

**Presented to
The Sub-Committee on the Status of Persons
with Disabilities**

February 12, 2003

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Some facts about CPP-Disability Benefit

CPP Disability is the largest long-term disability program in Canada.

More than 283,000 people receive a Canada Pension Plan disability benefit, and 97,000 of their children receive a children's benefit.

*In 2001, the program paid \$2.7 billion in benefits.
(Source Staying In Touch, Nov. 2001)*

Introduction

Who and What is CCD?

The Council of Canadians with Disabilities (CCD) is the national cross disability advocacy organization of people with disabilities. A cross disability organization is open to the participation of people with all types of disabilities. CCD's members include:

- Alberta Committee of Citizens with Disabilities,
- British Columbia Coalition of People with Disabilities,
- Canadian Association of the Deaf,
- Confédération des Organismes de Personnes Handicapées du Québec,
- Coalition of Persons with Disabilities--Newfoundland and Labrador,
- DisAbled Women's Network Canada,
- Manitoba League for Persons with Disabilities,
- Nova Scotia League for Equal Opportunities,
- National Educational Association of Disabled Students,
- National Federation of the Blind Advocates for Equality,
- National Network for Mental Health,
- People First of Canada,
- Prince Edward Island Council of the Disabled,
- Saskatchewan Voice of People with Disabilities,
- Thalidomide Victims Association of Canada and
- Persons United for Self-Help Northwest Ontario Inc.

CCD speaks out to improve the lives of Canadians with disabilities. Our motto, A VOICE OF OUR OWN, clearly states our purpose—to speak out on issues concerning the disability community. We are a grassroots, self-help movement seeking equality and self-determination over our own lives.

CCD's achievements include, but are not restricted to the following:

- Worked to have protection for people with disabilities included in the *Canadian Human Rights Act* and the *Charter of Rights and Freedoms*.
- Alerted Canadians with disabilities during the constitutional debate that we were excluded from the Canada clause.
- Advocated for and defended Employment Equity legislation.
- Worked for a *National Transportation Act*, which prohibits undue obstacles to the mobility of persons with disabilities.
- Struggled for and gained reform of the electoral system to ensure accessible voting practices.
- Worked to ensure re-instatement of the Court Challenges Program so that equality seekers can pursue their rights through litigation if all else fails.

The IL Paradigm/Social Model—A New Way of Looking at Disability

Before looking at any specific issue, it is helpful to first of all share CCD's world view of how society functions, the role of people with disabilities within society and the interaction between society's structures and people with disabilities.

In the Seventies, the consumer movement developed a new paradigm for analyzing disability issues—the Independent Living paradigm/Social Model. It moves us away from the medical model and medically based solutions to disability issues. The IL paradigm encourages an emphasis on:

- Accommodations required by individuals with disabilities to live in society
- The removal of barriers, creation of access through accommodation and universal design, promotion of health and wellness
- Provision of disability supports
- In the delivery of service it promotes the use of peers, generic service providers, consumer information services.
- Self-determination, self-identification.

CCD encourages Government decision makers to work from the assumptions of the IL paradigm when developing public policy addressing disability issues.

The IL Paradigm/Social Model—A New Way of Looking at Disability

	Old/Medical Model Paradigm	Social/IL Model Paradigm
Disability Definition	Limits imposed by medical condition.	Accommodations required by an individual to participate in society.
Strategy to Address Disability	Fix the individual.	Remove barriers, create access through accommodation and universal design.
Method to Address Disability	Provide medical and rehabilitation services.	Provide disability supports.
Source of Intervention	Professional, medical and rehabilitation service providers.	Peers, generic service providers, consumer information services.
Entitlements	Eligibility for benefits based on severity of impairments.	Eligibility for accommodation defined as a human right/disability right.
Role of Person with a Disability	Patient/client.	Citizen, consumer, decision maker, empowered peer supporter/advocate.
Domain of Disability	Medical problem.	A socio-environmental issue involving access, accommodations, and equality.

Poverty and People with Disabilities

CCD's National Council of Representatives established a Social Policy Working Group composed of individuals with particular expertise in public policy impacting on poverty, income support and labor market participation of people with disabilities. This Working Group oversees the development of CCD's positions on social policy, including its position on CPP.

People with disabilities are over-represented among Canada's poor. Dr. Gail Fawcett in "Living with Disability in Canada: An Economic Portrait," states, "Persons with disabilities are more likely to be poorer than those without disabilities, and there are a number of factors which affect the poverty rates of persons with disabilities. Not surprisingly, most of the factors that reduce the likelihood of persons with disabilities participating in the labor force also increase the likelihood of them living in poverty." (Gail Fawcett, "Living with Disability in Canada," HRDC, 1996, p. 130.) Consequently, Canada's social programs are very important to persons with disabilities. In any reform process, CCD makes it clear to decision makers that people with disabilities must not be adversely impacted by reform.

CCD's Concerns with Regard to Piecemeal Reform

CCD's believes that in order for people with disabilities to achieve full citizenship, Canada needs a comprehensive disability strategy that will address barriers in Canada's important systems. The Federal Provincial Territorial Ministers of Social Services have identified—income support, employment and disability supports as the three building blocks of full citizenship. CCD's long-term objective is to see positive comprehensive national strategic reform in all public policy areas impacting on persons with disabilities. (CCD, Community Definition of a National Strategy.) We have known for a long time that piecemeal reform has only limited impact. Nevertheless, incremental, rather than revolutionary, reform is what we have seen most often in Canada; therefore, in addition to its long-term objectives, CCD has developed recommendations for programmatic reform. In this brief, CCD will address its concerns with regard to the Canada Pension Plan Disability Benefits.

Disability Income System

CCD has been concerned about the disability income system since the 1970s. In 1983, CCD sponsored an open national forum, which addressed income security. At that conference, Canadians with disabilities focused their attention on all the disability income support programs in which people with disabilities participate.

Income support for people with disabilities can come from a number of different programs and sources—both private and public--and respond to a variety of life circumstances:

- Canada Pension Plan Disability Benefits,
- Veteran's Allowances,
- Worker's Compensation,
- Employment Insurance (Sickness Benefits),
- Provincial Social Assistance,
- Automobile Accident Insurance,
- Long Term Disability Insurance,
- Personal Injury Settlements.

At its 1983 conference, CCD developed a resolution calling for the abolition of all these programs and their replacement with a comprehensive disability insurance program that would provide coverage to all Canadians. CCD advanced this recommendation in an effort to lessen the disparities among various program recipients and ensure that all recipients had access to adequate incomes for a dignified, typical Canadian lifestyle. (CCD, The Edmonton Declaration, 1983.)

