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# Shadow Report for United Nations Convention on the Rights of Persons with Disabilities

Experiences of Indigenous women, girls, and 2SLGBTQQIA people  
with Disabilities



NOVEMBER 29, 2022

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NATIVE WOMEN'S ASSOCIATION OF CANADA



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## A. IDENTIFICATION OF SUBMITTING ORGANIZATION:

The Native Women's Association of Canada (NWAC) is a national Indigenous organization advocating for and defending the rights of Indigenous women, girls, and 2SLGBTQQIA<sup>1</sup> people in Canada, inclusive of First Nations on and off reserve, status, and non-status, disenfranchised, Métis, and Inuit. NWAC was founded on the collective goal to enhance, promote, and foster the social, economic, cultural, and political well-being of Indigenous women within their respective communities. NWAC has increased awareness about the situations of Indigenous women, girls, and 2SLGBTQQIA people with disabilities, for example with its 2018 report *Accessibility and Disability for Indigenous Women, Girls, and Gender-Diverse People with Disabilities* (Quinlan 2018).

This shadow report was written by the Live Work Well Research Centre at the University of Guelph, and specifically by Dr. Deborah Stienstra and Kaitlyn Pothier. The report draws on an extensive search of the academic and community research and literature and is guided by an advisory committee of Indigenous women and 2SLGBTQQIA people with disabilities. The advisory committee contributed considerably and substantively to the content of this report. NWAC and the Live Work Well Research Centre would like to give them deep thanks for all their contributions. Advisory committee members are Carrienne Agawa, Valdine Alycia, Dr. Lynn Gehl, and Kathy Loon.



<sup>1</sup> 2SLGBTQQIA stands for Two-Spirit, Lesbian, Gay, Bisexual, Trans, Queer, Questioning, Intersex and Asexual. We use this acronym in this report to reflect the practice of the report by the National Inquiry into Missing and Murdered Indigenous Women and Girls (MMIWG 2019a).



## B. EXECUTIVE SUMMARY

The United Nations Convention on the Rights of Persons with Disabilities (CRPD) and the issues identified in this shadow report do not reflect the interconnectedness of concerns identified by Indigenous women, girls, and 2SLGBTQQIA people with disabilities. As well, there is a disconnect between Western and Indigenous knowledge systems that affects and shapes how Indigenous women, girls, and 2SLGBTQQIA people with disabilities experience each of the issues discussed in this report.

Colonization continues to play a significant role in all parts of the lives of Indigenous women, girls, and 2SLGBTQQIA people with disabilities. The colonial system of separating Indigenous Peoples from their lands and placing them on remote, poor-quality land, including in the North, leads to greater food insecurity and greater risk of disasters like flooding and wildfires. The long-term and intergenerational trauma and impacts from residential school and Indian day school systems continue to reverberate in the lives of Indigenous women, girls, and 2SLGBTQQIA people with disabilities who cannot imagine sending their children away from their communities to receive disability services or education. The violence experienced by Indigenous women and girls is race-based genocide and empowered by colonial structures and removal from their lands. The colonial practices that initiated and perpetuate this violence have increased the numbers of disabled Indigenous women, girls, and 2SLGBTQQIA people.

Seventeen key issues of concern are included in order of priority. After a review of Canada's treaty body reports and the committee's responses and initial engagement with key stakeholders, the Shadow Report Advisory Committee confirmed both the importance of these issues and their priority in this report. With the draft report, NWAC engaged with two additional groups of stakeholders on both the priority of the issues and the content of the report. The body of the report includes context for each issue and recommendation.

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| 1. Housing (CRPD Articles 9, 28)                             | 10. Addressing discrimination (CRPD Articles 1-6)                                       |
| 2. Education (CRPD Article 25)                               | 11. Data (CRPD Article 31)  |
| 3. Child welfare (CRPD Articles 7, 23)                       | 12. Access to supports and services (CRPD Articles 19, 23, 25)                          |
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| 5. Access to clean and safe drinking water (CRPD Article 28) | 14. Disability supports and social protection (CRPD Article 28)                         |
| 6. Food insecurity (CRPD Articles 25, 28)                    | 15. Childcare and early childhood education (CRPD Articles 7, 8, 24)                    |
| 7. Violence (CRPD Article 16)                                | 16. Importance of disability in other human rights treaties (CRPD Preamble, Article 38) |
| 8. Climate change (CRPD Article 11)                          | 17. Resource extraction (CRPD Articles 19, 20, 26)                                      |
| 9. Infrastructure including Internet (CRPD Article 9)        |   |



## C. RESPONSE TO KEY ISSUES

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Many of the issues discussed in this shadow report are artificially separated and do not reflect the interconnectedness of concerns identified by Indigenous women, girls, and 2SLGBTQQIA people with disabilities. For example, one member of the advisory committee noted that addressing discrimination needs to be tackled in systems, structures, and the environment, with a particular focus on racism experienced by Indigenous women, girls, and 2SLGBTQQIA people with disabilities. Addressing discrimination then considers issues such as education, violence, housing, and the others discussed here. Awareness is also multi-faceted, surrounding and encompassing all the issues. Several issues include or overlap with other issues. For example, addressing violence can and should also include addressing issues in child welfare, disability supports and social protection, housing, access to clean and safe drinking water, food insecurity, and infrastructure.

Advisory committee members also noted that, while the CRPD does not explicitly address it, there is a disconnect between Western and Indigenous knowledge systems that affects and shapes how Indigenous women, girls, and 2SLGBTQQIA people with disabilities experience each of the issues. For example, as we discuss in section 14 on childcare, Indigenous understandings of how children are included in families and communities in addition to understandings of inclusion and disabilities can mean that families are forced to choose between childcare and disability services. We know that there are significant language differences between English or French and Indigenous languages that add additional barriers when Indigenous women, girls, and 2SLGBTQQIA people with disabilities seek medical or health care. These barriers can in turn mean that the care provided is inappropriate or inadequate.

This shadow report uses an intersectional analysis, recognizing that this is essential to understanding the complex barriers and systemic oppression faced by Indigenous women, girls, and 2SLGBTQQIA people with disabilities. As Lynn Gehl (2021a, p. 12) argues: “living under multiple layers of structural oppression where the effect on everyday living is more difficult because the layers interact in aggravating, compounding, and exponential ways whereas such the sum of the parts fail to capture what it is like to survive there. Succinctly, it is far worse. Said another way, living intersectional oppression means an exponentially more difficult, and thus vulnerable, lived reality that is greater than the sum of the various layers of oppression.”

Finally, we cannot move into discussing specific issues without a recognition of the significant role that colonization plays in all parts of the lives of Indigenous women, girls, and 2SLGBTQQIA people with disabilities. The colonial system of separating Indigenous Peoples from their lands and placing them on reserves that are often remote, poor-quality lands leads to greater food insecurity and greater risk of disasters like flooding



and wildfires. The long-term and intergenerational trauma and impacts from residential school and day school systems continue to reverberate in the lives of Indigenous women, girls, and 2SLGBTQQIA people with disabilities who cannot imagine sending their children away from their communities to receive disability services or education.

