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Message from the Executive Director

In general, newcomers experience many challenges upon settling in a new country. They must learn a new language, find employment and housing, and navigate the complexity of a new culture and the realities of discrimination.

The settlement process is especially challenging for im/migrants and refugees with disabilities and d/Deaf newcomers who experience barriers due to systemic ableism in our communities and workplaces. Therefore, learning how to address ableism and support im/migrants, refugees, with disabilities and d/Deaf newcomers is an ongoing process.

While our broader understanding of disability has led to the enhancement of legislations and programs, the unique obstacles facing im/migrants and refugees with disabilities and d/Deaf newcomers in settlement continues to be a challenge. We are committed to supporting the settlement sector in Canada to co-create a welcoming and inclusive space for all.

Our goal in creating this toolkit is to provide tools to help you support im/migrants, refugees with disabilities and d/Deaf newcomers live interdependent lives. In addition, we hope this resource will continue a discussion that will have a positive impact on the quality of life for im/migrants and refugees with disabilities and d/Deaf persons in Canada.

Debbie Douglas

Executive Director

Otario Council of Agencies Serving Immigrants - OCASI

About OCASI

Ontario Council of Agencies Serving Immigrants (OCASI) was formed in 1978 to act as a collective voice for immigrant serving agencies and to coordinate responses to shared needs and concerns. OCASI is a registered charity governed by a volunteer board of directors. Its membership is comprised of more than 200 community-based organizations in the province of Ontario.

Vision

A country of equity and social justice where everyone belongs.

Mission

OCASI champions equity and human rights for im/migrants and refugees through advocacy, collective action, collaborative planning, research, capacity-building, and information and knowledge transfer.

Values and Commitments

- 1. Social Justice We uphold human rights and equity. We work to ensure that im/migrants and refugees have access to the services that they need and the opportunity to participate fully and equitably in the social, cultural, political and economic life of our country.
- 2. Accountability We know that our words, decisions and actions reflect our true values and commitment. We assume the leadership role entrusted to us through transparency, kindness, respect and integrity.
- 3. Solidarity We affirm the collective voice and power of groups and communities in ending racism and oppression. We work collaboratively within and across sectors to effect change and the best outcomes for im/migrants, refugees and other marginalized communities.
- 4. Innovation We lead and support excellence in the sector. We spearhead continuous improvement and creativity through community-led and evidence-based decisions and the development of promising and impactful practices.



Expert on Immigrant and and Refugee Issues.
Advocate for the Immigrant-serving Sector.



What is the purpose of this Toolkit?

This toolkit has information and resources that speak to the specific struggles and needs of im/migrants and refugees with disabilities and d/Deaf newcomers. Most importantly, the Accessibility Canada Act is the law that sets out a process for developing, implementing, and enforcing accessibility standards. All businesses, non-profits, and public sector organizations must follow these standards and corresponding national, provincial and/or territorial laws to become barrier free.

Frameworks used in Developing this Toolkit

The immigrant and refugee sector strives to work towards a world where Anti-Racism Anti-Oppression (ARAO) frameworks are embedded within all social service agencies in meaningful and tangible ways. However, to understand the full depth of what accessibility means, we need to understand how to embody an ARAO lens.



Anti-Racism is action-based and requires tangible steps to creating a just society. One cannot be anti-racist in theory; practice, continued learning AND unlearning is required. Unlearning means to recognize our biases, internalized forms of oppression and how we can work towards being less oppressive humans, communities, and societies.



Anti-Oppression is a broad term used to describe a framework that addresses the various barriers that exist within society that prevent people from reaching their full potential and from societies being universally accessible. Anti-oppression requires continued learning and unlearning.



Disability Justice is a framework created by Black, brown, queer, and trans members of the original Disability Justice Collective, founded in 2005 by Patty Berne, Mia Mingus, Stacey Milbern, Leroy Moore, Eli Clare, and Sebastian Margaret. It is a framework that centers the diverse experiences of disabled people invisibilized within mainstream disability discourse. It enables us to understand how all systems of oppression intersect and interlock, shaping/informing each other (Piepzna-Samarasinha, 2018; Engelman et al., 2019). It calls for a cultural shift toward embracing people with disabilities, and challenges mainstream societal norms which construct disability as a binary (Engelman et al., 2019). It provides us with the language to understand the relationship between ableism and other forms of oppression.

People with disabilities have intersectional identities — they may be racialized, gendered, elderly, live in poverty and/or be part of immigrant communities. This viewpoint further reveals the persistent and invisible injustices people with disabilities experience and is important for developing policies, resources, and support for those affected by the pandemic. As service providers interested in furthering accessibility, we are being tasked with embedding an ARAO and Disability Justice lens in everyday practice.

The immigrant and refugee serving sector is striving to incorporate a Disability Justice framework into our work.

Learn more about Sins Invalid 10 principles of Disability Justice.



The Accessibility Initiative

The Accessibility Initiative initially came about through a partnership with ERDCO-the Ethno-Racial Disability Coalition of Ontario, and was funded by Citizenship and Immigration Canada in 2009. The project was representative of the collaboration of both settlement and disability sectors working together to bring greater attention to the needs of newcomers with disabilities.

OCASI is committed to supporting the settlement sector to create welcoming, positive, and inclusive spaces for all.

The current National Bilingual Accessibility Initiative aims to build the capacity of the immigrant and refugee serving sector across Canada by bringing greater attention to the lived experiences of im/migrants and refugees with disabilities and d/Deaf newcomers while equipping the sector with effective tools and resources to serve them. A range of online professional development activities, tools, and resources have been created to assist organizations serving im/migrants and refugees with disabilities and d/Deaf newcomers in creating accessible and inclusive spaces for all. Also addressed is the need for agencies to comply with national, regional laws and legislations related to accessibility while providing effective settlement services to im/migrants and refugees with disabilities and d/Deaf newcomers.

