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Institute for Research and Development on Inclusion and Society
Institut de recherche et de développement sur l'intégration et la société

Mixed Signals for the Disability Community: Successes, Setbacks, Stalled Reforms and Struggles for Citizenship

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I. Introduction

This paper provides a look at various policies, programs and practices that relate to Canadians with disabilities. The purpose is to present a sense of the state of affairs for disability organizations – service providers, consumer organizations, and advocacy groups – in contemporary Canada.

The paper addresses the following questions:

- What progress has been achieved on disability issues of late?
- Conversely, what setbacks can be identified for disability groups and disability issues on public policy agendas?
- In what areas have reforms apparently stalled with essentially no advances in rights and inclusion?
- What does the struggle for full citizenship mean for persons with disabilities?
- How are community organizations dealing with funding cuts and other resource constraints?
- How can the policy capacity of the disability community be enhanced? What strategies might be considered by individual organizations, the disability community, and civil society and political institutions?

These are, to be sure, expansive questions. Admittedly, the following analysis offers a very selective treatment of these substantial topics. The intent is to raise general awareness of the issues, encourage further research, and stimulate wider political discussion of disability-related conditions and trends.

“Mixed Signals” is the overall image this paper draws from reviewing the disability policy and practice landscape across the country. That policy and practice terrain contains an irregular mixture of successes, setbacks, stalled reforms and, not surprisingly, struggles.

In recent years, several interrelated trends present a rather confusing and challenging environment for community organizations in Canada. There have been (and continues to be in some jurisdictions) drastic and, at times, abrupt cuts in government funding to community agencies. At the same time, public benefits and services to agency clients have been reduced. Efforts at increasing revenues through fundraising confront the phenomenon of donor fatigue and an ever competitive charitable sector. Concurrently, needs and demands for community services have risen, reflected in growing case-loads and overburdened staff. Add to this the rising expectations, by donors and governments, for greater accountability and performance by community organizations and a context of tremendous complexity, stress and contradictions takes form.

This paper advances an argument for strengthening community capacity and developing active partnerships among governments, the disability community, and the community-at-large. The goal should be to eliminate or,

perhaps more realistically, reduce as much as possible the mixed agendas and to encourage organizations to work together on issues of common interest.

II. Successes

In 2002, the Government of Canada published the first in a series of comprehensive reports on disability in Canada. Called *Advancing the Inclusion of Persons with Disabilities*, the report describes where Canada has made progress, and what work remains to be done.¹

A central message of this federal report is that we have a record of many achievements in disability policy and practice over the past generation. The report notes that since the International Year of the Disabled Persons in 1981, “the Government of Canada and provincial and territorial governments have introduced initiatives, enhanced programs and reformed legislation to support the inclusion of persons with disabilities.”

The publication of this report, and the information and accountability framework it includes, is in fact a noteworthy event. The report draws together information from over 30 federal government departments and agencies. It provides an accountability framework, with outcome measures in five key areas², based on the Federal-Provincial-Territorial (FPT) vision document *In Unison*.

Other recent achievements include:

- The release of information from the Participation and Activity Limitation Survey (PALS) conducted in 2001 across the 10 provinces. So far, information has been released that provides us with the most up to date data on the population profile of children and adults with disabilities (by disability rates, nature and severity of disability, and by age and sex); the topic of disability supports – met and unmet needs for various disability supports, the providers of help and housing and transportation requirements; as well as education level, employment status and income.³
- A follow-up PALS is planned for 2006, with some modifications and improvements to the earlier survey that will, it is hoped, result in a more accurate reporting of the prevalence of disabilities among Canadians.
- The First Ministers’ Health Accords of 2003 and 2004 included new money for health care through the Canada Health Transfer as well as through a five-year \$16 billion Health Reform Fund, inspired by the Romanow report on

¹ *Advancing the Inclusion of Persons with Disabilities: A Government of Canada Report*, December 2002, Ottawa: Human Resources Development Canada. Available at web site: <http://www.hrdc-drhc.gc.ca>.

