What We Heard

Inclusion for All
Consultations to Develop a Plan to Remove Barriers for People with Disabilities in Newfoundland and Labrador
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Introduction

The Government of Newfoundland and Labrador is working towards making this province accessible and inclusive. In 2007, the Government made a commitment to the inclusion of people with disabilities in all aspects of society.

Barriers have been clearly identified by both community and government. Solutions to remove and prevent these barriers became the theme for consultations that took place throughout the province in the fall of 2010.

Over 600 individuals and organizations provided input through public sessions, focus groups, interviews, phone/TTY calls and written submissions. Individuals with disabilities, family members, friends, organizations and service providers brought forward rich and creative ideas.

The consultation process respected and promoted the motto of the international community of people with disabilities: ‘Nothing about us, without us’ as people with disabilities were actively invited to share knowledge and expertise gained through personal experience.

Ideas and solutions included making changes to:
- government policy, regulations and legislations;
- service and program eligibility, scope, delivery and accountability;
- societal attitudes.

A number of themes and considerations emerged during the discussions. Themes included access to buildings, supports (assistive technology, home support); access to public services (education, health care); access to information and communications, housing, and transportation. Considerations included looking at the solutions from the perspective of women, aboriginal people, rural and Labrador communities.

Input from the consultations is being used to form the basis of a provincial strategy for the inclusion of persons with disabilities. This
strategy will provide a blue print for moving forward in removing and preventing barriers; engaging public, private and volunteer sectors; and changing how society views disability. The strategy will guide Government in its actions to achieve a fully inclusive province in which Newfoundlanders and Labradorians with disabilities have the same opportunities and choices as other residents.

How Input was Gathered

The consultation process included public sessions, focus groups, individual interviews, written submissions, email and phone/TTY calls. A background paper was distributed in advance of the consultations to spark discussion.

Between September 14th and November 1st, 2010, approximately 460 individuals participated in 18 public consultation sessions throughout the province. Sessions were held in Bonavista, Carbonear, Clarenville, Conne River, Corner Brook, Deer Lake, Gander, Grand Falls-Windsor, Happy Valley-Goose Bay, Harbour Breton, Hopedale, Labrador City, Lewisporte, Marystown, Port aux Basques, St. Anthony, St. John’s and Stephenville.

In addition to public consultation sessions, approximately 86 individuals participated in focus groups held with disability-related organizations and other groups by request.

Individuals and organizations also participated in the consultation process via written submissions including email messages, reports, papers and thesis. As well, input was gathered through telephone/TTY and in-person interviews.

The purpose of the consultation process was to interact with people with disabilities, their advocates, families and service providers to generate solutions to overcome and prevent barriers to inclusion.

Various methods were used to ensure citizens of Newfoundland and Labrador were aware of the consultation process and how to give input. Public notices, letters of invitation, posters, postcards, cable television, newspapers, radio, email list serves, web postings with
American Sign Language (ASL) links, daily media advisories, and Facebook are some of the ways consultations were promoted. Community organizations circulated information about the public consultations via email lists, social networking and newsletters and encouraged their membership to participate. “Word of mouth” was very important to letting people know about the consultations.

Accessibility was very important for these consultations. Venues for the public consultations were selected on the basis of their physical accessibility and were subject to an accessibility audit checklist. Public sessions included on-site sign language interpretation (ASL), assistive listening devices (FM Loop system) and amplified sound. Each session was captioned. Handouts used clear language (plain language) and were available in alternate formats including large print and Braille. At each public session and focus group, the facilitator adhered to accessibility guidelines. All sessions were scent-free. Requests for other disability-related accommodations and/or supports to facilitate participation were received and put into place on an individual basis.

Notes were taken at each session, focus group and interview. Ideas and solutions from these sessions, phone/TTY calls and print submissions were compiled and categorized into the key themes and considerations.

The wealth of ideas and suggestions gathered from submissions and dialogues is being used in building the foundation for a strategy for inclusion in Newfoundland and Labrador.
What Was Heard

The consultation process was designed to focus on solutions to barriers to inclusion. Over 600 people and organizations participated, offering ideas about how best to remove and prevent barriers that are experienced by people with disabilities. A number of themes emerged from the discussions and submissions, as well as, unique perspectives that a strategy would need to consider.

Themes

Themes identified through the consultations are presented below in alphabetical order and not by priority. Solutions included in each theme reflect key points brought forward by participants during the consultation process.
Access to Buildings

While participants felt that accessibility had improved with the Buildings Accessibility Act, the need for renewed focus on this area was raised within most public sessions. Throughout the province, participants cited examples of inaccessible buildings and facilities preventing their participation.

