

## The Author



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## Canada's Live-in Caregiver Program

For over 20 years, Canada's Live-in Caregiver Program (LCP) has granted permanent residency (PR) to individuals who have worked for at least two years in the home of an employer. The overwhelming majority of those arriving in this program are women from the Philippines. On 30 November 2014, a series of sweeping changes to the program took effect. Renamed the Caregiver Program, it introduces two pathways to permanent residence - one for those who care for children, and another for those who care for people with high medical needs. In both cases, language requirements and annual quotas have been established, and in the latter case, professional credential requirements have also been put in place. In neither case is a 'live-in' arrangement now necessary, unless both caregiver and employer agree.

On 9 December 2014, a panel was convened by the York Centre for Asian Research (YCAR) to discuss these changes. The panel featured lawyers and caregiver advocates who are closely familiar with the LCP: Petronila Cleto, Gabriela Ontario; Fay Faraday, Packer Chair in Social Justice and Visiting Professor at Osgoode Hall Law School; Avvy Go, Director, Metro Toronto Chinese & South-east Asian Legal Clinic; Deanna Santos, Santos Law Office, Markham; and, Pura Velasco, Caregivers Action Centre. The panel raised a range of points:

The removal of the live-in requirement is welcome, but there are doubts if this will be meaningful in practice. In particular, it is not clear that an approval would be given under the Labour Market Impact Assessment process for caregivers who plan to live out, on the grounds that Canadians and permanent residents are available to do such work. If so, living in would be their only option.

Taking away the live-in requirement has been presented as removing the potential for abuse and contract violations, but our panelists pointed out that as long as caregivers are tied to a single employer, and rely on that employer to maintain their status in Canada, then they will be vulnerable. A better solution would have been to tie the caregiver to the occupation rather than the employer. To reduce if not eliminate precariousness, caregivers should be granted permanent residence upon arrival.

## Asia Research Briefs

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## About YCAR

The York Centre for Asian Research (YCAR) is one of Canada's largest and most active communities of scholars working on East, South and Southeast Asia as well as Asian migrant communities around the world.

The Centre includes faculty, graduate students and research associates from the social sciences, humanities, fine arts, law and business.

YCAR facilitates and supports research projects, knowledge exchange and graduate student training, as well as engagement with wider communities in the conduct or dissemination of research. YCAR is located on York University's Keele campus.

### For more information:

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The changes do nothing to ensure that caregivers working in the homes of their employers are covered by workplace health and safety regulations, and that compliance is monitored and enforced. There are also several provisions that applied in the old Live-in Caregiver program but do not appear in the new program: the option of accumulating the necessary service in the program through 3900 hours of work rather than 24 months; the quick issuance of open work permits; the “Juana Tejada Law”, which removed the second medical examination before permanent residency; the ability to move across streams (e.g. from child care to disabled care); and, the possibility of requesting humanitarian and compassionate consideration from outside of Canada.

The caps on pathways to permanence, and the additional conditions in terms of educational credentials and language skills, mean that the right to apply for PR status is no longer a central part of the caregiver program. The caps established are lower than the number of arrivals in the LCP in recent years. It is not clear what will happen if the numbers applying for PR exceed the quotas. The Minister has suggested that the quotas will be adjusted based on demand, but this begs the question why we need quotas in the first place.

The integration of various ‘high medical needs’ caring occupations is shifting the caregiver immigration category outside of home-based care and into other kinds of facilities. This appears to raise the possibility that nurses and other healthcare workers will now be incorporated into this two-step immigration. More broadly, panelists noted that the new caregiver program is part of a wider movement towards an ‘Express Entry’ system in which all workers are made more subject to employer demands.

Panelists noted that it is important to educate caregivers, employers and the wider public about what these changes represent. While the stated goals of the changes are positive, it will be important to assess whether they live up to these goals. We will, for example, need to monitor: how many caregivers will be accepted into the program on a live-out basis; how many will meet the language requirements for permanent residency; how many will go underground when they do not meet the criteria; how the requirements will affect caregivers from different countries (e.g. China); and how the existing backlog will be cleared.

## Notes

This brief is based on the panel titled ‘Assessing the Changes to the Live-in Caregiver Program: Improving Security or Deepening Precariousness?’, held at the York Centre for Asian Research, York University, on 9 December 2014. A video recording of the panel presentations is available at: [https://www.youtube.com/watch?v=-yKIK\\_4bLc&feature=youtu.be](https://www.youtube.com/watch?v=-yKIK_4bLc&feature=youtu.be)