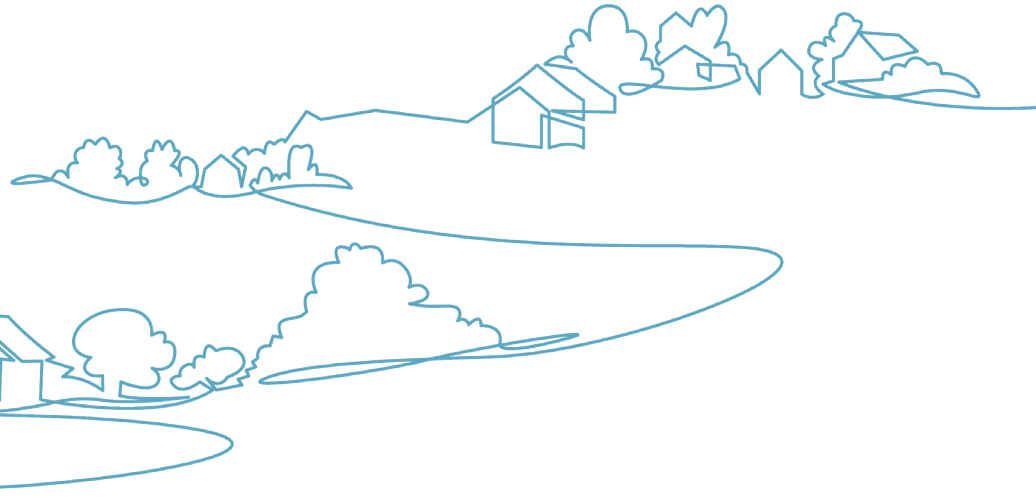
The treaty-making processes at the time of colonial expansion were undertaken in the spirit of peaceful co-existence and mutual respect by First Nations and the Crown. However, the Crown failed to uphold the treaties. Legislation, such as the Indian Act, and operational practices, such as resource extraction, continue to undermine the Treaty relationship.

As the final report of the National Inquiry on Missing and Murdered Indigenous Women and Girls (MMIWG 2019a) notes, the violence experienced by Indigenous women and girls is genocide and is empowered by colonial structures. These colonial structures include the Indian Act, child and family care policies, and the slow pace of registering women and girls under changes to the Indian Act. Advisory committee members stated that the so-called modern Treaty and self-government processes perpetuate the colonial agenda of genocide.

While the MMIWG report does not explicitly discuss disability as a result of this violence, it is clear that the colonial practices that initiated and perpetuate this violence have increased the numbers of disabled Indigenous women, girls, and 2SLGBTQQIA people.

The responses of Canadian governments and peoples need to not only work for reconciliation, which is ongoing and incomplete, but implement decolonizing measures that address these legacies, including reparations for land that has been taken.





## 1. HOUSING (CRPD ARTICLES 9, 28)

As the Native Women's Association of Canada (NWAC) 2018 report on housing argues, access to stable and quality housing is essential for the safety, security and well-being of Indigenous women and their families. Housing should also be responsive to the needs of those using it, including those with disabilities. Safe and secure housing also helps to maintain strong cultural ties. NWAC, Pauktuutit Inuit Women of Canada, and Les Femmes Michif Otipemisiwak (LFMO) argue for the importance of a gendered approach to Indigenous housing strategies, recognizing the disparate impacts of housing (or its lack) on Indigenous women and 2SLGBTQQIA people (NWAC 2018; Pauktuutit 2022; LFMO 2020).

Indigenous women experience homelessness and housing insecurity more than non-Indigenous women. Indigenous women often view housing as a political tool; access to housing is directly tied to the connections that one has in their immediate community. They can face hidden homelessness and housing precarity that can include over-crowding, unsafe housing conditions such as mould or poor repair, and limited access to water and sewage. There are clear links between gender-based violence and housing insecurity: "Due to the high cost and inadequate numbers of housing units, women may be forced to stay in unhealthy family situations or abusive relationships" (NWAC 2018). As well, according to the Family Homes on Reserves and Matrimonial Interests or Rights Act (2013), Indigenous women who are victims of domestic violence may be forced to leave their homes without



adequate temporary housing (s. 16). This is clearly discriminatory towards Indigenous women and 2SLGBTQQIA individuals.

Environmental emergencies also shape housing for Indigenous women. “The existing housing shortage is amplified when environmental emergencies take place in communities as many homes become dangerous, inaccessible, or uninhabitable” (NWAC 2018). As well, on many reserves, community buildings remain inaccessible.

These factors cause additional challenges for Elders and those who require medical and other supports and cannot get access to the supports they need in their own communities. This can require them to travel or move to get access to supports. For some deaf Indigenous People and those with complicated supports, this may mean they have to live in residential or institutional settings, which can evoke memories of residential schools (Shackel 2008).

### **RECOMMENDATIONS:**

- The federal government engage Indigenous women, girls, and 2SLGBTQQIA people with disabilities in discussions around housing and shelter strategies and policies.
- The federal government ensure that all existing homes on Indigenous land are fit for human residence, including updating any necessary infrastructure such as electricity, sewage and water lines.
- The federal government guarantee legitimate housing for all Indigenous People, regardless of income or ability.
- The federal government and Indigenous organizations work together to ensure that any new housing includes at least 30% accessible housing units available to Indigenous Elders and people with disabilities.
- The federal government and Indigenous organizations ensure that housing for Indigenous women, girls, and 2SLGBTQQIA people with disabilities is situated around supports and services they access, including for those leaving situations of violence.
- The federal government include accessible housing alternatives in developing and implementing emergency management plans.
- The federal government provide sufficient funding to Indigenous communities to ensure that community buildings are accessible to all.
- The federal and provincial governments create specific positions for Indigenous women, girls, and 2SLGBTQQIA people on the board of directors at the Canada Mortgage and Housing Corporation (CMHC).





## 2. EDUCATION (CRPD ARTICLE 24)

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Indigenous women, girls, and 2SLGBTQQIA people with disabilities continue to experience systemic barriers to education at the elementary, secondary, and post-secondary levels in Canada. Some of the barriers come because they are unable to access education in their own languages and/or receive the supports necessary to participate fully in their education. For some in northern, remote, or rural regions, they may need to move into urban areas to access education or the necessary supports for education. This often requires them to leave their family and cultural supports, which echoes experiences with residential schools.

While there are some Indigenous-led educational systems at each level, these are often under-funded in comparison with non-Indigenous-led educational systems. Indigenous cultures view all children as gifts from the Creator, regardless of disability. Some view disability as gifts or special skills. Indigenous education should reflect these ideas, especially as they pertain to Indigenous children with disabilities. As well, Indigenous cultures emphasize the importance of land-based skills such as foraging, hunting, fishing, and more. These skills are equally important to academic education for many Indigenous Peoples and should be considered as such. Culturally relevant education in this sense would reflect the importance of these land-based skills and would also stress the importance of key roles in Indigenous communities such as Elders and Healers.

As well, First Nations communities may not receive sufficient funding to provide adequate disability-related supports to students with disabilities in their school systems (Shackel 2017). Many First Nations schools are not accessible to children with disabilities (FNCFCS 2021). In some communities, it is difficult to ensure supports are available because of staff shortages, high turnover, and lack of disability-related expertise.

Current practices to identify students with disabilities in education are not culturally appropriate and can identify First Nations language learners “as being ‘cognitively impaired’ or ‘behaviourally disordered’” (Shackel 2017). This demonstrates a systemic link between racism, colonization and disability that is not clearly discussed or addressed in policies.

Curriculum and educational practices do not address the unique experiences of Indigenous women, girls, and 2SLGBTQQIA people with disabilities (Snyder 2019). Indigenous students with disabilities experience barriers, bullying and exclusion at school and lack “the institutional support, the accommodation, the funding and the programs and infrastructure required to access and benefit from the same quality of education as their fellow students” (CHRC 2017).

