People Before Systems:

Transforming the Experience of Disability in Saskatchewan

The Saskatchewan Disability Strategy

June 2015

Government of Saskatchewan

Table of Contents

Executive Summary

In the *Saskatchewan Plan for Growth*, as well as the 2012, 2013 and 2014 Speech from the Throne, Government committed to developing the disability strategy in consultation with the disability community. The Disability Strategy will provide the vision to improve disability programs and services to meet Government's goal of making Saskatchewan the best place in Canada to live for persons with disabilities.

Saskatchewan people experiencing disability face significant difficulties in being included in society and treated as equal citizens. People experiencing disability have lower levels of participation in education, training and employment. They also have limited access to goods, services and facilities; greater experiences of discrimination; poorer health; and higher rates of poverty and abuse.

Disability Strategy Recommendations

The Disability Strategy recommendations are informed by the results of the public consultations held in the spring of 2014, but also reflect research into best practices and disability strategies in other jurisdictions. The results of the consultations are summarized in a report prepared by the Citizen Consultation Team (CCT): *Our Experience, Our Voice: The Reality of Today, the Opportunity to Shape Tomorrow*, released on December 3, 2014.

The 12 Strategy recommendations were developed jointly by the CCT and the ministries of Social Services, Advanced Education, Economy, Education, Government Relations, Health and Justice & Corrections. The key areas Saskatchewan needs to focus on to improve the lives of people experiencing disability are arranged into six broad Priority Outcome Areas:

- Putting People Before Systems,
- Safeguarding Rights and Safety,
- Increasing Economic and Social Inclusion,
- Building Personal and Community Capacity,
- Creating Accessible Communities, and
- Becoming an Inclusive Province.

Four drivers of transformation support the Strategy:

1. **Person-Centred Services**: Disability programs and services are often designed with system needs as the priority. People are required to adapt to program rules and processes in order to receive support. Changing to person-centred thinking will create a more flexible system that responds to individual needs and is accountable for helping people achieve their goals. The person-centred view puts *people before systems*.

2. **Impact of Disability**: This approach shifts away from the medical model (diagnosis) of disability to an understanding of disability based on its impact on the individual. While most disabling health conditions are permanent, the "experience" of disability can be reduced by the way society responds to it. Changes can be made to reduce the impact that environment and circumstance play in the experience of disability. These changes will support the inclusion of people in all aspects of life.

3. **Promoting and Protecting Human Rights**: People experiencing disability who attended the consultations told us they are exhausted over their fight for fair treatment. First Nations people experiencing disability face an additional struggle in seeing their rights recognized due to jurisdictional and funding issues. The Strategy will help our province address the obligations contained in the *United Nations Convention on the Rights of Persons with Disabilities*.

4. **Accessibility and Inclusion Benefit Us All**: Our typical approach to designing buildings, communities, programs and services uses a standard or "normal" range of human functioning. We tend to address an individual's disability by focusing on the "exceptional" or "special needs" that fall outside this normal range. The Strategy aims to change systems and environments to reduce and, where possible, eliminate the need to adapt to individual circumstance. Investing in accessibility to meet a broader range of functioning will create a more convenient and better citizen experience for all.

Our Disability Strategy is a shared Strategy. Its success depends on the further and collective efforts of many, including people experiencing disability, caregivers, community-based organizations, the private sector, governments, First Nations, school divisions, health regions, post-secondary education institutions and the public. This effort to build consensus on the Strategy has helped develop partnerships that will be needed for its implementation. Shared ownership of the Disability Strategy is vital to its success.

Letter of Introduction

June 2015

On behalf of the Citizen Consultation Team (CCT), we are pleased to present *People Before Systems: Transforming the Experience of Disability*, Saskatchewan's Disability Strategy.

We launched our journey in October of 2013 when the CCT was appointed to ask the people of Saskatchewan how to create inclusive communities. More than 1,600 people shared their stories, their ideas and, most importantly, their solutions on how to make our province more welcoming, responsive, innovative, accessible and inclusive. They want to help create a Saskatchewan where people who experience disability can live the life they choose. We want to thank everyone for their time, energy and input.

Today, we have some of the best and truly unique disability support programs right here in Saskatchewan. However, we know that we can do better and must continue to be innovative and make changes that put people experiencing disability first. The changes we are proposing are not intended to be band-aids; systemic and cultural changes are needed to address complex issues.

We must come together as a society and embrace this opportunity for change. We must also all assume a leadership role and understand that our attitudes and actions determine whether we will succeed in our effort to build a culture of inclusion in Saskatchewan.

People Before Systems articulates the vision and actions needed to move our disability service system forward to better serve people who experience disability.

We are determined to do our part. And we hope that you will join us in our commitment to making Saskatchewan the best place in Canada for people experiencing disability to live.

Sincerely,

Amy Alsop
Citizen Co-chair
Citizen Consultation Team

Daryl Stubel
Government Co-chair
Citizen Consultation Team

Transforming the Experience of Disability

Introduction

A new way of understanding disability is turning the old one on its head and pointing to better ways to provide services and programming. The old way focuses on diagnosis to determine the needs of the person. The new way looks at disability from the individual's point of view and understands that the experience of disability can vary widely depending on the person's circumstances and experience.

The term "people experiencing disability" is based on this new understanding. It recognizes that the way people experience disability is affected by the interaction between their health condition and their physical and social environment. It also includes the idea that we are all people who experience disability. When we provide care to someone who has a health condition that limits mobility, we are people experiencing disability. Friends, relatives, spouses, co-workers, teachers and bosses who interact with a person who has limited mobility also are people experiencing disability. And all of us can expect to experience disability in a first-hand manner through the normal course of aging.

So what if we could adjust the world to lessen the impact of disability? That might sound implausible, yet it is already happening all around us. Most of us are familiar with public washroom stalls that accommodate wheelchairs, buses with steps that can be lowered to sidewalk level and those chirping-bird sounds we hear at busy intersections that help people who are blind know when it is safe to cross.

These changes reduce the impact of disability. They enable people experiencing it to participate more fully in life and they benefit everyone. They also make us see disability in a new way.

Shane's Experience of Disability: The promise of tomorrow today

Shane Statchuk works at the Ministry of Highways and Infrastructure's Yorkton Repair Depot. Shane is blind. He has a rare eye disorder and can only see shadows and variations of light and dark. Yet, if you drop by the depot on any given day you are apt to find Shane lying on his back under a big Ministry of Highway's truck using his keen sense of touch and a great memory to carry out maintenance tasks. At 28 years of age, Shane is a heavy-duty mechanic who has earned his journeyman ticket after studying at Saskatchewan Polytechnic's Kelsey Campus.

How can a person who is blind be a mechanic? Shane has been "tinkering with engines" on his grandfather's farm since he was a kid and owns four trucks that he's salvaging parts from to try to make two trucks that operate. Still, this does not explain how he can work safely and effectively among other staff members on an assortment of large vehicles.

Shane's success is supported by helpful co-workers who keep the aisles clear and help him identify coloured wires when required. But it really hinges on an organized work environment where everybody knows where everything goes and makes sure it goes back there when they are finished with it.

Shane's disability has not changed. His work environment and supportive co-workers help reduce the impact of his disability to a point where he has the opportunity and ability to work in a well-paying, full-time job in his community.

Clearly, disability does not have to limit opportunity. When you adjust social and work environments, improve access to supports and housing, and find simpler ways to deliver services, you are using a person-centred approach that can reduce the impact of disability. This change will not be fast or easy.

Saskatchewan people experiencing disability continue to have lower levels of participation in education, training and employment. They have limited access to goods, services and facilities; more incidents of discrimination; poorer health; and higher rates of poverty and abuse.

The problem is multi-layered. Current attitudes, practices, systems, policies and environments are all part of the problem. Stories we heard during our public consultation, summarized in *Our Experience, Our Voice: The Reality of Today, the Opportunity to Shape Tomorrow*, describe the many ways that "the system" is simply not doing a very good job helping people experiencing disability to participate in our communities. In fact, the system may well be hindering progress.

Exclusion is not inevitable. For all of us, disability is a reason to do things differently. By working together with all citizens and sectors across Saskatchewan, we can transform a fragmented and complex disability system and help people experiencing disability become participating and equal members of the community.

In the *Plan for Growth*, the Government of Saskatchewan made a commitment to developing a Disability Strategy with members of the disability community. *People Before Systems* supports the Government's goal of making Saskatchewan the best place in Canada to live for persons experiencing disability. It gives us an opportunity to build communities where everyone enjoys the rights, and exercises the responsibilities, of citizenship.

While the Strategy is based on public advice and Government direction, we also included promising practices and evidence-based research in its development. The primary vision of the Disability Strategy is to make Saskatchewan a more welcoming, responsive, innovative, accessible and inclusive province.

Four Drivers of Transformation

The Strategy builds on four interlocking drivers that will transform the experience of disability: achieving person-centred services, responding to the impact of disability, respecting and protecting human rights, and recognizing that accessibility and inclusion benefit us all. These drivers provide a new direction for disability programs and services for our province.

1. Achieving Person-Centred Services

Our disability programs and services are often designed with the needs of the system as the priority. From the point of view of many who use the system, policies and processes used to support programming are rigid and intrusive. Government and community groups often operate in silos and do not share information well, if at all. This creates needless work and frustration for people trying to access disability programs and services and makes it difficult to navigate the system.

A person-centred service system places the person experiencing disability at the centre of the process. It is organized to achieve that person's desired outcomes. It respects dignity and autonomy by allowing people to control and make decisions about the supports and services they receive. Government recognizes that person-centred approaches are desirable for all citizens and is using them in its Public Service Renewal through a focus on citizen-centred services.

Embedding and extending person-centred thinking right into the fabric of disability services will create a strong culture of person-centredness and make the system accountable to its user. In practice, this will result in a more flexible disability service delivery system that responds to people's needs and helps them achieve their personal goals. The person-first view puts *people before systems*.

2. Responding to the Impact of Disability

The Past – Medical Model of Disability

The medical model of disability, which focuses on the person's health condition, has been the dominant way of understanding and dealing with disability for a long time. In the past, we believed that the medical model established a consistent way to provide supports and services. Now we see that this approach creates gaps and inequities when people with the same needs have differing diagnoses. By shifting away from diagnosis to an understanding of disability based on its impact on daily living, access to meaningful disability support services can be more fair.

The Future – A New Understanding of Disability

Diagnosis will maintain a necessary role in prevention, treatment and condition management. However, our new understanding of disability can help us rebalance systems to better match service responses with needs. Our new definition of disability, based on the World Health Organization's International Classification of Functioning, Disability and Health (ICF), tells us:

> *Disability is a limitation in functioning that is the result of a dynamic interaction between an individual's health condition(s) and personal and environmental factors.*[1]

This new understanding is at the heart of an impact-based approach to defining disability. People experience the *impact* of their condition differently because disability is the result of the interaction of health conditions[2] with other social, personal and environmental factors. The impact of disability can also be affected by the person's age, culture, gender, and the presence or absence of environmental barriers and supports.

---

[1] This definition is adapted from Measuring Health and Disability in Europe (MHADIE). (2006). Definition of Disability.

[2] Health conditions refer to physical, psychiatric, cognitive, neurological, intellectual and sensory conditions.

The impact-based approach also recognizes disability can change depending on the stability of the person's health condition. For example, the impacts of a spinal cord injury can be fairly stable, whereas the impacts related to Multiple Sclerosis can vary day to day. When disability can be fully accommodated, the experience or impact of disability can be reduced or even eliminated.

Applying this new understanding of disability to determine how well a person can function is key to identifying the types and intensity of supports needed for daily living and involvement in the community.

3. Respecting, Protecting and Fulfilling of Human Rights

Often, people experiencing disability are viewed as "objects" of care, welfare, or medical treatment rather than "holders" of rights like other citizens.[3] *Our Experience, Our Voice* highlighted issues of discrimination and the lack of respect for the rights of people experiencing disability. Our diagnostic view of disability reinforces those values that put systems, processes and rules ahead of people, rights and citizenship.

