Alleviating Poverty Among Canadians Living with Chronic Disabilities

Brief to the House of Commons Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities (HUMA)

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Every Canadian Counts focuses on disability support advocacy and education. Our coalition joins community organizations, service providers, caregivers, and Canadians with disabilities in advocacy for a national disability support program. Our education project focuses on strengthening data on disability issues, sharing findings with stakeholders, and gauging public support for a national program to better serve Canadians living with chronic disabilities.

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Introduction

Every Canadian Counts is addressing the needs of one of the most disadvantaged and impoverished populations in Canada: people with chronic disabilities. We are grateful for the opportunity to submit this brief to the HUMA Committee and to share innovative approaches to alleviating poverty associated with disability.

A strong link exists between chronic disability and insecurity in terms of income, health, access to needed supports, and housing. If any one of these pillars collapses, Canadians with disabilities and their families risk falling into poverty – and many do.

Although a signatory to the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), Canada is failing to ensure Canadians with disabilities have an adequate standard of living or social protections from poverty (Article 28):

- Canadians with disabilities are twice as likely to live below the poverty line (IRIS, 2013) and 22.5% live at or below the Low-Income Cut-off (ESDC, 2016);
- 13% of all Canadians with disabilities have experienced “hidden homelessness” (Rodrigue, 2016); and,
- A disproportionate number of homeless Canadians have at least one disability (Homeless Hub, 2016; DAWN, 2017).

Canadians with disabilities and caregivers continually say household wellbeing relies on access to essential supports (ARCH, 2007), yet in low-income households only 18.5% receive adequate support to accomplish everyday activities (Peters & Parkes, 2014). Programs to assist with disability-related needs are underfunded, difficult to access, provide inadequate support, and do not transfer between provinces. This fragmented system makes entire households, including caregivers and dependents, vulnerable to poverty.

*Any* Canadian can become disabled *at any time* through accident or illness, so Canada’s Poverty Reduction Strategy should *prioritize creation of a national disability support program* that is fair and portable, sets minimum standards for service provision, and covers essential disability supports. This program would alleviate risk of poverty for Canadian households affected by disability and enhance their ability to participate in and contribute to society.
A Holistic Approach is Necessary

**Healthcare**

The Public Health Association of Canada (2016) acknowledges that disability often leads to income decline and material disadvantage. Canadians with disabilities also face poorer health outcomes and numerous barriers to accessing healthcare, which are exacerbated when living in poverty (PHAC, 2016; DAWN, 2017). Preventative, sustained care for this population could lower poverty rates along with national expenditures on emergency and long-term hospitalizations resulting from unmet health needs morphing into health crises.

To reduce poverty and uphold healthcare commitments under the UNCRPD (Articles 25 & 26) Canada should invest in a national disability support program that removes barriers to healthcare for residents with disabilities and ensures access to:

- local service providers and medical professionals;
- insurance coverage for specialists, medical devices, and prescription medications;
- accessible, reliable, and affordable transportation; and,
- care for dependents while attending appointments.

Every Canadian Counts also fully supports calls for a National Pharmacare Program to lower the cost of vital prescriptions for all Canadians. 1 in 10 Canadians do not take needed medications due to high cost and the resulting decline in public health is estimated to cost $1 billion – 9 billion annually (Morgan et al., 2016). Affordable medicine is especially important for people with chronic disabilities who otherwise lose ability to function and – by extension – jobs, income, and housing.

**Homecare**

Closely linked to healthcare is homecare. A recent Ontario Ombudsman investigation (2016) found many adults with developmental disabilities are housed in hospitals and long-term care facilities intended for seniors due to lack of access to appropriate in-home support. This is a national trend that is very costly to taxpayers.
The shortage in funding for homecare providers and supported housing means many Canadians with disabilities are forced to rely on family caregivers. Approximately 1/3 of Canadian workers are currently assisting a chronically-disabled person, resulting in a $1.3 billion loss in productivity every year due to time away from work (Bernier, 2015). Informal caregiving places stress on relationships, health, and household income, resulting in greater dependence on social assistance and vulnerability to poverty.

To alleviate the high costs of care for Canadians with disabilities and their caregivers and to support the right to homecare outlined in the UNCRPD (Article 19), Every Canadian Counts recommends that the federal government:

- fulfill their commitment to add $3-billion to homecare funding;
- support the Canadian Healthcare Association’s recommendation (2009) to protect homecare as an insured service under the *Canada Health Act*;
- include home care provisions within a national disability support program with guidance from the Home Care Association’s “Harmonized Principles for Home Care” (2016); and,
- make Caregiver and Family Caregiver Tax Credits refundable.

**Housing**

The last time data was collected, 17% of Canadians with disabilities were in “core housing need” (CMHC, 2001). These individuals not only compete for affordable spaces in a tight housing market, but also fight landlord discrimination to find accessible spaces close to required services (DAWN, 2017). Few can satisfy these requirements through public programs, resulting in long waiting lists across the country and precarious living conditions in the interim.

To ensure Canadians with disabilities have access to affordable and accessible shelter – another commitment under the UNCRPD (Articles 9 & 28) – Every Canadian Counts recommends the federal government act upon recommendations made during CMHC’s National Housing Strategy consultation (2016) to:

- modify the *National Building Code of Canada* to include standards of universal accessibility for all new and renovated social housing;
- commit long-term, stable funding to public housing initiatives to enable sustainable provincial and municipal housing plans; and,
ensure supportive housing is available to people with disabilities.