The solutions are multifaceted. Governments need to ensure greater support of Indigenous women, girls, and 2SLGBTQQIA people with disabilities in education at all levels, including



by providing scholarships to Indigenous students, sufficient funding to Indigenous-led educational institutions, and access to adequate disability supports. As Indigenous women, girls, and 2SLGBTQQIA people produce knowledge, educational systems need to ensure that is used and valued in curriculum. Coburn (2020) demonstrates the rich and diverse field of Indigenous women's academic knowledge production in Canada that is concerned with resisting and redressing colonial practices and renewing Indigenous knowledges and practices. These can be more systematically used in educational settings. Some Indigenous women, girls, and 2SLGBTQQIA people with disabilities use their time to contribute to community radio and teaching. Without recognition of these contributions, other sites of gathering and sharing knowledge like libraries fail to recognize and value the contributions of Indigenous women, girls, and 2SLGBTQQIA people with disabilities and sustain their invisibility and marginalization (Doerksen and Martin 2015).

#### **RECOMMENDATIONS:**

- The federal government formally lifts the 2% annual growth cap on all direct transfers to First Nations communities that has been in place since 1996, focusing on matching a rate comparable to provincially funded public schools.
- All levels of government ensure that the knowledges of Indigenous women and 2SLGBTQQIA people with disabilities, and the gifts they offer, are integrated into educational curricula.
- The federal government provide avenues in which Indigenous communities can participate in culturally relevant, land-based education.
- Colleges and universities ensure that the knowledges of Indigenous women, girls, and 2SLGBTQQIA people with disabilities are integrated into the fabric of their institutions.



### 3. CHILD WELFARE (CRPD ARTICLES 7, 23)

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Indigenous children have been forcibly removed from their homes and communities through residential and Indian day schools, the ‘Sixties Scoop’, the high number of Indigenous children in child welfare, and the ongoing practice of ‘birth alerts’. While the last residential school in Canada closed in 1996, the legacy of residential and day schools lives on. Residential care facilities and child welfare organizations continue to see an overrepresentation of Indigenous youth in their systems (de Finney et al. 2011). In fact, the overrepresentation of Indigenous youth in the child welfare system has prompted the creation of the term “Millennial Scoop”—this phrase is a reworking of the phrase “Sixties Scoop” that was coined in relation to the 1960s trend of Indigenous youth being removed from their homes and families and put into foster care. More Indigenous children were put into out-of-home residential care between 2000 and 2010 than were put into residential schools at the height of its movement (de Finney et al. 2011). Indigenous mothers face high levels of scrutiny, which can result in children being removed at birth or for reasons such as housing issues or poverty at higher levels than non-Indigenous mothers (de Finney et al. 2011).

Indigenous youth with disabilities are much more likely to be placed in foster care and to be mistreated or abused while in foster care (Marchenski and Mudry 2005). Indigenous parents of disabled children are also more likely to have their parental rights overturned by the government. In some provinces, the government may enter into an agreement with parents in which the parents relinquish custody but not guardianship of their disabled child for up to 12 months. If parents are incapable of providing for their disabled children, the government can step in and remove the child from the parents’ care to give the child access to resources. Rather than grappling with the root of the problem, which in this case is a lack of resources available to Indigenous families, the government compounds the problem by sending the children to live off-reserve in a non-Indigenous home where the connections to their Indigenous identity are limited and where the likelihood of abuse or maltreatment is significant.

#### **RECOMMENDATIONS:**

- The federal government provide adequate funding to Indigenous communities to ensure access to supports and services that benefit the welfare of Indigenous children.
- The federal government emphasize and support the importance of keeping Indigenous children with their birth families and in their communities, whenever possible.
- Provincial and regional governments that oversee child welfare agencies work to ensure Indigenous children are placed in Indigenous homes when out-of-home care is the only option.



## 4. AWARENESS (CRPD ARTICLE 8)

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Very few of the commitments made by Canada in its previous CRPD report, its other reports on human rights treaties and its actions in relation to the lives of people with disabilities address the experiences and knowledges of Indigenous women, girls, and 2SLGBTQQIA people with disabilities. This is made worse by the lack of awareness of the experiences of Indigenous women, girls, and 2SLGBTQQIA people with disabilities among Indigenous Peoples and in the general Canadian population.

Statistics Canada data (Hahmann et al. 2019) shows that rates of disability among First Nations women living outside their communities, Métis and Inuit women are higher than for the same group of men. We also know that there is a higher prevalence of disability among Indigenous Peoples compared with non-Indigenous people in Canada. Finally, the Statistics Canada data demonstrate that Indigenous women are more likely than non-Indigenous women to experience severe disabilities (Arriagada 2016). There is no data on the prevalence of disability among Indigenous 2SLGBTQQIA people with disabilities.

In addition, as the Truth and Reconciliation Commission of Canada (TRC): Calls to Action report (2015) and the final report of the National Inquiry into Missing and Murdered Indigenous Women and Girls (2019) note, Indigenous women and girls are three times more likely to experience discrimination as a result of physical or mental disability. Colonization and colonial violence shape how and how many Indigenous women, girls, and 2SLGBTQQIA people experience disabilities.

There is no information about awareness campaigns by Canada about the rights of Indigenous women, girls, and 2SLGBTQQIA people with disabilities. There have been awareness campaigns among Indigenous groups, including Indigenous disability groups, funded by the federal government to support the implementation of the Accessible Canada Act. NWAC celebrates the inclusion of Indigenous Sign Language components of the Act and what that means for federally regulated industries such as telecommunications and broadcasting. Indigenous Disability Awareness Month is held each November.

### **RECOMMENDATION:**

- The Canadian governments and Indigenous organizations should implement imaginative, creative, and culturally appropriate ways to raise the awareness of the experiences of Indigenous women, girls, and 2SLGBTQQIA people with disabilities. For example, creating a 'superhero' that demonstrates the strengths and contributions of Indigenous women, girls, and 2SLGBTQQIA people with disabilities. A superhero will both raise awareness and empower Indigenous women, girls, and 2SLGBTQQIA people with disabilities. These can be used in the context of Indigenous Disability Awareness month, accessibility awareness events and celebrations of human rights.



## 5. ACCESS TO CLEAN AND SAFE DRINKING WATER (CRPD ARTICLE 28)

In many communities, Indigenous women have a traditional role as water carriers (Anderson et al. 2013; Longboat 2015). Yet Indigenous women have been excluded from much of the water governance. This is especially significant given the high number of boil water advisories in Indigenous communities and other water contamination in

Indigenous communities as a result of resource extraction and industrial waste (Lucier et al. 2020). Advisory committee members stressed the

importance of considering biological, chemical, and radioactive water pollution and its effects on Indigenous women, girls,

and 2SLGBTQQIA people with disabilities. Waterborne

disease and contaminants may result in impairments and disability in people, including those who are pregnant. As

well, many Indigenous People with disabilities require clean water as part of addressing their impairments and

disabilities, as access to unsafe drinking water often leads to higher rates of disability. Thus, access to clean

and safe drinking water is a key issue for Indigenous women, girls, and 2SLGBTQQIA people with disabilities.



While the government of Canada has committed to reducing the number of boil water advisories and increasing

Indigenous access to safe drinking water, the implementation of this change has been very slow. In addition, approval of new

resource extraction processes may continue to negatively affect

access to clean and safe drinking water. The federal government has

invested significantly in pipelines for oil and should invest equally in ensuring clean and safe water.