People experiencing disability should not have to fight for the basic services, activities and opportunities that most of us take for granted. We believe an impact view of disability will challenge systemic barriers to equality so that people experiencing disability can exercise their rights and responsibilities as citizens of our province.

For many in the disability community, the United Nations *Convention on the Rights of Persons with Disabilities* continues to be an aspirational standard of equality and inclusion.[4] Saskatchewan supported the Federal Government's ratification of the *Convention* and is committed to its progressive realization. The Strategy will

---

[3] United Nations. (2007). Handbook for Parliamentarians on the Convention on the Rights of Persons with Disabilities. Retrieved from http://www.un.org/disabilities/default.asp?id=224

[4] United Nations. (2007). Convention on the Rights of Persons with Disabilities. Retrieved from http://www.un.org/disabilities/default.asp?id=259

help our province address the obligations contained in the *Convention* so that people experiencing disability can fully enjoy their rights and freedoms and participate in their communities "on an equal basis with others[5]."

First Nations people experiencing disability face additional challenges in having their basic human rights recognized. The public consultation heard that jurisdictional and funding issues are barring access to basic disability supports and services such as technical aids and devices, accessible housing and transportation. Collaboration is needed to assist First Nations people experiencing disability to receive the same services and programming as everyone else in Saskatchewan.

4. Recognizing that Accessibility and Inclusion Benefit Us All

Disability can touch any one of us at any point in our lives. This reality suggests that we need to adopt more universal responses to disability.[6] Yet, our current approach to designing living environments and developing programs and services tends to respond within a standard or "normal" range of functioning. This results in many people experiencing disability having "exceptional" or "special needs" because they fall outside of this range. Paratransit services and the retrofitting of housing or public buildings are examples of special programs and "add-ons" developed to address these limitations.

People Before Systems will take a more inclusive approach to disability by developing environments that consider everyone's needs. Instead of looking at disability as though it is an exception, the focus is on changing systems and environments to reduce and, where possible, eliminate the need for adaptation by the individual.

This approach can best be seen in the area of accessibility. Housing with zero-step entrances, wider hallways and doors and accessible bathrooms has benefits for all of us. This kind of housing makes it easier to move furniture and other large items in and out, and fewer stairs mean fewer fall-related injuries. It makes sense that stays in hospital are reduced when homes are designed to accommodate limited mobility. The design of these homes can also improve the living conditions of people experiencing lifelong disabilities and extend independence for seniors, thereby reducing the costs of long-term care.

Investments in accessibility are investments in the common good. These improvements will meet a broader range of functioning, be more convenient and provide a better citizen experience for all.

Leadership and Partnerships

The Government of Saskatchewan has a role in championing the Strategy. Strong and persistent leadership is needed to demonstrate commitment to the recommendations and actions included here. Government leadership is also needed to ensure the Strategy's implementation is consistent with the vision, values and principles that were developed jointly with the community. The vision, values and principles for the Disability Strategy can be found in Appendix A.

As we move ahead, the Province will collaborate with communities on how to implement local changes. Much of the work will require the support of other organizations, including businesses, community-based organizations, First Nations, municipalities, school divisions and health authorities. Everyone in the province must be involved to realize the vision of a Saskatchewan that includes and welcomes all people.

---

[5] United Nations. (2007).

[6] Zola, I. K. (2005). Toward the Necessary Universalizing of a Disability Policy. The Milbank Quarterly, 83 (4), 1-27.

Disability Strategy Overview

The Strategy recommendations, developed jointly by the Citizen Consultation Team and the Provincial Government, are organized into six broad Priority Outcome Areas. These areas are based on feedback received during the public consultation and represent the key areas Saskatchewan needs to focus on to improve the lives of people experiencing disability in our province.

Putting People Before Systems

Safeguarding Rights and Safety

Increasing Economic and Social Inclusion

Building Personal and Community Capacity

Creating Accessible Communities

Becoming an Inclusive Province

There are 12 recommendations with supporting sub-recommendations. Each Priority Outcome also suggests actions required to begin implementing the Strategy over the first 12 to 18 months (*Where to Start*), as well as potential future actions (*Future Directions*) that would serve to guide the implementation of the recommendation.

The Strategy is intended to be a "living document." While *Future Directions* are suggested actions for reaching each of the Priority Outcomes, they are based on best practices and prominent thinking when the Strategy was developed. As we carry out the Strategy, we will monitor the *Future Directions* sections to make sure they are consistent with the latest best practices. Along the way, we will also talk to the disability community to make sure the actions we are taking address the most pressing concerns.

Included with each of the recommendations is a personal story from a Saskatchewan citizen. These stories are based on real experiences of real people in our province, although we have changed their names to protect their privacy. While the stories describe specific situations, they illustrate common shortcomings within the current system. The stories are placed within the recommendations which, if implemented, could provide better outcomes for the individual in the story and all people experiencing disability. The section describing the *Better Future* at the end of each recommendation is meant to show how much better life could be for people experiencing disability once the Strategy is in place.

Thank you to everyone represented in these stories for sharing your experiences and hopes. By doing so, you are helping to shape a better future for Saskatchewan.

Putting People Before Systems

One of the main concepts in the Disability Strategy is that disability programs and services need to be delivered using a person-centred approach. This approach values inclusion, respect, independence, as well as choice and control. Service providers, including those from different areas and programs, must work together to connect people experiencing disability to the services they need. Eligibility criteria need to be guided by the impact of disability in order to improve transparency, fairness, and effectiveness when accessing disability programs and services.

Recommendation #1

SHIFTING ACCOUNTABILITY: Make disability programs and services, within and outside Government, accountable to the people they support.

Currently, disability programs and services are often designed with system needs as a priority, and individuals must meet and adapt to these requirements to receive support. What is needed is a culture shift that puts people first and provides a more flexible system that is accountable to them.

Sub-Recommendations

1.1 Adopt consistent person-centred policy and practice standards for all disability programs and services.

1.2 Develop and launch a method to evaluate person-centred approaches that includes performance measures and provides ongoing support so that performance targets are met.

Weak voice, limited choice: Sara's experience today

Sara is a beautiful 23-year-old woman who loves singing, shopping, going for coffee, laughing with friends and talking about relationships. She has mobility and vision disabilities. Sara has dreams of moving into her own home one day and living with roommates her own age, just like her sister.

Right now, she's waiting for a residential placement that meets her physical and social needs. But finding a suitable home that accommodates her disabilities and is age-appropriate is very difficult. Her service provider has suggested she consider a group home where other residents are in their 60s and 70s, but that's not what she wants. Recently, a placement opportunity came up that seemed okay; however, eight other people were also referred and Sara was told they'll be given preference because their needs are more easily met.

Sara was hurt and disappointed. She felt excluded. She got very frustrated when her service providers said she requires "too much" support, making it difficult to find options for her. She was unhappy with the decision but found there was nothing she could do about it. There is nowhere to go to appeal. The entire process has been closed to Sara and she has had no say. She is unhappy knowing that her best option now is to wait to get interviewed again. In the meantime, she will have to live with elderly people. Sara feels that she doesn't have a choice and will have to wait for a very long time to live in a place where she is supported for who she is. She feels that she has "no voice" in this system.

Where to Start:

- Define person-centred approaches to be used in the development of policies and standards.
- Develop policies/processes that help people experiencing disability take control of the programs and services that serve them, such as supported decision-making.

Future Directions:

- Expand opportunities for people experiencing disability to manage and direct the programs and services they receive, such as Individualized Funding for home care and Self-Directed Funding programs for people experiencing intellectual disabilities.
- Develop an accountability plan that can be used to measure how well service delivery standards are being met and to provide support when they are not.
- Include an oversight mechanism and appeal mechanisms to help individuals to hold programs and services to account for delivering quality service.
- Improve the accountability of community-based organizations that receive funds to provide services to Aboriginal citizens experiencing disability.

A stronger voice: A better future for Sara

In the future, people experiencing disability have more choice and control over their lives. They're not bound by what's available in the system. They have choice-based programming that allows them to live and grow in their own community. They have enhanced programming options and support from knowledgeable service providers that together give them significantly more independence and choice. And appeal mechanisms are in place if they're not satisfied with decisions made on their behalf. It's a more open and transparent process where people feel they are a part of the system and expectations are more clearly stated and consistently met.

For Sara, this would mean more choices about where and with whom she lives. She would have more choice, as well, regarding who provides support and when it's provided. She would not have to wait indefinitely for an accessible and age-appropriate placement and it wouldn't matter if she needs more support or less. If she is not satisfied with a support decision she could appeal it using a fair process. Although she is blind and uses a wheelchair, the people supporting her would not see her as "too much work." She would be celebrated for her singing and happy personality. And a process would be in place so that when Sara decides "I'm ready for this" or "I'm ready for that," there's a plan and timeline in place to carry out her wishes.

Recommendation #2

MAKING ELIGIBILITY FAIR: Adopt fair eligibility rules that focus on the impact of disability rather than simply medical diagnosis.

Today in Saskatchewan, as in other jurisdictions across Canada, medical diagnosis is used in determining access to disability programs and services. Yet, this approach creates gaps and inequity when services are not available without the prescribed diagnosis, even when the person has the same service need. By adopting an impact-of-disability approach to assessing needs and eligibility, disability programs and services are available to individuals with the same service needs regardless of the presence or nature of a diagnosis or how the need was acquired. Fairness in accessing disability programs and services will be further enhanced by considering impact of disability along with non-disability related eligibility criteria, such as age, place of residence, and personal income levels.

Note: Medical diagnosis will continue to serve its proper and necessary function in the prevention, treatment and management of health conditions.

Sub-Recommendations

2.1 Develop a common approach to assessing impact of disability for use across Government-funded programs.

2.2 Take impact of disability into account with other eligibility considerations such as income, age and residence.

2.3 Transition from medical- to impact-of-disability-based eligibility criteria for disability programs and services.

2.4 Make eligibility for provincial disability programs and services more transferrable (e.g., between health regions and school divisions) so that individuals can access services as they move across the province and through life transitions.

Feeling trapped: Ashley's experience today

Ashley is a young adult. She uses a wheelchair and her needs are fairly intensive. She needs a two-person transfer with a ceiling lift to get in and out of her chair and needs assistance with bathing, toileting and dressing. Ashley is currently receiving Individualized Funding (IF) in her home health region and is managing well under the program. IF gives Ashley the ability to purchase and manage the supports that meet her needs.

Last month, she accepted employment in another part of the province and was very excited about her new opportunities. However, her spirits dampened when the health region there put her on a waiting list for IF and told her it could be some time before she gets funding. Ashley feels trapped and frustrated because she's not able to transfer funding to her new health region.

Where to Start:

- Develop training materials to support the transition to impact of disability eligibility.
- Revise the Individualized Funding Program policy to allow portability across service boundaries.
- Standardize disability eligibility requirements for paratransit services.
- Identify and prioritize disability support programs to transition to impact-based eligibility for programs and services such as Community Living Service Delivery.

Future Directions:

- Review existing housing policies to ensure that they support fair access to appropriate housing for people experiencing disability.
- Review jurisdictional eligibility criteria to ensure First Nations citizens of Saskatchewan have equitable access to disability supports.
- Address age eligibility issues to improve access to before-and-after-school services for children and youth experiencing disability.

Truly independent: A better future for Ashley

In the future, eligibility for programs and services is transferrable and portable across the province. Funding for disability programs is more connected to the individual than to health regions or geographical location. As a result, individuals experience improved independence in their choices of where they want to live or work.

In these circumstances, Ashley would be accepted in the Individualized Funding Program and would receive the same level of support and care in the new health region as in the previous one. She could move if and when she wanted and there would be nothing to dampen her spirits about the new opportunities in her life.

Recommendation #3

CO-ORDINATING AND NAVIGATING THE SYSTEM: Improve access to information, intake and service delivery so that people are able to easily navigate and experience a seamless and co-ordinated system of disability programs and services.