The Edmonton Declaration reads as follows:

Edmonton Declaration: Comprehensive Income Insurance Plan

1. The delegates assembled at the Open National Conference on Income Security and Employment Opportunities: "An Economic Responsibility" endorse the principles contained in Professor Ison's presentation, which calls for the establishment of a comprehensive income insurance program for Canadians with disabilities.

Essential Elements of a Comprehensive Income Insurance Program Are:

- 1.2 An adequate base-level available regardless of the cause of the disabling condition and without scrutiny;
- 1.3 Income replacement for individuals who become disabled while in the workforce;
- 1.4 Income derived from the "base-level" and "income replacement" components is to be considered taxable;
- 1.5 A non-taxable component paid directly to the individual to cover the additional costs associated with the disabling condition;

The Program Be Based on the Following Principles:

2. Proposed program be based on universal coverage regardless of cause of disability;
 - 2.1 The system must be perceived to be, an insurance system, not a welfare or charity system;
 - 2.2 Insurance against loss of previous income or purchasing power;
 - 2.3 Adequate income for those with no previous income. (The above two should be considered as taxable income);
 - 2.4 Offsetting costs related to disability;
 - 2.5 The plan will cover partial or total disability;
 - 2.6 Consumer input would be an integral part of the establishment and operation of the system;
 - 2.7 The system would be administered by one agency of government, with local administration and local jurisdiction;
 - 2.8 The administration of the benefits should respect the dignity, the privacy, the human rights and the civil liberties and the self-determination of disabled persons, particularly in respect to the lifestyle of the individual;
 - 2.9 The cost should be met by diverting funds from existing systems, such as motor vehicle insurance premiums, Workers Compensation premiums, group insurance premiums, etc. The balance would be raised by surcharge;
 - 2.10 The premiums would be paid either by employer or employee and should be based on a percentage of income with no top ceiling;
3. That action be taken by CCD to push for the implementation of a comprehensive income insurance plan;

4. That CCD and its Provincial Affiliates take immediate action to meet with the respective Ministers of Social Services to inform them of the resolutions of this conference pertaining to income security and to seek input into their deliberations;
5. Although it is important that immediate action be initiated, there is also a need for further study by CCD and its Provincial Organizations regarding a comprehensive income insurance plan and also to undertake an active educational process within the movement concerning such a plan. The study could focus on various issues including a floor level, income transition from one plan to the other, and ensuring that services will be available to be purchased;
6. If the federal/provincial proposals regarding a comprehensive income insurance plan prove unsatisfactory, CCD should advocate for Provincial Royal Commissions;
7. CCD should approach Revenue Canada and advocate for expansion of the definition of disability as it affects the eligibility for the disability deduction under the Income Tax Act. At present the deduction is available only to persons who are totally blind or confined to bed or wheelchair for a substantial part of each day;
8. CCD should approach employers, trade unions and other relevant groups and enlist their support for a comprehensive income insurance plan;
9. The plan should be presented to the public as a universal protection for all people.

What Other People Have Been Recommending

CCD would like to remind everyone of the income security recommendations made by the Federal Task Force on Disability Issues:

34. The Government of Canada should, in conjunction with the provinces, initiate a process to work towards putting in place a coherent, comprehensive and sustainable approach to providing income to people with disabilities. The process should include serious considerations of ways to move towards a disability insurance program that covers all Canadians.

35. The Government of Canada should recognize its responsibility to ensure that an adequate disability-income support system is in place for people with disabilities by:

a) Including this recognition of its responsibility in the terms of reference of any negotiations with the provinces that involve issues related to income support; and by

b) Using a transparent process that involves people with disabilities.

36. The Government of Canada should:

a) In the longer term, work with the relevant partners in the public and the private sectors, and with people with disabilities to reconfigure the existing set of disability-income programs, combining earnings replacement and income-support functions, and taking into account the tax system and the need to find ways to compensate individuals for the extra cost of disability.

b) In its discussions with the provinces regarding the Canada Health and Social Transfer, establish the importance of removing the link between income and access to supports and services for persons with disabilities, and introduce the idea of a comprehensive disability-supports program with pan-Canadian objectives, principles and values, to provide disability-related supports and services, independent from income programs.

c) Work with the provinces to determine how to rationalize and maximize the effectiveness of income-support and earnings replacement systems such as the Canada Pension Plan, Employment Insurance, Worker's Compensation, social assistance and other disability income programs, so that they enable participation in the labor force and ensure basic safety and security.

39. In the short term, Human Resources Development Canada should implement measures to ensure that the assessment and application procedures of the Canada Pension Plan make it possible to identify and quickly refer clients who would be better served by active measures offered under Employment Insurance.

40. In the medium term the Canada Pension Plan should be integrated more closely with other earnings-replacement programs to increase information sharing and reduce administrative duplication and costs. This would involve exploring the links to Employment Insurance, Worker's Compensation and private insurers."

CCD, and other organizations in the disability community, were supportive of the recommendations made by the Liberal Task Force on Disability Issues.

The Canada Pension Plan

Any presentation regarding CPP-Disability must begin with an examination of the Canada Pension Plan (CPP), as a whole.

The Government of Canada created the Canada Pension Plan (CPP), in 1965 when it passed *An Act to Establish a Comprehensive Program of Old Age Pensions and Supplementary Benefits*. As a result of the Act, CPP came into being in 1966, providing (1) retirement income and (2) financial assistance for workers with disabilities (and their children) and for the families of deceased contributors. The Income Security Programs Branch of Human Resources Development Canada (HRDC) administers CPP. It is important from the consumer perspective to note that the Program pre-dates the IL paradigm.

Global society is being pushed by a variety of forces to become more market driven. The Canada Pension Plan has not been immune to these forces. This has led to calls from a number of different quarters to reform the CPP in radical ways. For example, there have been calls to move away from a public plan to a system of private savings accounts.

CPP's Guiding Principles

As a result of these pressures, governments have been reviewing the functioning of the Canada Pension Plan. In October 1996, governments agreed to the following guiding principles for the Canada Pension Plan:

1. The CPP is a key pillar of Canada's retirement income system that is worth saving.
2. The CPP is an earnings-related program. Its fundamental role is to help replace earnings upon retirement, disability or death of a spouse—not to redistribute income. The income redistribution role is the responsibility of the income tax system, the Old Age Security/Guaranteed Income Supplement/Seniors Benefits, and other income-tested programs paid from general tax revenue.
3. The solutions to the CPP's problems must be fair across generations and between men and women.
4. The CPP must be affordable and sustainable for future generations. This requires fuller funding and a contribution rate no higher than the already legislated future of 10.1 per cent. In deciding how quickly to move to this rate, governments must take economic and fiscal impacts into account.
5. Governments must tighten administration as the first step toward controlling costs.

