SHELTER VOICES

*S*helter Voices 2020 is the seventh national survey[1] of shelters and transition houses (THs) that serve women and children affected by violence.[2] This special issue of *Shelter Voices* focuses on how violence against women (VAW) shelters/THs were affected by and have responded to the COVID-19 pandemic. It includes information on capacity, crisis calls and requests for admittance, changes in violence (both severity and frequency), how COVID-19 has impacted the work of shelters/THs, how they have adapted, and what adaptations they plan to keep post-pandemic.

Demand for Shelters/THs and VAW Support during COVID-19

Survey data demonstrates that crisis calls and requests for support varied during different phases of the pandemic. Phase I refers to March-May 2020, when many parts of Canada were in lockdown. Phase II refers to June-October 2020, when lockdown measures eased.

Three in five (59%) survey respondents indicated that crisis calls decreased in Phase I, while nearly the same number (61%) reported that calls increased during Phase II (Figure 1). As one respondent noted:

"At first, it was very quiet, which was concerning because we knew there were women in the community who needed support. We did not get busier until September, and now we are very steady with both calls and stays in the shelter."

This same pattern emerged concerning requests for admittance (Figure 2). During Phase I, 65% of respondents indicated that requests decreased; when restrictions were lifted and businesses reopened between June and October, 54% of

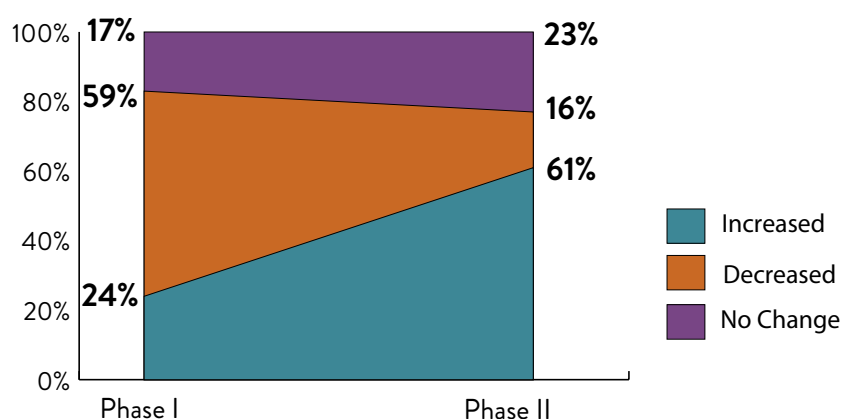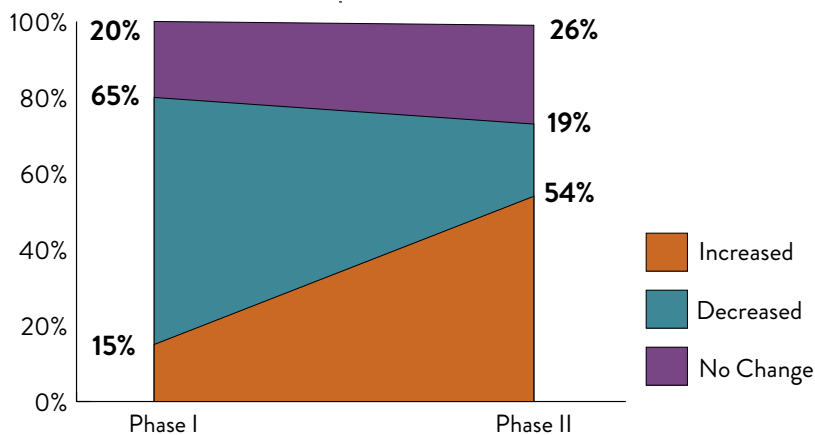**Figure 1: Frequency of Crisis Calls During Different Phases of the Pandemic**

Phase I: 17% No Change, 59% Decreased, 24% Increased
Phase II: 23% No Change, 16% Decreased, 61% Increased

Legend: Increased, Decreased, No Change

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Figure 2: Requests for Admittance to Shelters/THs During Different Phases of the Pandemic

respondents said that requests for admittance increased.

