SECTOR PROFILE

Social Services

This profile is intended to provide CUPE members with basic information about the sector they work in from a national perspective. Find all our sector profiles and more information online at cupe.ca

NATIONAL SECTOR COUNCIL CONFERENCE

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CUPE members in the social services sector provide a range of services and supports to vulnerable and often marginalized people. CUPE members working in the sector do a wide variety of work, including: assisting women and children fleeing domestic violence; working with adults with developmental disabilities; protecting children from harm and neglect; providing employment counselling; administering social assistance; staffing shelters; and providing education about HIV and AIDS. Our members work for employers ranging from small non-profit community agencies to large social assistance programs and municipalities.

Approximately 85 per cent of workers in the social services sector are women. An increasing amount of work is being pushed to temporary, contract, casual, or part-time positions.

CUPE is the second-largest union in the social services sector, representing approximately 27 per cent of all unionized social services workers. CUPE works collaboratively with the people we serve, their families, and the organizations that support them, to improve services and increase funding.

CUPE represents 48,710 social services workers in over 500 bargaining units across Canada.

In addition, we have members in larger locals that overlap with several other sectors such as municipal, school board and health sectors. For example, workers in Ontario who provide social assistance are employed by municipalities.

FUNDING AND GOVERNANCE

Decades of government funding cuts and/or years with no increase to baseline funding have made social services vulnerable to a variety of methods of privatization.

Federal and provincial governments continue to promote the latest form of privatization, the social impact bond (SIB). SIBs are a market-driven investment approach that allows the private sector to profit from social services delivery. Under this model, private investors invest money in a social services project towards achieving targets, as defined by the government and the private sector investor group. Targets are often defined in narrow and simplistic ways to make an investment seem attractive. When program targets are met, the government pays the investors a "return on investment" between five and 30 per cent. In this model, governments outsource control of project development, financing, service delivery and follow-up evaluation to the private sector.

Provincially, Manitoba has launched its first SIB and is soliciting proposals for more. Saskatchewan has two SIBs, a home for single mothers and their children, and a project aiming to improve graduation rates for private middle school students. Ontario has explored developing SIB pilot projects, and other provincial governments have considered the SIB model for social services.

The federal Liberal government is currently the biggest promoter of SIBs. In 2018, it invested $755 million over 10 years to create the initial social finance fund. Through this fund, investors are expected to contribute at least two dollars of private investment for every one dollar of federal money, except for projects involving First Nations, where the government will contribute a higher rate. As COVID-19 impacts the amount of donation funds received by many social services organizations, social impact investment groups are pressuring the federal government to speed up the timeline for the distribution of these funds.

The Federal government has partnered with the YMCA to expand the long-standing Alternative Suspension program (established in 1999) from Quebec to 10 sites across Canada as a social impact bond. The program aims to support students who have been temporarily dismissed from school. The Federal government is also involved in two SIBs in the areas of health and skills training. In the case of the skills training SIB, 60 per cent of the funding was spent on overhead and profits rather than service delivery.

Independent research has shown that SIBs or pay-for-success bonds have failed. Investors want to make a profit, not tackle the root causes of systemic issues. After paying multiple consultants and providing investors with their returns, there are no public sector "savings" to be found. The process from beginning to end is not democratically accountable or transparent.

Experts have called this a new "social economy market" that has been based on public-private partnerships (P3s), another failed privatization strategy.

Individualized funding, or "vouchers," for clients is another form of privatization that negatively impacts social services. Governments give financial resources directly to parents, families or individuals, so they can purchase social services and supports. In Ontario, for example, people with developmental disabilities or their families receive some funding to purchase services and supports. Though framed as providing choice to families, this practice is a piecemeal approach that weakens the overall system by fragmenting services, eroding working conditions and wages, and continuing the chronic underfunding in the sector. It does nothing to ensure that needed services are actually available and accessible, while promoting the development of private for-profit services.

Another model being promoted is competitive bidding, which opens the door to privatization by imposing a market model on community social services agencies. This process pits non-profit community agencies against one another and against private operators for scarce funding resources, staff and volunteers. In Alberta, the use of competitive bidding has expanded under the current UCP government.

Pensions

Members in the social services sector have a variety of pension arrangements: municipal pension plans (BC community social service workers and Ontario municipal and Children's Aid Societies workers); large pension plans (Healthcare of Ontario Pension Plan); the Multi-Sector Pension Plan (MSPP); and Group Registered Retirement Savings Plans. Over 75 per cent of social service locals have a pension plan; over half of those are defined benefit plans.

CUPE has been extremely successful at introducing the MSPP in many smaller social services workplaces. In Ontario, for example, through coordinated bargaining, members in 86 per cent of developmental services bargaining units now participate in the MSPP. Many workers in the social services sector, elsewhere in the country, still do not have any pension arrangements.

Bargaining

CUPE's social services sector has a mix of local, coordinated and central bargaining. Local bargaining is the sole form in New Brunswick, Prince Edward Island, Manitoba and Alberta, while some locals in Nova Scotia, Newfoundland and Labrador, Ontario and Saskatchewan have forms of coordinated bargaining. Central bargaining exists in BC, Quebec and Ontario.

Nova Scotia, New Brunswick, Ontario and Manitoba legislative attacks on collective bargaining and interest arbitration have created challenges in the sector. Attacks on workers' rights, such as legislated wage freezes, back-to-work legislation, forced arbitration and expansive definitions of essential services have created a difficult collective bargaining environment. In June of 2020, a Manitoba court struck down *Bill 28* – The Public Services Sustainability Act, which sought to freeze the wages of 100,000 public sector workers, including child and family services workers. Even though the legislation was not proclaimed, it had an impact on collective agreements going back to 2017.

Members in some sub-sectors have made gains in negotiating collective agreement language on workload. For example, many locals in Ontario's child welfare sector now have comprehensive language on workload, achieved through coordinated bargaining. The next round of coordinated bargaining in Ontario will be in the Developmental Services Sector.

MOBILIZING OUR MEMBERS AND COVID-19

In March of 2020, many of CUPE's social service workers found themselves on the frontlines of the COVID-19 pandemic. Due to the essential work that our social services members provide, the sector did not see the same mass layoffs that other sectors faced. However, many social services workers – those who work multiple jobs or at multiple job sites – were impacted by government orders limiting them to working at a single job site, without providing any corresponding increase in hours to make up for these restrictions. These government orders – aimed at curtailing the spread of COVID-19 highlighted the importance of the work that some CUPE social services members do, and the need for improving working conditions in the sector.

As COVID-19 restrictions continued, CUPE social services members mobilized in order to pressure governments to provide adequate PPE to front-line workers in the sector, and to provide pandemic pay to front-line workers who have had hours cut due to the inability to work at multiple sites. Thanks in part to CUPE's lobbying efforts, CUPE social services workers in Prince Edward Island, Ontario, British Columbia, New Brunswick, Manitoba and Newfoundland were deemed eligible for some form of temporary pandemic pay.

In Ontario, severe and persistent underfunding of social services has caused workload issues, increased risk of violence in the workplace due to lack of proper staffing, overwork and burnout. Further voucher-based privatization or service integration and restructuring could intensify each of these issues and impact service delivery. In 2019, CUPE members across the province joined with community members to force the Ontario Conservative government to back away from announced cuts to social assistance rates.

In several provinces, CUPE social services members are mobilizing in order to highlight the importance their work provides as governments work to combat COVID-19. After decades of funding cuts, flatlined budgets and privatization the time has come for governments to reinvest in publicly delivered social services.