6. Disability and survivor benefits are important features of the CPP. However, they must be designed and administered in a way that does not jeopardize the security of retirement pensions.

7. Any further benefit improvements must be fully funded.

8. CPP funds must be invested in the best interest of plan members, and maintain a proper balance between returns and investment risk. Governance structures must be created to ensure sound fund management.

9. Governments must monitor changing economic, demographic and other circumstances that can affect the CPP, and act to respond to these changing conditions. Annually, Ministers of Finance should provide Canadians with appropriate information so they can judge for themselves that the integrity and security of the CPP is being protected. (HRDC, Securing The Canada Pension Plan Agreement on Proposed Changes to the CPP, February 1997, Annex II p. 24.)

It is very negative and stereotypical for a set of principles such as these to cast the CPP-Disability pension as a potential hazard to the stability of the CPP program. In addition, it is a shortcoming that the principles only reference gender issues, and not the issues of other equality seekers, such as people with disabilities, when discussing fairness.

CCD acknowledges the importance of the Canada Pension Plan, which has some valuable and significant features. Sherri Torjman in "The Canada Pension Plan Disability Benefit" (Caledon Institute 2002) describes these features in the following terms:

- **Universal Coverage:** It is the only earnings-based pension available to most Canadian women and the majority of Canada men. 39.1% of women workers and 41.9% of male workers belonged to a company pension plan in 1998.
- **Defined Benefits—**It guarantees a fixed percentage of employment earnings averaged over a person's working life.
- **Indexation—**The CPP is fully indexed to inflation, benefit keeping pace with the cost of living.
- **Portability—**Canadians can move from job to job, maintaining the value of their CPP contribution.
- **Drop Out Provisions—**This provision makes adjustments for periods when people are out of the labor market.

- **Survivor Benefits**—There are benefits for the surviving spouse and children of a worker who passes away.

Monica Townson in *Pensions Under Attack* describes the advantages of the CPP in the following manner, “The CPP is not a personal savings plan like a mutual fund or an investment portfolio. It is a social insurance program that pools the risks of providing for the loss of income that individuals face when they retire or become disabled. An investment portfolio or mutual fund can’t provide the additional benefits available through CPP, such as inflation-indexed pensions, disability coverage, survivors benefits, and benefits for the dependent children of disabled or deceased contributors.” (p. 59.)

CCD supports the continuance of the Canada Pension Plan as a public system. CCD does not support any action that would move the Canada Pension Plan away from being a public system. For example, there have been some bodies, such as the Fraser Institute and the C. D. Howe Institute, recommending that CPP be replaced or augmented by a system of individualized savings accounts that would allow people to opt out of CPP. This type of approach is not supported by CCD because it would move Canada away from our current approach to social security which is based upon a collective responsibility for those who are in need. As is pointed out in “Pensions Under Attack,”

“Among other things, the Lazar Task Force said, ‘A person who saves and insures himself adequately can find that unanticipated inflation, depression or a poor investment climate seriously erodes the value of his private savings and insurance.’ When governments require individuals to participate in public pension programs, some of these difficulties are eliminated and others are reduced. Public pension programs pool the risks inherent in unforeseen future events, lessening the risk faced by any single individual.”

People with disabilities would be at a disadvantage in a privatized pension saving system. With CPP, contributors are guaranteed a basic earnings related pension. With a system of mandatory individual accounts, the amount of the eventual pension would depend on the circumstances of each individual throughout their working life and in retirement. Due to systemic discrimination, people with disabilities tend to fare less well in the labor market than people without disabilities.

Chile has adopted the mandatory private savings account approach. There are serious concerns about the system in Chile: 1. the high cost, 2. the low coverage 3. the large number of vulnerable workers who are excluded from the scheme (i.e. it has been estimated that one third of the work force is not covered.), 4. the inadequate benefit levels, 5. systemic biases against women. (Townson, p. 81.) Disability benefits are paid by insurance companies that are contracted with by the Chilean plan. Low income workers are disadvantaged because they cannot afford to contribute the mandatory percentage of their incomes.

CCD also opposes recommendations which suggest that CPP should be subject to means testing, as has been recommended by the Association of Canadian Pension Management. (Monica Townson, *Pensions Under Attack What's Behind the Push to Privatize Public Pensions*, Canadian Center for Policy Alternatives and James Lorimer and Company Limited Publishers Ottawa, 2001 pg). Townson continues that, "The ACPM wants to redefine poverty, using a much more restrictive definition to determine who would qualify for social benefits."

CPP-Disability Benefit

CCD policy upholds the principle that reform should not make people with disabilities worse off than they were prior to the reform taking place. The rationale for this is that people with disabilities are among the most disadvantaged of all Canada, thus it is inequitable to make our community bear the brunt of cutbacks.

There were a number of factors behind cutbacks to CPP. In the Nineties in Canada alarm bells went off regarding the expansion of the CPP-Disability case load. This increase was due in part to: (1) Provincial Governments assisting people with disabilities make CPP-Disability claims in order to move off Provincial Income Security Programs; (2) changes in eligibility requirements brought about by legislators and adjudicators; (3) an international climate of concern about pension policy, led in part by the World Bank.

The minimum objective of CCD is to see a roll back of the regressive reforms that took place in CPP-Disability during the Nineties.

The 1998 Changes in Summary Form

	Pre 1998	1998 Changes
Eligibility for disability benefits	Must work and contribute in 2 of last 3 or 5 of last 10 years.	Must work and contribute in 4 of last 6 years.
Retirement pensions for disability beneficiaries	Based on year's maximum pensionable earnings (YMPE) when recipient turns 65, then indexed to prices.	Based on YMPE at time of disablement within subsequent price indexing.
Combined survivor disability benefits	Ceiling equal to maximum retirement pension plus larger of two flat rate components.	Ceiling is one maximum disability pension.

In its material for election 2000, "Our Fair Share—CCD Election Challenge to Federal Parties" CCD stated,

“CCD calls upon all Federal political parties to make a commitment to reverse the decisions made in the last three years to restrict eligibility for CPP. Furthermore, there needs to be a commitment to removing the concept of unemployable from the CPP eligibility criteria, so that people with disabilities have the option to work part-time and supplement their pension income up to a certain ceiling, which should be established through consultations with the representative organizations of people with disabilities. There also needs to be developed a method to achieve rapid re-instatement to full benefits for those whose conditions change.”

The 1996 Report of the Auditor General describes CPP in the following terms, “The Canada Pension Plan was created in 1966 as a mandatory social insurance program to provide some measure of protection to Canadian workers and their families from loss of earnings resulting from retirement or death, as well as from serious and prolonged disability. CPP Disability provides, on average, about half of recipients’ incomes; this share is partly due to the fact that some other income providers reduce their amounts of their benefits by the amount of CPP Disability benefits. This makes the Plan a first payer in most situations.”