² The five areas in which progress is to be measured with a series of performance indicators are: disability supports; skills development, learning and employment; income; injury prevention and health promotion; and, capacity of the disability community.

³ For those interested in the findings, the data are available on the Statistics Canada web site: <http://www.statcan.ca>

health care, for three targeted areas: catastrophic drug coverage, primary health care and home care.

- Recent federal government budgets have enriched existing tax assistance measures and introduced new ones to help people with disabilities and those who care for them. Federal tax assistance grew from \$600 million a year in 1996 to about \$1.1 billion a year in 2002.⁴ This pattern has continued in recent federal budgets, with further enhancements in eligibility criteria and allowable expenses, respectively to the Disability Tax Credit and the Medical Expenses Tax Credit. In addition, a new Child Disability Benefit of up to \$1,600 a year was announced for low-income families caring for children with severe disabilities. With the Child Disability Benefit (and a compassionate family care benefit also announced in the 2003 federal budget), Canada is following other countries. The maximum benefit amount is higher than offered by a similar program in the United States, but it is somewhat less than programs in Australia and Britain and substantially less than such programs in Sweden and Finland.
- University education in formal disability studies programs is emerging in Canada. Ryerson University in Toronto has a four-year undergraduate program in disability studies. The University of Manitoba and York University have both launched master's programs in disability studies, joining a select group of such programs around the world.
- Consider but one provincial example: In Manitoba, achievements include the formation of the Disability Issues Office, the adoption of new building design guidelines for new government facilities, and the hosting of an annual round table on disabilities with a range of representatives from the disability community.

Other cases could be added, but the point has been sufficiently illustrated: there are instances across Canada at all levels of the public sector of new, expanded and reformed initiatives on disability issues.

But another point needs to be made. While there has been some momentum and much remains to be done, the momentum is not universal nor all in the one direction of progressive change. One reason much remains to be done is that some of the gains fought for in the past by individuals with disabilities, their families and advocates, have been undone. This means that some of the work that remains to be done is restorative rather than additive.

Behind the commitments, actions and progress is, in many parts of the country, a record of cuts to general public services, cuts to disability-specific

⁴ *Advancing the Inclusion*, p. 19. With the changes in the February 2003 budget, tax measures for persons with disabilities (including persons with medical expenses and those who care for persons with disabilities) will be about \$1.3 billion a year as of 2003.

supports and services, and cuts to the funding of community agencies in the voluntary sector.

III. Setbacks

A strongly held belief and sentiment among many people in the community is that as a priority of governments, disability issues have slipped on the national policy agenda and certainly in some provinces. There is, perhaps an equal sense that voluntary sector agencies are not as appreciated and valued by governments as they once were, despite the current rhetoric of the importance of social capital, cohesion and community capacity.

A. The Localization of Issues

In recent years, most provinces have devolved or decentralized responsibility for children and family services, health care and other social services to regional and community authorities. This results in what we may call the “localization’ of disability support systems, policy issues, and citizen participation.

Localization is an example of the mixed signals and mixed consequences of contemporary decision-making. On the one hand, this localization holds the promise of community-based experimentation, innovation and an enhanced responsiveness in service design and delivery. On the other, a high degree of decentralization can make it harder to speak to disability issues in an integrated way, and to chart new directions for policy development at the level of the province or the country, thereby continuing a piecemeal approach.⁵

B. Discrimination and Harassment

Human rights are an area where there is evidence of setbacks in removing barriers for persons with disabilities.

Reports by the Canadian Human Rights Commission are quite telling on the persistence of systemic discrimination against persons with disabilities. The Commission’s 2002 annual report states: “Discrimination against persons on the basis of disability, including perceived disability, has been prohibited by law in Canada for more than 25 years. In 2002, the federal government released a report [*Advancing the Inclusion*] citing the many federal programs designed to improve the circumstances of persons with disabilities.... But this enabling infrastructure belies the human rights situation of persons with disabilities, which saw little progress in 2002.” In fact, the Commission notes that, “The government decided not to renew funding for the Enabling Resource Centre for persons with disabilities in the federal public service.”