### RECOMMENDATIONS:

- The federal and provincial governments ensure increased access to clean and safe drinking water in First Nations communities.
- The federal government increase the speed of eliminating boil water advisories on First Nations communities.
- Federal and provincial governments, in partnership with Indigenous organizations, include Indigenous women, girls, and 2SLGBTQQIA people with disabilities in water governance and decision-making.
- The Impact Assessment Agency of Canada include attention to the intersections of Indigenousness, gender and disability in its impact assessment processes.



## 6. FOOD INSECURITY (CRPD ARTICLES 25, 28)

Research demonstrates that a much higher proportion of women, Indigenous Peoples, and people with disabilities experience severe food insecurity in Canada (Deaton et al. 2019; Woodgate et al. 2017; Tarasuk et al. 2013). Indigenous women living in remote and northern communities also experience nutritionally poor or contaminated food, shortages, and high food costs, mainly due to a lack of equitable food distribution and exploitation of food services in the North (Pauktuutit 2022). For example, Indigenous Peoples have cited issues with the Nutrition North program such as limited product availability and inflated prices as a result of low profitability. This connection between food insecurity and capitalism cannot be denied.

Poor quality and inadequate food can create or exacerbate impairments and chronic health conditions and can lead to disability. Many people with disabilities require specialized diets, which can increase their expenses and these costs are often not included in social assistance or other disability income programs. As well, the ingredients required to sustain such specialized diets are often not available to Indigenous People living in remote and northern communities, leaving these individuals to either relocate themselves or not follow their recommended diet.

### RECOMMENDATIONS:

- The federal government extend the Nutrition North program to address the needs of communities that are not currently eligible.
- All levels of government include additional funding for specialized diets for Indigenous women, girls, and 2SLGBTQQIA people with disabilities.
- The federal government work alongside Indigenous communities and organizations to develop and emphasize the importance of a self-sufficient land-based food economy for Indigenous Peoples that is not reliant on government subsidies and grants.
- The federal government consider the inflated costs of food in remote and northern communities when calculating disability pensions for Indigenous Peoples.
- The federal and provincial governments implement training programs for Indigenous women, girls, and 2SLGBTQQIA people with disabilities to become leaders in agriculture and healthy eating habits.



## 7. VIOLENCE (CRPD ARTICLE 16)

Indigenous women, girls, and 2SLGBTQQIA people with disabilities experience significant physical, psychological, spiritual, and sexual violence in their lives resulting from the intersections of Indigenousness, disability, and gender. Indigenous women with disabilities are roughly two times more likely than Indigenous women without disabilities and about 1.5 times more likely than non-Indigenous women with disabilities to experience sexual assault.

Indigenous women and 2SLGBTQQIA people are also more likely to be involved in sex work- there is a correlation between Indigenousness/disability and sex work, which may be a result of the colonial framework within which many modern workplaces operate. In addition, Indigenous women with disabilities experience unwanted gender-based violence in public settings and while online at higher rates than other women (Cotter and Savage 2019; Gehl 2021a).

Indigenous women are also at risk for digital violence and cyberbullying, even when controlling for the lack of e-infrastructure in rural and remote areas.

Indigenous women, girls, and 2SLGBTQQIA people with disabilities also have to deal with government services which reflect long-standing colonial relationships and are often substantively less than what is available to other people with disabilities in Canada. Gehl (2021a, pp. 33-34) describes many of the federal government services available to Indigenous women, girls, and 2SLGBTQQIA people with disabilities and the complex layers they are required to navigate to access these services.

The final report from the Missing and Murdered Indigenous Women and Girls Inquiry (MMIWG 2019b) identifies how the preponderance of violence against Indigenous women and girls can lead to death. This violence can also be disabling, in some cases causing traumatic brain injury (Haag et al. 2019).

Access to shelters and services also reflects the barriers and inequities faced by Indigenous women, girls, and 2SLGBTQQIA people with disabilities. For example, Pauktutit Inuit Women of Canada (2019) outlines the many gaps in services and shelters for Inuit women in its communities. DAWN Canada's (2022) report on changes to the National Action Plan



to end gender-based violence notes the lack of shelters in First Nations communities and the lack of accessible shelters across Canada. It also notes the need for services that are culturally safe, trauma-informed, intersectional, inclusive, and accessible.

The Government of Canada's Gender-based Violence Strategy does include an intersectional analysis of Indigenous women, girls, and 2SLGBTQQIA people with disabilities. The federal government has ensured that the knowledge of Indigenous women with disabilities is valued and included (Gehl 2021a). This allows a deeper understanding of the complex relationships at work in creating, sustaining, and preventing this violence.

Gehl (2021a) identifies the importance of a holistic framework for government action as well as an understanding of the broader context within which Indigenous women, girls, and 2SLGBTQQIA people with disabilities meet and respond to violence in their lives. This includes creating wider awareness of the lived experiences of Indigenous women, girls, and 2SLGBTQQIA people with disabilities in addition to addressing existing gaps in services and funding. She argues that Canada must "extend their intersectional framework to the very level of lived reality of Indigenous women and girls with disabilities as they, their communities, and their caregivers have identified their requirements and needs to be" (p. 13).

#### **RECOMMENDATIONS:**

- The federal government address service and funding gaps for Indigenous women, girls, and 2SLGBTQQIA people with disabilities in terms of medical (including chiropractic), dental, vision, and nutritional needs; accessible and safe housing; and accessible, inclusive, and culturally relevant and trauma-informed community services including shelters and other violence-related services.
- The federal and provincial governments, along with Indigenous organizations, use an Indigenous lens to ensure that service providers are qualified, reliable, screened and monitored.
- The federal and provincial governments, along with Indigenous organizations, provide supports, funding, and respite care for care providers, including those from families and communities.
- The federal and provincial governments address jurisdictional barriers to delivering these services to adults in the context of Jordan's Principle in addressing jurisdictional barriers in services for Indigenous children.
- The federal and provincial governments, along with Indigenous organizations, include Indigenous women, girls, and 2SLGBTQQIA people with disabilities in the development and implementation of services and support programs.





## 8. CLIMATE CHANGE (CRPD ARTICLE 11)

Indigenous women are at the forefront of climate change, both because they face significant impacts and because they hold knowledge about and solutions for addressing climate change (NWAC 2021; Williams et al. 2018). Yet we know little about how Indigenous women, girls, and 2SLGBTQQIA people with disabilities engage with climate change.

