People with Disabilities

Participants in the Conversation on Health were concerned about the availability and accessibility of services for people with disabilities in British Columbia. The importance of addressing issues related to people with disabilities, including housing, social determinants, and children and families, were highlighted in many discussions and submissions. Here is a selection of what British Columbians had to say on the subject of people with disabilities.

Access to Services and Programs

The majority of participants cited the cost of acquiring help as the primary barrier to accessing services for people with disabilities. Available services are fragmented and limited, with little investment in patient discharge planning or follow-up care. This results in daily activity needs not being met. Other participants expressed concerns that people with disabilities often do not know how or where to find support and that they may be easily deterred.

Participants encourage the Government to work with existing non-profit agencies and civic groups to create more opportunities for people with disabilities through wellness and employment programs. Participants also recommended that the health care system be made more organized and user-friendly, so people with disabilities would be able to access the support they are entitled to. Many agreed there needs to be more adult daycare facilities, including psychiatric daycare, respite care and convalescence support for patients.

…we actually pull the agencies, community… and government together into some physical sites where someone would come in looking for aides and devices and you’d have a navigator function… that actually links you to the appropriate programs where you get the funding and supports, and have an OT [occupational therapist] on site, have a housing advocate on site, have a MEIA [Ministry of Employment and Income Assistance] income support person on site…to provide that linkage and accessibility. So there’s a big interface with the primary care system because they’re doing the assessments, and they may be actually doing the diagnosis and so on, but it’s actually outside of that in terms of delivery.

-Focus Workshop Primary Health Care, Vancouver
Social Determinants

British Columbians spoke out regarding the difficulties people with disabilities face, and put an emphasis on the importance of educating health professionals and the public. Many agreed that disabled people are marginalised, which negatively affects their physical, mental and emotional health. The overall quality of life on long-term disability is low, which serves to further isolate people with disabilities.

Housing and Residential Facilities

Participants feel that British Columbia needs affordable housing, assisted living and complex care facilities in all communities. Many participants expressed concern that disability benefits for the mentally ill are not sufficient to pay for housing and food, and that the Government does not recognize the higher costs of living in different areas of the province. They suggested having group homes with twenty-four hour care for people with disabilities.

Families and Children

Many participants expressed concern that there are inadequate facilities and therapist supports for younger disabled people. Participants asked for more information and resources for families with children who require rehabilitation for a disability, as well as early intervention and assessment programs for Foetal Alcohol Spectrum Disorders (FASD), Attention Deficit Disorder (ADD), autism and other mental illnesses. Some expressed concern that families of disabled children receive minimal funding from the Government for treatment programs, and that the treatment costs are primarily shouldered by the families. For many British Columbians, this means that parents caring for disabled children need increased support and assistance. Participants further recommended that the Government and community provide assistance to people with disabilities and children at risk.

*Early treatment…will help us to recover many children and will save millions of tax dollars in the long-term. It will also drastically improve quality of life for our autistic children, their families and our society!*

- Regional Public Forum Open Space, Surrey
Conclusion

Participants discussed the need for increased acceptance of people with disabilities within the health care system and an increase in core funding for special needs. The majority of participants who explored these issues agreed that people with disabilities should be asked what they want and need from the health care system. Through that consultation, a new system could be built to support people with disabilities.
People with Disabilities

This chapter includes the following topics:

Access to Services and Programs
Social Determinants
Housing
Families and Children

Related Electronic Written Submissions

Submission to the Conversation on Health
Submitted by the BC Cancer Agency

Related Chapters

Many of the topics discussed by participants in the Conversation on Health overlap; additional feedback related to this theme may be found in other chapters including: Residential Care; Home Care or Support and Community Care.

Access to Services and Programs

Comments and Concerns

Availability and Effectiveness of Services
Funding and Costs of Services

- Comments on the availability and effectiveness of services:
  - People do not have equal access even when we have a universal health care program. Persons with disabilities often do not know how or where to find support, and they may get deterred easily.
  - Too many services for the disabled have been eliminated.
  - When there is a shortage of health care professionals, people with complex needs are less likely to be accepted on a doctor’s patient load.
・ The creation of Health Services for Community Living, a province-wide government initiative that provides community nursing and rehabilitation services to adults with intellectual and developmental disabilities has been a successful program.

・ Available services are fragmented and limited. There is a lack of coordination, follow-up care and discharge planning.

・ There is a lack of services for persons who are deaf or hard of hearing, and for persons for whom English is a second language.

・ Victoria has nothing to accommodate the spinal cord injury quadriplegic.

・ There are annual transit passes available for those with disabilities.

・ When a person with a disability is given a tool to address their problem but not given instruction or support, that tool becomes ineffective.

・ When people who are deaf receive chemotherapy they should have the option to receive it intravenously on other parts of their body because their hands and arms are their means of communication.

・ The health care system uses a disease model to deal with disabilities.

・ Coordinating transfer of care needs to be more effective and efficient.

・ Many disabled persons are dependant on the transit system and do not qualify for HandyDART.

・ Seniors or persons with disabilities often do not feel they are an equal partner with their health professional.

・ The criteria for disability benefits does not include going through detoxification, depression or short-term illness.

• Comments on the funding and costs of services:

・ Canadians with disabilities cite the cost of getting help as their primary barrier to accessing services.

・ British Columbia spends 4.3 billion dollars on persons with disabilities. The province offers a lot of services, but we do not access those services properly.

・ There is a lack of financial commitment to comprehensive support and services, such as HandyDART.

・ The Canada Pension Plan is not a full solution for disability funding.