⁵ Michael Bach, “Governance Regimes in Disability-Related Policy and Programs: A Focus on Community Support Systems.” In Alan Puttee, Ed., *Federalism, Democracy and Disability Policy in Canada*. Montreal and Kingston: McGill-Queen’s University Press, 2002, p. 161.

The Commission also refers to a public service survey that reported that 36 per cent of federal employees with disabilities have been harassed in the past few years.⁶

A more recent annual report by the Canadian Human Rights Commission shows that disability continues to be, by far, the most commonly cited grounds of discrimination in inquiries and complaints. In 2004, 43 per cent of inquiries and complaints to the Commission named disability as the main basis for their complaint, frequently employment-related and services-related discrimination.⁷

C. Eroding Income Benefits

The welfare incomes of people with disabilities is another stark example of erosion and setbacks across the country.

According to research by the National Welfare Council, between 1989 and 2003, single people with disabilities experienced an average 11.7 per cent decline in the real value (after inflation) of welfare income.⁸ In only one province over this period, Quebec, did welfare income increase for persons with disabilities. In all other province, people with disabilities lost ground, experiencing declines in the purchasing power of benefits over time and thus in their standard of living.

This is also reflected in the gap between the welfare incomes of persons with disabilities and the poverty line. In 1989, the benefits for people with a disability closest to reaching the poverty line was in PEI, where benefits represented a 77 per cent share of the poverty line; the lowest was Manitoba, at 43 per cent of the poverty line. "Since 1989, the welfare incomes of people with disabilities have steadily eroded. In every province except Quebec and Manitoba, these welfare incomes are a much lower percentage of the poverty line in 2003 than they were in 1989. Although there were minor gains made in some intervening years in some provinces, every gain has been lost over time."⁹

⁶ Canadian Human Rights Commission, *Annual Report 2002*, available at the web site: <http://www.chrc-ccdp.ca>

⁷ Canadian Human Rights Commission, *Annual Report 2004*, available at the web site: <http://www.chrc-ccdp.ca>

⁸ See National Council of Welfare, *Welfare Incomes 2003*, Ottawa: Minister of Supply and Services, 2004. Welfare income as used here includes basic social assistance from provincial/territorial governments, national child benefits, the federal Goods and Service Tax credit and provincial tax credits. Dollar figures are expressed in constant 2003 dollars to factor out the effects of inflation and to show the real purchasing power of benefits over time.

⁹ National Council of Welfare, *Welfare Incomes 2003*, p. 59. Likely the main reason for the relative stability of Manitoba and Quebec is that they had the lowest and third lowest levels, respectively, of welfare benefits as a share of the poverty line in 1989 and were still among the bottom of the group in 2003.

Across the 10 provinces, welfare incomes for persons with a disability as a percentage of the poverty line, has declined over the last 15 years. This represents an intensification of the depth of poverty experienced by Canadians with disabilities.

Social assistance policy trends further reveal the appearance of mixed messages within a single field.¹⁰

Over the last 15 years or so, most provinces shielded from more general cuts the welfare benefits for persons with disabilities, sending a signal of wishing to protect this vulnerable group from further financial constraints; however, governments across Canada have universally failed to index welfare benefits to cost of living increases so that over time the purchasing power of these already inadequate benefits declined.

And, it is the case that most governments increased the earnings exemptions under their welfare programs allowing clients with disabilities, plus other client groups, to retain a greater share of whatever earnings from employment they undertook while on benefits. Indeed, raising the earnings exemption has been an inexpensive symbolic measure by governments; inexpensive and symbolic because relatively few social assistance clients with disabilities work enough to need to make use of the maximum amounts allowed under the earnings exemptions.

For a great many social assistance clients with disabilities, such announcements of “making work pay” and “easing transitions from welfare to work” ring hollow.

D. Stalled Reforms

Amidst the talk of progress, and the concerns over cutbacks, many elements of disability policy and practice in Canada are relatively unchanged from five or ten years ago, or even longer.