Solutions offered to improve accessibility included:

- Using universal design principles in all new building construction
- Using assistive technology in buildings to include individuals with vision and hearing disabilities (ex: visual alarms, assistive listening systems)
- Reviewing the existing building accessibility legislation to:
  - include universal design principles
  - remove the pre-1982 exemption
  - be flexible for advances in technology
  - include public use recreational areas, such as trails and beaches
- Enforcing current regulations of the Buildings Accessibility Act, including blue-zone parking regulations
- Having individuals with cross disabilities perform accessibility audits of buildings (including at the design stage)
- Providing accessibility subsidies to support retrofitting buildings (small business, volunteer and public sectors)

Participants encouraged government to lead by example by following protocols for full accessibility when holding or supporting public events, including consultations and government funded community activities.

“Using Universal design principles in all new building construction…”
Assistive Technology

Assistive technology was described by participants as essential for inclusion, yet often unaffordable or difficult to use. Solutions offered to help change this included:

- Creating a provincial program for assistive technology for individuals (modeled on other provincial programs that are based on need not income)
- Building flexibility into eligibility criteria
- Providing individuals, families and service providers with information and technical support
- Establishing regional resource centers as central points for information on disability-related services and demonstrations of assistive technologies

Participants living in rural areas highlighted the need for timely repairs for assistive equipment. Individuals suggested that government monitor repair service providers to ensure safe transfer and timely repairs of medical and assistive equipment such as wheelchairs.

Participants described the benefits of introducing assistive technology at an early age as increasing effectiveness and acceptance for day-to-day use.

“…Creating a provincial program for assistive technology for individuals”
Awareness

Participants felt that the general public has a better understanding of disability-related issues than they did five to ten years ago. However, participants also described that, despite the improvement, negative attitudes and misconceptions continue to be one of the greatest barriers, if not the most limiting of all barriers.

Solutions offered by participants to improve public understanding and change social attitudes were:

- Creating a public mass media awareness campaign
- Including positive, respectful and current images of people with disabilities in Government messaging campaigns, communications and publications
- Ensuring all government staff demonstrate an understanding of disability and disability-related issues
- Promoting inclusion through government-led celebration and recognition initiatives, such as awards for advancing inclusion

Participants stressed the importance of Government leading by example through actions that support inclusion. Examples included making government buildings accessible, using respectful language when referring to people with disabilities and captioning government television advertisements.

Participants advised that all awareness raising initiatives and government action should be framed in the context of dignity (i.e. human rights) as opposed to charitable or medical perspectives of disability.

“…Government leading by example through actions that support inclusion”
Community Capacity

Input from public sessions, focus groups and written submissions highlighted the benefits of community engagement in developing strong public policy. Community living and inclusive education were often cited as successful public policy directions that were informed by community involvement.

Suggestions about supporting community capacity to engage in program and policy design, implementation and monitoring included:

- Resourcing community organizations to ensure capacity to inform Government policy and to deliver services to citizens of the province
- Developing ways to enhance accountability in consultation with community groups, and providing grants based on goals and objectives of proposed activities
- Providing multi-year core funding to organizations to support stability, planning and growth
- Expanding the volunteer base, by providing allowances to offset personal costs such as child care and transportation

Participants in rural areas frequently highlighted the need to support individual communities in finding creative and unique solutions that use assets that already exist.

“…resourcing community organizations to inform Government policy and deliver services to citizens of the province”
Disability-Related Supports

Participants referred to disability-related supports as any and all supports that meet disability-related needs and enable people to live independently with dignity and choice.

Participants frequently suggested linking disability-related supports to the individual is an efficient and effective approach compared to providing supports through specific programs.

Ideas put forward by participants about improving access to disability-related supports included:

- Determining eligibility based on individual need
- Following principles of control, choice, portability and flexibility

Participants encouraged Government to work with the community of people with disabilities to establish a supported decision making model to ensure individuals are supported in guiding the decisions that affect their lives.

- **Home Supports**

Home supports were highlighted as an essential disability-related support that affects all aspects of the lives of individuals with disabilities. In this area, participants offered specific solutions including:

- Enhancing eligibility for funding for home support based on individual needs
- Supporting funding arrangements that give individuals and families greater flexibility and still have needs met
- Ensuring adequate training and pay for home support workers
- Increasing home support hours
- Increasing flexibility for individuals to create shared arrangements
- Supporting family members who provide home support

Some participants identified a need for certification of home support workers and encouraged that this be explored in collaboration with consumers.
As in other themes, participants stressed the importance of having eligibility and levels of service based on individual needs.

**Education**

Participants shared numerous ideas about how to make sure students with disabilities are fully included in the education system. These included:

- Providing teachers with disability-related information, training in instructional methods and resources such as teacher assistants
- Providing students with resources based on individual student needs, including student-based allocations of student assistants, tutors and disability-related supports such as American Sign Language and assistive technology
- Supporting early diagnosis of disability
- Providing student assistants with adequate wages and training
- Improving planning processes to support students moving through the educational system was frequently raised

As in other themes, participants suggested basing eligibility and level of service for disability-related supports on individual needs.