The National Bilingual Accessibility Initiative aims to strengthen the sector's capacity to assist im/migrants and refugees with disabilities and d/Deaf newcomers by:

- 1. Building strategic partnerships and relationships.
- 2. Providing self-directed online courses in English and French.
- 3. Providing webinars for front-line settlement sector professionals and management in English and French.
- 4. Creating an online national discussion group that fosters community interaction and discussions to share and exchange knowledge, expertise, and solve issues regarding service delivery to newcomers with both visible and invisible disabilities.
- 5. Recruiting 'Allies in Accessibility' (AiA) across Canada with the aim of assembling a wide group of individuals who have an interest in creating accessible programs and services.



Understanding Disability

To ground our thinking about disability, we begin with a brief overview about disability and how our understanding of disability has evolved over time. There are many different schools of thoughts about disability. It is important to understand some of the big ideas so we can better understand the content. Throughout history, the treatment of people with disabilities has varied over and across communities between unjust and equitable. Though the rights of people with disabilities are legally protected, the current understanding of disability is still grounded within the medical model of disability.



The Medical Model of Disability

According to the medical model of disability, the problem of disability resides within the individual (Oliver, 1990). Bodies that could not be rehabilitated or cured were subsequently excluded from society and placed into institutions and/or mental hospitals (Barnes, 2012) away from those accepted as "normal". This perspective has become so ingrained within our society that it is seldom challenged.



The Social Model of Disability

During the latter half of the twentieth century, people with disabilities and their allies started to question the negative ways in which they were being treated based on bodily differences giving rise to the social model of disability. According to this model, the problem of disability resides within society (Oliver, 1990).



The social model provided people with disabilities with the language to speak to the unjust ways in which they were being treated.

While there is recognition that impairment does exist, it becomes exacerbated in a disabling capitalist society that does not value bodies that fall outside the socially constructed norm (Dossa, 2009). Understanding disability through the social model allows us to have alternative points of view. The social model of disability allows us to understand that people with disabilities face barriers daily. The barriers can be physical, attitudinal, environmental, technological, and organizational. It also recognizes that people with disabilities are not helpless; rather, exclusive policies and social norms create further barriers (Dossa, 2009).

There are debates within the disability and the academic sectors with reference to the social model of disability as the focus has been about social barriers without taking into consideration that emphasis is still placed on the individual to change (Hughes & Paterson, 1997). There needs to be a greater understanding of the materialist society we live in, that values people without disabilities. Moreover, our inability to understand the needs of people with disabilities leads to a lack of access to suitable housing, employment, education, transportation, healthcare etc.



The quality of life of people with disabilities increases when barriers are removed and they can live and participate in their communities, access services and goods interdependently, and exercise control over the decisions affecting their lives.

The table and diagram below highlight the key differences between the medical and social model of disability.

Table 1: Medical and social medal of disability

Medical Model	Social Model
Disability is located inside the body	Disability is caused by inaccessibility, laws, policies, and practices in society
The goal is to cure, rehabilitate, prevent, and treat disability. All decisions are made by experts	The goal is accessibility, eliminating barriers (attitudinal, physical, technological, information and communication, environmental), including the experiences of people with disabilities, and changing society
Pro: Medical intervention can lead to a longer life	Pro: Quality of life improves when people with disabilities can fully participate
Con: Significant emphasis is placed on the fixing/curing the individual without considering how ableism functions in society	Con: Changes in society alone do not mean people with disabilities are included. Medical assistance may be required

Figure 1: Medical and Social models of disability



Disability in the Global and Local Context

Before we turn our attention to looking at how disability is constructed around the world, it's important to name and define how imperialism and **colonialism** inform disability. The Canadian Race Relations Foundation defines colonialism as the, "policy or practice of acquiring full or partial political control over another country, occupying it with settlers, and exploiting it economically", while **imperialism** is the in/formal economic and political domination of one country over the other. These concepts help us to make sense of the unjust social, economic, and political divide perpetuated by colonialism and imperialism (El-Lahib, 2015) in the global North and South. The North includes North America, Western Europe and "developed" parts of East Asia seen as economically advanced and more developed compared to the South. The South includes Africa, Latin America, and "developing" Asia including the Middle East.

According to the World Bank, approximately 15 percent of the world's population is disabled, with 80 percent located in countries in the global South (Grech, 2015). However, resources created for people with disabilities have concentrated its efforts and remain focused on those in the global North. The understanding of disability and disability-related experiences in the Global North is still being used to make sense of the experiences of people with disabilities around the world without a deeper look at how environmental degradation, war, famine, poverty context, culture and the ongoing impact of colonialism continue to shape how people with disabilities are navigating the world around them (Grech, 2015).



According to the World Bank, approximately 15 percent of the world's population is disabled

In the recent past, disabled activists have called for a broader understanding of disability by highlighting the unique experiences of those in the global South, the implications of centering the experiences of people with disabilities in the North and viewing those in the South as a homogeneous group (Chataika, 2012).

However, Grech and Chataika (2012), caution us about simplifying, homogenizing and assuming that there is universal consensus in how disability is viewed in the global South. An emergent body of work has brought attention to the experiences of displaced migrants with disabilities living in refugee camps in the global South. **Displaced migrants with disabilities are less likely to be selected for resettlement in the global North** even though they are living in poor conditions in refugee camps with limited accessibility further increasing disability (Mirza, 2011; Mirza et al., 2014). Throughout this toolkit, we recognize our location in the North, the space we occupy and the importance of learning about the experiences of those coming from the South.