A major Canadian study on policies and programs for people with disabilities done in 1977 was aptly entitled *A Hit-and-Miss Affair*. The inquiry sought to discover what was happening in services and programs for people with physical disabilities across the country. Looking at the total policy system, the study found that the network of policies for Canadians with disabilities was not functioning effectively. Gaps in service provision, late referrals and inadequate follow-up programs, insufficient linkages among social programs, and incomplete information systems were among the barriers.

¹⁰ The same observation of mixed messages in a single program can be made of other income security programs, such as Canada Pension Plan Disability, and most likely a number of health, employment and social service programs.

The study concluded with two strong impressions: “The first was that there is a lively awareness of the many deficiencies in policies for disabled people in Canada together with a desire for constructive change. The second was a strong sense of frustration that the need to change is not being given an adequate priority at the level where decisions must be made.”¹¹ A growing awareness of the need for change coupled with a strong frustration with inadequate policy action meant that addressing the needs and rights of Canadians with disabilities was a hit-and-miss affair.

This description of the policy setting remains a realistic portrayal of Canadian disability programs and services, especially so from the perspective of groups of, and for persons with disabilities. Consider a few examples:

In 1986, Canada enacted legislation at the national level dealing with employment equity. A new *Employment Equity Act* was passed in 1995 and took effect in 1996. The new Act expanded the scope of coverage of the law to include the federal public service and gave the Canadian Human Rights Commission the power to verify employer compliance with the law through on-site audits of employers.

The purpose of the *Employment Equity Act* is

to achieve equality in the workplace so that no person shall be denied employment opportunities or benefits for reasons unrelated to ability and, in the fulfillment of that goal, to correct the conditions experienced by women, aboriginal peoples, persons with disabilities and members of visible minorities by giving effect to the principle that employment equity means more than treating persons in the same way but also requires special measure and the accommodation of differences.¹²

The legislation applies to most federal public service organizations as well as federally regulated private sector employers with 100 employees or more.

In the federally regulated private sector, to which the employment equity law applies, persons with disabilities have experienced virtually no improvement in their labour force representation. In 1999, persons with disabilities made up

¹¹ Joan C. Brown, *A Hit-and-Miss Affair: Policies for Disabled People in Canada*, Ottawa: Canadian Council on Social Development, 1977, p. 548.

¹² *Employment Equity Act*, Statutes of Canada, 1995, c. 44, section 2. Aboriginal peoples refer to North American Indians, Inuit (an indigenous people of the circumpolar north) and Métis (the culturally distinct descendants of early unions between European immigrants and Aboriginals). Visible minorities refer to persons, other than aboriginal peoples, who are non-Caucasian in race or non-white in colour. Alongside this legislated employment equity policy, the federal government, through a Cabinet decision in 1986, introduced the Federal Contractors Program. This program applies to provincially regulated employers with a national workforce of 100 or more employees, a much larger share of the Canadian workforce than is under the jurisdiction of the federal government. As a condition of bidding on large federal goods and services contracts (\$200,000 or more), these employers are required to commit to a program of employment equity.

2.4 per cent of the workforce compared to 2.3 per cent in 1989, well below their labour market availability of 6.5 per cent.¹³

A more recent study found that representation of persons with disabilities in the federally regulated private sector remained unchanged over the 1997 to 2003 period, at 2.3 per cent, and that representation actually declined in several sectors. Indeed, of the four designated groups under the federal employment equity law, persons with disabilities have benefited the least in the private sector. And within the federal public sector, while the representation of persons with disabilities has increased from 3.9 per cent in 1992 to 5.7 per cent in 2003, the increase appears to be due to increased self-identification rather than to hires.¹⁴

Another familiar aspect of the status quo in disability supports is that family members are the backbone of care giving, with respite care a pressing need.¹⁵

Without adequate supports and services, especially important around transitions in life, individuals with disabilities and their families endure hardship and are disenfranchised from full and active participation. In the existing system, persons with disabilities continue to face fragmented and piecemeal arrangements, with a bewildering array of different programs with eligibility criteria that typically restrict rather than improve access, if the support or service is even available.