Of course, demand varies and comments showed that some shelters/THs saw an increase in calls and requests for admittance throughout the pandemic. For instance, one respondent shared:

"We have seen an increase in requests for space and remain full. We use a local hotel to support us beyond our capacity. We are in a rural area, so keeping folks safer is challenging in terms of scope of availability."

The data suggests that it was difficult for women to reach out for help or leave their homes during the pandemic lockdown periods. Comments indicated a variety of reasons for this, including fear of contracting the virus – "There is a greater reluctance for women to come into shelters as they are worried about COVID outbreaks in shelters." Survivors may have been unable to call or leave because their abuser was monitoring their phones and other devices as well as their movements. Fear over housing security and potential homelessness, particularly during a pandemic, was also a significant deterrent for women wanting to leave an abusive home.

VAW shelters/THs remained open during the pandemic and met public health regulations to keep their staff and clients safe. However, many expressed concern for those who were not reaching out for help:

"We have had to adapt to online phone chats, video conferencing, etc. Women have pulled away due to the fear that the pandemic has created. Women feel that their confidentiality is at risk through online services, and imposed self-isolation due to public health protocols has made clients hesitate to reach out. Services have needed to do a lot of publicity to educate the community that we still offer services regardless of the pandemic."

Reduced Capacity & Public Health Regulations

The majority (71%) of VAW shelter/TH respondents had to reduce capacity to meet public health regulations. Bedrooms (and therefore beds) were reduced to ensure that there was an isolation unit on-site and to maintain physical distancing. Shared bathrooms also created challenges for physical distancing, with shelters/THs limiting shared rooms and bathrooms to one resident/family, further reducing capacity. Communal areas such as kitchens, lounges, family rooms, and children's play areas were significantly altered as well. Many shelters/THs had to reduce their capacity by up to 50% or more.

The situation has been challenging as some VAW shelters/THs remained at full capacity even with a reduced maximum occupancy, often with altered staffing schedules, remote working conditions, and, in some cases, reduced staffing capacity. Public health regulations created additional work for staff in terms of cleaning, reorganizing spaces for physical distancing, changing the way programming was delivered, and ongoing efforts to encourage residents to follow these regulations. This proved particularly difficult for children in a communal environment.

1,039

total isolation units on- and off-site

64% of shelters/THs had units off-site at a hotel or motel

51% had units on-site

17% had units off-site not at a hotel

Isolation Units

VAW shelters/THs have found various ways to deal with reduced capacity while also ensuring that there are isolation units available for those who may need to quarantine. Among respondents, 74% had established isolation units on- or off-site. The most common approach to isolation units, especially among emergency shelters/THs, was an arrangement with a hotel or motel off-site. Without hotels for overflow, many would have had to decrease their capacity even more.

While off-site isolation units were a much needed short-term solution, they were not without their challenges. It has been difficult for some shelters/THs to serve women and children staying in hotels:

*"We do have funded hotel rooms, which helps to increase our capacity (although not to the same level) but the level and quality of service are reduced compared to what we can provide at the shelter. It is a significant challenge to provide the resources and supports to the women and children accessing hotels."*

Half (51%) of VAW shelter/TH respondents had an isolation unit on-site. Many emergency shelters/THs continued to operate in a communal environment and therefore some had to modify their physical space to adhere to public health regulations. The need for such renovations varied, with 8% needing major renovations (above $10,000), 19% minor renovations (below $10,000), and the majority (74%) not requiring any. Among the shelters/THs that needed renovations, 84% used the COVID-19 emergency funds from the federal government,[3] 40% their existing budget, and 30% used donations to cover the costs; some used a combination of funds for their renovations.

Second stage shelters, with longer-term apartment-style units, did not necessarily need to reduce their capacity to the same extent as emergency shelters/THs because their units are not shared. Where available, some set aside one unit as an isolation site.