It was also suggested that schools be supported to achieve inclusion by implementing clear standards for school/district planning processes.

Participants encouraged Government to work with Memorial University and the community to design and deliver more core training for teachers.

“…basing eligibility and level of service for disability-related supports on individual needs”
Employment

Solutions were offered about how to ensure individuals with disabilities have equal employment opportunities. Solutions included:

- Expanding successful existing employment programs and models such as Supported Employment and Partners for Workplace Inclusion
- Supporting employers through awareness, incentive programs and workplace accessibility grants
- Providing flexibility in job creation programs and streamlining application processes
- Providing more options for individuals with disabilities who could not work such as a long term disability pension program
- Expanding the Opening Doors Program to include private sector and further promote the program

Participants suggested continuing to make changes that enable individuals to maintain income support and prescription drug coverage during transition to work. Participants noted that to ensure people with disabilities can benefit from these policies; higher limits are required to address disability-related expenses.

Some participants noted that creating or modifying job descriptions to fit an individual’s skills and abilities can support inclusion in the workforce.

“….Participants highlighted the need to maintain disability-related supports (example: drug, home supports, etc) during transition to work”
Health Services

Participants offered suggestions on how to ensure equal access and provision of health services for individuals with disabilities. These included:

- Providing flexible eligibility criteria for services based on assessed or self-identified need
- Ensuring timely referrals
- Working with consumers to provide training for health professionals in service delivery models based on choice and control (example: an Independent Living model)
- Coordinating health care appointments to reduce travel costs
- Increasing health professional specialists in areas related to disabilities and reducing workloads (ex: occupational therapists)
- Providing specialized services for acute or chronic injuries or disabilities (ex: brain injury, mental illness)
- Ensuring appropriate supports are in place upon discharge from the hospital especially for mental health consumers

Participants highlighted the need for increased accessibility of health care facilities (including communication systems and methods). It was suggested that universal design be followed for diagnostic and treatment equipment as well as buildings themselves.

Like in other themes, participants highlighted the need for supported decision making to ensure individuals are fully included in their health care.

“…working with consumers to provide training for health professionals in service delivery models based on choice and control…”
Housing

Housing that is safe, affordable and accessible is essential to quality of life and the overall health of all individuals. Housing becomes accessible when it follows universal design principles.

Universal design features include things like wider entrances, lever handles and ground level entrances. As much as possible, it ensures use by everyone, without the need for adaptation or special design.

Participants recommended universal design be used in all new housing and retrofits for NL Housing. People throughout the province emphasized the need to increase the number of affordable accessible apartments.

Participants shared solutions to inclusion for housing. Solutions offered included:
- Building more one-level affordable, accessible housing units
- Increase the number of affordable, accessible apartments
- Linking housing with day-to-day supports (as these are connected)
- Using existing housing models to build onto homes of family members, friends or paid employees
- Ensuring flexible housing and support programs for individuals, so that people are not forced back into institutions to live
- Expanding eligibility criteria to access housing options with the NL Housing Corporation

Similar to other themes, participants suggested following universal design principles in all new social housing units.

Participants stressed that to achieve inclusion, segregated and congregate housing would need to be discontinued.

“… following universal design principles in all new social housing units”
Information and Communications

Participants offered suggestions to improve access to information that would include everyone. Suggestions included:

- Providing one-stop access for information, including accessibility standards, technologies and relevant programs and connection to disability-related services
- Providing system navigators and a forum for people to ask questions and receive answers
- Ensuring systems are user-friendly with simple to use forms and people answering the telephone
- Setting accessibility standards for government information, communications and publications to be fully accessible; following accessibility standards for clear language, web and electronic access, clear layout/print and available in alternate formats.

Participants frequently suggested creating a one-stop or first-stop service for information through regional disability resource centers and/or hot lines.

“Ensuring systems are more user-friendly; simple to use forms, people answering the telephone.”
Transportation

Participants suggested ways to ensure individuals with disabilities can participate in their communities by having accessible transportation available. These included:

- Supporting urban communities to make their public transportation systems accessible and supporting rural areas to have accessible vans available
- Providing grants for individuals to retrofit personal vehicles
- Mandating taxi companies to have a percentage of accessible taxi vehicles and providing incentives through subsidies to purchase or retrofit taxi vehicles
- Providing transportation subsidies or taxi vouchers to individuals
- Supporting communities to find local solutions using existing assets
- Mandating disability awareness training for personnel in the transportation sector, such as dispatchers, drivers, airport personnel, bus company personnel.