In many respects, then, there is a discouraging persistence in the marginal social conditions of many Canadians with disabilities and in the modest results of many public policies. Much of disability services and programs remain a hit-and-miss affair in Canada. After 20 years, we are still waiting for a disability (or access and inclusion) policy lens to be used within the federal government.

We can call this *déjà vu* disability policy; the feeling that we have been here before: the repetition of words and ideas, the declaration of plans, followed by external reviews, and then governmental responses reiterating previously stated promises.

E. Struggles for Citizenship

The promises of full citizenship are many. Possibilities include the realization of various rights and freedoms, the attainment of equality of status under the law and a sense of belonging in the community, backed with the

¹³ *Advancing the Inclusion*, pp. 40-1. The other designated groups in the legislation are women, visible minorities, and Aboriginal peoples.

¹⁴ Canadian Human Rights Commission, *Annual Report 2004*, pp. 25-26. Available at the web site: <http://www.chrc-ccdp.ca>

¹⁵ See The Roeher Institute, *Moving 'In Unison' into Action: towards a policy strategy for improving access to disability supports*, Toronto: The Roeher Institute, 2002.

opportunity to participate and advance personally, economically, politically and socially.

However, from the promise to the practice of citizenship is a long, uneven and uncertain journey. It is a passage marked by struggles for membership and participation in all segments of society.

Struggles for citizenship are readily apparent in the areas already discussed – the determined efforts to gain recognition of needs and achieve some successes; advocates, service providers, individuals and their families fighting against, and contending with cuts and other setbacks; and funding agencies, community organizations and their coalitions striving hard, under difficult circumstances, to maintain the status quo of benefits and supports.

The sociologist, Bryan Turner, in a comparative and historical analysis of citizenship, highlights the importance of struggle in the development of citizens' rights.¹⁶ Turner regards the conscious struggle of individuals and groups to achieve, to defend, and to expand the nature of full membership in the community to be the critical factor in the emergence of citizenship.

The basis for the struggle lies in the fact that the pursuit of citizenship involves significant changes to existing inequalities, inequities and injustices in society.

For persons with disabilities, full citizenship raises challenges to various kinds of paternalism, discrimination, and exclusion. It additionally poses challenges to the traditional workings of federalism, the market economy, medical practices, the mass media, and family relationships.

F. Insufficient Supports for Daily Living

In concrete terms, the struggle for full citizenship plays out in the world of everyday living. The 2001 PALS found that of the 3.4 million adults with disabilities, 2.2 million (or 65 per cent) need help with everyday activities.¹⁷ The majority of these people, 1.4 million (or 65 per cent) report they have the help they need. This leaves 640,000 people (29 per cent) who have help but need more and a further 126,000 adults (6 per cent) with disabilities who need help with everyday activities but receive none of the help required.

Likewise, 1.6 million people with disabilities need some aids or devices for everyday activities, of whom 460,000 people (29 per cent) use such aids but need

¹⁶ Bryan S. Turner, *Citizenship and Capitalism: The Debate over Reformism*, London: Allen and Unwin, 1986.

¹⁷ Statistics Canada, *Disability Supports in Canada, 2001*. Ottawa: Minister of Industry, 2003. This analysis excludes people with disabilities under the age of 15, of which in 2001 PALS estimates that there were 180,930 children and youth with disabilities living in households in Canada.

more, and an additional 164,000 people (10 per cent) who need aids and devices but have none at all.

G. Under-resourced Disability Organizations

The struggle for full citizenship plays out as well at the level of organizations and associations in the disability community.