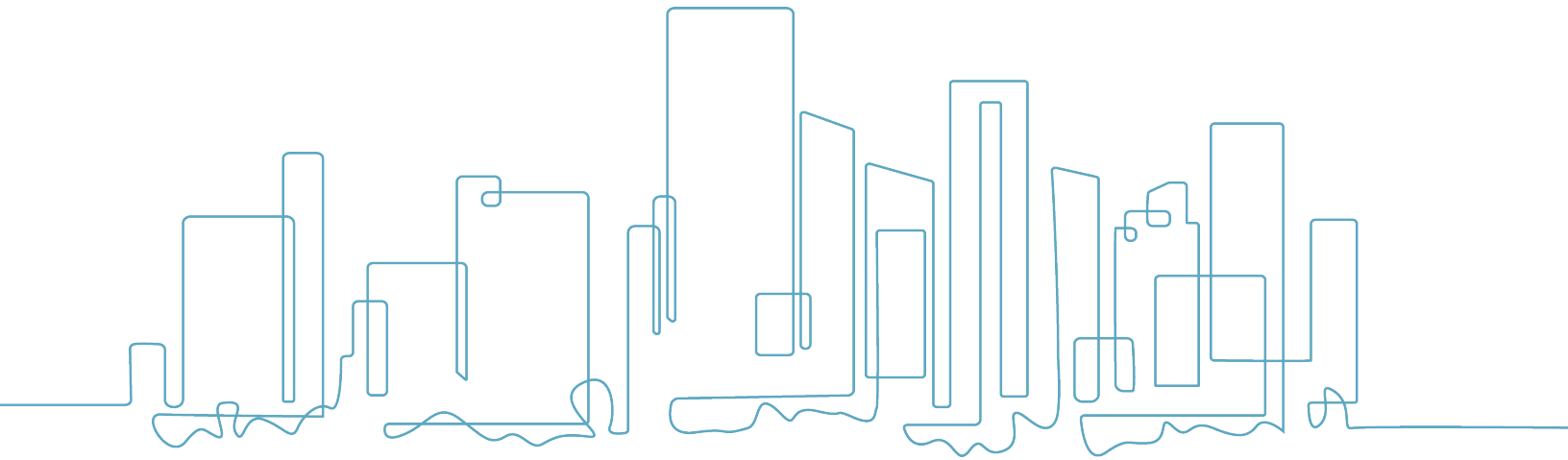
The increased wildfires, flooding, global warming, and other climate-related disasters have disproportionately negative impacts on Indigenous Peoples in terms of land, food, and ways of life. Indigenous People with disabilities must also navigate inaccessible disaster responses that have not considered them. The effects of climate change also have significant impacts on the mental health and wellbeing of Indigenous women, girls, and 2SLGBTQQIA people with disabilities that are not addressed by the health care system, such as struggles with anxiety, depression, and post-traumatic stress disorder (PTSD). The lack of infrastructure in rural and remote areas further impedes the ability of Indigenous women, girls, and 2SLGBTQQIA people with disabilities to access supports and services.



Indigenous women, girls, and 2SLGBTQQIA people with disabilities are often only discussed as vulnerable and victims of climate change, yet they bring important knowledges from their lived experiences to understanding how to build climate resilient societies. Indigenous women and 2SLGBTQQIA people have a sacred responsibility for the water (Bluesky and Levasseur 2022). "Taking people with disabilities as a starting point helps to transform questions of what climate-resilient development looks like by defining them from the vantage point of those in vulnerable situations and by identifying processes of discrimination and exclusion that more socially just forms of development must address" (Eriksen et al. 2021).

### RECOMMENDATIONS:

- All levels of government use an Indigenous lens to engage Indigenous women, girls, and 2SLGBTQQIA people with disabilities in all stages of planning and decision-making related to climate change mitigation, adaptation, and disaster risk reduction.
- The federal government increase funding for climate change-related infrastructure such as paved roadways, alternatives to ice roads, and public transit.



## 9. INFRASTRUCTURE INCLUDING INTERNET (CRPD ARTICLE 9)

Infrastructure, including roads, transportation, information and communication technologies, access to the internet, and community facilities, demonstrate colonial power relations and colonizing practices (Barney 2021) in addition to questions of access and accessibility.

For Indigenous women, girls, and 2SLGBTQQIA people with disabilities even accessible infrastructure can replicate colonizing inequalities. For example, while community hospitals may be accessible, when governments approve resource extraction projects in the community, that health infrastructure may not be able to meet the demands resulting from additional workers, and Indigenous women, girls, and 2SLGBTQQIA people with disabilities may lose their access to much-needed infrastructure (Stienstra 2015). Many of these hospitals do not incorporate trauma-informed practices, which leaves Indigenous women, girls, and 2SLGBTQQIA people with disabilities without adequate care. There is also a concern in rural and remote Indigenous communities that the development of infrastructure will bring an influx of outsiders to the area, leaving Indigenous women, girls, and 2SLGBTQQIA people without infrastructure-related work. Infrastructure can be destructive and undermine



Indigenous ways of living and “reproduce the separation of certain human bodies from others, and from lands, waters, air, and non-human beings to enable the extraction, exploitation, and exhaustion of the latter for the benefit of the former” (Barney 2021).

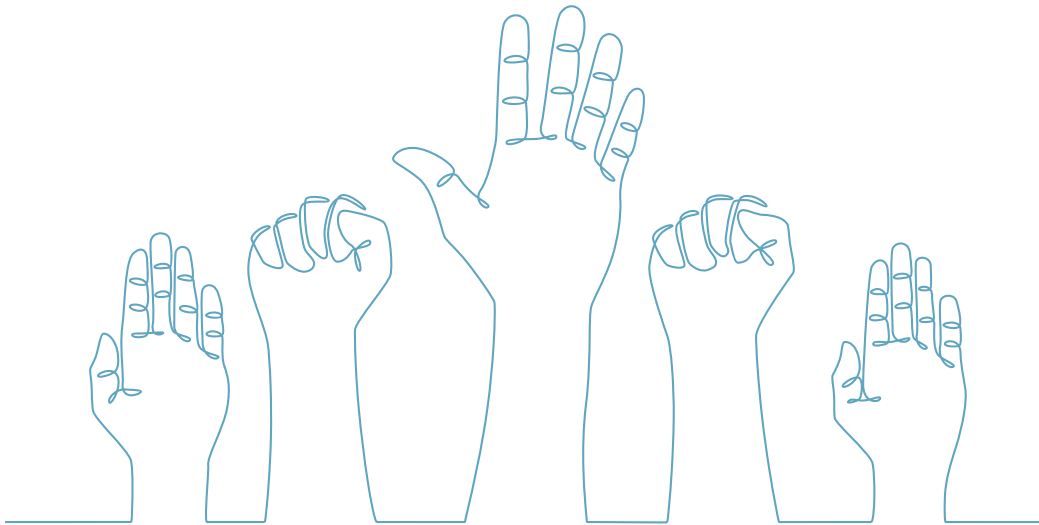
There is a lack of basic mobility infrastructure in rural and remote communities. Sidewalks are inconsistent and can be cracked and broken. There is also very limited public transportation. As well, many buildings in rural and remote communities are not disability accessible. This presents significant barriers for Indigenous women, girls, and 2SLGBTQQIA peoples with disabilities; many are unable to freely move around their neighbourhoods, which can decrease overall safety and increase vulnerability to trafficking.

Helpful infrastructure like access to the Internet can also replicate colonizing inequities, with significantly reduced access for Indigenous People, especially for those who live in northern and remote communities (CCA 2021). A lack of access to the internet can be very expensive, especially when Indigenous Peoples have to use their cellular data to make up for the lack of connectivity. The COVID-19 pandemic has demonstrated how these systemic infrastructure inequities can be intensified during crises.

Alternative and community infrastructure can be used to sustain Indigenous ways of living and relationships. For example, “a community centre could be seen as one way to create an infrastructure that could house, prevent and respond to any crisis” (McCaslin and Boyer 2009). In predominantly Indigenous communities, including Traditional Knowledge within the structure of health care centres and hospitals could also be a way to integrate necessary infrastructure with Indigenous ways of living.