Public Policy Goals of CPP-Disability

In summary the public policy goals of the CPP-Disability benefit are:

1. To provide some income protection to workers who become disabled and thereby supplementing private insurance, personal savings and other programs.
2. To provide a Children’s Benefit to the children of CPP-D beneficiaries, who are attending an educational institution.
3. To assist some recipients to return to work.
4. To administer the program fairly.
5. To be sustainable.

Benefit Levels

CCD policy on income support advocates that disability income insurance programs should provide an adequate base level income for consumers.

Benefit level is always an important issue in discussions of earnings replacement programs. Fairness and adequacy are the concerns for consumers. A concern for governments that administer income replacement programs is that the benefit is not more attractive than paid work. Employers and employers’ associations have the same concern. Terrence Ison points out “There is a conviction among employers’ organizations that rates of compensation equivalent to 100 percent of lost earnings would create a disincentive to return to work.”

CPP-Disability recipients receive a low income. The average monthly benefit in 2002 was \$737.21 for men and \$625.15 for women. It must, of course, be recognized that during the life of the Program there has been an increase in the benefit level. In 1987, the value of the disability benefit was increased, the monthly flat rate portion increased from \$91.06 in 1986 to \$233.38.

While there has been an improvement in the benefit level over time, it has never been a generous program, leaving some recipients in poor circumstances. In 1994, the Committee on Disability Issues of the then existing Canada Pension Plan Advisory Board presented its report to the Minister of Human Resources Development the Hon. Lloyd Axworthy. This report advised the Minister not to restrict eligibility nor reduce pension levels.

The Committee on Disability Issues said:

“Canadians with disabilities are generally poor. A 1986 survey found that CPP disability benefit recipients (probably not the poorest of the disabled) had incomes only 79% of the national average, and 46% had incomes below Statistics Canada low income cut-offs. 1991 survey figures indicated that 60% of Canadians with disabilities had annual incomes below Statistics Canada Low Income Cut-Offs.

For CPP disability recipients, CPP benefits were their single most important source of income accounting for 27.9% of their total income. The 1986 survey found that 36% of the CPP disability benefits simply reduced benefits from other sources, an indication of the interaction of the CPP and other parts of the system.”

The situation has not changed. A study, called ***Living with a Disability in Canada: An Economic Portrait*** by Dr. Gail Fawcett, which was sponsored by HRDC, found that almost 28% of CPP/QPP disability pensioners were poor. She also found that 10% of Canadian adults with disabilities (under 65) received CPP/QPP. This shows that CPP disability pensions are desperately needed.

In 2000, the average CPP for women with disabilities was \$625.15 compared to \$709.10 for men. The difference is due to the fact that women's earnings are lower than men's earnings. This fact affects the earnings-related component of the benefit. Maintaining an adequate flat rate amount is crucial for women because it helps to compensate, to a limited extent, for the gender differences in the earnings-related portions of the benefit.

The study “Evaluation of the Canada Pension Plan (Disability Component) Final Report” provides the following information on CPP-Disability pensioners' satisfaction with benefit levels.

“To further assess income adequacy, the evaluation examined the perceptions of beneficiaries responding to Statistics Canada's 1995

CPPD Beneficiaries Survey. That survey provided respondent ratings of the adequacy of beneficiaries' family income and personal income in relation to meeting their needs and those of their family.

Generally, those participating in the survey reported that the adequacy of family income decreased after the individual became a CPPD beneficiary. For example, 44% of beneficiaries rated their family income as adequate to more-than-adequate after their disability, as compared to 92% of beneficiaries who rated their family income as adequate to more-than-adequate prior to their disability.

The rated adequacy of personal income decreased as well after the beneficiaries were disabled. For example, 36% of beneficiaries rated their personal income as adequate to more-than-adequate after the onset of their disability, as compared to 89% of beneficiaries who rated their personal income as adequate to more-than-adequate prior to their disablement.

Considering the beneficiaries' family size, living area (urban/rural), and family income, the beneficiaries were categorized as living above or below the Statistics Canada definition of Low Income Cut-Off Line. Based on respondents' self-reported data, it was estimated that slightly over half of the beneficiaries (58%) reported living above the Low Income Cut-Off Line while 42% were living below the Low Income Cut-Off Line. (Evaluation of the Canada Pension Plan (Disability Component) Final Report Evaluation and Data Development Strategic Policy Human Resources Development Canada September 1996 SP-AH009E-09-96 p.16-17).

The concern for consumers with regard to benefit levels is adequacy and fairness. Let us look at fairness for a moment. An important issue is whether the benefit is intended to replace current or future income. All income replacement systems use a formula for determining benefits. One problem with these formulas is that they do not take into consideration the possibility of improvement in an individual's situation. There is no good reason that the wage loss of some one who is permanently disabled at 22 for example should be a ceiling for his or her income forever.

Canada is not at the head of the pack when it comes to providing replacement incomes for workers who have left the labor market due to disability. The study "Evaluation of the Canada Pension Plan (Disability Component) Final Report (1996)" provided the following comparison:

Minimum and Maximum Yearly Disability Pension Amounts as a Percentage of Average Industrial Wage, Selected Countries Local Currencies

Country	Average Industrial Wage	Minimum Yearly Pension	% of average industrial Wage	Maximum Yearly Pension	% of average Industrial wage
Canada	31,697	3,748	12%	9,754	31%
Australia	30,924	n/a	n/a	8,115	26%
The Netherlands	54,258	18,160	33%	52,252	96%
New Zealand	30,772	n/a	n/a	8,634	28%
Sweden	173,900	67,424	39%	166,524	96%
United Kingdom	14,113	n/a	N/a	3,416	24%
United States	25,179	none	0%	14,736	59%

Source: Evaluation of the Canada Pension Plan (Disability Component) Final Report Evaluation and Data Development Strategic Policy Human Resources Development Canada September 1996 SP-AH009E-09-96).

Qualifying for CPP Disability Benefits

The CPP provides disability benefits to all those who meet the Plan's requirements. Unlike some private insurance plans people with disabilities are not excluded from the Disability Benefits provisions of the CPP program because of the pre-existence of a disabling condition.

As a social insurance program, the Canada Pension Plan makes benefits contingent upon:

- A record of contribution [A variety of changes have been made to this requirement over the life of the Program.] and
- The occurrence of a disability, which meets the criteria established by the Program.

Working Canadians pay into CPP between the ages of 18 and 70. This is called the contributory period. Today, in order to qualify for CPP Disability benefits, contributions must have been made in four of the last six years. This is called the **recency requirement**.