Deconstructing Language

There have been debates around using the phrase "disabled people" or "people with disabilities."

The language used to refer to persons with disabilities has played a significant role in the persistence of attitudinal barriers. This has led to negative images and stereotypes about people with disabilities. For example, in the United Kingdom there is a preference for using disabled people, while in Canada, there is a preference for using persons with disabilities. This is related to the various social movements around the world and how the world disability is taken up.

People with disabilities may identify themselves as a disabled person as a means of claiming back the language and politicizing it. Therefore, **it is important to ask people how they would like to**



be referred to. While we are aware of the different ways in which people with disabilities choose to speak to their own lived experiences, OCASI uses people with disabilities in this toolkit consistent with Canadian legislations and policies around disability.

We encourage you to ask people with disabilities how they would like for you to refer to them as. It is important to recognize that people will identify themselves differently in terms of language based on their experiences and preference.

Remember, **ableism** is a systemic form of oppression that discriminates against people labeled as disabled in favour of people who fit social norms of 'able-bodied Ness'. In an ableist worldview, there are ways of doing things and looking that are assumed to be 'normal', and people who do not meet these expectations are viewed as 'problems-to-be-fixed'.

Ableism results in:

- Multiple forms of barriers for people with disabilities
- People with disabilities may hold these ableist views as what they should aspire to be, which is referred to as internalized ableism.



Adapted from the Nora Project

<u>The Nora Project</u> is on a mission to promote disability inclusion by empowering educators and engaging students and communities. They created some resources to help others understand why language matters.

People absorb everything that we say and how we say it. **Our words shape what others think of themselves and how they view the world.** Sometimes we use words that cause harm, and we don't even know it. This is often the case when we talk about disability. Sometimes, due to discomfort and limited experience with disability, we diminish that disability is an important part of many people's identity - not something to be avoided or portrayed with pity (Rowe Schulte, 2022).

Sometimes, when talking about caring for or supporting a person with disabilities we use language that inadvertently portrays people with disabilities as a burden or have low expectations of what they can do or are expected to do. So how can we make sure that our words acknowledge and celebrate disability as human diversity?

Below we explore commonly used phrases and statements that cause harm and take us away from our goal of a more inclusive and equitable world. Let's explore how we talk about disability and the messages that these statements convey:

"I don't even think of my friend as disabled. They're just friends to me!"

"My neighbor is just Amara! I don't think of her as having a disability."



The Message: The person's disability isn't an important part of who they are. It isn't something to celebrate or be proud of. Focus on other things about them.



The Problem: Disability is a part of their identity. If we don't acknowledge a person's disability, then we aren't fully seeing or accepting them. Ignoring disability suggests that the disability identity is bad. This can lead to a sense of shame in people with disabilities about a part of who they are.

"My 45-year-old son, who has the language of a toddler, said 'I love you' today!"

"My nephew Liam is developmentally like a 18-month-old."



The Message: My child, or my family member, is similar to a typical infant or toddler. You can more-or-less treat them as you would a child of that age.



The Problem: Age equivalents for skills are a harmful and dehumanizing framing of personhood. They do not reflect the fullness of a person's human experience. Each year lived is a year of knowledge and life gained, for all people. Referring to a disabled child, teen, or adult as an infant, and talking to an adult like a baby, is harmful and demeaning.

"My aunt inspires me every day."

"The fact that she gets up every morning and goes to work is such an inspiration."



The Message: This statement conveys disability as a tragedy that inherently makes life worse or harder, instead of natural human diversity that makes life different and interesting. When simply living is portrayed as an accomplishment, a disabled person becomes the focal point of inspiration simply because of their impairment.



The Problem: This message of otherness doesn't acknowledge a child or person's individuality, hopes, dreams and strengths. It sets low expectations and devalues the contributions that people with disabilities make in their communities and in the world. It says, "I would never want to trade places with you. The fact that you simply live your life is an accomplishment."

In every instance, the words and phrases above "other" people with disabilities. These harmful, inaccurate portrayals create and maintain a distance that makes inclusion seem impossible - when in reality, truly knowing, understanding, and supporting one another as people will enrich all of our lives and bring us closer to our goal of making the world a better place for everyone.



Useful Accessibility-related Practices for Service Providers

- Analyzing one's privilege and how it can impact the work and power dynamics that exist between you and the client. For example, understanding how **various forms of oppression** (ableism, homophobia, sexism, racism) impact a person's lived experience and how they interpret your power, and how they interpret their own.
- Taking steps to listen to and build rapport with a client, allowing for them to speak and interact with you on their terms, and in their own time, this includes when they have a support person.
- When sensitive information is disclosed, asking clients what support they need, what they feel is most helpful for them. Remember, for people with disabilities, they may have very different perspectives on what these challenges mean for them or if they are even a challenge at all.