Individuals and families experiencing disability in Saskatchewan struggle to find the information and supports they need in a system that is highly fragmented and complex. People experiencing disability are frustrated with having to continually prove they have a disability and repeatedly provide personal information because service providers do not or cannot share information. Processes and policies need to be changed to support a more seamless and co-ordinated approach to serving people experiencing disability. As well, information about disability services must be made easier to find.

Sub-Recommendations

3.1 Establish information sharing procedures to improve communication across Government programs and services, as well as with third-party partners.

3.2 Develop rules and procedures to deliver integrated services to support case management and crisis prevention.

3.3 Streamline entry points for accessing disability programs and services.

3.4 Establish clear roles and responsibilities to support smooth and timely transitions across Government and between third-party partners as people move in and out of disability programs and services.

3.5 Expand navigation and planning services for people experiencing disability to help connect them to appropriate supports in their community.

Lost in a maze: Jason's experience today

Jason has been in two car crashes that have altered the course of his life. When he was 15, a car accident left him with cognitive and physical disabilities. A second car crash at the age of 36 resulted in further cognitive impacts. After the second injury, Jason felt he no longer knew who he was.

Since his injuries, he does a great deal of volunteer work at a rehabilitation centre and residents are very grateful for his attention. This keeps him busy most days. However, he is unable to do work that can earn an income. Jason had been an active person and is frustrated that his mobility has been affected. He says he can't even remember being able to run. His gait is unsteady because of compromised balance and for the last couple of years he has used a cane for walking. Because of his unsteady gait, he has been misunderstood by some people. And although Jason has his high school diploma he feels that it was given to him as a "courtesy" because there were no special services for students with acquired brain injuries at the time.

Jason has been able to participate in a support group that has been very helpful to him. However, although he and other participants are willing to share their stories to support each other, they are frustrated by having to share the same stories over and over again with a variety of government agencies in an attempt to get appropriate information about supports that may be available. This, along with repeatedly being asked whether his disability is permanent, is infuriating and embarrassing Jason.

Where to Start:

- Identify high-risk, common clients across Government programs in order to prioritize opportunities for co-ordination.
- Begin developing a universal registration process for Government programs.
- Expand programs shown to be effective in providing integrated services to individuals with complex needs.
- Improve co-ordination and information-sharing among educators, students and families.
- Initiate discussion on an information portal that could be used to provide information on disability programs, services, housing and transportation options.
- Work with community-based organizations to explore opportunities for providing in-person navigational support.
- Develop information-sharing guidelines and consider any regulatory amendments needed in order to deliver common or integrated services.

Future Directions:

- Develop and oversee rules that will govern key life transitions, such as children entering the K–12 school system, students moving from school to employment or post-secondary education and adults moving into retirement.
- Create an online portal to apply for Government disability support services.
- Provide information and support to individuals and families during periods of transition to ensure that they are a part of planning for a smooth transition.
- Develop multiple channels such as Web, paper-based and social media to provide information on disability programs and services that is culturally responsive and accessible to a wide range of people experiencing disability.
- Provide system navigators for people with recently-acquired health conditions or disabilities.
- Partner with organizations offering support to new Canadians to increase awareness of disability-related programs and services.
- Develop protocols for transition between children's and adult programs and services.
- Develop use of a "one-stop" point of contact where passengers can more easily access information on the type of transportation that best meets their needs, whether conventional, paratransit, taxi or other.

Finding a way out: A better future for Jason

In the future, people experiencing disability find systems of supports that are seamless and co-ordinated. The "siloed" approach to delivering services and supports, where little or no information is shared among providers, is minimized. And people find it easy to get information and to access various disability programs and supports.

As for Jason, he now goes online and interacts with an agency or office that helps guide him to the service options he's seeking. He no longer has to repeat his information to multiple people numerous times, and that has greatly increased his sense of well-being.

Safeguarding Rights and Safety

The rights and safety of people experiencing disability must be better understood, observed and protected. Improved responses to abuse and neglect, as well as better supports for people experiencing disability in the justice system, are also needed. More work is required to meet the needs of Aboriginal people experiencing disability. We must make sure they have the same access to disability programs and services as all other Saskatchewan citizens.

Recommendation #4

UPHOLDING RIGHTS AND SAFETY: Promote and protect the rights of people experiencing disability and improve responses to violence, abuse and neglect so they can live safely in their communities.

Issues of rights, discrimination and systemic barriers to equality are a problem for people experiencing disability. Greater understanding of their rights and our obligations to promote and protect them will be essential to achieving more inclusive communities. People experiencing disability are at greater risk of experiencing violence, abuse and neglect. Improving prevention and the responses to violence, abuse and neglect will help people experiencing disability to live safely in their communities. Enhanced supports will be needed for people experiencing disability who are involved in the justice system.

Sub-Recommendations

4.1 Support people experiencing disability to understand and advocate for their rights.

4.2 Increase Saskatchewan citizens' understanding of the rights of people experiencing disability.

4.3 Increase services to prevent and address violence, neglect and abuse of people experiencing disability.

4.4 Improve prevention and diversion services for people experiencing disability who are at risk of being involved in the justice system.

4.5 Improve specialized supports for people experiencing disability as they interact with the justice system, whether as victim, accused, perpetrator, witness or offender.

Denied entry: Ryder's experience today

Ryder uses a guide dog to travel between home and work, buy groceries and clothes and to go to the theatre, movies and social events. He also uses his guide dog to visit other cities for work or pleasure. A major hassle for Ryder is having his guide dog refused entrance to places that provide public services, such as restaurants, hotels and taxis. *The Animal Protection Act* clearly states that no person shall harm, attempt to harm, touch, feed, impede or interfere with a service animal without lawful excuse or authority. There is a penalty of up to two years in jail and a fine of up to $25,000 if someone violates this law.

However, it seems that there is no strict enforcement of the Act, and there's a commonly-held view that there are no real consequences for refusing entry to service animals. Another issue is that some people pretend their pets are service animals in order to get them access to public facilities. There is no identification of certified training available for service animals that can set them apart from regular pets.

Ryder feels humiliated, angry and degraded whenever he is refused entry to buildings or transportation. All dignity seems to be taken away and he feels less than a full resident of this province.

Where to Start:

- Partner with the Saskatchewan Human Rights Commission and community-based organizations to educate people experiencing disabilities on their rights and how to advocate for them.
- Partner with the Saskatchewan Human Rights Commission and community-based organizations to develop and implement targeted public campaigns to increase awareness of the rights of people experiencing disability.
- Establish a multi-ministry partnership to focus on service and intervention for chronic offenders with cognitive disabilities and/or mental health issues.
- Consult on improving residential crisis intervention services provided to people experiencing disability.
- Partner with justice, health and social services sectors and community-based organizations to develop and oversee public education programs on abuse and neglect of people experiencing disability.
- Expand best practices in responding to abuse and neglect of people experiencing disability. Initial focus could build on the protocols for the prevention, reporting and investigation of abuse that were developed by the Ministry of Social Services.

Future Directions:

- Improve education and awareness of school-aged children and youth about the rights of people experiencing disability.
- Increase public understanding and application of "duty to accommodate."
- Build community skills to support, assist and advocate for people experiencing disability.
- Continue to improve services provided to women living with disabilities who experience violence.
- Make sure people experiencing disability who are exiting the justice system can access disability programs and services to re-integrate into the community.
- Continue to support the establishment of specialized "Therapeutic" Courts[7].

---

[7] Therapeutic courts take a problem solving and collaborative approach to justice. These courts can better support individuals whose cognitive disability or mental health issue has brought them in contact with the criminal justice system.

Included: A better future for Ryder

There is a broader understanding of the rights of people experiencing disability in Saskatchewan. The province has increased public understanding of "duty to accommodate." A person experiencing disability with a service animal is able to access and use any place or form of transportation to which the public has access. A mechanism for registering service animals is in place, making it possible to distinguish pets from service animals.

For Ryder, this change allows him to fully participate in society without barriers being put in front of him. No longer will it be OK to tell him: "sorry, no dogs allowed" or "you can't get into my cab because you have a dog" or "we can't serve you in this restaurant or book you into this hotel because dogs are not allowed."

Recommendation #5

INCLUSION OF ABORIGINAL PEOPLE – First Nations, Métis and Inuit people experiencing disability are well-supported regardless of their home community.

Many Aboriginal people experiencing disability have considerable difficulty getting access to basic disability programs and services. These barriers are intensified for First Nations people whose access is affected by jurisdictional challenges. Attention is needed to make sure Aboriginal people experiencing disability have fair access to the supports received by other Saskatchewan citizens.

Sub-Recommendations

5.1 Work together to improve access to provincial disability programs and services for First Nations people experiencing disability.

5.2 Engage the Federal Government in developing and improving capacity and infrastructure to support the delivery of disability services and programs to First Nations people experiencing disability on-reserve.

5.3 Support culturally respectful disability programs and services for Aboriginal people experiencing disability.

Trapped: Elaine's reality today

Elaine is a First Nations woman living on-reserve. She acquired polio as a child, and has difficulty walking even a few steps. Elaine has a hard time using her wheelchair in her home because the doorways and corridors are too narrow, cupboards and shelves are high and inaccessible, and the washroom and laundry room are too small. These are just some of her everyday challenges. Elaine likes to participate in traditional ceremonies such as pow-wows, sweat lodges, round dances and healing ceremonies. However, there is no program available that offers assistance for attending these ceremonies and Elaine has to rely on her family or friends to take her out. There is no accessible public transportation for travel on- or off-reserve. Medical care transportation is available but limited and not enough to meet the needs of the community.

During her off-reserve medical appointments, Elaine feels her wait times are longer than non-Aboriginal patients. She receives no cultural support from her doctor, therapists, nurses and social workers. And she feels that they do not know where she is coming from or the barriers she experiences as a First Nations person living on-reserve, such as the challenge of finding transportation to hospital to get her bandages changed daily. As she is growing older, she needs help with house chores but has no access to homecare. She knows that this is not fair because a person living in a city or town would have no such trouble. Also, there are no skill development or employment-related programs available on her reserve.

Elaine's lack of physical and financial supports and her inaccessible surroundings make her feel stuck in her home and community. Her dependence on others inside and outside her home makes Elaine very upset, disappointed and angry.

Where to Start:

- Begin discussions with First Nations and the Federal Government for the purpose of providing First Nations with registered status the same disability benefits and services as all other Saskatchewan citizens. Initial focus could include:
  - Saskatchewan Aids to Independent Living (SAIL) Program
    - Special Needs Equipment Program
    - Para Program
  - Saskatchewan Assured Income for Disability (SAID) Program
  - Cognitive Disability Strategy
- Work with First Nations and the Federal Government on a needs assessment for use in the development and delivery of disability programs and services on-reserve.
- Undertake a provincial needs assessment with Aboriginal citizens off-reserve to determine the potential demand for community-based disability programs and services.

Future Directions:

- Work with First Nations to increase awareness of disability issues and be more responsive to the needs of people experiencing disability on-reserve.
- Help First Nations agencies train and recruit qualified staff to deliver disability programs and services on-reserve.
- Develop a plan to train and recruit qualified staff to deliver culturally respectful disability programs and services off-reserve.
- Partner with First Nations, Métis and community-based organizations to develop programming specifically for First Nations and Métis people experiencing disability.

Independent at last: A better future for Elaine

In the future, there are more discussions between First Nations and the Federal Government toward improving access to basic disability services and supports for people experiencing disability on-reserve. Aboriginal people have access to culturally respectful and qualified service providers and they also have more opportunities to provide input into the development and delivery of disability programs and services.

As for Elaine, she can now access more programming without having to move from her home reserve, including house renovation options that make her home more livable. She is more independent physically and financially and benefits from an income-supplement program on her reserve.