・ Welfare and disability rates are too low.
Ideas and Suggestions

Availability and Effectiveness of Services
Funding and Costs of Services

• Ideas about the availability and effectiveness of services
  • The health care system needs to be more accepting of people with disabilities.
  • There needs to be more care available for the physically and mentally disabled. A new system should be built to develop supports for persons with disabilities.
  • Persons with disabilities should be asked for their input on what they want and need from the healthcare system.
  • Professionals need to listen to what people with disabilities require rather than just telling them what they need.
  • The health care system needs to be more organized and more user-friendly, so persons with disabilities are able to access the support they are entitled to.
  • Long-term disability patients should only have to apply once for government programs, but remain responsible to notify government of any changes.
  • There needs to be physiotherapy recovery centres all over British Columbia.
  • We need to create more opportunities for disabled to participate in wellness programs.
  • There are some pilot interpretation projects at some hospitals; however, these should be increased.
  • There should be a modified care facility created for those in their forties and fifties and unable to function in society.
  • There should be centres where the various agencies, community services and government come together into locations where someone could find assistance. There could be a navigator, whose function would be to link appropriate programs, funding and supports. There could also be a housing advocate and a Ministry of Employment and Income Assistance income support person on-site to provide linkage and accessibility.
  • There needs to be more adult daycare facilities, including psychiatric daycare, respite care and convalescence support for patients.
  • Better transportation programs are needed for those with disabilities.
  • Livestock therapy for disabled individuals should be readily available.
• Physicians should not be able to opt out because a patient is on assistance.
• Health care programs should put pressure on city councils to enforce handicapped parking regulations.

• Ideas about the funding and costs of services
  • It is paramount that there is special funding for special needs.
  • The government should work together with existing non-profit agencies and civic groups (for example, Vancouver Access and Inclusion Advisory Centre) to address disabilities.
  • The government should provide core funding to social service agencies and increase contact levels to allow them to keep high quality counsellors and administrators.

**Outstanding Questions**

• Do we provide the right service for the person at the right time?

**Social Determinants**

**Comments and Concerns**

• People are speaking out more about the problems that people with disabilities face.
• Quality of life on long-term disability is low.
• Living a healthy lifestyle is difficult, especially for the physically disabled.
• A social network for those with disabilities is very important.
• To a certain degree disabled persons are marginalised, which then affects physical, mental and emotional health.
• Education of the public and professionals is important for people with disabilities to obtain respect.
• Not all disabled people are the same. There are many that are mobile, with limitations and/or assistive devices.
- We have over three hundred thousand disabled British Columbians and the vast majority of them would love to work. There may be little difference in the education levels between disabled people and the general population. Yet, there are thousands of people in the province who are unable to get a job.

- Most small employers will not consider hiring a person with a disability.

- The provincial Ministry of Employment and Income Assistance bureaucracy creates marginalisation and isolation for the disabled.

- Many people don't want to admit that they've got a problem, and there is a certain amount of pride with that. They may be afraid to ask for help with daily tasks, such as shopping for household items.

**Ideas and Suggestions**

- Vulnerable populations need to be considered if there is going to be equity.

- Enable people with disabilities to participate in environmental movements and get exercise by adapting sporting equipment to their needs and abilities. For example, a customised bicycle.

- Permit disabled persons to use their annual transit pass in order to get other discounts, since their income is less than seniors' income.

**Housing**

**Comments and Concerns**

- Disability benefits for the mentally ill are not sufficient for housing and food, and do not recognize the higher cost of living different areas of the province.

- There is too little affordable housing.

- There is a need for assisted living and complex care facilities in all communities.

- Affordable housing is especially important for families that have one or more member with a disability. Without supportive families, the costs to the government for people with disabilities to live independently would rise drastically.
Ideas and Suggestions

• We should have group homes with twenty-four hour care for the paraplegic, quadriplegic and other persons with disabilities.

Families and Children

Comments and Concerns

• Some families are able to finance treatment (at personal sacrifice), but many cannot. This imposes a terrible financial burden on families to ensure their children have the treatment that is necessary for them to live productive lives. These children may be destined for life-long institutional care with additional costs and a low quality of life.

• Families of autistic children get minimal funding from government for treatment programs. Children who have early intensive treatment have a nearly fifty percent chance of recovery. Those who go untreated may end up in life-long institutional care, which is very costly.

• Autism is a medical and developmental disorder and treatment costs should not be shouldered by families.

• Applied Behaviour Analysis therapy for Autism does work.

• Families are able to choose care providers that are right for their children.

• There is a lack of facilities for younger population of disabled persons.

• There is an inadequate number of occupational and physiotherapist supports for children and adults with disabilities.

• There is accountability and parents are able to be directly involved in their children’s programs.

• Parents require support and assistance when caring for special needs children.
Ideas and Suggestions

- There needs to be early intervention programs for Foetal Alcohol Spectrum Disorders, Attention Deficit Disorder and other mental illnesses.

- Early treatment (with full funding, like is provided in Alberta) will help us to assist many children and will save millions of tax dollars in the long-term. It will also drastically improve quality of life for our autistic children, their families and our society.

- There needs to be better assessments for children who have Foetal Alcohol Syndrome and ongoing assessments for those children when they become adults. Supports should be made available.

- Integrate and increase occupational and physiotherapist supports for children (early and middle years) and adults with developmental disabilities.

- There needs to be more information and resources available for families with children who need rehabilitation for a disability.

- Give support to families who are caring for a severely handicapped person.

- The government and community should provide assistance to people with disabilities and children at risk.

- De-institutionalize people with developmental disabilities.