- If you are concerned/uncertain if a client is eligible for certain services or financial support (disability support programs, employment insurance), do not discourage them from applying. If you have concerns about eligibility, explain what the eligibility criteria are and let the person make their own decision about applying.
- Understanding that people with invisible disabilities are often not believed, **if you think a client does not merit certain support, it is not your place to try and have those services removed.** If they have been assessed already, please assume that the right decision has been made. Having to prove to you that they are deserving of support can be very traumatizing and impact building trust with service organizations.
- **Providing holistic** support instead of purely clinical/social service support could yield better outcomes for the client (social events, affordable housing, community involvement, volunteer opportunities, food banks, spiritual spaces, naturopathic therapies, affordable entertainment, educational services, employment services, etc.).
- Implementing **accountability measures** for staff and agency through client participation and feedback. This could mean advisory committees, suggestion boxes, evaluations and having transparent complaints processes that are accessible for people who speak languages other than English and French, who may have difficulty reading/writing and who may have a hard time communicating verbally.
- Educating yourself on the issues of client experience, not expecting them to educate you, proving/validating their existence. This means doing your own reading and research, while remembering that every person's experience and reality could be different, therefore having the knowledge without making assumptions, is imperative.
- Being connected and knowledgeable about the community you serve is essential. This means remembering that there are many communities of people with disabilities and understanding the struggles they face is vital. Also remember the different types of communities that encompass the work that you do. The community you serve could be different from the community that exists in the neighborhood in which you work, it could also be several communities. This means keeping up to date with the resources in your community and understanding the day-to-day issues that exist within the geographic area in which you work.

- Bring in presenters and community members that can speak to what is needed within your agency to enact the change you wish to see. Prompt people with privilege to do the work that supports the needs of the staff and the community.
- Work **collectively**, as a team to push for systemic changes, ask for accountability measures from the top down. Meet your board of directors, advocate for client and staff representation. This is a team effort, otherwise doing it on your own can be overwhelming and cause burnout.
- Remembering that people with disabilities are people, without an inspirational story to tell is important. Many times, people with disabilities are positioned as tools of inspiration, that is not their responsibility.
- When providing feedback or bringing up concerns to people who may feel uncomfortable, have a hard time receiving feedback, ask questions to understand such as "I'm wondering if....", "I'm hoping you can clarify...." It can allow for less defensive responses and provides an opportunity for clarification.
- If you think there is a problem or an issue, come into the discussion with possible alternatives or solutions, this way the work is already being done and the responsibility does not necessarily fall on the other person/group.

Using a Person-Centered Approach

A person-centered approach means seeing a person as an individual by considering all the different aspects of their lives that impact their wellbeing. For example, think about your intake forms. Do they consider the different experiences clients have? Do they allow us to understand different systemic barriers? A person-centered approach allows you to:



Create more inclusive communities

Support interdependence

Promote access to public spaces and services

Increase the social, political, economic, and cultural participation of all

It is critical to use a person-centered approach with all im/migrants and refugees with disabilities and d/Deaf newcomers rather than the "cookie cutter" approach that presumes the sameness of experience and needs. Here are some key things to consider when using the person-centered approach.

Building Rapport with Clients

Building rapport starts before the client enters the building. Agencies must strive to create safer spaces for clients. Remember, **accessibility is not just about physical barriers, a lot of factors create barriers to access.** Understanding that the law and government can be scary, being upfront about what services you can provide and the limits you have around confidentiality, is important.

For people with invisible disabilities, such as those with mental health challenges, there is stigma that they must deal with on a day-to-day basis. It is important to be aware of the stigma and provide clients with the space to communicate their wants and needs. Communicate and ask clients with mental health disabilities the best ways to communicate with them.

Understanding Community

Here are some questions to reflect on when working with clients.

What country did the client migrate from? How did they arrive in this community?

Depending on where people with disabilities migrate from, they may have been exposed to violence, starvation, illnesses, etc. Understanding more about their migration experience will help you understand cultural perspectives and religious practices. Perhaps they experienced traumatic events in the process of immigrating to Canada. Perhaps their disability is the result of their migration experience.



Where does the client live? Who lives with them? Do they have a support system?

If the family was accustomed to an extended family network in their home country, the individual and family might experience stress from having less help to assist the person with a disability. This information is also important for determining financial resources, knowing who is available to help with physical care, and helpful in understanding the decision-making structure within the family.

What care/support did they have in the past?

As people start applying for benefits and services, developmental and medical histories are important for determining eligibility. In addition, knowing about previous support and care plans will be helpful in determining the course of support needed from community service providers, doctors, and other professionals.

Communication

The first step is establishing communication. People have varying ways of communicating. Avoid making assumptions about how someone communicates with you, especially if it is not something you are used to. **Combating stigma starts with the language we use.** That's why we must all be conscious of the outdated, prejudicial language being used in the media and around us every day. As you communicate with others, be mindful of the impact of your words.

Listen to understand the situation

Listening and communicating non-judgmentally can help the client feel heard and understood. This can make it easy for the person to feel comfortable to talk freely about their challenges and begin to seek support.

Ask questions which show that you genuinely care and are interested in what the client is saying.

You mentioned... Can you tell me more about that?

Check your understanding by re-stating what they have said and summarizing facts and feelings. Below are some things to think about from the client perspective.



Signs that you ARE listening

- You ask questions to better understand my point of view if I'm unclear.
- You grasp my point of view, even when it's different from your own.
- You encourage me to make my own decisions.
- You allow me to work through my challenges.
- You hold back the desire to give me advice.



Signs that you are NOT listening

- You say you understand even if I'm unclear.
- You say you have an answer to my problem, before I've finished telling you
 my problem.
- You finish my sentences.
- You tell me about your experiences and how you overcome your challenges making mine seem unimportant.

Critical Reflections on the Types of Questions we ask During Intake

It is always important to perform an intake as a conversation, and less related to paperwork, as this allows for the conversation to flow while receiving useful information.

An intake is supposed to do three things:

- 1. Illustrate whether a person is eligible for services.
- 2. If the answer is yes, then it will allow for you to retrieve information that must be documented in your database, which will go back to your funders; and
- 3. Is where a person gets to know about your services, and you get to know about what types of support they need.

The intake is not where you find out all of your client's history, it is about finding out just the information needed to answer the questions above.