Increasing Economic and Social Inclusion

People experiencing disability often do not have the same opportunities as others to participate in the economy. Barriers to education and employment need to be addressed in order to create more opportunities for people experiencing disability to be employed. In situations where people experiencing significant and enduring disabilities are not able to be economically self-sufficient, income support is needed to make sure they have an acceptable quality[8] of life.

Additionally, people experiencing disability have unique and extra costs for items associated with disability such as special diets, housekeeping and laundry. Meeting these costs places a greater financial burden on people experiencing disability, particularly those with significant disabilities and low incomes. Recognition of the extra costs of disability is needed to support financial security and quality of life.

Recommendation #6

INCLUSION IN THE ECONOMY: Expand opportunities for people experiencing disability to contribute to the economy and address the extra costs of disability.

People experiencing disability often have fewer opportunities for financial security and inclusion in the labour force. Employers miss opportunities to hire people with talents and skills who can benefit their organization. Greater economic inclusion of people experiencing disability can be achieved by addressing disability-related obstacles to education, training and employment, as well as the extra costs of disability for individuals with lower incomes.

Sub-Recommendations

6.1 Remove disability-related barriers to post-secondary education, employment training and skills development programs to improve labour market participation for people experiencing disability.

6.2 Champion the inclusion of people experiencing disabilities in the workforce, including working with business and industry groups to improve access to tools and supports for more inclusive and welcoming workplaces.

---

[8] The term “socially acceptable income” comes from the public commitment made to develop the Saskatchewan Assured Income for Disability (SAID) program. Government continues to work with the disability community to define this term.

6.3 Develop education and awareness tools to help employers and co-workers understand opportunities to include and accommodate people experiencing disability in the workforce.

6.4 Increase the availability of employment supports to help people experiencing disability enter and remain in the workforce.

6.5 Establish and maintain a socially acceptable income for people experiencing significant and enduring disabilities who are unable to attain long-term financial self-sufficiency.

6.6 Offset the extra costs of daily living for people experiencing disability.

6.7 Improve transition planning and processes so that students experiencing disability can effectively move from high school and post-secondary education training and skills programs into employment.

Really want a job: Bill's experience today

Bill experiences disability as the result of excessive physical growth during the first few years of life. His impacts of disability include delayed or impaired motor, cognitive and social development, as well as low muscle tone and difficulties with speech.

Bill's Adult Basic Education program instructor referred him for an assessment because he displayed problems with reading and math. The results of the assessment show that Bill has a mild intellectual disability. He needs employment and training that focus on concrete and hands-on learning. He tried to continue with the education program but was not able to complete it. The report from the institute's counselling services said his "strength is working and learning hands-on, not academic learning." Bill was very disappointed in his academic progress and what it meant for his future employment opportunities.

Where to Start:

- Begin to develop consistent policy across post-secondary institutions and systems to accommodate people experiencing disability.
- Review student financial assistance programs to identify barriers to accessing post- secondary supports and services.
- Work with employers, organized labour and people experiencing disability to develop ways to increase employment levels of people experiencing disability.
- Explore work experience options such as increasing part-time work, flexible work arrangements and hours, and summer job opportunities for students and new entrants to the work force who are experiencing disability.
- Identify a central contact point for employers to access supports, information and guidelines on workplace accommodations.
- Create an icon on the SaskJobs website for employers interested in hiring people experiencing disability.

- In collaboration with the disability community, continue to develop the Saskatchewan Assured Income for Disability (SAID) program to achieve the design described by the Task Team on Income Support for People with Disabilities.
- Increase awareness of housing repair and modification programs to assist with improving the quality and safety of homes.

Future Directions:

Post-Secondary Education

Create and implement a consistent policy on accommodations for students experiencing disability across post-secondary institutions and related systems.

Employment

- Explore options to encourage employers to hire people experiencing disability.
- Increase awareness of employers about hiring people experiencing disability by publicly recognizing ones who are doing so.
- Raise awareness with businesses about the benefits of hiring people experiencing disability.
- Review existing government benefits and programs to address unintended disincentives to employment.
- Create more mentorship and paid work placement opportunities in the private and public sectors.
- Build on supported employment initiatives in the province and develop a formal network for sharing innovative approaches (e.g., Saskatchewan Employment Transition Initiative).

Affordable Housing

- Review existing programs to ensure people experiencing disability can get financial support to help repair their homes.
- Partner with homebuilders and municipalities to ensure an adequate supply of affordable, accessible homes, including rental units.

Income Support

- Review existing income support programs, including the Saskatchewan Assistance Program (SAP), Saskatchewan Assured Income for Disability (SAID) program and low income bus passes, to find out how to improve access to appropriate transportation for people experiencing disability.

Transportation

- Create a fare structure for paratransit that is the same as conventional transit in all communities and establish consistent rates for accessible and non-accessible taxis.

Supported Employment: A better future for Bill

In the future, a local community-based organization helped arrange a work “try-out” for Bill as a gas attendant for a national petroleum company. He was hired following this work assessment and continues to work there on a full-time basis. Bill is very hard working. The company understands and recognizes his strengths and weaknesses. He is dependable with only very few “hiccups” here and there. Whenever he experiences difficulty doing his job, the employer’s response is that there is always someone Bill can ask for help. This employer has been very considerate, patient and understanding.

As the Disability Strategy is implemented, more people experiencing disability will have access to employment opportunities and be valued employees, just like Bill.

Building Personal and Community Capacity

Personalized supports and services must be readily available to people experiencing disability so they can choose where to live and how to engage in the community. Some people experiencing disability need specialized forms of support to maintain everyday well-being and meaningful participation in the community.

Children, youth and adults experiencing disability must have access to educational supports, families must be supported in their caregiving role, and service providers must have the knowledge and skills to provide quality, person-centred services.

Recommendation #7

ACCESSING PERSONAL SUPPORTS: Improve access to the supports that people experiencing disability need to live in their community.

Limited access to, and availability of, personal supports such as specialized therapies, assistive technology, supportive housing and flexible funding arrangements reduces the ability of people experiencing disability to create the lives they want to live. Supports and services designed to meet needs and maximize choice and control are necessary.

Sub-Recommendations

7.1 Increase access to, and availability of, assistive technology, technical aids and modifications that promote participation and independence.

7.2 Increase access to and availability of human services to facilitate living in one's home and community.

7.3 Increase availability of supportive housing options so people experiencing disability have services that meet their needs.

Every day a challenge: Reece's experience today

Reece is a young man who has an intellectual disability. He likes to engage in a variety of community activities and loves his part-time job. While he likes to meet and help people, he tends to be vulnerable. Sometimes people take advantage of him because he's so kind-hearted. Reece struggles every day with his social skills and has trouble communicating negative emotions in an effective way. Due to his disabilities, he requires a range of supports to pursue what he wants. He needs help co-ordinating appointments, getting to work and managing his money. Job coaching has helped him to an extent.

Day programming is another area where Reece has not had a particularly good experience. The community agency that provides day programming in his area doesn't provide activities that interest him. His time at the day program typically consists of sitting with several other clients watching movies and drinking coffee. Reece dislikes going to the day program, but there is nothing else for him to do during the three days each week that he's not working.

Reece has been waiting for a residential placement for several years. He needs 24-hour staffed housing, but these kinds of accommodations are in short supply and in high demand. He has been on a waiting list for six years and still has no idea when he will have a permanent home. In the meantime, he's been living in a number of Approved Private Service Homes, many not suitable for him. There were several periods of instability that were very difficult and meant many moves and much upheaval. Reece's current residence, though not ideal, at least is a home where he is well liked and well treated, although he continues to wait for his ideal home.

As a result of the poor fit between available programs and the supports required, Reece struggles with his mood and behaviour. He often feels alone and down. He's frequently bored and unhappy with daily life and can be irritable and frustrated. He has experienced depression and even talked about hurting himself because he was feeling so unhappy. Reece doesn't want anything out of the ordinary. He just wants the opportunity to enjoy a full and meaningful life just like everyone else.

Where to Start:

- Begin a review and redesign of the Special Needs Equipment and Paraplegia Programs in the Saskatchewan Aids to Independent Living Program.
- Review the range of supportive housing options and determine opportunities to expand and sustain this type of support (e.g., home care, supported living, Approved Private Service Homes, personal care homes, group homes, Housing First and transition housing).
- Examine the array of residential services and how they are funded.

Future Directions:

- Make assistive technology and technical aids and modifications more available. Focus on providing direct funding options to individuals and families, based on impact of disability, so they can directly purchase supports and services.
- Identify demand, examine gaps and seek opportunities to expand or redirect human services. Begin by addressing areas already shown to have significant gaps, including:
    - Therapy providers (e.g., occupational therapy, physical therapy, speech and language pathology and psychology);

  - Sign language interpreters – explore the option of establishing a training program for the province to ensure that qualified interpreters are available;
  - Personal support providers (e.g., respite workers and mentors).
- Improve access to assessment and early intervention services for people experiencing disability.
- Expand existing and develop new programs that provide in-home supports to enable people to stay in their own homes and maintain their independence.
- Review individualized/self-directed funding programs to ensure that they are meeting the needs of individuals throughout the province. Initial focus could be on the Individualized Funding Program through the health regions.
- Improve supportive housing options in the community and provide appropriate supports that match the impact of disability.

A meaningful life: A better future for Reece

In the future, Reece is able to go to a job he loves and work as many hours as he is capable of working. In his remaining time, he has access to programming that supports his social nature and allows him to continue to grow and learn new skills. His programming is flexible and adaptable to his own goals and desires, and the staff support him in pursuing his goals and dreams.

Reece has a home that fits with his needs and provides the right amount of flexible support for him to live as independently as possible. He now has opportunities many of us take for granted, enriching opportunities such as being able to work out with a friend, go to a concert or football game, or just go out for a coffee.

Recommendation #8

FOCUS ON DEVELOPMENT AND LIFELONG LEARNING: Remove barriers to inclusive quality education, early development programming and lifelong learning so that people experiencing disability have the opportunity to realize their potential.

Education is critically important to overall well-being and lifelong development. Making sure children experiencing disability enter the school system ready to learn means focusing on timely interventions and access to supports in their early years (birth to five years of age). Flexible, accessible and well-co-ordinated learning opportunities help children and youth experiencing disability achieve learning success and develop skills that will help them as adults. Supporting adults experiencing disability to continue building new skills and knowledge will help them achieve their employment goals, reach their potential and live the lives they choose.

Sub-Recommendations

8.1 Expand early learning programming that helps young children experiencing disability to receive a good start on their learning and development.

8.2 Improve access to educational services, supports and technology that assist students experiencing disability to maximize the benefit of educational programming.

8.3 Improve specialized educational programming to address gaps for students experiencing disability, including students with impacts of disability related to communication, sensory functions and socialization.

8.4 Improve transition planning and processes so that students experiencing disability can effectively and smoothly transition from the early years into school and from school to post-secondary education.

8.5 Develop province-wide policies and standards to ensure that students experiencing disability have equitable access to post-secondary education programs and services throughout the province.

Isolated: Rachel's experience today

Rachel is a young adult who is deaf. She has no language as there are no PreK-12 or post-secondary institutions in Saskatchewan that can teach in American Sign Language. This lack of language has reduced her ability to learn and develop skills, be engaged in the community, make friends, obtain education or find employment. She says her inability to communicate isolates her and makes her feel excluded. She's depressed and has developed suicidal tendencies.

Rachel wants to ask for help but absence of language inhibits her from reaching out and connecting with a support network. She feels lost, upset and unable to plan a way to escape her isolation and pursue a normal life.

Where to Start:

- Review and determine gaps in hearing screening services for newborns to children eight years of age and develop a plan to ensure children with hearing impairments are identified and supported so they can realize their full potential.
- Review early childhood development and learning services as a step toward improving early identification of issues and timely referral to appropriate services for children experiencing disability.
- Examine barriers for students experiencing disability in accessing educational support services in K-12 and post-secondary education.
- Research and consult with other stakeholders to find better ways to support the inclusion of students with specific learning needs such as hearing, vision and cognitive disabilities.
- Undertake a gap analysis of barriers for students experiencing disability and develop a plan to address these gaps to ensure programs are flexible, based on needs and accountable to the student.
- Develop a priority list of resources for post-secondary education so that technology and services are adequately funded (e.g., tutoring services and alternate material/ conversions services).

