



CANADIAN FEDERATION  
OF NURSES UNIONS  
LA FÉDÉRATION CANADIENNE  
DES SYNDICATS D'INFIRMIÈRES  
ET INFIRMIERS

**Submission by**

**the Canadian Federation of Nurses Unions (CFNU)**

**to**

**the Standing Committee on the Status of Women**

**March 15, 2017**

## Introduction

The Canadian Federation of Nurses Unions (CFNU) welcomes the opportunity to provide input into the Standing Committee on the Status of Women's study on The Economic Security of Women in Canada to improve women's economic security and ensure their equal participation in the Canadian economy. The CFNU is Canada's largest nursing organization and the national voice for frontline nurses in Canada. It represents close to 200,000 nurses and student nurses. As the Committee is aware, the majority of nurses (over 90%) are women. Nursing has remained a largely gender-segregated occupation.

- 1. The CFNU recommends that a gender lens be applied to all government policies to promote gender equity and equality, and increase the role of women in decision making and leadership roles, including in our health care system.**

An important first step would be for the government to act upon the 2004 Pay Equity Task Force's 113 recommendations. In addition, the federal government needs to recognize paid domestic violence leave within the *Canada Labour Code*. Domestic violence doesn't stay at home; it follows people to their jobs. One in three workers have experienced domestic violence, and more than half of those affected experienced violence at or near their workplace. The federal government needs to act to keep victims safe and help them keep their jobs.

- 2. The CFNU recommends that a gender lens be applied specifically to government employment insurance leave policies to account for the needs of double-duty caregivers.**

As health care professionals, nurses are generally the first choice of caregiver for all family members. However, as a 24/7 workplace, the nursing environment is not conducive to work-life balance. Working in essential public health services, nurses have difficulty taking time-off because they must always be replaced, leaving little time for family responsibilities. As such, special leave provisions are needed for essential workers such as nurses, who are double-duty caregivers, so they are not forced into part-time or casual work – with the subsequent trade-off in terms of both their productivity and their overall economic security. With respect to increasing the participation of women in the workforce, in 2002, the Canadian Nursing Advisory Committee (CNAC) recommended a 70-30 ratio of full-time to part-time as optimal for nurses' employment; the CFNU supports this recommendation. However, the national full-time equivalent (FTE) rate for Registered Nurses (RNs) has remained stubbornly intransigent, hovering around 60%. It is closer to 50% in a number of provinces. Nurses' dual role as caregivers, both in the workplace and at home, mean that the optimal FTE to PT ratio has never been achieved.

- 3. The CFNU recommends that the federal government, in conjunction with the provinces and territories, establish a national child care program.**

The Liberals promised a new child care deal. Funding to the provinces and territories would ensure all Canadians can access quality, affordable child care. Currently, child care represents

one of the biggest expenses for parents of young children. There are only enough regulated child care spaces for 25% of children between the ages of 0 and 12. Shift workers like nurses, particularly those who are mothers with young children, may have difficulty maintaining their attachment to work in the absence of child care.

**4. The CFNU recommends that a special education fund be established to provide for health care professionals' education in order to meet Canada's current and future health care workforce challenges, and attract and retain the nursing workforce.**

For students, the fund would: a) support 50/50 (F/P/T) cost-sharing for nursing education programs; b) increase the availability of student loans and flexible provisions for loan repayments; c) allow health care facilities to provide new nursing graduates with mentorships, preceptorships, and full employment programs, and d) diversify the health care workforce and increase its cultural competencies by supporting indigenous students and internationally educated health care professionals. For the existing nursing workforce, who may not have the financial resources to pursue further education given the competing demands of family responsibilities, the fund would allow workers to retrain as a factor in retention. According to the Canadian Institute for Health Information (CIHI), almost 40% of the workforce are over 50; more than a quarter are over the age of 55. CIHI noted in its latest nursing report (2016) that the inflow and outflow rates for the RN profession have continued to draw closer together, suggesting that fewer RNs would be available to fill future vacancies, meaning the retention of nurses is a potential issue with respect to the health care system's sustainability.

**5. The CFNU recommends that the Employment Insurance program be used to provide income supports and apprenticeship-like programs for health care workers for laddering in the health care sector.**

Retraining supports would compensate for skills shortages in the labour market, such as the lack of providers with specialized training in mental health, home care, gerontology and palliative care needed for the rising level of acuity among seniors, as well as for the need for nurses in new specializations. A tiered-pathway or apprenticeship-like approach through modular education and ladderized credentialing would provide health care students with options to graduate into the workforce at various stages of training. The cultural competence of the workforce could be enhanced by engaging Indigenous peoples and internationally educated health care workers in skills upgrading. These support programs could allow a personal support worker (PSW) to seek skills upgrading to become a Licensed Practical Nurse (LPN), an LPN to become a Registered Nurse (RN), or an RN to become a Nurse Practitioner (NP). Further, educational supports could help address the maldistribution of professionals by expertise and geography.

The CFNU thanks the Status of Women Committee for considering its submission to the study on The Economic Security of the Women of Canada and looks forward to working with the Committee to advance the progress of women in Canada's workforce.