Also, look at your intake documents and critically analyze what they ask. **Here are some thoughts to consider when reviewing your intake documents:**

- 1. Does the gender/sex section only have male and female or man/woman as options? How might this exclude gender diverse clients?
- 2. When asking about ethnicity, is it missing some identities, or not allowing for someone to pick multiple (if an intake says white, African, Latino, South Asian, what would an Afro-Latino check? A white South African?) We need to allow for multi-ethnicity options.
- 3. Are there questions that you could skip if you feel a client is nervous, apprehensive, distrustful, etc.?
- 4. Do all the questions provide you with the information needed above?
- 5. Is there a way to provide background information for some of the questions so that a person knows why they are being asked?



- 6. Is there a prompt or something written to remind the intake personnel to inform clients that they only have to answer what they are comfortable answering?
- 7. Is the intake process accessible? Do you travel to your clients? Do service providers know sign language? Have you asked about possible support/accommodation needs before the intake?

Ways in Which Managers and Executive Directors can Practice Disability Justice

Agency-wide implementation, although often mentioned, can sometimes not be practiced due to a variety of reasons. Some are out of the control of management, but there are many opportunities for management to implement disability justice practices in their workspaces. If these practices are only something that frontline staff are responsible for adhering to and implementing, it could leave staff feeling burned out, powerless and unsafe.

Policy Implementation

Have you ever heard of the old social service saying, "if it's not documented, it didn't happen"? This is the stance you should have with the ways in which you practice disability justice. If there are no policies in place that directly speak to the disability justice framework your agency stands by, it can be hard to create accountability and sustainability. Having policies already written into collective agreements, policy manuals, rights and responsibility documents, mission statements, and strategic planning documents is very important.

As leaders, it is your responsibility to ensure that accessible spaces are protected, expected, and implemented. Each organization has a role to play in challenging oppression.

This can be through:

Policies: reviewing existing policies with an ARAO and Disability Justice lens, including human resources (recruitment, performance management, etc.)

Samples of Wording in Policy:



The Employer and employees agree to conduct their affairs in accordance
with the law... (agency takes it further by adding language to the already
existing legislation) parental status, number of dependents of the person,
HIV/AIDS status, record of offenses, criminal record, receipt of public
assistance



2. Harassment can be intersectional. Should this occur, complainants need not make a complaint on one specified ground but may make a complaint that acknowledges the intersectional nature of harassment.



3. The Agency... works within Anti-Racism/Anti-Black racism and Anti-Oppression frameworks.



4. Rooted in up-to-date research and consistently active community engagement, our progressive strategies are implemented by our capable staff - who are committed to improving the quality of mental health and addiction care for *racialized people (this language is embedded with the mission, vision, AND values with explanations as to HOW).

Organizational Responsibilities

Each organization has a role to play in challenging oppression.

This can be through:

- 1. Practices: ongoing capacity-building related to ARAO and Disability Justice for all staff, a transparent equity complaint process and built-in accountability mechanisms for all staff
- 2. Hiring and promotion of diverse staff (without tokenization and with the guarantee of creating safer spaces for staff)
- 3. Diversity at all levels
- 4. Ensuring that community members' experiences of oppression are understood when planning and delivering programs and services
- 5. Understanding and differentiating between professional expectations vs. personal expectations
- 6. Your agency can commit to work with communities to stop and prevent oppression from occurring



Ways in which to Practice ARAO as a Manager/ ED to create an Accessible Workplace



1. When hiring staff, ensure the entire **hiring process is accessible.** As managers, encourage and create a process that enables people with disabilities to apply. Making sure that there are multiple ways to apply, posting the job opportunities in various formats and to various agencies and websites, being transparent with examples of accommodations available for the interview process and allowing for people to bring in different forms of references and expertise (e.g., lived experience) to the table can really create a more dynamic work environment.



2. Always have **clients represented** on your Board of Directors. Boards are often some of the few ways that upper management can be held accountable to the needs of clients due to the nature of the helping profession. Remember the phrase "Nothing About Us Without Us".



3. Create **a committee** with staff, clients, and management representation to go over policies and practices to see what can be changed in order to be more inclusive, accessible and in line with the ARAO and Disability Justice lens.



4. Provide **the same accommodations**, support and empathy to your staff, as well as to yourselves, that you would expect your staff to provide to clients. Remember that ableism is often internalized, and it is sometimes hard to pinpoint. For example, many workers who disclose mental health challenges to their employers find themselves being micromanaged, being pushed out of the agency, or being passed up for promotions (Poole et al., 2017). They find this ableism discouraging, pathologizing, and ultimately makes their mental health worse.



5. Remember that washrooms that need keys, codes or fobs are not accessible for people with various mobility issues. If you have an accessible washroom that is found within a space that requires any of these things, it is no longer accessible.



6. As a manager/ED you are in a place of privilege, and that privilege can be used to better the lives of those who are oppressed. Remember that **ARAO and Disability Justice is about action.** For example, if funding cuts are hurting clients, speak up, and do so collectively with other managers and ED's. Show your staff and clients that you are there to support them.



7. Create training opportunities for staff and compensate them for doing training outside work hours (lieu time, compensatory time, banked time).



8. Make Disability Justice, anti-racism, resisting anti-Black racism and anti-oppression training a priority and/or make them mandatory. Allow for them to be done within office hours and within the workplace.



9. Provide **employment opportunities** for people who volunteer at the agency. Many clients are looking for opportunities to gain work experience but can sometimes be passed up for paid employment opportunities. They are asked to work for free, often being an integral part of keeping a functioning agency. Let's not pass up clients who can really speak to the benefits and gaps within our agencies. They are a real asset.