Types and Severity of Violence Against Women during COVID-19

Figure 3: Changes in the Severity of Violence/Abuse Among Women Coming to the Shelter/TH
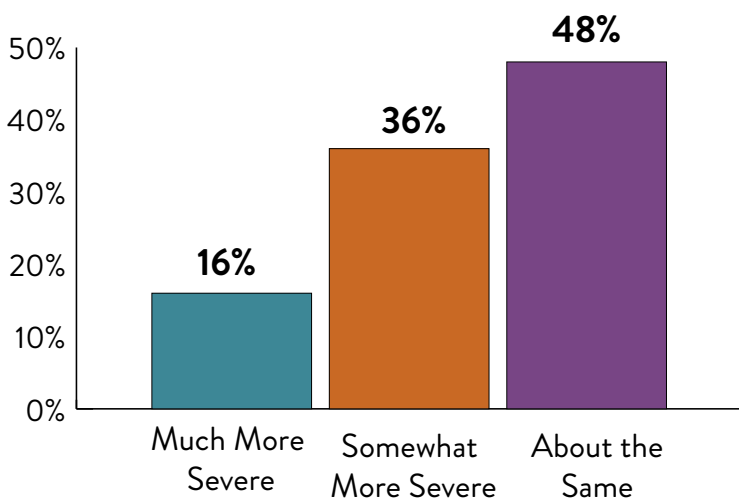
"Not only is our shelter at full capacity, but the number of violence cases that we deal with has also dramatically increased as has the seriousness of these cases."

This comment points to a disturbing trend reported by shelters/THs across the country who have seen an escalation in the severity of violence against women during the pandemic.

Among the women admitted to their shelters/THs, 16% of survey respondents reported much more severe violence, 36% somewhat more, and 48% about the same (Figure 3).[4] VAW shelters/THs that did not see changes in the rates or types of violence clarified that they were often in locations where the pandemic had not affected their community (i.e. no or very few cases, no closures or lockdown).

Additionally, over one-third (37%) of respondents indicated that they had seen a change in the types of violence experienced by women; 51% said it had not changed and 11% were unsure. Shelters/THs reported that they were seeing women admitted who scored higher on danger risk assessments and with higher indicators of lethality.

Comments revealed disturbing trends in the violence frontline workers were seeing, including an increase in physical attacks (specifically stabbing, strangulation, and broken bones), forced confinement, sexual violence, emotional and financial abuse, increased human trafficking, and an overall higher frequency of abuse in all forms.

Perpetrators used the pandemic itself as a strategy to further abuse and control women who were confined to the home due to COVID-19 restrictions. Isolation and lockdown measures to keep the public safe during the global pandemic inadvertently created a dangerous situation for women and children living with their abusers, who used this government-sanctioned increased isolation to further control their victims. Specifically, the rise of coercive control[5] – isolation, limiting access to finances, controlling behaviours, degradation, restricting movements, etc. – was being reported more frequently by survivors calling and coming to the shelters/THs for support and safety.

Comments indicated that threats to transmit COVID-19 to women or spread it to their children were common tactics used by abusers. Perpetrators also used delayed court dates and timelines due to the pandemic to their advantage to further inflict violence and abuse on women and their children. One respondent shared:

"Men are using the legal court system to abuse women by using the children as emotional leverage. In Quebec, it is automatically shared custody, but the minute she declares abuse in court then...she is accused of using abuse as a means of parental alienation.[6] The Quebec court system works against her."

Additionally, child custody arrangements were violated as abusers refused to return children to their mothers.

Survivors in rural, remote, and northern areas are already isolated and often hours away from VAW supports and shelters/THs. Several respondents noted that Indigenous women were unable to leave their isolated communities and could not find transportation to reach the shelter/TH – "Women report they had trouble leaving their communities and could not get away from partners." This only increased the violence as women were trapped.