The Program has established its own definition of disability. CPP defines disability as being a condition that is prolonged and severe, making a person “incapable

of regularly pursuing any substantially gainful occupation.” A fuller discussion of the CPP definition of disability and the contribution requirements is provided below.

CCD has concerns with regard to both the contribution requirements and the way in which CPP defines disability.

How CPP Defines Disability

The current definition of disability used by the Canada Pension Plan requires applicants to have a disability that is both severe and prolonged. As defined by CPP a severe disability is one that makes a person incapable of regularly pursuing **any** substantially gainful occupation. This is different from private insurance and workers compensation programs which initially focus on an individual's inability to do his or her own job.

For CPP, a prolonged disability is one which is usually longer than 12 months, continued and indefinite or likely to result in death. Essentially, to be eligible for CPP a person must be completely out of the workforce and incapable of performing any work that would provide sufficient income for basic support. **CCD's 1983 policy resolution on disability income insurance called for a program that would “cover partial or total disability”.**

The CPP does not recognize varying degrees of capacity. A person must be in or out of the labor market.

Another problem that exists is that there are an increasing number of disabilities. Canadians are being disabled by stress, certain mental health conditions, environmental sensitivities, fibromyalgia, etc. The administrative guidelines at CPP call for the assessment of disability on “objective” criteria and for some disabilities there is not really an agreed upon set of “objective” criteria for assessment. Take for example chronic fatigue. A diagnosis of chronic fatigue is not based upon X-rays or blood tests. In some instances instead of using x-rays and blood test information, consumers have made their case by documenting their own accounts of how their disability has affected them and supported this with the concurring opinions of their doctors. Consumers in numerous consultations have made the point to government officials—“just what does disabled look like”. This issue is of particular concern to women with disabilities. Women tend to have a higher incidence of claims in the area of mental health concerns and stress related conditions—disabilities where there are highly differing opinions regarding “objective criteria”.

In 2001, the Federal Court raised concerns about how CPP frames disability in the Villani case. Sherri Torjman provides an account of the Villani case:

“In the Villani case, the judge concluded that a review of the Pension Appeals Boards' disability decisions, particularly the severity requirement in the CPP definition of disability, has been applied not

only inconsistently but also unfairly. The judge noted that recent decisions of the Pensions Appeals Board represent a 'decidedly ungenerous version of the statutory definition of a 'severe' disability. These ungenerous decisions have had the effect of 'subverting the benevolent purposes of the legislation.'" (p; 35)

Torjman continues,

"An analysis of the actual language of the statute suggests a strong legislative intent to apply the severity requirement in a 'real world' context. According to the Federal Court decision: 'Requiring that an applicant be incapable regularly of pursuing any substantially gainful occupation is quite different from requiring that an applicant be incapable at all times of pursuing any conceivable occupation.' In the judge's opinion, Parliament viewed as 'severe' any disability, which renders an applicant incapable of pursuing with consistent frequency any truly remunerative occupation. The judge concluded: 'In my view, it follows from this that the hypothetical occupations which a decision-maker must consider cannot be divorced from the particular circumstances of the applicant, such as age, education level, language proficiency and past work and life experience.'" (p.35)

The CPP-Disability program seeks to ensure that all recipients continue to have disabilities that are severe and prolonged. In 1993, CPP-Disability began to increase its focus on reassessment. Catherine Drummond describes the program in the following way:

"In 1993, CPP began to develop a computerized, rules-based re-assessment system to regularly monitor continuing eligibility. Prior to this time, reassessment had not been a big focus, since the expectation had been that most beneficiaries would continue to receive disability benefits until they were old enough to retire. ...

One of the biggest challenges in monitoring the disability benefit caseload is deciding which clients should have priority for reassessment. One of the functions of the rules-based reassessment system is to identify and prioritize clients most likely to have regained the capacity to work. This could be based on medical condition at outset or other information. For example, the system receives electronic information from income tax files and clients with earnings are flagged by the system for early review.

Since the start of the project in May 1993 to October 1997, we have reassessed 35,577 clients using the new system. 10,073 benefits were ceased, resulting in annual savings of \$93 million with an additional \$41.5 million in overpayments identified.

...We now have 290,000 clients, ten thousand less clients than we had in February 1996. The Program's Chief Actuary has projected that these administrative changes will reduce disability expenditures by 10% by 2030." (Catherine Drummond, Director General, Programs Income Security Programs, HRDC, "Refocusing the Disability Provisions of the Canada Pension Plan 1998).

In 1995, tighter adjudication guidelines were developed. As Catherine Drummond indicates, "They refocused the adjudication squarely on medical evidence, with personal factors and particularly socio-economic factors considerably reduced in importance in decision-making."

Since the administrative changes of 1995, CCD has heard from more and more consumers that they have been disqualified. Consumers tell us that the "jobs" that they are supposed to be able to do may exist in a bureaucrat's manual but they do not exist in Canadian communities in 2003.

One of the problems with CPP that has been identified by CCD is that the CPP does not recognize that some consumers have the capacity to work part time and want to work part time. At many consumer conferences, there have been calls made for a system of partial benefits that would allow consumers to work part time and top up their incomes with CPP-Disability Benefits. The following resolution was made at a CCD conference, "Be it resolved that CCD, in concert with other interested organizations and individuals initiate a study of disability insurance provided by government and private companies so as to suggest better ways of offering incentives to a return to work without a total loss of benefits as well as providing the consumer with sliding scale benefits..."

It must be noted that CPP has begun to address CPP's all or nothing orientation. Catherine Drummond provides an introduction to changes introduced by CPP. She states,

"The biggest barrier identified to taking a more flexible approach with our disability clients is the "all or nothing" definition of disability in the Canada Pension Plan legislation, whereby an applicant has to prove that the medical condition is severe and prolonged, preventing him or her from regularly pursuing any substantially gainful occupation. Up to this time, the interpretation had been that any evidence of capacity to work, for example, doing volunteer work or going to school full-time, would be grounds for ceasing benefits. During the government's overall review of Social Security in 1994-95, the disability community raised their concern that this practice led to behaviors, which reinforced dependency rather than providing a platform for return to active involvement in work and community.

As a result, four work incentives were identified and brought into effect in early 1996. Volunteer work or enrolment in full-time studies would no longer be grounds for ceasing benefits; a three-month trial work period was introduced to enable an individual to try working without the immediate fear of losing benefits; and a fast-track re-application process was introduced for those who had returned to work and then had a recurrence of their medical condition which again prevented them from working." (Catherine Drummond, Director General Programs, Income Security Programs, HRDC, "Refocusing The Disability Provisions of the Canada Pension Plan.")"