### **RECOMMENDATIONS:**

- All levels of government actively involve Indigenous women, girls, and 2SLGBTQQIA people with disabilities in decision-making about infrastructure across Canada.
- The federal government increase funding for and implementation of high-quality broadband internet access in rural, northern, and remote communities. Funding should be targeted to support communities in developing their own capacities and leadership without reliance on further government funding.
- The federal government increase its support for Indigenous implementation of the Accessible Canada Act.
- Accessibility Standards Canada ensure that its understanding and use of accessibility recognizes the colonizing uses of infrastructure and includes a culturally relevant approach to accessibility such as NWAC’s Culturally Relevant Gender Based Analysis (NWAC 2020).



## 10. ADDRESSING DISCRIMINATION (CRPD ARTICLES 1-6)

Indigenous women, girls, and 2SLGBTQQIA people with disabilities experience significant discrimination as a result of their Indigeness, gender and disabilities and the intersections of these. This discrimination is both individual and systemic. Experiences of discrimination happen in workplaces (Waite 2021; LFMO 2019), health care settings (Wallace et al. 2021; Ford-Gilboe et al. 2018; Rainbow Health 2016), education systems, on-line, in public, and many other settings. Even in pieces of legislation aimed at addressing discrimination such as the Accessibility for Ontarians with Disabilities Act (AODA), Indigenous knowledge is not considered; this ultimately furthers discrimination towards Indigenous women, girls, and 2SLGBTQQIA people with disabilities. Similarly, many equity-diversity-inclusion (EDI) policies do not incorporate or address disability. For Indigenous women, girls, and 2SLGBTQQIA people with disabilities, these policies reinforce their inability to adequately capture the integrative nature of their identities. Tone policing of Indigenous women, girls, and 2SLGBTQQIA people with disabilities when they voice concerns about being discriminated against in the context of legitimate frustration over the multiple barriers they face is another covert form of discrimination that is under-discussed in the literature. The COVID-19 pandemic increased and intensified many of these experiences of discrimination (Hahmann 2021).

In comparison with both non-Indigenous women, girls, and 2SLGBTQQIA people with disabilities and Indigenous men with disabilities, the impacts of discrimination on Indigenous women, girls, and 2SLGBTQQIA people with disabilities are evident in their higher levels of poverty and lower income, increased experiences of violence, more limited access to supports and services, and many of the other issue areas addressed in



this shadow report. These impacts can result in additional health issues, especially for women, girls, and 2SLGBTQQIA people with disabilities.

There can be a direct link between Indian status registration and access to medical care; hospitals act as sites of racism in these situations, especially as funding for Indigenous health services continues to dwindle. This is compounded by issues with unknown and unstated paternity, and discriminatory language within the Indian Act (Gehl 2021b). The advisory committee members agreed that these discriminatory policies serve as a continuation of the ongoing genocide of Indigenous Peoples in Canada.

Addressing the experiences of Indigenous women, girls, and 2SLGBTQQIA people with disabilities requires a multi-faceted approach, beginning by increasing awareness of the experiences of Indigenous women, girls, and 2SLGBTQQIA people with disabilities. This awareness is by Indigenous women, girls, and 2SLGBTQQIA people with disabilities of their own rights as well as by other Indigenous and non-Indigenous people. It requires honouring diverse Indigenous knowledge and recognizing the distinctions among Indigenous Peoples. It requires not only action on reconciliation, but decolonizing policies and practices to dismantle the legacies of colonization. It requires culturally relevant analysis (NWAC 2020; LFMO 2019), and culturally safe practices (Browne et al. 2018). It requires the full participation of Indigenous women, girls, and 2SLGBTQQIA people with disabilities in increasing awareness of their multiple and intersecting experiences of discrimination, using Indigenous knowledge to transform practices and policies (Cyr and Riedeger 2021) and creating culturally safe and accessible spaces for Indigenous women, girls, and 2SLGBTQQIA people with disabilities.

### **RECOMMENDATIONS:**

- All levels of government provide support for Indigenous Peoples to use Indigenous knowledge to develop locally relevant practices in education, health services, disability supports, employment training, accessibility, and other areas.
- The Canadian Human Rights Commission, and provincial and territorial human rights commissions continue to develop mechanisms to track and address the multiple, intersecting forms of discrimination experienced by Indigenous women, girls, and 2SLGBTQQIA people with disabilities.
- The federal government continue to develop culturally relevant gender-based analysis frameworks to collect, analyze and respond to the multiple, intersecting discrimination experienced by Indigenous women, girls, and 2SLGBTQQIA people with disabilities.
- The federal government expand and extend its employment equity legislation to consider intersecting types of discrimination, including gender diversity.



## 11. DATA (CRPD ARTICLE 31)

To include Indigenous women, girls, and 2SLGBTQQIA people with disabilities effectively in Canadian society, and in line with the commitments made in the CRPD, Canadian governments need to gather and analyze strong sources of data. They need to recognize that Indigenous Peoples must be custodians and stewards of their own data. Since its last report, Canada has made progress on gathering more intersectional data and preparing some reports that demonstrate analysis of some intersections. Yet there continues to be a significant data gap in relation to Indigenous women, girls, and 2SLGBTQQIA people with disabilities.

Statistics Canada has gathered and published data on the prevalence of disability among Indigenous Peoples of First Nations, Métis, and Inuit people (Hahmann et al. 2019). This includes data analyzed by sex, geography, and age group (older than 15 years old). This is an important, but incomplete understanding of Indigenous people with disabilities. For example, the study does not discuss the disability prevalence among Indigenous 2SLGBTQQIA people with disabilities, children under 15 years old or First Nations People living on reserves.

While a recent study on Indigenous youth in Canada (Anderson 2021) includes data on Indigenous youth in Canada, its gender analysis is limited to a binary discussion of women





and men, and its discussion of disability is only linked to health and long-term conditions rather than to disability. This leaves this study out of sync with the disability data and perpetuates a medicalized/health approach to disability.

Arriagada (2021) offers an important analysis of the educational attainments and labour market outcomes of Indigenous women compared with Indigenous men and non-Indigenous women. Yet there is no discussion of the experiences of Indigenous women with disabilities, nor of 2SLGBTQQIA people with disabilities.

During the COVID-19 pandemic, Statistics Canada collected crowd-sourced data on experiences of Indigenous Peoples among others. The collection methods mean that the studies coming from this are not representative of Indigenous people with disabilities in general, but they do illustrate some relevant findings. For example, Hahmann (2021) offers an overview of the impacts of the COVID-19 pandemic on the health, service access, and ability to meet basic needs of Indigenous people with disabilities. Notably the study demonstrates that Indigenous women with disabilities reported worsening health than either Indigenous men with disabilities or non-Indigenous women with disabilities. There is no discussion of 2SLGBTQQIA people with disabilities in this study.

Thus, there is a pressing need for more data that understands the unique experiences of Indigenous women, girls, and 2SLGBTQQIA people with disabilities. This data needs to be both comprehensive and disaggregated. By this, we mean that the data should incorporate and separately discuss all intersecting identities such as Indigenousness, gender identity, sexual orientation, disability, and socio-economic status. A fulsome understanding of the prevalence of these identities, as well as identity-specific experiences, will allow for stronger policy solutions.

### **RECOMMENDATIONS:**

- All levels of government ensure that data collected is analyzed through an Indigenous lens that reflects multiple intersecting experiences including gender, disability, and Indigenousness.
- Where the sample of data collected is too small to ensure confidentiality of participants or may contribute to or amplify stigma or discrimination, qualitative research methods should be used to ensure these perspectives are included.
- All levels of government ensure data sovereignty and that information from data is accessible, culturally appropriate, and inclusive to all.
- Together with Indigenous women's organizations, all levels of government develop and share this information in Indigenous languages and in culturally appropriate and accessible formats.