Survey respondents noted significant increases in mental health crises and challenges for survivors as a result of increased violence and abuse, as well as the additional stresses of the pandemic and isolation:

"Women are stressed and experiencing high anxiety. There is fear about COVID and tension and fear of the violence these women are experiencing."
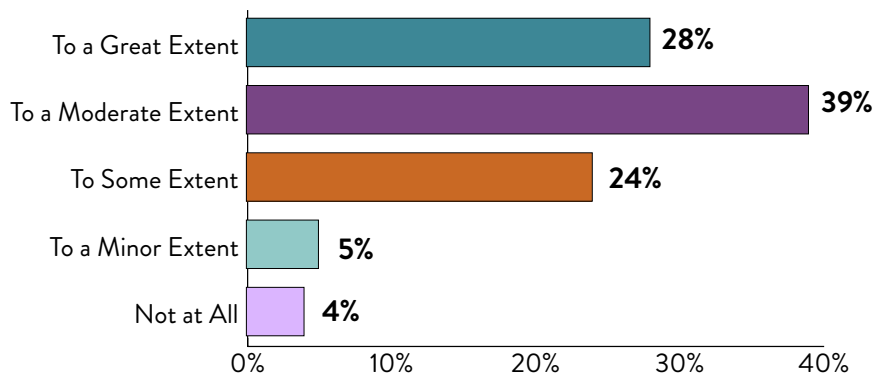
This was further exacerbated as many support services became remote, as discussed in more detail in the next section.

Adapting to the Pandemic

VAW shelters/THs have been dealing with significant challenges due to COVID-19. Over one-quarter (28%) of survey respondents said that the pandemic impacted their ability to provide services

Figure 4: Extent to which Pandemic Has Impacted the Shelter/TH's Ability to Provide Services

Extent	Percentage
To a Great Extent	28%
To a Moderate Extent	39%
To Some Extent	24%
To a Minor Extent	5%
Not at All	4%

to women and children fleeing violence to a "great extent," with one-third (39%) indicating it was to a "moderate extent" (Figure 4).
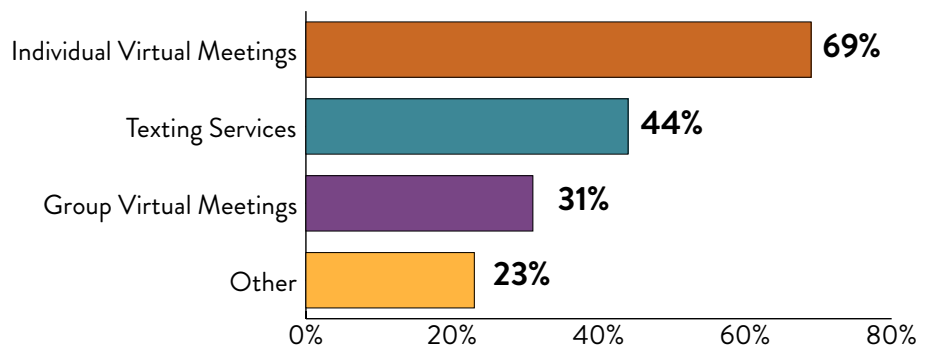
Despite the challenges, shelters/THs continued to support women and children in the community. A significant majority (89%) continued to provide services to those who did not reside in the shelter/TH. Comments showed that many shelters/THs increased their outreach services, using technology to reach survivors unable to physically come to the shelter/TH to receive services or accommodation.

To appropriately serve survivors in these challenging and constantly changing conditions, 82% of VAW shelters/THs surveyed had to purchase new technology to support residents during the pandemic. Among shelters/THs who used technology to increase their capacity to serve survivors, 67% used the federal COVID-19 emergency funds to purchase new technology such as tablets, phones, and laptops for residents and staff.

Many respondents adjusted their service delivery to maintain physical distance by providing remote support via texting and phone and video calls. For example, they used encrypted videoconferencing platforms for individual and group counselling (Figure 5).