10. When creating new programming, **conduct community consultations**. It is important not to assume what is needed for the community. Having extensive research and community consultations and paying community members for their labour when creating new interventions is important. It can help inform how these programs are funded, can create client-centered spaces and provides accountability measures for the agency, as well as for the government, because if they cannot or do not wish to fund various programs, there can be official paper trails.





This section aims to introduce disability laws from all levels, international, national, provincial, and territorial. Accessibility in Canada is about creating communities, workplaces and services that enable everyone to participate fully in society.



In Canada, 1 in 5 Canadians aged 15 and over identify as having a disability (Statistics Canada, 2018). Of the 6.2 million Canadians with disabilities, approximately 21.4% identified as immigrants, while 14.3% of people with disabilities identified as racialized (Statistics Canada, 2018). Only 59% of Canadians with disabilities aged 25 to 64 are employed compared to 80% of Canadians without disabilities (Morris, Fawcett, Brisebois and Hughes, 2018). For those individuals with disabilities, being able to participate in society, shop in the same places, learn at the same schools, read the same online information – is a fundamental human right. Accessibility laws are written to protect and enforce those rights.

The advocacy of disability stakeholders and organizations in Canada has been critical in promoting the rights of persons with disabilities. The Government of Canada is building on this legacy to improve accessibility and promote inclusion for everyone in Canada. There are several **legislative and legal tools** at our disposal in pursuing equitable opportunity for im/migrants and refugees with disabilities and d/Deaf newcomer on an international, national, and provincial/territorial level. The principles that underpin them all are participation, inclusion, non-discrimination, and accessibility for people with disabilities.

The goal of these legislations is to:

Meet legal obligations ✓
Comply with domestic and international law ✓
Promote accountability ✓

1

International

The United Nations Conventions on the Rights of Persons with Disabilities

Gives universal recognition of the dignity of persons with disabilities. The Convention can be used to advocate for community development work and policy reforms that aim to remove barriers to inclusion for people with disabilities. "To promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity."

To learn more, click here www.un.org/disabilities

2

National

The Accessible Canada Act

The Accessible Canada Act uses a key principle from the disability community, "Nothing Without Us", which means that persons with disabilities should be consulted when developing laws, policies and programs that impact them. The Government of Canada worked with persons with disabilities and organizations who advocate on their behalf, to better understand the full diversity of the community it serves.

On June 20, 2018, the Government of Canada introduced Bill C-81, *An Act to ensure a barrier-free Canada (the Accessible Canada Act)* in Parliament. On June 21, 2019, the Accessible Canada Act received Royal Assent and came into force on July 11, 2019. The following content has been adapted from the Government of Canada's website on the Accessible Canada Act.

Definitions from the Act



a. Barrier

"Means anything—including anything physical, architectural, technological or attitudinal, anything that is based on information or communications or anything that is the result of a policy or a practicethat hinders the full and equal participation in society of persons with an impairment, including a physical, mental, intellectual, cognitive, learning, communication or sensory impairment or a functional limitation."



b. Disability

"Means any impairment, including a physical, mental, intellectual, cognitive, learning, communication or sensory impairment—or a functional limitation—whether permanent, temporary or episodic in nature, or evident or not, that, in interaction with a barrier, hinders a person's full and equal participation in society."



c. Preamble

In the preamble, the Accessible Canada Act recognizes the existing human rights framework that supports equality for people with disabilities in Canada. This includes:

- The Canadian Charter of Rights and Freedoms
- The Canadian Human Rights Act, and
- Canada's commitments as a State Party to the United Nations Convention on the Rights of Persons with Disabilities

The Accessible Canada Act builds on this framework through a proactive and systemic approach for identifying, removing, and preventing barriers to accessibility.



d. Purpose

The purpose of the Accessible Canada Act is to make Canada barrier-free by January 1, 2040 by identifying, removing, and preventing barriers in **federal jurisdiction** in the following priority areas:

- Employment
- The built environment (buildings and public spaces)

- Information and communication technologies
- Communication, other than information and communication technologies
- The procurement of goods, services, and facilities
- The design and delivery of programs and services, and
- Transportation (airlines, as well as rail, road and marine transportation providers that cross provincial or international borders)

Communication, as a priority area, includes the use of:

- American Sign Language
- · Quebec Sign Language (Langue des signes québécoise), and
- Indigenous Sign Languages

The Accessible Canada Act recognizes these sign languages as the primary languages of Deaf people in Canada.



e. Principles

The Accessible Canada Act is to be implemented in recognition of, and in accordance with, the following principles:

- Everyone must be treated with dignity
- Everyone must have the same opportunity to make for themselves the life they are able and wish to have
- Everyone must be able to participate fully and equally in society
- Everyone must have meaningful options and be free to make their own choices, with support if they desire
- Laws, policies, programs, services, and structures must take into account the ways that different kinds of barriers and discrimination intersect
- Persons with disabilities must be involved in the development and design of laws, policies, programs, services, and structures, and
- Accessibility standards and regulations must be made with the goal of achieving the highest level of accessibility.



f. Application

The Act applies to organizations under federal responsibility, including:

- The Government of Canada, including government departments, agencies and Crown corporations
- Parts of the private sector that the Government of Canada regulates, such as:
 - ✓ Banks
- The federal transportation network, including:
 - ✓ Airlines
 - ✓ Railroad and marine transportation providers that cross provincial or international borders
- The broadcasting and telecommunications sectors
- The Canadian Forces and the Royal Canadian Mounted Police
- The Act also applies to parliamentary entities, with a tailored approach to respect parliamentary privilege.
 - ✓ Parliamentary entities include the:
 - 1. House of Commons
 - 2. Senate
 - 3. Library of Parliament, and
 - 4. Parliamentary Protective Service



g. The Minister

The Minister responsible for the Accessible Canada Act is to create a barrier-free Canada by January 1, 2040. To make this happen, the Minister may, among other things:

- Support and conduct research to identify, remove and prevent barriers
- · Implement policies and programs that address accessibility

- Gather, analyze, and publish information related to accessibility, and
- Work with provinces and territories to coordinate efforts on accessibility



h. Creating accessibility standards

The Accessibility Standards Canada (referred to as the Canadian Accessibility Standards Development Organization) to help create a barrier-free Canada.