## 12. ACCESS TO SUPPORTS AND SERVICES (CRPD ARTICLES 19, 23, 25)

Barriers to access to services for Indigenous women, girls, and 2SLGBTQQIA people with disabilities are evident in many areas including health care, homecare, HIV and AIDS care, employment and training, and youth in care. There are different barriers for those who live in First Nations communities than for those living off reserve and in urban areas, or who are Métis and Inuit. All the barriers are, however, shaped by the legacies of colonization and the intersections of being Indigenous, women or 2SLGBTQQIA, and disabled.

For those who live on First Nations communities, access to services is restricted by the administration of policies determined by the federal government, chronic underfunding, and the geographical location and isolation of many First Nations (Vives and Sinha 2019; NWAC 2018). Local health and community centres provide limited services, and specialized services may be far away in larger urban centres. Funding gaps along with widespread skilled labour shortages can make it difficult for communities to attract and retain qualified service providers.

Some areas rely on visiting service providers who may be non-Indigenous and may not provide culturally safe services. NWAC stakeholders addressed difficulties in finding service providers that were both culturally safe and in close proximity to their community. Practices







like smudging are often difficult to find and travelling for these practices ignores the issue of limited supports within the community. The differing jurisdictional responsibilities for service provision for Indigenous people on and off reserve can delay and prevent service delivery.

Those who must travel to get services may not have time or money to travel, or the transportation available may not be accessible. Having to travel for services may also mean losing access to existing supports in families and communities as well as access to cultural supports and traditions. Many face racism, sexism, and ableism when they use services in large urban settings.

Indigenous women, girls, and 2SLGBTQQIA people with disabilities may experience additional barriers to sexual and reproductive health services, as well as a lack of services that are targeted to their needs (Hillier et al. 2020). In addition, barriers to service can result from poverty, homelessness, food insecurity, and experiences of violence.

#### **RECOMMENDATIONS:**

- The federal and provincial governments improve jurisdictional coordination and the federal government provide equitable funding to services on-reserve comparable to or greater than those provided by provincial governments.
- The federal government, and especially Indigenous Services Canada, ensure that a gendered disability analysis of the impacts of policy changes related to service provision be made and addressed prior to their implementation.
- All levels of government work with Indigenous women and 2SLGBTQQIA people with disabilities to build accessible, quality and culturally appropriate services and programs within Indigenous communities.
- All levels of government ensure service providers are trained in providing trauma-informed, culturally safe, equity-oriented services.
- All levels of government strengthen accessible and affordable transportation services especially in rural and remote areas.
- All levels of government ensure the necessary supports to support transitions, including into adulthood and out of violent situations.
- All levels of government recognize the service and support provision by family care providers and ensure training and respite for them.



### 13. PARTICIPATION (CRPD ARTICLE 29)

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To ensure meaningful contributions to the evolution of policy in Canada, Indigenous women and 2SLGBTQQIA people with disabilities must be given opportunities to participate in the political sphere in culturally appropriate ways. Currently, Indigenous women and 2SLGBTQQIA people with disabilities are vastly underrepresented in decision-making roles within the Canadian policy sphere, including in health care (Gracey and Malcolm 2009; Shimmin et al. 2017), infrastructure (Barney 2021), resource extraction (Stienstra 2015), education (Doerksen and Martin 2015), as well as many other policy areas outlined in this report (Atrey 2018; Bernasky 2019). This underrepresentation results in the needs and priorities of Indigenous women and 2SLGBTQQIA people with disabilities remaining invisible, which contributes to the cycle of their ongoing discrimination (Stienstra 2018).



Due to the unique intersections of gender, Indigenousness, and disability, disabled Indigenous women and 2SLGBTQQIA people are often left out of important policy conversations, which reinforces barriers and limits possibilities for change. Participation can support economic and political self-determination (Barney 2021) and can transform both what we know and how knowledge is shared (Doerksen and Martin 2015). Promoting Indigenous participation while ignoring the categories of disability and gender can further marginalize individuals who experience overlapping and intersecting forms of discrimination.

To combat this lack of representation, governments, Indigenous organizations, and other community organizations can support representation of and by Indigenous women, girls, and 2SLGBTQQIA people. This involves honouring all facets of these identities—gender, disability, and Indigenousness—for the unique experiences they may provide. Participation must go beyond a tokenistic approach without meaningful opportunities to engage and make change (Doerksen and Martin 2015) and recognize the need for equity so that Indigenous women, girls, and 2SLGBTQQIA people with disabilities can fully participate in policy conversations. Meaningful participation requires careful consideration and appreciation of each participant's contributions and a willingness to be transformed by the inclusion of those who have not been involved (Stienstra 2018). Allies should commit to “following the turtle” (Gehl 2013)— this means that allies stand behind Indigenous women, girls, and 2SLGBTQQIA people with disabilities and act as an amplifier rather than speaking over or in front of them.

### RECOMMENDATIONS:

- All levels of government provide avenues in which Indigenous women, girls, and 2SLGBTQQIA people can meaningfully and wholly participate in public decision-making.
- All levels of government provide subsidized programming for Indigenous women, girls, and 2SLGBTQQIA people with disabilities which includes providing skills-based training and opportunities for leadership in the policy realm.
- The federal government use culturally relevant gender and disability-based analysis frameworks to analyze and redraft policies aimed at increasing the participation of Indigenous women, girls, and 2SLGBTQQIA people with disabilities.



## 14. DISABILITY SUPPORTS AND SOCIAL PROTECTION (CRPD ARTICLE 28)

Indigenous Peoples experience greater poverty than non-Indigenous people, and people with disabilities experience greater poverty than people without disabilities (Arriagada 2016; Burlock 2017). During the COVID-19 pandemic, government income transfers reduced poverty among Indigenous Peoples, and to a lesser extent among people with disabilities. People with disabilities, and especially women with disabilities, living in poverty may live without required aids and devices because they cannot afford them (Morris et al. 2018).

There is currently no federal disability income assistance program and Indigenous women and 2SLGBTQQIA people with disabilities must rely on provincial or territorial social assistance programs if they live off reserve or are Métis and Inuit, or on the on-reserve income assistance plan from their band council with funding from Indigenous Services Canada. In all cases, these programs provide significantly lower levels of income than did the COVID-19 pandemic income benefits. While the federal government has introduced legislation for a Canada Disability Benefit, consultation processes are very slow, indicating limited forward movement.

Indigenous women and 2SLGBTQQIA people with disabilities have different ways to access aids and medication. Under the Non-Insured Health Benefits, First Nations people



registered under the Indian Act and Inuit have access to medications, dental benefits, vision care, mental health services and medical transportation. The majority of those receiving benefits under this program are women (NIHB 2022). Over a third of all expenses (35%) in 2020-21 was for medical transportation.

Low-income Indigenous people with disabilities living on reserve may also be able to access non-medical supports through the Assisted Living Program. This program covers in-home care, adult foster care, and institutional care. Expenditures for this program are not publicly available.

In all cases, non-status Indigenous people and those living off reserve, as well as Métis people, do not have access to these programs and must rely on provincial or territorial programs of disability supports, home care services and income assistance. Even where supports are available, navigating through services and supports can be confusing and unclear. This lack of protection is problematic, especially for Indigenous people who have been denied status due to sex discrimination within the Indian Act. This demonstrates a significant disparity in access to disability supports and income assistance among Indigenous Peoples.