Comments revealed mixed feelings about the use of technology. For example, technology expanded access to survivors beyond residents, yet bandwidth, Wi-Fi, and cell reception was limited in many rural and remote areas. Additionally, respondents said that some survivors preferred remote counselling and programming, while others felt that residents were missing in-person connection. Going forward, having options for residents to choose how they receive services could be a viable solution.

Figure 5: Technology Used to Provide Services during the Pandemic

Technology	Percentage
Individual Virtual Meetings	69%
Texting Services	44%
Group Virtual Meetings	31%
Other	23%

Challenges

Women's Shelters Canada's previous research found that VAW shelters/THs were facing many challenges before the pandemic.[7] These included funding, staffing, capacity, and service delivery challenges affecting shelters/THs from coast to coast to coast. Shelters/THs located in rural, remote, and northern regions, many of which are Indigenous, were particularly challenged due to isolation and the high costs of living, transportation, and consumer goods.

### Funding and Fundraising Challenges

Less than half (41%) of respondents reported that funding challenges were about the same as before the pandemic; 26% reported somewhat more funding challenges and 18% much more. The pandemic's

impact on fundraising may be one reason why some shelters/THs were struggling, as 38% reported fundraising significantly less during the pandemic, 15% slightly less, and 25% about the same (Figure 6). While fundraising dollars were down, many commented that their communities continued to provide much needed and appreciated donations.

For many shelters/THs, in-person fundraising events were cancelled due to the pandemic, putting programs for women and children in jeopardy. Some communities were also hit hard by job losses, which had an effect on local fundraising. While some shelters/THs moved to online fundraising, many reported that this had not been successful. Since the majority of VAW shelters/THs rely on fundraising dollars to operate,[8] these cancelled fundraisers lead to financial uncertainties:

"We are unsure how we are going to make up our required fundraising dollars to maintain operations."

Figure 6: The Pandemic's Impact on Fundraising Dollars, Compared to the Previous Year
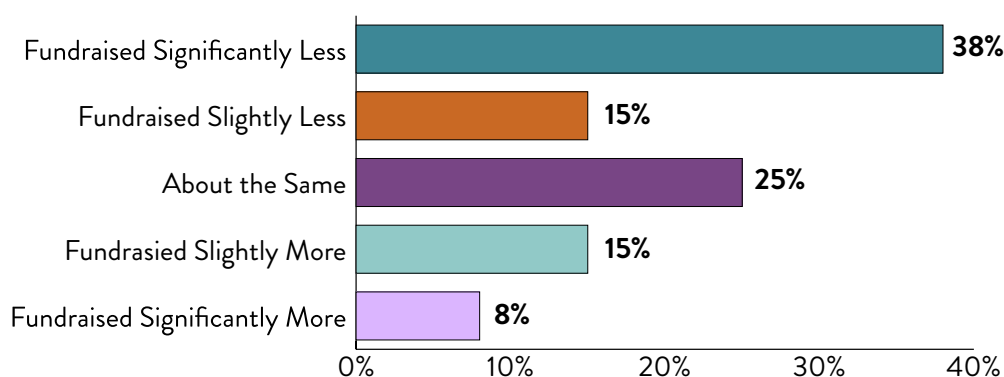
While many shelters/THs were appreciative of the federal government's emergency COVID-19 funding, with some saying it was the only way they could remain open during the pandemic, others commented that it was not enough. They were concerned about the lack of sustainable funding[9] to help them endure the pandemic and remain open. Some had to lay-off staff due to financial difficulties.

Staffing Challenges

The majority (78%) of shelters/THs faced staffing challenges during the pandemic. This is not surprising given that a majority of shelter workers are women and research has shown that they have been hardest hit by the global pandemic in terms of balancing paid work and family responsibilities.[10] For example, 41% of shelters/THs were moderately and 18% majorly affected by staff availability due to childcare responsibilities, especially during lockdown when school and daycare closures occurred.