While a step in the right direction, this change does not accomplish what consumers have called for.

Contributory Requirements

The Disability Benefit's contribution requirements have not remained static over the life of the Program. The Disability Benefit was originally developed with restrictive eligibility requirements because it was believed that the benefit could be quite costly to the Program. When the Program was begun it was assumed that once an applicant was accepted into the Disability Benefits program, they would remain there until they became eligible for retirement benefits. This assumption was due in part to negative stereotypes about disability inherent in the medical model, which was the dominant paradigm when the Program was created.

In the 80s, the eligibility requirements for the CPP-Disability Benefit were relaxed somewhat. Contributory requirements were relaxed in 1986 to allow workers who had contributed to CPP for two out of the past three years or 5 of the last 10 years to qualify for benefits. The 1986 reform was introduced in response to a recommendation by the House of Commons Committee on the Disabled and the Handicapped that fewer people be excluded from coverage under CPP Disability. Prior to 1986 contributions were required in 5 of the last 10 years and for at least one third of the total years in their contributory period.

Also, in the late 1980s, the Pension Appeal Board rulings began to take socio-economic considerations into account in the adjudication of claims. There was recognition of a broader range of conditions as being disabling. Then in 1992 additional reforms were made which further relaxed the contributory requirements. The result of these changes were that more people became recipients of CPP-Disability. In the mid-90s there was a negative reaction to these less restrictive eligibility criteria.

As has been stated, in the 90s there was a great deal of pressure exerted upon governments to reform public pension programs. The 90s was a decade of belt tightening in Canada. Governments sought to bring down their deficits. In this climate, the pendulum began to swing towards more restrictive eligibility for the

CPP-Disability program. There were public criticisms of the CPP system and also of CPP – Disability. Indeed, CPP-Disability was scapegoated as being a threat to the continued viability of the CPP.

What follows is a sampling of some of the positions taken. Monica Townson in "Pensions Under Attack" shares some comments from Paul Martin:

"In Canada, Finance Minister Paul Martin raised the alarm in his 1995 budget, when he kicked off a round of proposed cuts to public pension programs telling Canadians that, if nothing were done, spending on Old Age and the Guaranteed Income Supplement, along with the Canada/Quebec Pension Plan, would jump from 5.3% of GDP in 1993 to more than 8% in 2030. But he neglected to mention that this would still be less than what OECD countries were spending for public pensions in 1991, when, according to the World Bank, the cost of public pensions in these countries averaged 9.2" (Monica Townson, Pensions Under Attack What's Behind the Push to Privatize Public Pensions, Canadian Center for Policy Alternatives and James Lorimer and Company Limited Publishers Ottawa, 2001 pg. 5-6.)

An example of the scapegoating of CPP-Disability can be seen in the comments of actuary Robert Brown a Simon Fraser University Press Release,

"Another key area he [Brown] wants to target is the explosion in payout of disability benefits, which have leapt from 13 percent of all benefits paid in the mid '80s to 19 percent of all benefits in the mid '90s. It's not that there are more disabled people, Brown says, it's just that Ottawa softened its criteria over the years. At that rate of expenditure the pension pot runs dry in 19 years." (Don't Panic, Pension Expert Says, There's Still Time, Simon Fraser News Release 16 September 1996.)

Catherine Drummond, then the Director General of Income Security Programs HRDC, described the situation from an internal perspective in the following terms:

"...during a period when the number of disability beneficiaries almost doubled, the average age of these beneficiaries fell, from 55 years of age in the early 90's, to 52 years of age today. This is a worrisome trend, both from the point of view of the increased costs of paying benefits for a longer period and even more when one considers the loss of productivity and workforce participation of an increasing number of younger workers." ("Refocusing the Disability Provisions of the Canada Pension Plan.")

CPP responded to the public criticisms, which were being lobbied at it. Measures were taken at Canada Pension Plan to address the increased number of recipients. These are described below by Catherine Drummond:

"The response to all the pressures on the CPP program reflect both "carrot" and "stick" reactions. In an attempt to wrench back costs, tighter adjudication guidelines were developed in 1995. They refocused the adjudication squarely on medical evidence, with personal factors and particularly, socio-economic factors, considerably reduced in the decision-making. Secondly, legislative changes this year mean that to qualify for a benefit, people must have a more recent and longer workforce attachment than previously. In addition, the program developed a sophisticated computerized reassessment system and reassessments have been steadily increasing. On the side of more active measures, a successful rehabilitation pilot has resulted in rehabilitation becoming a permanent part of the program and a number of work incentives were introduced to make it easier for beneficiaries to attempt a return to work."

To summarize, administrative cutbacks began with changes to the disability determination process in 1995 and in 1998, Bill C-2 imposed new rules which continued the cutbacks. In 1998 legislative changes required applicants to have a more recent and longer workforce attachment than previously. Contributions must have been made in four of the last six years. Prior to 1998, applicants only required contributions in "2 of the last 3 contributory years or 5 of the last 10 contributory years."

CPP Contributory Requirements And Drop Out Provisions

People have to leave the labor market for a variety of reasons. Some people leave the labor market to raise their children. Some people leave to advance their education. Others leave because they had a health problem or disability. In some cases the situation improves and the individual returns to work. The CPP program has developed formulas, called the drop out provisions, to address these situations. The drop out provisions disregard periods of no earnings or very low earnings. People with severe and prolonged disabilities who have had to interrupt their work histories can apply the drop out provisions of the CPP program in order to qualify for benefits. Consumers with episodic or progressive disabilities have found that these provisions do not treat them fairly.

CCD believes that the CPP's drop out provisions do not treat people with progressive or episodic disabilities fairly. CCD was granted intervener status in the Granovsky Case at the Supreme Court, which addressed drop out provisions.

Mr. Granovsky, who applied for the CPP Disability Benefit, was found to be ineligible, because he did not meet the recency requirement. Mr. Granovsky was unable to apply the drop out provisions because his disability did not meet the Act's requirements of severe and prolonged. For persons with progressive or episodic disabilities, while their disabilities are severe, they are not "prolonged" as defined by the Act. For persons in this position, there are no exceptions made

to the recency of contribution requirements. This is unlike what exists for those who have a “severe” and “prolonged” disability, where there are “drop-out” provisions when the contributory period does not include any months when the person was experiencing a “severe” and “prolonged” disability and was collecting a disability pension. CCD argued the CPP fails to meet the equality demands of the **Charter** because it does not accommodate persons with progressive or episodic disabilities. CCD called for a remedy that would see the drop out provisions include people with progressive or episodic disabilities. Unfortunately, the Court did not accept CCD's analysis. **CCD continues to advance the position which it presented in the Granovsky case.**

The Sixteenth CPP Actuarial Report, prepared by the Federal Chief Actuary Bernard Dussault, projected a total cumulative reduction in CPP spending on disability pensions by the year 2005 of over \$1 billion, while cutbacks in retirement pensions and other benefits for the same period is less than \$0.7 billion. Since the disability program is only about one-fifth of the total CPP, this means that it has been cut much more than any other component of the CPP.