Jordan's Principle and the Inuit Child First program provide disability supports to some Indigenous children with disabilities. The January 2022 Agreement in Principle on the Jordan's Principle addresses service gaps and the Human Rights Tribunal decisions after long delays and persistent pressure especially from the First Nations Child and Family Caring Society (Fayant and Bach 2022; FNCFCs 2021, 2022). Several significant questions remain (FNCFCs 2022).

### **RECOMMENDATIONS:**

- The federal government move quickly to introduce and implement legislation on the Canada Disability Benefit at a level well above provincial social assistance rates, drawing on the lived and embodied knowledges from the Indigenous and disability communities.
- The federal government address the disparities among Indigenous Peoples in relation to non-insured health benefits and income assistance, specifically looking at the First Nations and Inuit Health Branch in Indigenous Services Canada.
- The provincial governments match the federal government program for transition funding for young adults who have aged out of care and moved off reserve.
- Social support program providers hire navigators who can assist disabled Indigenous Peoples in finding supports and services.



## 15. CHILDCARE AND EARLY CHILDHOOD EDUCATION (CRPD ARTICLES 7, 8, 24)

Culturally different views of both childhood and disability among Indigenous Peoples compared with the implicit (and explicit) approaches in childcare and early childhood education lead to increased barriers and inadequate care for Indigenous children with disabilities and their families. In addition, colonialism continues to create and perpetuate poverty, environmental risk, and trauma—all of which can disable Indigenous children, thus increasing the rate of disability (Underwood et al. 2019).

Few childcare services are designed specifically for Indigenous children with disabilities, and the lack of attention to both culture and disability means that some families must choose either culturally safe services or disability services (Underwood et al. 2019; Ineese-Nash et al. 2018).

Those living in rural and remote communities have even fewer options. When services are only available outside the community and require children to leave the communities, families may respond in the context of their experiences of residential schools. Culturally inappropriate assessments and diagnosis may lead to overrepresentation of Indigenous children in disability-related education and services (Underwood et al. 2019). Children with disabilities who are non-status or live off-reserve are also subject to inappropriate early childhood education and may be lost between the intersections of Indigenousness and disability.





Childcare and early childhood services often fail to include family networks or fail to understand the context that leads to a child's wellbeing. Families may be able to understand the needs of a child and provide accommodations, while disability and education services may deem the behaviours of the children as requiring interventions. This leads to 'cultural misunderstandings' by service providers (Underwood et al. 2019; Ineese-Nash et al. 2018).

### RECOMMENDATIONS:

- All childhood disability service providers ensure culturally safe service provision that centres disabled Indigenous people.
- All levels of government support Indigenous service providers to develop their own approaches to delivering disability supports in line with the needs and priorities of Indigenous communities and families and their culture, language, and worldviews.
- The federal government eliminate funding discrepancies in education and childcare funding for First Nations living on and off reserves.
- The federal government, in coordination with Indigenous organizations, continue to fund and implement the Indigenous Early Learning and Child Care Framework (2018).





## 16. DISABILITY IN HUMAN RIGHTS TREATIES (PREAMBLE, ARTICLE 38)

The CRPD builds on and draws from a wide-ranging set of human rights treaties, many of which reinforce the importance of understanding intersectional experiences of discrimination. The United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP), which is the minimum standard of human rights for Indigenous Peoples, calls for special attention to be paid to the rights of Indigenous elders, women, youth, children, and persons with disabilities (Article 22).

In addition to its General Recommendation on disabled women (no. 18), the Committee on the Elimination of All Forms of Discrimination Against Women notes “The discrimination of women based on sex and gender is inextricably linked with other factors that affect women, such as race, ethnicity, religion or belief, health, status, age, class, caste, and sexual orientation and gender identity” (General Recommendation no. 28).

The Convention on the Rights of the Child recognizes the intersections of childhood and disability in article 23 and the rights of girls with disabilities in General Comment 9 and the rights of Indigenous children in article 30 and General Comment 11.

The Convention on the Elimination of Racial Discrimination examines the intersections of race, gender, and disability in its General Comment no. 25.

Unfortunately, international human rights treaties continue to pay little attention to those who are disabled and 2SLGBTQQIA people (de Beco 2020).

With these as reminders, it is surprising that the Canadian government continues to keep separate its consideration of Indigenous Peoples, women, and people with disabilities in its Universal Periodic Review Report (UPR) as well as in its reporting on these treaties. This can make invisible the experiences of Indigenous women, girls, and 2SLGBTQQIA people with disabilities (Bassily et al. 2020).

### **RECOMMENDATIONS:**

- The government include consideration of Indigenous women, girls, and 2SLGBTQQIA people with disabilities in its implementation of and reporting on all international human rights treaties, including its Universal Periodic Review Report.





## 17. RESOURCE EXTRACTION (CRPD ARTICLES 19, 20, 26)

Resource extraction has had disproportionately negative impacts on Indigenous women. The influx of workers to extraction sites has led to increased violence against Indigenous women through sexual harassment and unregulated sex work (Pauktuutit 2020; Manning et al. 2018), compromised food and water security (Levac and Manning 2019; Castleden et al. 2017), as well as other issues such as an absence of meaningful relationships with local communities, poor wages, and racist, sexist, ableist, and otherwise discriminatory employment practices (Pauktuutit 2020; NWAC 2021). Resource extraction itself comes from a Western approach which is violent, extractive, and environmentally racist, rather than from Indigenous approaches that recognize the responsibility for caring for creation (Bluesky and Levasseur 2022).

While there has been significant attention to the impacts on Indigenous women (Bluesky and Levasseur 2022), there has been little discussion of the effects on Indigenous women, girls, and 2SLGBTQQIA people with disabilities. The literature does indicate there are less obvious negative impacts on other invisible groups such as the 2SLGBTQQIA community or those with disabilities (Levac et al. 2021). This lack of attention leads to serious negative consequences for Indigenous women, girls, and 2SLGBTQQIA individuals with disabilities. The impacts on transgender and gender-nonconforming individuals are particularly at risk of being overlooked (Levac et al. 2021).

While the federal government introduced the 2019 Impact Assessment Act to alleviate or mitigate some of these negative impacts, more attention is needed to the intersectional impacts and how proponents must address them. The Act requires consideration of Indigenous culture and knowledges and consultation with Indigenous Peoples in addition to “the intersection of sex and gender with other identity factors.” This can be done with impact assessments that are community-based, culturally relevant, and intersectional in their analyses (Levac et al. 2021).

### RECOMMENDATIONS:

- All impact assessments include disaggregated data to better understand the unique impacts of resource extraction on Indigenous women, girls, and 2SLGBTQQIA individuals with disabilities.
- To further ensure intersectional impact assessments, the Impact Assessment Agency of Canada and provincial and territorial impact assessment agencies use culturally relevant gender-based analysis frameworks and other tools developed by Indigenous Peoples when developing/analyzing impact assessment reports.
- The Impact Assessment Agency of Canada together with Indigenous women and their



organizations develop clear guidelines and examples of how to identify, address, and prevent negative impacts of resource extraction on Indigenous women, girls, and 2SLGBTQQIA people with disabilities.

- Impact assessment and resource extraction companies include Indigenous women, girls, and 2SLGBTQQIA people with disabilities at all levels and eliminate discriminatory racist, sexist and ableist policies.



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# Shadow Report for United Nations Convention on the Rights of Persons with Disabilities

Experiences of Indigenous women, girls, and 2SLGBTQQIA people  
with Disabilities

NOVEMBER 29, 2022



Native Women's  
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