Future Directions:

- Expand innovative learning models to support the inclusion of students with unique or specific learning needs such as hearing, vision and cognitive disabilities.
- Expand the use of technology to improve access to educational programming for students with unique learning needs in the North and on-reserve.
- Review current practice and policies to make sure they encourage schools to facilitate parental involvement in their child's educational programming.
- Develop policies to support a culture of inclusion in post-secondary institutions.
- Identify specialized training needs for teachers, education assistants and other staff to educate deaf and hard-of-hearing students.

Included: A better future for Rachel

In the future, teachers, education assistants and other staff have been consulted on specialized training needs for educating students who are deaf and hard-of-hearing. American Sign Language (ASL) is available in some locations as a language of instruction in Saskatchewan, and training programs are available for service providers in the province. Sufficient early hearing detection programming is available in the province.

For Rachel, this is an opportunity to get practical training in ASL and connect with community outreach and support networks. It gives her hope that a better, more inclusive life lies ahead.

Recommendation #9

9. VALUING FAMILIES: Promote the value of family caregivers and help families provide quality care and support to family members experiencing disability.

Family caregivers are a vital part of the network of support for people experiencing disability. It is essential to recognize the value of family caregivers and to help them provide the best possible care to their family members. This includes providing more opportunities for families to get a break from their caregiving role as well as helping to address the extra costs of caregiving. It is also important to use the expertise some family members have gained through their caregiving role by transferring this knowledge and skills to other families and building strong networks of support and learning.

Sub-Recommendations

9.1 Value the role of family caregivers by providing emotional, social and financial resources to better equip them to support their family member(s) experiencing disability.

9.2 Help families get time away from their caregiving role by developing and expanding respite options.

9.3 Provide opportunities for families to build on the skills they use in providing quality care to their family member(s) experiencing disability.

Unsupported: Barry's experience today

Barry is a full-time caregiver to his spouse Paula who has a progressive chronic disorder. Most of Barry's day is spent as a caregiver to Paula in their home in a rural community. He provides her with personal care around the clock and also has to take her for medical appointments in the nearest major centre, which is two hours away by car. Unable to find adequate caregiving support for Paula, Barry was forced to take an early retirement. This significantly lowered their family's pension supports. They feel financially burdened because Paula's health care and drug therapies cost more than $30,000 a year. The money has to come from their savings.

Barry feels unrecognized and unsupported in his efforts to provide care for a person whose disability is hard on the caregiver and erodes the caregiver's ability to earn a living, plan for retirement or be a parent. With no downtime or adequate homemaking and therapy support, he struggles to find time for his own interests and has put aside his well-being to look after his family. He used to be active in his community as a volunteer and leader but has slowly withdrawn from these activities. As a result, he often experiences isolation as well as anxiety over the possibility he could pass away before Paula. He's frustrated and discouraged with the lack of social and emotional support he receives, and upset he gets no help with his family's financial and medical circumstances.

Where to Start:

- Build on current initiatives that develop pools of dedicated, trained respite workers in communities across Saskatchewan.
- Look at online and other methods of delivering learning opportunities for family caregivers, particularly those living in rural areas.
- Examine options for disability programming for families with children experiencing disability.

Future Directions:

- Improve financial incentives for family caregivers to help address the extra costs of disability.
- Explore options for supporting homemaking services for families providing full-time care to family members experiencing disability.
- Review childcare for children experiencing disability, including the subsidy, to make sure that it meets the needs of children experiencing disability until they graduate from school.
- Build strong networks of support and learning by increasing access to sibling, parent groups, and culturally appropriate support groups for families experiencing disability.
- Develop and expand flexible financial respite benefits for families caring for children and adults experiencing disability.
- Develop a continuum of in-home and out-of-home respite supports including planned and emergency/crisis respite to prevent and manage issues that can easily escalate. This would include:
    - Expanding the pool of trained respite providers for families to access in their communities;
    - Developing longer-term respite options where a family needs an extended break (e.g. parents are in training, parent is in hospital);
    - Providing families with better access to outreach workers who deliver training to address challenging behaviours and difficult situations.
- Expand the range of learning opportunities available to families on how to best support their family member(s) experiencing disability.

Recognition and support: A better future for Barry

In the future, families have access to improved emotional, social and financial supports that make them feel valued and connected with the community. Respite support is readily available in the community providing a needed break for families.

Barry now has time away from his caregiving role and is an active member of his community again. Barry has opportunities to network with other caregivers to share his experiences and knowledge on caregiving. He now has opportunities to improve his skills and learn new ones so he can give Paula the best, high-quality care possible.

Recommendation #10

BUILDING CAPACITY OF SERVICE PROVIDERS: Support disability service providers in developing the skills and resources needed to provide effective and respectful care and services.

One of the most important determinants of quality services is competent and respectful service providers. Focused effort is required to develop and support service providers. This includes training and education, support for caregivers in safe and healthy settings, and strengthening recruitment and retention activities.

Sub-Recommendations

10.1 Build the understanding, skills and competencies needed by disability service providers through sector-specific training.

10.2 Recognize the value of disability service providers and direct-support workers who provide services for people experiencing disability.

10.3 Support and improve the health and safety of the disability service provider workforce.

Under-supported: Clint's experience today

Clint is 10 years old and the eldest of three boys. He was born prematurely at 23 weeks and, as a result, he is deaf. He also has low immunity due to his premature birth and has difficulty speaking and understanding speech. In 2012, Clint had cochlear implant surgery and can now hear all sounds. His "hearing age" is that of a two- to three-year-old child and he needs intensive therapy and help from an education assistant to improve it. He's learning sign language and lip reading, but he needs to see an image or a representation of an idea in order to connect a word to its meaning. Clint is redeveloping the hearing area of his brain.

Clint's parents feel it's up to them, alone, to ensure he gets an outstanding education because the education system seems satisfied with "good enough." They're frustrated that the education team depends on them to bring together the medical professionals, specialists and therapists to provide an optimal learning environment for Clint. And they've had to hire a speech and language therapist privately. This was particularly challenging because it's impossible to find specialized therapists in their community. They had no choice but to hire one that has no specialized skills working with hearing-impaired children. Moreover, because there are so few specialized therapists in their community and they're in such high demand, they can't provide the intensive amount of therapy that Clint needs. There are no translators available in the area but, even if there were, their services would be very expensive.

Clint has an education assistant at school who translates for him during class, but he's isolated at recess and noon hour because he can't communicate with his peers. This is also a huge barrier to extracurricular activities such as sports and clubs. Any extra money the family gets goes to Clint's trips to the city for his appointments and his speech and language therapist.

Where to Start:

- Develop an education and training plan for the disability service sector. This could include:
  - Establishing competencies for frontline disability support workers;
  - Increasing training opportunities for frontline disability support workers, including training in cultural sensitivity and respectfulness;
  - Increasing funding to agencies to do their own training, and providing resources for "train the trainer" models.
- Develop an education and training plan to improve disability-specific knowledge for justice, social services, health, education, transportation and recreation sectors. This plan can include:
  - Creating more professional development opportunities for educators, guidance counsellors, income assistance workers and supported employment service providers to help them better understand and accommodate disabilities;
  - Training for all drivers that provide transportation to people experiencing disability;
  - Improving education and awareness of accommodations needed in the recreation sector so that people experiencing disability can be more effectively included in programs;

  - Increasing access to specialized training for those who support people with complex needs;
  - Investigating different delivery methods for a wide variety of training needs. For example: an online tool to provide training resources to increase the knowledge and skills of individuals who work with people experiencing disability.

Future Directions:

- Promote the value of frontline disability support work as a viable career option. This could include exploring opportunities for partnerships on a public education campaign to promote the value of providing care and to make this career option more attractive.
- Support recruitment and retention, as well as service sustainability, across the community-based disability service sector.
- Improve occupational health and safety standards and promote better compliance with these standards.
- Provide better access to training on equipment to reduce injuries in the workplace.
- Create more specialized and interventionist services (crisis and behavioral supports) for paid caregivers to access before, during and after a crisis.
- Partner with provincial safety associations to educate frontline disability support workers about safe workplaces.
- Develop ongoing awareness and education plans across sectors.

Feeling supported: A better future for Clint

In the future, people in communities across Saskatchewan have access to disability service providers who have the competence and skills to address their unique issues. That's because the service providers now have more opportunities to receive the special training and education they need to provide high-quality service to citizens. They're also more knowledgeable, respectful, and culturally sensitive to their clients' needs.

There are more opportunities for local people to get training as education assistants and therapists. Technologies such as Skype and other innovative, cost-effective solutions are being used by communities to access trained and competent service providers.

As for Clint, he now has improved access to extensive and specialized therapy in his community. The disability programming is specific to his needs following cochlear implant surgery, and there are provisions for intensive therapies so that he can experience the full benefits of the programming.

Creating Accessible Communities

An accessible community is foundational to the inclusion of all people in society. Compared to other jurisdictions, Saskatchewan is behind in the area of accessibility. This lack of access to public buildings and facilities, information and communications, as well as transportation and housing often denies people experiencing disability the opportunity to be included in their communities. Opportunities exist to make Saskatchewan a more inclusive province by developing environment that consider broader range of functioning. Such improvements can reduce the impact of disability and provide a better citizen experience for all.

Recommendation #11

CREATING ACCESSIBLE COMMUNITIES FOR ALL: Create communities to meet the needs of all citizens.

A long-term and systematic approach to remove and prevent barriers to participation for Saskatchewan citizens experiencing disability is needed. Changes should focus on improving access to the physical environment, transportation services, information and communications systems, recreation, and culture and sports.

Sub-Recommendations

11.1 Improve access to the physical and built environment by adopting a consistent approach to accessibility standards so that everyone can be included.

11.2 Improve access to community spaces.

11.3 Increase the availability of accessible homes in Saskatchewan communities.

11.4 Improve access to accessible and safe transportation in communities.

11.5 Make public information and communication more accessible.

11.6 Give people experiencing disability more meaningful opportunities to participate in recreation, cultural, sport and leisure activities.

Dependence on others: Mark's experience today

Mark is a high school student with a vision disability. He is able to use braille and needs a cane for safe, independent travel. He has no other disability. He is competent and learns with his peers in a mainstream high school using learning materials provided by a qualified teacher of students with visual disabilities.

However, the school Mark attends has no braille signage or touch indicators at the base, landing and top of staircases. This is an accessibility challenge and a safety hazard for him. This means that if he's trying to find a classroom or other part of the school, he has to ask someone to read the signs to him or help him with the stairs. He's lost if there's no one around to help him.

Mark is frustrated because he's forced to depend on others for information, safety and accessibility. And it's particularly irritating for him because the school could easily be made accessible to someone who has a vision disability.

Where to Start:

Physical Environment:

- Accelerate the implementation of the Canadian Standards Association *Accessible Design for the Built Environment* standard.
- Support public education and development of capacity in the building trades around Universal Design[9].
- Evaluate accessibility of venues in communities with innovative technology and software.
- Partner with homebuilders, municipalities, local housing authorities and the disability community to:
  - Increase education efforts for the public and homebuilders about Universal Design and accessible housing.
  - Ensure the consumer's voice is heard in the design of accessible homes.
  - Determine present and future demand for accessible housing in the province.
- Review accessibility in health facilities. An initial step could be to encourage health care providers to make adjustable examination tables available within the health care system.

Transportation

- Increase capacity of municipal paratransit programs, allowing more people to use them and support new accessible transportation options.
- Review vehicle modification programs with a view to expanding their use based on impact of disability.
- Require municipalities to purchase low-floor buses as they replace vehicles in their conventional fleet.