Accessibility Standards Canada's mandate is to:

- Develop and revise accessibility standards
- Recommend accessibility standards to the minister to be made into regulations
- Provide services and information related to its accessibility standards
- · Support and conduct research on accessibility, and
- Share information and best practices about identifying, removing and preventing barriers

Standards, unlike regulations, are *voluntary*. However, if the Government makes a standard into a regulation, the standard becomes mandatory.



i. Enforcing accessibility

The Accessibility Commissioner enforces the Accessible Canada Act in all priority areas for most organizations, including:

- The Government of Canada
- Parliamentary entities, and banks

The Accessibility Commissioner also enforces the Accessible Canada Act in specific priority areas, such as employment and the non-passenger-built environment, for organizations in the:

- Federal transportation network
- Broadcasting sector, and
- · Telecommunications sector

The Accessibility Commissioner can use a range of tools to ensure that organizations are meeting their obligations under the Accessible Canada Act, including:

- Inspections
- Production orders (ordering an organization to provide records and reports)
- Compliance orders (ordering an organization to correct a contravention, and to take steps to ensure the contravention does not happen again)
- Notices of violation (notices setting out a warning or requiring an organization to pay a penalty of up to \$250,000 per violation), and
- Compliance agreements (when an organization agrees to correct a violation within set terms)
- The Canadian Radio-television and Telecommunications
 Commission is responsible for enforcing the Accessible Canada Act
 in the broadcasting and telecommunications sectors for the priority
 areas within their jurisdiction.
- The Canadian Transportation Agency is responsible for enforcing the Accessible Canada Act within the federal transportation network for the priority areas within their jurisdiction.



j. Complaints

If an organization has not complied with a regulation under the Accessible Canada Act, individuals can file an accessibility complaint if they:

 Experienced physical or psychological harm, property damage or financial loss, or were otherwise adversely affected

The Accessibility Commissioner will likely be the person to handle complaints in all the areas for which they are responsible.

The Canadian Transportation Agency will deal with complaints related to accessibility in the federal transportation network. The federal transportation network includes:

- Airlines, and
- Rail, road and marine transportation providers that cross provincial or international borders

The Federal Public Sector Labour Relations and Employment Board will deal with complaints related to accessibility for most federal public servants and parliamentary employees through the grievance process.

The Canadian Radio-television and Telecommunications Commission will deal with complaints related to accessibility in the broadcasting and telecommunications sectors.

Accessibility complaints under the Accessible Canada Act are different from discrimination complaints under the Canadian Human Rights Act. Organizations that meet requirements under the Accessible Canada Act could still be subject to discrimination complaints under the Canadian Human Rights Act.



k. Monitoring progress

Parliament is to review the Act 5 years after the first regulation is made, or as soon as possible thereafter. To learn more, click here <u>Accessible Canada Act</u>.

Canadian Charter of Rights and Freedoms

The Canadian Charter of Rights and Freedoms of 1982 includes a specific mention of physical or mental disability as a prohibited ground of discrimination. The Charter makes it illegal for governments in Canada to discriminate against persons with disabilities in their laws and programs.

"Section 15(1) recognizes that every individual is equal before and under the law and has the right to the equal protection and equal benefit of the law without discrimination and, in particular, without discrimination based on race, national or ethnic origin, colour, religion, sex, age, or mental or physical disability." To learn more, click here www.laws-lois.justice.gc.ca

The Canadian Human Rights Act

The Canadian Human Rights Act states that physical and mental disabilities are prohibited grounds of discrimination. Under the Canadian Human Rights Act, federally regulated employers are bound by law to prevent discrimination and to provide access and support to individuals with disabilities.

"To promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity."

To learn more, click here www.un.org/disabilities

Duty to Accommodate

Society has a duty to remove and prevent further barriers that inhibit a person with a disability from fully participating in their communities and daily life.

The Employment Equity Act

This law requires federally regulated employers and crown corporations to <u>eliminate</u> <u>barriers that prevent people with disabilities</u> (and other designated groups) from participating equally in the workforce. It also calls for these employers to provide accommodations, such as ensuring the technology used to perform a job is accessible.

To learn more visit Employment Equity Act (S.C. 1995, c. 44).

3

Provincial

Human Rights Legislation

Each province or territory has a human rights act and subsequent laws that address discrimination against people with disabilities.



1. Alberta

Alberta's current disability policy exists as a "patchwork of legislation" made up of

- Acts addressing specific aspects of accessibility (e.g. the Service Dogs Act)
- Acts with a different focus, that contains clauses on how disability affects the administration of that focus (e.g., the Student Financial Assistance Act.)

There are 30 current pieces of legislation in Alberta related to disability and accessibility, but no central principles ensure a consistent approach to accessibility.

• Alberta Human Rights Act:

includes physical and mental disabilities in its list of prohibited grounds for various types of discrimination. This, however, does not establish an active duty to accommodate.

To learn more click here ALBERTA HUMAN RIGHTS ACT.