As a report on community capacity by the Canadian Centre for Disability Studies observes:

The disability community is filled with both strong and effective voices among individuals with disabilities and within organizations. Associations are working in extremely difficult circumstances and are continually being asked to do more without being offered sufficient resources. People with disabilities are living longer and experiencing increasing needs for services and advocacy support resulting in higher demands being placed on the limited resource capacities of organizations. In addition, all levels of government and the private sector are requesting greater organizational participation in consultations on disability issues and policy development to advance the disability agenda. This is not a sustainable situation, and it is a critical time in which to develop support to enhance the capacity of the disability community.

While the last five years have been difficult for all voluntary organizations, the situation has been even more challenging for disability associations because of issues related to the costs of inclusion such as ASL interpreters and the need to provide alternate format and plain language materials.¹⁸

A fundamental message from this analysis is that reaching the vision of full citizenship necessitates reinforcing the capacity of the disability community. For this to be done, requires ideas and actions on several levels.

¹⁸ Canadian Centre for Disability Studies, *Disability Community Capacity: A Framework for Preliminary Analysis*, Analysis paper to Human Resources Development Canada, Social Policy Unit, May 31, 2002, p. 1. Available at web site: <http://www.disabilitystudies.ca/communitycapacity.htm>. See also, *Advancing the Inclusion*, pp. 62-66.

IV. The Need for New Strategies

Enhancing capacity and advancing the policy agenda can be thought about in terms of three levels: first, at the individual organization; second, at the overall disability community; and, third, at a society-wide level.

At the level of individual organizations, a pressing issue is how to cope with limited resources and an uncertain and more competitive funding environment. In many parts of the country, public sector funding has been eroding for many agencies and disappearing for some others.

We know that insufficient and declining resources have consequences for community agencies. A recent Canadian study identifies two such consequences. “First, sponsors may divert their attention to resource mobilization activities rather than supporting the activities that are necessary to promote citizen participation. Second, the lack of resources may create organizational instability and make staff positions insecure, thereby decreasing staff effectiveness in recruiting members.”¹⁹

If agencies are not content to see their public funding decline and just carry out what government funds them to do, there are several potential strategies, as outlined in Box 1.

¹⁹ William Boyce et al, *A Seat at the Table: Persons with Disabilities and Policy Making*, Kingston and Montreal: McGill-Queen’s University Press, 2001, p. 133.

Box 1
Dealing with Cuts in Government Funding:
Possible Strategies by Community Organizations

1. Lobbying for a reprieve or reinstatement of cut funding.
2. Seeking other government grants and contracts from other programs, ministries or levels of government.
3. Reducing costs of community agency operations (e.g., reduce hours, lay off some staff, and relocate to less expensive space).
4. Rethinking and realigning the program content and delivery mode of services.
5. Reaching out to other revenue sources: fundraising and or commercial activities.
6. Building relationships within the sector and across sectors, through coalitions and networks, to pool resources and or engage in public policy processes.

Each of these strategies is a response to the challenge of ensuring adequate resources to deliver goods and services to persons with disabilities. Each, potentially, has advantages and disadvantages for an agency's mandate, its working culture, its clientele, and to the broader value system of society.

There are no "quick fixes." Any of these strategies takes considerable time and investment of staff and of money. And not all of these approaches are available or suitable for everyone. There are discussions to be had, more research to be done, and choices to be made on these important matters.²⁰

If we are to work through the noise of the mixed signals of recent years, there needs to be a far greater recognition by policy makers in Canada that sustainable, multi-year funding for programs as well as for the core infrastructure of community organizations is vitally needed. Much of this will need to come from the public sector.

Undertaking cost-effectiveness measures, fundraising and maybe even commercial ventures might support and diversify the revenue base of some community agencies, but cutbacks, donations and profits will not replace the role

²⁰ See Brenda Zimmerman and Raymond Dart, *Charities Doing Commercial Ventures: Societal and Organizational Implications*, Ottawa: Trillium Foundation and the Canadian Policy Research Networks Inc., 1998. Available at web site: <http://www.cprn.org>.

of public investment in our social fabric. Such public funding, at a renewed level, will go a long way to recruiting and retaining skilled and motivated staff; appropriate staff, with adequate time, to deliver services, provide care, administer the operations, and oversee whatever pool of volunteers are employed by agencies.