Communication and Information Systems

- Develop alternate communication formats and accessibility standards for the Government of Saskatchewan and Crown corporations.
- Encourage businesses and organizations to make their information more accessible for people experiencing disability by establishing information and communication accessibility standards.

---

[9] Universal design refers to making products, transportation, communications, buildings and public spaces usable for all citizens.

Recreation, Sport, and Culture

- Promote community recreation, sport and culture opportunities for people experiencing disability.
- Partner with the Canadian Paralympic Committee to help educators promote physical activity and to encourage the inclusion of children experiencing disability in sport activities at school, alongside their able-bodied peers.
- Partner with the Ministry of Parks, Culture and Sport – who are currently identifying priorities and actions to implement the Framework for Recreation in Canada – to ensure it takes into account the inclusion of people experiencing disability.

Future Directions:

- Make Universal Design the standard for community and building design and support relevant professional development to make sure the standard is understood and incorporated into community design.
- Explore the development of elective courses on accessible/Universal Design in university and other post-secondary programs.
- Explore options to help students experiencing disability work in the field of accessibility and Universal Design.
- Incorporate accessibility requirements into procurement policies and practices for the Government of Saskatchewan.
- Encourage municipalities to update their Official Community Plans to promote greater development of accessible housing in areas close to shopping, transportation and services.
- Improve the capacity and range of transportation options to create a more reliable and responsive system.
- Adopt accessible transportation service standards based on national statistics and best practices.
- Explore alternate sources of funding for capital and operational needs of paratransit.
- Introduce periodic inspection requirements for accessible public service vehicles.
- Develop and expand partnerships between transportation providers and community stakeholders (e.g., First Nations, health regions, school divisions, municipalities, private corporations, government offices and agencies) to increase travel options within and between communities.
- Improve accessibility and safety standards for public and private transportation services.
- Review existing regulations regarding disability parking, including the design and enforcement of parking spaces.
- Continue to expand knowledge and use of accessible devices such as audio amplifiers, and text-to-audio among public services, public servants and disability service providers.

More independence: A better future for Mark

In the future, there is broader implementation of Universal Design and new building standards in Saskatchewan. A systematic approach has been followed to make sure there's improved access to physical and built environments around the province. There are touch indicators at the top and bottom of all staircases that conform to new standards. Mark, and others like him, now feel included.

These steps are significant in reducing Mark's dependence on others. Adding braille signage within and beyond the school environment ensures that he can now find his way around the school and community without relying on others to show him the way.

Becoming an Inclusive Province

In order to realize the shared vision for the Disability Strategy, specific recommendations around how to implement it have been developed. The recommended changes to the service system will require the Provincial Government to play the lead role in overseeing the Strategy's implementation. However, the collaborative relationship with the disability community and other key stakeholders, which was used to develop the Strategy, should be continued throughout its implementation.

Cultural change is also required in order to create truly inclusive communities where all people can fully participate in community life. Government will need to demonstrate strong and persistent leadership by reflecting and embedding in its own systems and processes the values and principles (Appendix A) that are the foundation of this Strategy. Leadership from every level of government, as well as effective partnerships with the private sector, the non-profit sector and communities across the province, is needed to build support and momentum to implement the Strategy. Collaboration will create greater opportunities for the meaningful inclusion of people experiencing disability at school, work and play.

Recommendation #12

BECOMING AN INCLUSIVE PROVINCE: Champion and commit the resources needed to advance a vision of Saskatchewan as an inclusive province that is welcoming, responsive, innovative and accessible so that people who experience disability can live the life they choose.

Building an inclusive province is a multifaceted and collaborative endeavour that will not only require an investment of resources, but also an investment of time. Although this is a 10-year strategy, it is truly a plan for generational change that will require annual planning, choices and implementation. Persistent leadership from Government and the continued collaboration with key partners is needed to create the change necessary for meaningful inclusion of people experiencing disability.

Sub-Recommendations

12.1 Create annual implementation plans that will guide the Strategy over the next 10 years.

12.2 Provide oversight to the implementation of the Strategy.

12.3 Collaborate with the disability community on the implementation of the Strategy.

12.4 Establish an accountability framework on the implementation of the Strategy.

12.5 Build awareness in the community regarding the experience of disability and acceptance of disability as a normal part of the human condition.

Where to start:

- Develop a Year One implementation plan for the Strategy. This plan will prioritize the "Where to Start" actions as well as begin to analyze the current environment.
  - Implementation planning will also establish a governance structure to provide oversight of the Strategy's implementation.
- Continue ongoing processes of community engagement during the implementation phase of the Strategy. Options include: citizen advisory team, public forums and joint task teams.
- Initiate over-arching actions to support inclusion of people experiencing disability:
  - Research and implement a mechanism to address systemic issues impacting the rights of people experiencing disability. Options include developing a Vulnerable Persons Commissioner or Advocate and could involve partnerships with the Provincial Ombudsman, Advocate for Children and Youth and Saskatchewan Human Rights Commission.
  - Consult with key stakeholders and partners from the public and private sectors about the development of accessibility legislation with potential standards in the areas of public spaces and buildings, information and communications, customer service, employment, transportation and service animals.
- Gain a better understanding of the existing service systems by using tools to analyze the environment (for example, through client experience mapping, current state analysis, and demographic analytics) and review best practices.
  - Review the Cognitive Disability Strategy to better understand and improve the services provided through this program.
- Have the Public Service Commission (PSC) and Crown corporations lead and champion the employment of people experiencing disability in the public sector.
- Implement an accountability and reporting plan that includes performance measures for reporting on the progress of the Disability Strategy.
- Continue a regular public dialogue on the implementation of the Disability Strategy.
- Use social media to publicly promote groups doing positive, innovative work on disability.

Future Directions:

- Develop an Accessibility Plan that guides Government's transformation to a fully accessible public service. The plan could look at public spaces and buildings, information and communications, customer service, employment and procurement.

Appendix A: Vision, Values and Principles

Below are the vision, values, and principles for the Saskatchewan Disability Strategy.[10] The vision, values and principles were validated and revised based on input from the public consultation process led by the Citizen Consultation Team. They are intended to provide the aspirational and foundational direction that will help guide policies and program changes that will transform disability services across the province.

Vision

Saskatchewan will be an inclusive province that is welcoming, responsive, innovative and accessible so that people who experience disability can live the life they choose.

This vision sets out our final destination. It speaks to a province that not only accepts but also celebrates people who experience disability. It foresees a place where people who experience disability have the same opportunity as everyone else to create their own lives.

Principles in the United Nations Convention on the Rights of Persons with Disabilities

The Disability Strategy affirms and adopts the principles in Article 3 of the United Nations *Convention on the Rights of Persons with Disabilities*. The Strategy's values and principles outlined below are consistent with, and informed by, the Convention. They will help guide implementation of the Strategy.

Values

Saskatchewan people:

- Respect the dignity and worth of all people.
- Shape and determine our own lives, including the right to take risks and explore opportunities as part of our learning, growth and development.
- Value our interdependence and are happy to help each other develop our abilities and realize our dreams.
- Work together to develop and nurture the talents and skills of all people so we can contribute to the growth of the economy and vitality of our communities.
- Enjoy the full benefits of citizenship by having our rights and freedoms respected and protected, and appreciate our opportunity to meet our responsibilities as participating and contributing citizens.
- Respect and accommodate the diversity of all people.
- Work together to create safe and secure communities so we can all live lives free from violence≈and abuse.

---

[10] Several documents were considered in the development of the vision, values, and principles. These documents include the United Nations *Convention on the Rights of Persons with Disabilities*, the World Health Organization's *International Classification of Functioning, Disability and Health*, the *Canadian Charter of Rights and Freedoms*, and *The Saskatchewan Human Rights Code*.

Principles

An inclusive province:

- Designs and delivers disability programs and services from a person-centred perspective, focusing on the needs and wishes of individuals.
- Supports opportunities for individuals and families to choose and control the services and programs they wish.
- Recognizes that inclusion may vary according to an individual's needs and context. Inclusion is not a "one-size-fits-all" approach. The nature of the disability, as well as the environment in which it is experienced, needs to be considered for meaningful inclusion.
- Actively involves all who experience disability. People experiencing disability are involved in the development, design, delivery and evaluation of the policies, programs and services that affect them.
- Develops programs and services as well as physical and social environments that recognize disability is a normal part of the human condition.[11]
- Promotes equality and creates communities where people who experience disability can enjoy their inherent right to live on an equal basis with everyone else.
- Effectively accommodates a range of disability impacts within existing services, workplaces, schools and communities.
- Reduces the impacts of disability by creating inclusive environments that make participation possible for people who experience disability.
- Promotes and incorporates Universal Design.[12] Designing buildings, products and environments that are accessible to everyone enables participation in all aspects of society.
- Promotes and nurtures continuous innovation in services and environments.
- Invests in disability supports and services so all people can be included and have an equal opportunity to experience a quality of life that reflects their personal aspirations and wishes.
- Establishes reciprocal accountability. Individuals receiving programs and services, as well as those providing programs and services, are open and accountable for outcomes.
- Invests resources wisely to ensure quality services and improved outcomes can be sustained.

---

[11] Bickenbach, Jerome. (Spring 2003). *Disability and Equality*, Journal of Law and Equality, 2(1). p. 11

[12] Universal design refers to making products, transportation, communications, buildings and public spaces usable for all citizens.

Appendix B: Definition of Disability

Arriving at a single definition of disability is a challenge given the differences among people who experience disability and the variety of impacts disability has on daily living. In addition, a single definition may not be wanted for disability programs and services meant for specific support needs.

It is suggested that a two-level approach to defining disability be developed: *Level 1*) a standard description of disability to guide the development of definitions and *Level 2*) definitions of disability specifically for programs and services (purpose-specific definitions) that are based on this description. This approach will provide a consistent way, within and outside Government, to define disability for programs, services and legislation.

Level 1: Standard Description of Disability

The World Health Organization's (WHO) 2001 *International Classification of Functioning, Disability and Health* (ICF) provides the basis for a standard description of disability. The ICF is the most widely accepted tool used to describe and define functioning and disability. The WHO's approach moves beyond the medical model of disability to acknowledge the multi-dimensional, interactional, and contextual nature of disability. This interactional model of disability is also reflected in the Preamble and Article 1 of the United Nations *Convention on the Rights of Persons with Disabilities*.

For the Disability Strategy, and in an effort to develop a standard way to describe and understand disability that can be used across Saskatchewan programs, disability is a limitation in functioning that is the result of a dynamic interaction between an individual's health condition(s) and personal and environmental factors.[13]

- **Limitation in functioning** refers to difficulties or problems in functioning that can take place at three levels:
  1) Body/Mind – Limitations in bodily/mental functions (e.g., seeing, hearing and memory)
  2) Individual – Difficulties performing tasks and activities (e.g., walking, dressing and household tasks)
  3) Society – Difficulties participating in society (e.g., education, employment, recreation)
- **Health condition(s)** refers to physical, psychiatric, cognitive, neurological, intellectual or sensory conditions.
- **Personal factors** refer to aspects of an individual's background and life, including gender, orientation, ethnicity, age, fitness, lifestyle, coping skills, education, employment and economic status.

---

[13] This definition is adapted from Measuring Health and Disability in Europe (MHADIE), Definition of Disability (2006).

- **Environmental factors** refer to physical and social settings that affect the world in which an individual lives. These include human-made environments (e.g., buildings, community spaces, products and technology), natural environments (climate and geography), supports and services, attitudes and relationships.

This framework has three main themes: the multi-dimensional nature of disability, recognition of the universality of disability, and the shift in the focus from cause to impact.

Multi-dimensional nature of disability – recognizes disability is complex and that variations in people's experiences of disability depend not only upon their specific health conditions, but also considers how personal and environmental factors interact with each other.

Universality of disability – recognizes that every person can experience a health problem and thereby experience some degree of disability. This approach recognizes disability as a common (universal) human experience. Similarly, disability can be a transitory condition, since people can move into and out of a state of disability depending upon their personal situation.