Since shelters/THs provide direct services to the public, their staff sometimes needed to stay home due to health concerns or quarantine. Specifically, 37% of respondents were moderately and 27% majorly impacted by staff reluctance to work due to health concerns or self-isolation requirements.

Many shelters/THs allowed staff to work remotely from home when possible. One-third (33%) of respondents were moderately impacted by these changes, with another 31% reporting it having a minor impact; 19% said this had a major impact. There is still a need for some shelter/TH staff to be on-site, especially with the increased need for regular cleaning and sanitation, which has meant increased workloads for some:

"In order to respect physical distance, we had to reduce the team who then became very tired, which led to further reductions in staff. COVID procedures take a lot of energy."

Despite efforts to maintain quality and consistent programming and support, some shelters/THs described negative impacts on residents due to reduced staffing on-site, in-person support, and cancelled group activities – "Clients expressed feeling isolated and missing the previous level of support."

Conclusion: Moving Beyond the Pandemic

The majority (66%) of respondents said they will continue some of the practices they have put in place during the pandemic when it is over. Many comments suggested that the pandemic allowed them to "think outside the box" and "become more empathetic and creative."

Among the responses, some emerging practices stood out. Many commented that they would continue to provide remote services and were looking to expand their virtual, texting, and telephone capacities. For emergency VAW shelters, several said they would continue to prepare all meals for residents so that physical distancing and safe food handling could be maintained. Respondents indicated that pandemic planning, stocked personal protection equipment, and maintaining handwashing were health and safety practices that would remain.

The pandemic has prompted many emergency shelters/THs to rethink their physical space, including shared bedrooms and bathrooms and communal spaces. While the VAW shelter/TH sector has been having these conversations for some time, the pandemic has "caused us to seriously look at alternative shelter options." Several listed self-contained units with ensuites or apartments as an ideal model. This would require significant capital investment and advocacy with funders to recognize and fund this need.

Several respondents explained the positive outcomes of remote staffing, which they planned to keep in place following the pandemic – "We have worked in two teams alternating days in the office with days out. This way, if one member of a team becomes ill, we will still be able to deliver services. The days at home have allowed us to do telephone calls and keep up with the case files better than we have ever been able to and have reduced the stress on staff in dealing with extreme cases all the time."

Overall, VAW shelters/THs are working in incredibly challenging and ever-changing environments as the pandemic continues to unfold. However, they have continued to keep countless women and children safe, both from violence and from COVID-19, in what some have called the double pandemic.[11]

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[1]The survey received responses from 266 shelters from 251 (of 480) shelter/TH organizations, representing a 52% response rate. This included responses from every province and territory, urban and rural areas, and Indigenous (First Nation, Métis, Inuit) shelters/THs.
[2]Due to the COVID-19 global pandemic, this year's *Shelter Voices* does not include a one-day snapshot of the number of women and children served.
[3]These funds were part of the federal government's COVID-19 Economic Response Plan. See this press release for more information.
[4]See EVA Canada's report, which found similar changes in violence during the pandemic.
[5]See this research report, submitted to Justice Canada in April 2020, for more information on coercive control.
[6]Parental alienation, in this instance, refers to the accusation that a woman is inventing claims of domestic violence in order to maliciously keep her children away from (i.e. alienate them from) their other parent. For more information, see this *CBC* article.
[7]See Women's Shelters Canada's previous reports: *More Than a Bed* (2019), *Transitioning to a Life Free from Violence* (2019), and *Breaking the Cycle of Abuse and Closing the Housing Gap* (2020).
[8]Research in WSC's *More Than a Bed* report found that 55% of shelters could not meet their operating expenses without fundraising (Maki 2019: 64).
[9]The provincial and territorial governments are responsible for operational funding of the shelters and transition homes under their jurisdiction.
[10]See the Canadian Women's Foundation's July 2020 report on women, decent work, and Canada's fractured economy.
[11]See, for example, this article by *VICE* and this one by *The Washington Post*.