When analyzing public policy it is important to consider who benefits from a change and who is harmed by a change in practice? The 1998 changes impacted upon young people in their first three years of employment and other new comers to the labor market who won't qualify. Neither will those who have had a difficult time becoming part of the labor market due to high unemployment rates in their part of the country, care giving responsibilities, barriers in the labor market such as racism, ableism, sexism. Of particular concern are those who have tried to keep working despite the onset of a disability like—multiple sclerosis, psychiatric disability, cancer, or any of the other disabilities that have ups and downs that may cause a person to be in and out of the labor market.

Since 1995, many consumers have been contacting CCD because they are experiencing problems claiming their CPP Disability Pensions. While they were in the labor market, they assumed that because they were paying into a social insurance program—the CPP program—they would have protection if they lost their income due to disability. Unfortunately many of the people who contact CCD have found out that although they have made contributions they do not qualify.

CCD actively opposed the 1998 revisions to the CPP Disability program. At that time CCD stated, “CCD does not support cuts in CPP to anyone. The pensions and other benefits are modest enough at present. CCD particularly objects to cuts targeted at the community of persons with disabilities because our community already faces severe disadvantage. When CCD participated in the Social Security Reform Process led by the Hon. Lloyd Axworthy CCD proposed the principle people with disabilities should not be made any worse off by any reform initiative. The rationale for this is that people with disability as a group in Canada are already worse off than most other Canadians due to the historic disadvantage of persons with disabilities.”

Rehabilitation

In 1990, CCP began to address vocational rehabilitation in a limited way and in 1996 the CPP-Disability established a Vocational Rehabilitation Program. CPP has begun to work with some recipients toward re-entry into the workforce. Sherri Torjman describes the program in the following way:

The vocational rehabilitation plan may focus upon educational upgrading, new skills training, on-the-job training, or workplace and job accommodation. Vocational services are delivered through a network of rehabilitation contractors located throughout the country. As a general guideline, the financial limit on each rehabilitation plan should not exceed the annual average disability benefit.

The rehabilitation plan should include a job search period that typically lasts about three months. It may be extended for an additional three months if the individual has not yet found employment. Total job search should not exceed one year.

If the rehabilitation effort is unsuccessful, the individual may remain on the CPP disability benefit. Beneficiaries also are permitted to participate in volunteer opportunities and academic courses; these "self-guided measures are not considered vocational rehabilitation."

The policy guideline requires the CPP beneficiaries deemed to have employment potential comply with "reasonable vocational rehabilitation measures." A CPP beneficiary is considered to have ceased to be disabled upon evidence of a capacity to return to regular, gainful employment or failure to comply with reasonable vocational rehabilitation measures without "good cause." (p. 18-19)

A Caution

While there are positive aspects about CPP's work on rehabilitation, a cautionary note must be sounded as well; because there is an inherent danger in an approach that includes employability expectations. Rehabilitation can become a de facto workfare program. It would be entirely inappropriate to build a workfare type of expectation –ie. no participation no pay—into any disability income program.

CCD has taken a policy position against workfare.

CCD has taken the following policy position on rehabilitation:

Whereas the disabled consumer is seldom involved in the development of his/her rehabilitation plan; and

Whereas the disabled consumer should be directly involved in the development and review of his or her rehabilitation plan;

BE IT RESOLVED that CCD strongly advocate Federal Legislation providing that any service agency supplying rehabilitation services, which require federal funds, VRDP, etc. either directly or on a Federal/Provincial cost-shared basis, be required to develop an individually written rehabilitation plan in consultation with the consumer, and in the event of a dispute there be an appeal to an independent third party. Each plan shall incorporate definite time limits with clearly defined objectives and specific review methods and an appeal mechanism. (R 5.80.4)

Disability/Retirement Interface

As long as they meet the disability definition, CPP disability beneficiaries continue to receive the benefit until age 65, unless they experience recovery from disability. At age 65, the disability benefit is converted to a retirement benefit. The new rules that were introduced in 1998, resulted in lowered retirement pensions for those who have been receiving the CPP disability pension.

Taxability of CPP Disability Benefit

CPP Disability beneficiaries pay income tax on the disability benefit.

CCD's Edmonton Declaration on disability income insurance stated that, "Income derived from the 'base-level' and 'income replacement' components is to be considered taxable." However, CCD in 1985 passed a resolution calling for the revision of the "Income Tax Legislation so that any disabled person with an income of less than \$20,000.00 be tax-exempt for the purpose of encouraging independent living."

Extra Costs of Disability/Disability-Related Supports and Emergency Needs

Another important topic that must be addressed is the matter of extra costs of disability. People with disabilities have extra costs because we need disability-related supports.

Disability Supports are:

Disability supports are: a wide range of goods and services. Any good or service, which assists a person in overcoming barriers to carry out day-to-day activities, social activities (includes political and cultural activities) and economic participation. In this definition, the term barriers refers to any obstacle directly associated with a disabling condition. With this conceptualization of disability supports, there is no fixed set of disability-related goods and services. A good or service becomes "disability-related" when it is used to assist a person or persons in overcoming barriers associated with a disabling condition. (The Roeher Institute has developed this conceptualization of disability supports.) A disability supports program is needed to assist people with disabilities transcend the barriers, which prevent people from achieving their social and economic potential. For example, 25% of Canadians with disabilities on income support programs cite loss of supports as a reason for not looking for work. A majority of complaints to the Canadian Human Rights Commission deal with a failure to accommodate. 36% of people with disabilities had non-reimbursed out-of-pocket disability-related expenses. (1991 HALS) Disability support services should be directed by the following guiding principles-- comprehensiveness, universality, accessibility, quality, mobility, accountability, and adequacy. In order for services to be responsive to individual and community need, there are number of desirable characteristics, which should be included in any disability supports program that is developed: a holistic range of supports available to persons with disabilities, mixed delivery of services (i.e. private/public, as well as a self-management option), community based services/community governance of services. Examples of disability supports are: drugs, prosthetics, wheelchairs, writing aids, adaptive equipment, attendant care services, homemaker services, respite care.

CCD has been advocating a national disability supports program. It is considered desirable to separate disability-related supports from income programs.

CPP Administration

The role of the CPP administration is to assess initial eligibility for a disability benefit, to determine continued eligibility for a benefit, to collect and document information, and to manage the process in the event that an appeal is launched. It also assesses beneficiaries who would benefit from rehabilitation.