Participants emphasized that to meet a range of needs, it is important to make existing transportation systems accessible and provide para-transit services at the same time.

“…supporting communities to find local solutions using existing assets”
Perspectives

Participants highlighted the need to look at disability-related issues through a number of lenses. This would help ensure solutions are broadly applicable and do not exclude individuals based on culture, gender, or geography. People suggested that these perspectives be applied to all themes and solutions.

Aboriginal People

Aboriginal people with disabilities experience additional barriers to inclusion. For example, transitioning from reserve to non-reserve communities often comes with loss of disability-related supports and this impacts participation in all aspects of society.

Women

Participants expressed that women experience multiple layers of barriers and discrimination. Women with disabilities are more at risk of violence and abuse than women without disabilities. Aboriginal women with disabilities face even greater risks. Participants advised that developing inclusive policies for people means there needs to be a good understanding of what women experience. Therefore, a gender lens would need to be applied.

Solutions offered included:
- Making gendered statistics available on a wide range of issues in all areas related to activities of daily living including parenting
- Requiring adjustable height examination tables in health care offices providing women’s health services
- Informing doctors and other health care service providers about stereotypes related to women with disabilities (example: reproductive health)

Rural

Participants indicated that rural Newfoundland and Labrador faces additional challenges for inclusion that cross all themes identified
throughout the consultation process. Barriers related to accessible transportation, health care, accessible housing, home support, and employment can be more pronounced in rural areas. Solutions included:

- Creating regional centers that provide expertise, knowledge, assistive technologies and supports;
- Supporting communities to identify local and creative solutions using existing assets
- Ensuring the strategy for inclusion is flexible in order to respond to unique needs of specific regions and communities.

**Labrador**

Participants from Labrador highlighted that solutions designed for rural areas of the province may still not meet Labrador’s unique needs. It was stressed that geography and weather had huge impacts on availability and/or costs of services and the unique needs of individuals with disabilities living in Labrador needed to be considered to achieve inclusion.

A sample solution raised by participants was to place health and rehabilitative services in a centralized location in Labrador to reduce travel times and costs.
Where to From Here?

Input from the consultations will inform a provincial strategy for the inclusion of persons with disabilities. This strategy will provide a blueprint to:

- Remove barriers
- Prevent barriers
- Support society to understand disability in a positive way

It is important that all levels of government, communities and private businesses work together. It is also important that the Government of Newfoundland and Labrador lead by example and apply the strategy across all government departments and agencies.

Participants of the consultations stressed that the strategy on inclusion be framed in the context of human rights; that this is not about charity or fixing. The Convention on the Rights of Persons with Disabilities provides guidance and the Strategy will seek to reflect the spirit and articles of this international agreement.

Newfoundlanders and Labradorians will continue to be consulted and engaged in this strategy. People with disabilities throughout the province have provided ideas and solutions and it is important that the discussions continue.

The strategy will guide Government in its actions to achieve a fully inclusive Province in which Newfoundlanders and Labradorians with disabilities have the same opportunities and choices as other citizens.
Glossary of Terms

1. **American Sign Language (ASL)**: A visual language that communicates meaning by hand signs and signals on the face and body. Most people who are Deaf in Newfoundland and Labrador use ASL.

2. **Assistive Technology**: is also known as assistive devices or in the case of computer-related software and devices, it is known as **adaptive technology**. Assistive technology makes environments more accessible by decreasing barriers. Assistive technology includes a range of devices, equipment and software such as mobility devices like wheelchairs, magnifying devices, visual alarms, hearing aids, and speech software.

3. **Consumers**: People who self-identify as having a disability.

4. **Consumer Control**: Consumer control means that more than half of the people in charge have a disability.

5. **Supported Decision Making**: When individuals get help with making decisions and legal matters (e.g. opening a bank account or signing a lease agreement) from people who know them well. The level of assistance is dependent on the individual’s ability to understand choices and communicate his/her wishes.

6. **Universal Design**: The design of products and environments to be usable by all people, to the greatest extent possible, without adaptation or specialized design.

7. **Universal Design Principles**:
   - Equitable use: The design is useful and marketable to people with diverse abilities
   - Flexibility in Use: The design accommodates a wide range of individual preferences and abilities
   - Simple and Intuitive Use: Use of the design is easy to understand, regardless of the user’s experience, knowledge, language skills, or current concentration level.
iv. Perceptible Information: The design communicates necessary information effectively to the user, regardless of ambient conditions or the user’s sensory abilities.

v. Tolerance for Error: The design minimizes hazards and the adverse consequences of accidental or intended actions.

vi. Low Physical Effort: The design can be used efficiently and comfortably and with a minimum of fatigue.

vii. Size and Space for Appropriate Use: Appropriate size and space is provided for approach, reach, manipulation, and use regardless of user’s body size, posture or mobility.