Impact-based – shifts the focus from cause and individual dysfunction to describing the levels of functioning and disability people with health conditions experience during interaction with their social and physical environments. By considering the whole person, this approach improves understanding of the many ways people experience disability, the impacts on daily living and the capacity for participation and inclusion.

Impact is viewed within the three dimensions of functioning and disability: the body/mind health conditions; the individual activity limitations; and societal participation restrictions. The nature and severity of health conditions, the availability of support, as well as the influence of personal and environmental factors, also result in differences in the impact of disability.

Level 2: Program-Specific Definitions Based on Impact of Disability

It is proposed that existing programs and initiatives will, to the greatest extent possible, support and be guided by the standard description of disability as presented in *Level 1*, recognizing that disability will be defined differently using an impact of disability approach and based on the specific purposes of a program or legislation.

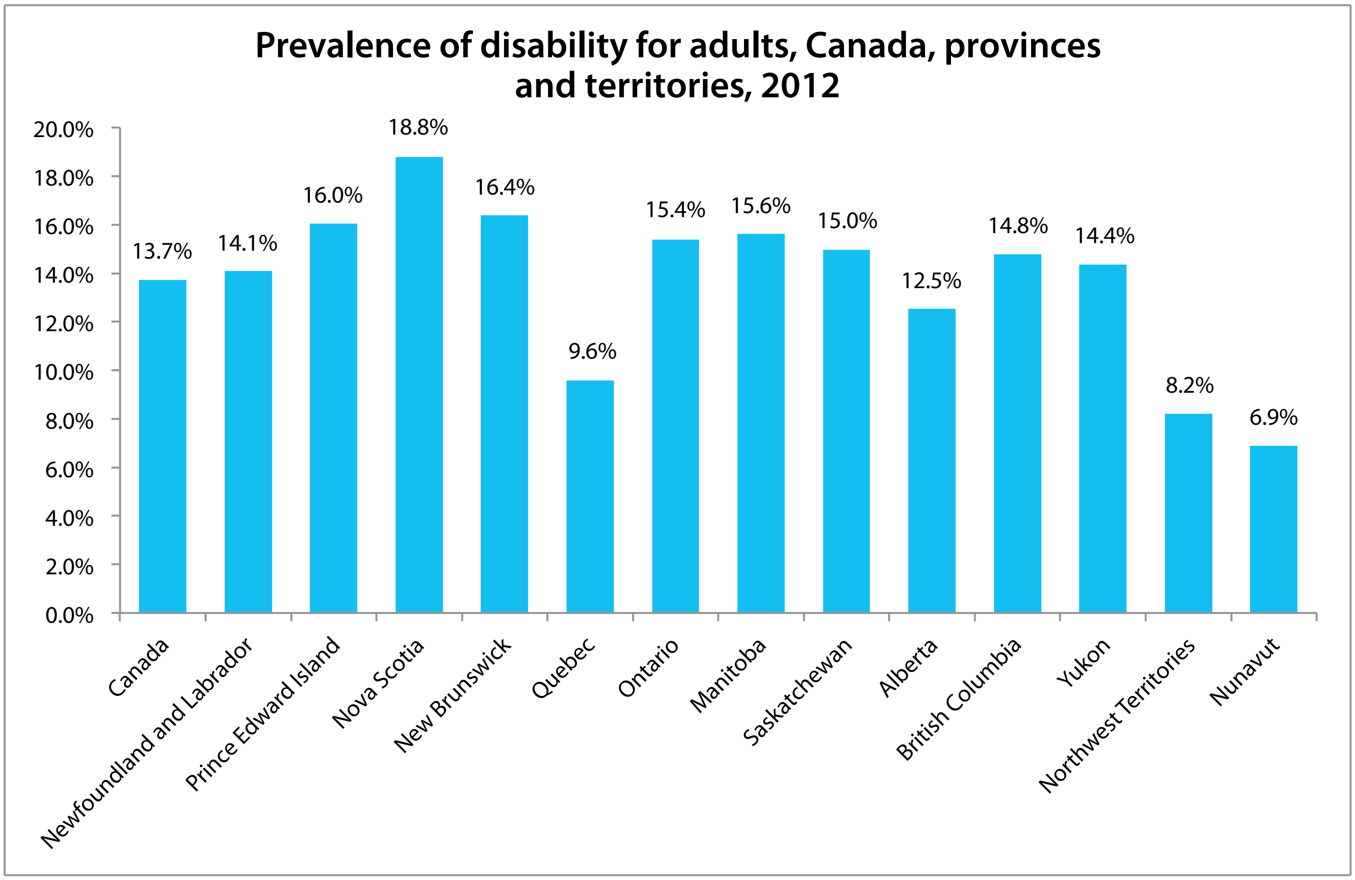
Ideally, the new approach to defining disability will lead to a more integrated and consistent delivery of disability-related programs and services. It will also change the way eligibility is determined for programs and services. Accordingly, definitions of disability, eligibility criteria, and/or measures of functioning will be reviewed and developed based upon the proposed model.

An impact-based approach to eligibility does not assess medical cause. Impact of disability can be measured by describing limits in functioning and the type and amount of support that is needed to reduce and accommodate these limitations. Assessment focuses on identifying the level of impact of the disability and support needed to lessen the impact.

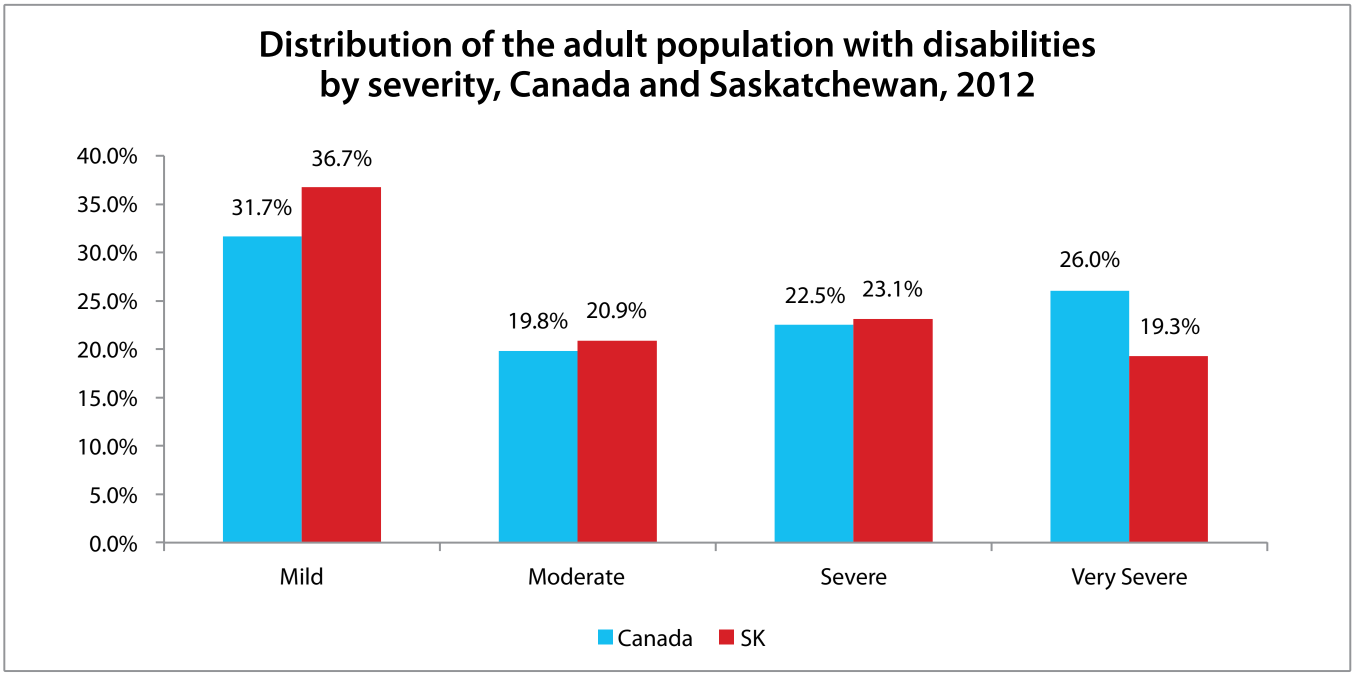
Appendix C: Profile of People Experiencing Disabilities

Adults

- **In Saskatchewan in 2012** (Canadian Survey on Disability, 2012):
  - 116,640 of people aged 15 and over with disabilities were identified. This translates to a disability rate of 15.0 per cent, the sixth highest rate of disability in Canada. Nationally, the disability rate was 13.7 per cent.
  - The working-age population, people aged 15-64 years of age, had a rate of disability of 10.6 per cent (68,790) compared to 10.1 per cent nationally.
  - Seniors, aged 65 years and older, had a rate of disability of 36.9 per cent (47,850) compared to 33.2 per cent nationally.



- This disability population included 63,150 females (54.1 per cent) and 53,490 males (45.9 per cent). The rate of disability among Saskatchewan adult females was 16.0 per cent, which is higher than the rate for males at 13.9 per cent.
- 57.6 per cent of people aged 15 and over with disabilities had mild or moderate disabilities, while 42.4 per cent indicated severe or very severe disabilities. Nationally, 51.5 per cent of adults with disabilities had mild or moderate disabilities, while 48.5 per cent had severe or very severe disabilities.



Distribution of the adult population with disabilities by severity, Canada and Saskatchewan, 2012

- Among adults with disabilities, the most common types of disability were pain (71.4 per cent), flexibility (53.1 per cent), mobility (50.1 per cent), hearing (24.4 per cent), mental/psychological (22.8 per cent), and dexterity (21.8 per cent). Other disabilities (ranked highest to lowest) included sight, memory, learning, and developmental.

Children

- **In Saskatchewan in 2006**[14] (Participation and Activity Limitation Survey 2006):
  - 6,550 children 0-14 years of age had a disability. This translates to a rate of 3.9 per cent in Saskatchewan, compared to 3.7 per cent nationally.
  - For children with disabilities 5-14 years of age, 61.4 per cent had mild to moderate disabilities, while 38.6 per cent had severe to very severe disabilities.[15]
  - For children 5-14 years of age, the most common types of disabilities reported were chronic health conditions, learning disabilities, speech disabilities, developmental disabilities, and psychological disabilities.
- The estimated number of children with disabilities 0-14 years of age for 2014 in Saskatchewan is approximately 8,000, including approximately 1,300 children 0-4 years of age and 6,700 children 5-14 years of age.[16]