National housing and poverty reduction strategies must be closely integrated and clearly demonstrate how accessible, affordable, and supported housing will be delivered to Canadians with chronic disabilities, especially those who are low-income and in poverty.

**Assistive Devices**

ARCH Disability Law Centre (2007) has documented “high levels of unmet needs in relation to assistive devices”. Assistive devices include mobility aids like wheelchairs, medical aids like prostheses and ventilators, sensory devices like hearing aids, and communication technologies like adapted computers.

Funding to cover necessary assistive aids is inadequate, often limited to device models that do not meet user needs, and frequently does not cover repairs. Many Canadians languish on months-long waiting lists to access publicly-funded devices – inexcusable when it means someone cannot afford to walk, communicate, or breathe properly (ARCH, 2007). Further, many provinces only loan devices that must be returned if the user moves elsewhere in Canada. The Council of Canadians with Disabilities and the Canadian Association of Community Living (2007) reported 2 out of 3 Canadians with disabilities lack one or more required aids, leading to poverty and exclusion from communities and workplaces.

To level the playing field and meet commitments under the UNCRPD (Articles 20 & 28), Every Canadian Counts recommends that the federal government invest in a national disability support program that:

- covers the full cost of necessary assistive devices, including repairs;
- allows for greater consumer choice and portability of assistive devices across Canada; and,
- is responsive to changing assistive device needs.

**Employment**

Many Canadians with disabilities are both able and willing to work. However, a 2011 poll by Statistics Canada found the employment rate for Canadians with disabilities was 49% compared to 79% for non-disabled Canadians (Turcotte, 2014). This is partially due to inaccessible workplaces and discrimination by employers suggesting more must be done to educate employers about the
benefits of hiring Canadians with disabilities and workplace accommodations (Turcotte, 2014).

But a greater problem is insufficient support to retain employment. Without homecare assistance to get ready for work, accessible or reliable transportation to get to work, and personal mobility and communication aids to navigate at work, Canadians with disabilities struggle to get and keep jobs.

The government must invest in day-to-day support needs of Canadians with disabilities so they can maintain employment – another commitment under the UNCRPD (Article 27). A national disability support program would provide access to the homecare, transportation, and assistive devices necessary for Canadians with disabilities to work, thus improving financial security and alleviating risk of poverty.

**Income**

Canadians with disabilities are twice as likely as non-disabled Canadians to live with low-income during their working years and their single largest source of income is social assistance (Prince, 2014; Peters & Parkes, 2014). But existing income support levels – paired with strict limits on earnings, assets, and additional assistance – are insufficient to lift Canadians with disabilities out of poverty (Segal, 2016).

A basic income program modelled after Old Age Security and the Guaranteed Income Supplement for Canadians with disabilities unable to work would be of great benefit (Prince, 2014). However, Every Canadian Counts cautions that any such program should ensure:

- other needed social assistance, such as child support, is not clawed back;
- asset limits enable people to save for emergencies and plan for the future;
- payments are indexed to inflation so recipients can meet basic needs as cost of living increases;
- eligibility is not determined based on total household income to prevent financial dependence on parents or partners (Laidley, 2016; DAWN, 2017); and,
- it works in tandem with a national disability support program to cover support needs beyond the basic costs of living.
Until a basic income program is in place, Every Canadian Counts supports recommendations to make the Disability Tax Credit refundable at an increased amount to bring recipients above the Low-Income Cut-off level (Mendelson, 2015; Simpson & Stevens, 2016).

A Model for Inspiration

Australia’s National Disability Insurance Scheme (NDIS) is a national disability support program we hope to adapt for Canada. The NDIS was developed as a central part of Australia’s National Disability Strategy, which was a response to high poverty rates amongst Australians with disabilities – approximately 45% of whom lived in poverty in 2010 – and their families (National People with Disabilities and Carer Council, 2012). It covers the cost of essential, disability-related supports and is complemented by a disability pension that assists with living costs for those unable to work more than 15 hours per week.

The NDIS is still being implemented but it is expected to increase annual GDP by 1% through job creation and enabling caregivers and NDIS recipients to (re-) enter the workforce (Australia Productivity Commission, 2011). Impacts to date are currently being studied by the Productivity Commission (report expected in September 2017), but the Commission expects “benefits [will] significantly exceed the additional costs of the scheme”.

Addressing Gaps in Data

No standard definition of disability exists across Canada and there is no federal mandate to collect data on disability issues. Therefore, data on disability prevalence and associated costs is extremely limited. The most recent source of data, the 2010 Canada Survey on Disability, gathered minimal and largely unreliable information. The best data available is from the decade-old Participation and Activity Limitations Survey.

Poor data on disability affects all governments sectors and was highlighted in the Canadian Institute for Health Information’s “Advancing the Measurement of Equity in Healthcare” consultation (2016). Lack of data makes it exceedingly difficult to effectively advocate or propose viable models to combat poverty amongst Canadians with disabilities.

A national mandate for all government departments who deliver disability-related programs to collect and maintain data is sorely needed and required under the UNCRPD (Article 31). Data should feed into a central body, similar
to the CIHI, to create a full picture of disability in Canada (including poverty rates). Further, future national poverty studies should include disability, at different levels of severity and functionality, as an identity marker.

A Final Word

Fully addressing the issue of poverty amongst Canadians with disabilities requires a comprehensive, multi-pronged approach coordinated between federal departments and in collaboration with provincial, territorial, First Nations, and municipal governments. Continuous consultation with disability research, support, and advocacy organizations is key to developing an effective response and measuring results.

Every Canadian Counts looks forward to providing additional suggestions and support in developing disability-related components of the Poverty Reduction Strategy.
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