At the overall level of the disability community we face a number of strategic questions: How to build or strengthen relations between consumer organizations and service provider groups? How can we bring together the many strong and effective voices in order to articulate one voice on key issues, or at least a harmonious chorus of voices? And how can we help add the voices that to date have been unheard?

Investing additional resources in the personnel and financial aspects of disability organizations is a necessary prerequisite to effective citizen engagement in policy processes and in advancing the inclusion of Canadians with disabilities. Such investments, though absolutely essential, are insufficient on their own. We need to pay close attention to *the costs of managing relations* among disability organizations, along with relations between the disability community and the larger public environment, especially governments.

Building community capacity in an effective way must involve building up the policy capacity of the disability sector. This means that some funding must be devoted to the ability to do research, consult with the membership, and to interact, in an organized fashion over time, with other agencies and government officials.

These activities cannot be done by each and every organization in the disability sector; most organizations are probably too small.

One strategy, therefore, is to pool resources. An example of this, on administrative supports, is where a larger organization in a city or province provides a clearinghouse facility of secretarial and clerical services for smaller agencies and self-help groups. An example on policy development and advocacy is where forums are established, often by a provincial or national organization, that invite groups to come together to explore and establish common themes and interests.

To get strong buy-in on a community perspective, a wide cross section of disability organizations is a key ingredient. A cross-disability vision can be based on shared core values, incorporating a blend of idealism and pragmatism. Such a vision can be facilitated by focusing on concrete concerns that relate directly to the lives of people. Groups participating need to be clear about what compromises the community is prepared to accept or reject.

It is important to not set our sights too low or too high politically or risk being dismissed as either too restrained or naive.

One way to avoid that is to map out a policy vision and associated recommended actions that extend across the short term, through medium term, to the longer run. Having a bundle of reform options spread over a broader time frame, allows a coalition to be thoughtful in timing advocacy efforts around various known cycles, such as municipal elections, government budgets, United Way Campaigns, and annual general meetings. The common message then needs to be consistently and persistently communicated.

Strategies for strengthening the capacity of disability organizations and empowering persons with disabilities must also be considered at the level of society. Perhaps for most of us, this may seem a rather daunting and abstract exercise to contemplate. Where does one begin? How can any individual or single agency actually engage at this broad level?

Questions to inform discussions and that suggest entry points for engagement at this level are: What are the current roles and responsibilities of governments and authorities (federal, First Nations, Métis, provincial/territorial and municipal), families, community service agencies, businesses and unions in relation to various disability issues? Where are the strengths and the weak points? What would an appropriate balance look like between service provision and self-determination, between public and private responsibilities, between political jurisdictions and personal requirement?

V. Conclusion

This paper has offered a review of several trends currently affecting advocates, consumers, families and service providers in the Canadian disability community.

Key findings are that:

- There are a number of achievements in disability policies, programs and practices in recent decades, although the progress has been uneven and incomplete across types of disability, jurisdictions, communities and policy fields.
- Setbacks and ongoing challenges include the localization of disability issues; persistent widespread discrimination; and erosion in the real value of income benefits.
- Employment equity legislation at the federal government level has yielded minimal change in the representation of qualified persons with disabilities in the workforce.
- Ongoing struggles for citizenship are apparent in the marginal social conditions of many people with disabilities; the insufficient availability or affordability of supports for daily living and participation in the community; and the resource constraints facing many disability associations and organizations.
- Building community capacity in an effective manner must include building the policy and knowledge mobilization capacity of the disability sector.

That we do not actually have a good sense of the current landscape is a critical reason for the mixed signals given to Canadians with disabilities.

There is a huge need for answers to these sorts of questions, and a great responsibility and necessity to build and rebuild the capacity of the disability community in Canada.

When we examine these issues and work on building community capacity, we do well to be guided by the following values: empowerment of persons with disabilities, independence as a principle of well-being, participation in all areas of society, community for support and growth, holism as a model for service, and, human dignity in all matters.