The administration of the disability benefit has been subject to considerable criticism over the years. Not all that criticism has come from the disability community. One vocal critic has been the Office of the Auditor General. In 1996 the Auditor General issued a set of recommendations regarding CPP administrative changes. The Auditor General was very concerned with the length of time it took to process an initial application and to process appeals. Following that report was done changes were made.

Application Procedures

Many consumers have expressed to CCD the concern that CPP's application and appeal procedures are too difficult and too lengthy. CPP's own material states, "Decisions on eligibility for disability benefits, WCB benefits, or social services, are often made more quickly than the decision under the CPP". In order to be successful in their applications many consumers require assistance from their MP or an independent advocate. In cooperation with two of its member groups, the BCCPD and the Saskatchewan Voice, CCD has worked to make available to consumers an information kit that helps them get through the application procedure.

CPP Appeals System

If an individual is refused a CPP-Disability benefit, there are three levels of appeal. There is the first level of appeal, which must be requested 90 days after the first rejection. At this stage a departmental adjudicator, who has not previously been involved in the case, reviews the case. New evidence can be introduced at this stage. Sherri Torjman reports that in 1998-99, at this stage, there were 28% reversals. The second level of appeal is the Review Tribunal, which is a three-person panel. The third level of appeal is the Pension Appeals Board.

The decisions made in the appeal system can have an impact on future applicants. The 1988 Leduc decision took into account socio-economic considerations. The Leduc decision stated,

"The Board is advised by medical authority that despite the handicaps under which the appellant is suffering, there might exist the possibility that he might be able to pursue some unspecified form of substantially gainful employment. In an abstract and theoretical sense, this might be true. However, the appellant does not live in an abstract and theoretical world. He lives in a real world, peopled by real employers who are required to face up to the realities of commercial enterprise. The question is whether it is realistic to postulate that, given all of the applicant's well-documented difficulties, any employer would remotely consider engaging the appellant. The Board cannot envision any circumstances in which such might be true." (Torjman, p. 34)

As a result of this decision, there was a policy directive that allowed the consideration of socio-economic concerns in the adjudication of decisions. In line with the general cutback mentality of the period, in 1996, the Pension Appeals Board put the brakes on the further consideration of socio-economic circumstances in adjudication decisions. Torjman writes, "In 1996, the Board attempted to limit the interpretation of the Leduc precedent by stating that the Leduc and associated decisions were decided in 'special and restricted circumstances' which should not be expanded. These circumstances included (but were not limited to): total disability depending on both combined medical and non-medical conditions and somewhat complicated in nature; the consideration of learning disabilities; and unqualified acceptance of symptoms by certain medical witnesses and Board members." (p.34)

Referring back to the IL paradigm, CCD believes that limitations for people with disabilities originate in barriers in the environment.

What Others Are Calling For

The disability community has been making a variety of recommendations with regard to the administration of CPP Disability. The following recommendations and concerns were shared at a December 2001 Round Table on Disability.

- Involve more people with disabilities in focus testing, designing service delivery, etc. Some examples of where this could be done are as follows: physicians guide could have benefited from being focus tested with persons with disabilities; name more persons with disabilities, especially those who experience chronic pain to Review Tribunals.
- Do more to counter the myth that all initial applications are denied by telling personal stories in newsletter, etc.
- Allowable earnings need to be increased in future to reflect the reality of getting back to work.
- Advocacy and other disability groups have a lot of experience that could be tapped for client communication, service delivery, and to support successful return to work.
- Consider the effect of denial on a person with a mental health condition. This is another form of rejections that can lay low the individual; explore involving community mental health advocates to support the denied applicant.
- More encouragement to employers to provide accommodation to those trying to return to work, including assistance to pay for equipment.
- Need to do more communication work with Aboriginal communities.

- More education and training for CPP adjudicators re: invisible disabilities such as chronic fatigue and pain and mental health conditions.

Appeals

- People are afraid of representing themselves at appeals—they feel they need counsel in order to be successful.

- Some give up because the process takes too long and they are too unwell to keep up the fight.

- Many experience feelings of hopelessness when confronted with a complex system they must deal with in order to obtain benefits.

- Requests from the Minister to attend Independent Medical Exams (IMEs) are seen as adversarial when they are requested prior to a hearing.

- Many advocacy groups have developed excellent materials and supports for those going through appeals and clients could be referred to these organizations.

Issues requiring legislative change:

- Extend eligibility for those trying to return to work.

- Review 4 out of 6 contributory eligibility.

- Review whether disability benefit should continue to be taxable.

- Consider partial benefit: that CPP cannot provide partial benefits is a major disincentive to work. Most European countries have income programs that cover partial disability.

- Idea of one comprehensive disability income program should not be lost.

Sub-Committee on Disability could play a role in identifying these broader issues.

CONCLUSION

So, what do we as citizens do about the CPP-Disability Benefit. We need to get to the politicians who make the decisions about Canada Pension Plan. Both Federal and Provincial politicians are the decision makers on the Canada Pension Plan. At the past couple of CCD meetings, CCD was fortunate enough to have the Manitoba Minister of Family Services Tim Sale participate in our activities and he shared with us some observations on the role of citizens in developing social policy. He strongly made the point that it is citizens and

citizens groups that drive public policy reform; and that progressive change does not occur unless citizens hold politicians feet to the fire.

As can be gathered from the following sections, the CPP Disability Benefit is not static.

Parliament changed the benefit level and the contributory requirements in 1987 and 1992 to make the benefit more adequate and extend its coverage.

The Auditor General encouraged the CPP Disability Program to inform Canadians about the benefit.

Following that the caseload increased substantially. Analysts suggest that the caseload rise was the result of explicit political decisions and administrative directives intended to open the program and redress its perceived inadequacies in terms of both benefit and coverage.

In 1998, CPP-Disability promotional material announced that, "HRDC also introduced new adjudication guidelines and appeals procedures and strengthened reassessments to ensure that benefits are paid only to those who are eligible for them." In 1998, Parliament changed the rules once again and made the CPP Disability Benefit more restrictive and harder to get.

So, people from various perspectives have over time held politicians' feet to the fire on CPP and change has occur—albeit not the type of change that we wanted in all instances. At times this change has benefited people with disabilities and at time it has hurt people with disabilities. The 1998 reforms hurt people with disabilities.

Our message to Canada's politicians is that the time is overdue to swing the pendulum back and to improve access to the CPP Disability Benefit for consumers. CCD's first principle for reform is that people with disabilities must not be made worse off by reform. With respect to the CPP-Disability Benefit, Canada's politicians have a responsibility to overturn the regressive actions of 1995-98.