---

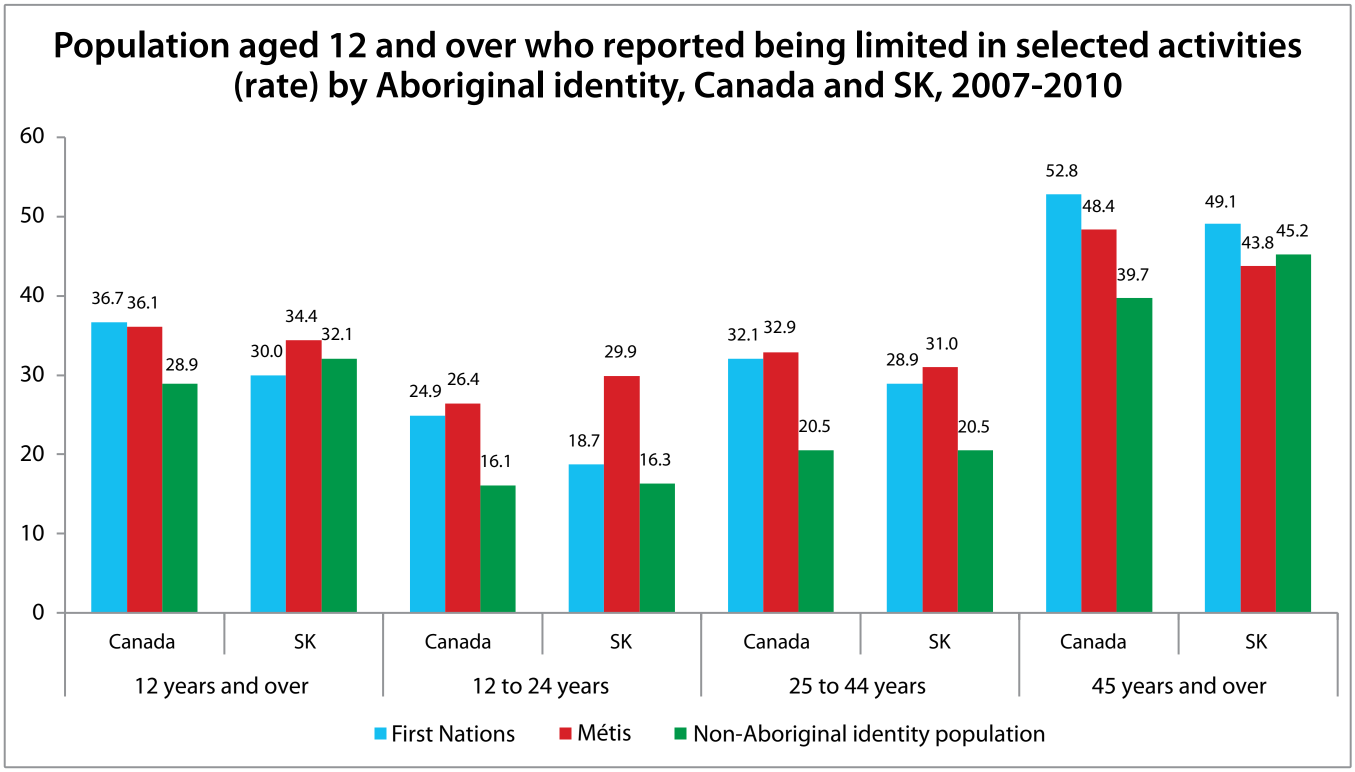
[14] 2006 data is the most recent survey data on children with disabilities.

[15] Data on severity for children under 5 years of age for Saskatchewan is not available.

[16] The estimates are based on prevalence of disability for children by age groups from PALS 2006 and Statistics Canada population estimates. Assumption: prevalence of disability for children has not changed significantly since 2006.

Aboriginal People

- **In Saskatchewan in 2006** (Aboriginal Peoples Survey 2006):
    - 49 per cent of persons of Aboriginal identity living off-reserve in Saskatchewan reported having one or more longer lasting health conditions.
    - Among children and youth (aged 6-14 years of age) of Aboriginal identity living off-reserve in Saskatchewan, 18 per cent reported one or more activity limitations.
- In the following chart, in Saskatchewan in 2007-2010 (Canadian Community Health Survey, 2007-2010):

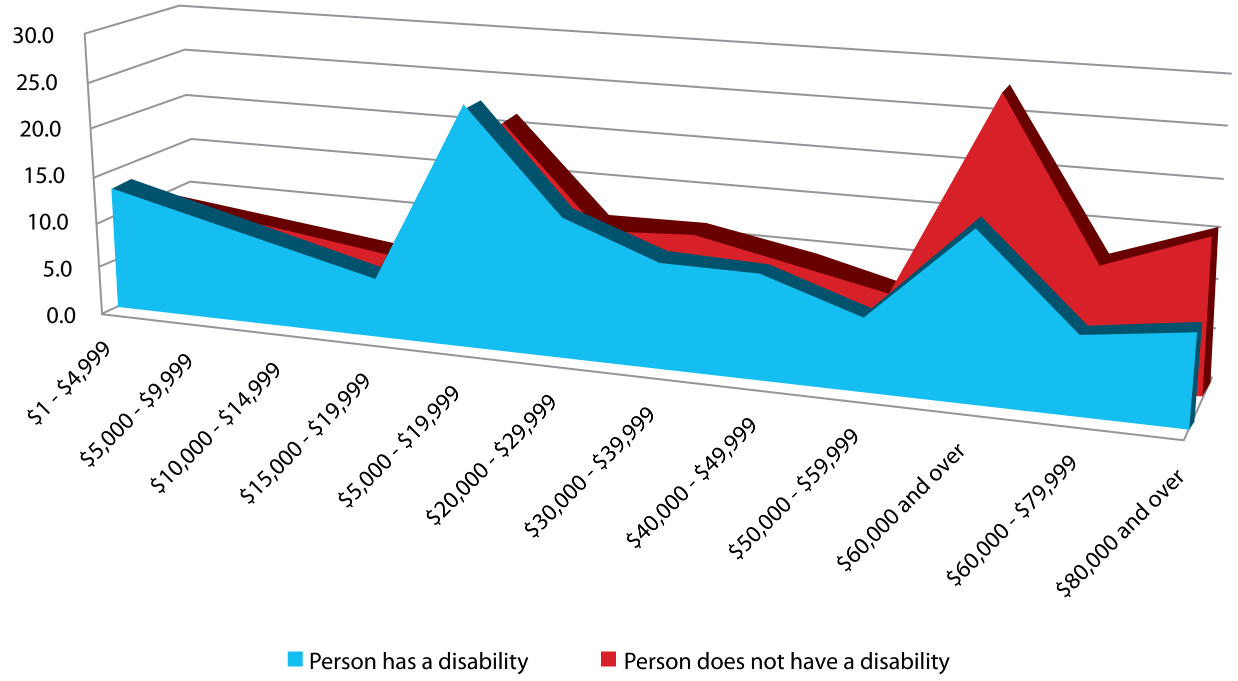


Notes: Participation and activity limitation – included population aged 12 and over who reported being limited in selected activities (home, school, work and other activities) because of a physical condition, mental condition or health problem which has lasted or is expected to last 6 months or longer. The term "First Nations" refers to the First Nations population living off-reserve.

Employment

- **In Saskatchewan in 2012** (Canadian Survey on Disability, 2012):
  - 65.1 per cent of working-age (15-64) people with disabilities participated in the labour force, compared to 83.1 per cent of persons without disabilities. Nationally, the participation rate for working-age people with disabilities was 53.6 per cent, compared to 79.3 per cent for people without disabilities.
  - Unemployment rate for working-age (15-64) people with disabilities was 6.9 per cent while for people without disabilities it was 5.4 per cent; nationally the unemployment rate was 11.8 per cent for working-age people with disabilities and 7.1 per cent for people without disabilities.
  - 76.5 per cent of people with mild disabilities, 67.1 per cent of people with moderate disabilities, 50.0 per cent of people with severe disabilities and 34.4 per cent of people with very severe disabilities were employed at the time of the survey.
- **In Saskatchewan in 2012** (Canadian Income Survey, 2012):
  - The average earnings of people with disabilities age 16-64 in Saskatchewan were $34,800 – about 24 per cent lower than the $45,600 for people without disabilities. Nationally, average earnings of people with disabilities were $31,000 as opposed to $44,000 for people without disabilities.
  - To further illustrate that people with disabilities are more likely to have lower earnings than people without disabilities, the following chart shows the distribution of earnings of people with and without disabilities in Saskatchewan.

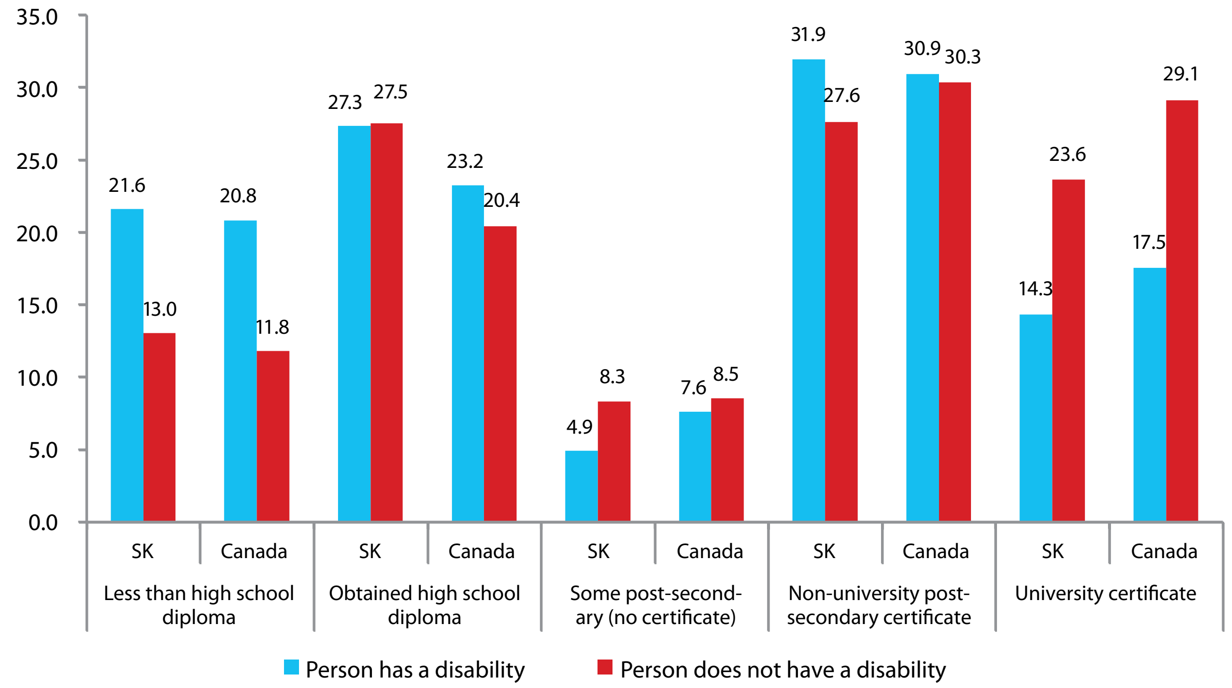
Distribution of earnings of individuals age 16 and older by disability status, 2012



Education

- **In Saskatchewan in 2012** (Canadian Income Survey, 2012):
  - While 23.6 per cent of Saskatchewan residents aged 16-64 years without disabilities had a university certificate, the figure among those with disabilities was 14.3 per cent. Nationally, the percentage of people with disabilities with a university certificate was 17.5 per cent, compared to 29.1 per cent for people without disabilities.
  - Among people with disabilities aged 16-64 years in Saskatchewan, 21.6 per cent had less than a high school diploma, compared with 13.0 per cent of those without disabilities. Nationally, 20.8 per cent of working-age people with disabilities had less than a high school diploma, compared with 11.8 per cent of those without disabilities.

Highest level of education of individuals by disability status, age groups 16-64, Canada and Saskatchewan, 2012



Appendix D: Your Citizen Consultation Team

A huge thank you goes out to the following people who made up the 15-member Citizen Consultation Team (CCT). Their enthusiasm, dedication and tireless efforts throughout the consultation process allowed more than 1,600 people to have a voice – and the opportunity to share their stories, experiences and ideas. Their collective wisdom, experience and advice made this report possible, and will have an impact on generations to come.

Amy Alsop: Regina

Merv Bender: Prince Albert

Larry Carlson: Regina

Roger Carver: Saskatoon

Dawn Desautels: Shaunavon

Carole Eaton: Regina

Lynette Griffin: Regina

Charmaine Landrie: Lloydminster

Andrea Lavallee: Meadow Lake

Michael Lavis: Regina

Marie Lindenschmidt: Dundurn

Laurie McSymytz: Wynyard

Eugene Paquin: Saskatoon

Shaun Soonias: Saskatoon

Ian Wilkinson: Saskatoon

Visit www.saskatchewan.ca/disabilitystrategy to view a brief biography of each of the members of the CCT.

This report is available in alternative formats upon request.
Please contact the Office of Disability Issues to make a request:

Office of Disability Issues

12th Floor,
1920 Broad Street
Regina, SK S4P 3V6

Toll Free: 1-877-915-7468

Hearing Impaired Only TTY: 306-787-7283

Fax: 306-798-4450

Email: disabilitystrategy@gov.sk.ca