2. British Columbia

British Columbia Human Rights Code:

is the current governing law that protects and promotes human rights. The Code helps to protect people from discrimination and harassment.

To learn more visit <u>HUMAN RIGHTS CODE [RSBC 1996] CHAPTER 210.</u>

• Accessible British Columbia Act:

provides clarity to the types of organizations that will be subject to accessibility requirements under the Accessible British Columbia Act. The list includes school districts, schools and other educational institutions, municipalities and municipal departments, and health authorities, among other public-sector organizations (covered organizations).

A provincial accessibility committee is being established by the Minister of Social Development and Poverty Reduction. The committee will propose accessibility standards that assist in the identification, removal or prevention of barriers in such areas as:

- Employment
- Delivery of services
- The built environment
- Information and communications
- Transportation
- Health
- Education
- Procurement

To learn more visit Accessibility legislation plain language summary.



3. Manitoba

Manitoba Human Rights Code:

is Manitoba's provincial human rights law. It protects individuals and groups in Manitoba from discrimination and is administered by the Manitoba Human Rights Commission.

To learn more visit Manitoba Laws.

• The Accessibility for Manitobans Act:

Manitoba's provincial accessibility legislation was passed in 2013 as part of its goal of making Manitoba accessible by 2023. The Act's structure is similar to Ontario's law. It

currently focuses on five mandatory accessibility standards that apply to both the public and private sectors.

To learn more visit The Accessibility for Manitobans Act.



4. New Brunswick

New Brunswick Human Rights Code:

is a provincial law that prohibits discrimination and harassment based on 16 prohibited grounds of discrimination in specified activities that fall under provincial jurisdiction. It is the principal legal instrument through which equality rights are enforced in New Brunswick. The Act applies to public accommodations, services and facilities; the sale of property; labor unions and professional, business or trade associations; notices and signs; and all aspects of employment.

To learn more visit The New Brunswick Human Rights Act Explained.

New Brunswick Accessibility Act:

Many in the province have been advocating for a New Brunswick accessibility legislation to go beyond symbolic statements of equality to communicate that persons with disabilities in New Brunswick are innately equal and deserving of legal protection and support. Many feel this will bring disability rights to the forefront, acknowledging that such rights exist, and provide a mechanism to enforce those rights.





5. Newfoundland and Labrador



The Human Rights Act of 2010:

protects people from discrimination and harassment. The Human Rights Act recognizes the inherent dignity and worth of all people, that we all have equal rights and opportunities and should live free from discrimination and harassment.

To learn more visit CHAPTER H-13.1 AN ACT RESPECTING HUMAN RIGHTS

• An Act Respecting Accessibility:

in the province has had a second reading in the House of Assembly. The purpose of this proposed legislation is to improve accessibility by preventing, identifying and removing barriers that prevent persons with disabilities from full participation in society. The proposed Bill would:

- Authorize the establishment of accessibility standards to improve accessibility;
- Establish an advisory board to make recommendations to the minister regarding accessibility standards;
- Require an individual, organization or public body that is subject to an accessibility standard to take actions to prevent barriers from being created and to identify and remove barriers;
- Require public bodies to prepare accessibility plans every three years and make them publicly available; and
- Provide inspection and enforcement powers to enforce accessibility standards.

To learn more visit BILL 38 AN ACT RESPECTING ACCESSIBILITY IN THE PROVINCE

To learn more visit <u>CHAPTER B-10 AN ACT RESPECTING ACCESSIBILITY TO BUILDINGS</u> FOR PERSONS WITH DISABILITIES



6. Nova Scotia

• The Nova Scotia Human Rights Code:

The <u>Nova Scotia Human Rights Act</u> prohibits actions that discriminate against people based on a protected characteristic in combination with a prohibited area.

To learn more visit Human Rights Act.

• The Nova Scotia Accessibility Act:

In 2017, the province of Nova Scotia passed legislation aimed at developing accessibility standards in five areas, including information and communication. The Accessibility Act aims to make Nova Scotia inclusive and barrier-free by 2030 and includes six accessibility standards which are currently under development. Nova Scotia was the third province to enact accessibility legislation, after Ontario in 2005 and Manitoba in 2013.

To learn more visit BILL NO. 59.

Legislation Nova Scotia



7. Ontario

Ontario Human Rights Code (OHRC):

The OHRC guarantees freedom from discrimination because of disability in the areas of employment, housing and with respect to services, goods and facilities. "...equal rights and opportunities without discrimination in areas such as jobs, housing and services. The Code's goal is to prevent discrimination and harassment because of race, sex, disability and age... All other Ontario laws must agree with the Code."

The OHRC allows for only three factors to be considered in looking at undue hardship: cost, outside sources of funding, and health and safety requirements. If an employer's lack of accommodation does not fall within one of these three categories it cannot be exempt under the claim of undue hardship.

To learn more visit www.ohrc.on.ca/en/ontario-human-rights-code

Accessibility for Ontarians with Disabilities Act (AODA):

The AODA lays out mandatory province-wide standards on accessibility in all areas of daily life for both public and private sectors. This Act applies to every person or organization in the public and private sectors of the Province of Ontario, including the Legislative Assembly of Ontario.

The AODA standards were developed to identify, prevent and remove barriers to accessibility for people with disabilities. They have specified timelines for fulfillment and are enforced through inspections, compliance orders and administrative penalties. This act reinforces the OHRC's definition of disability to include physical, mental health, developmental and learning disabilities both visible and non-visible. The AODA specifically addresses the issue of conflict in laws, stating that the law providing the highest level of accessibility supersedes any other existing law.

Below are the current AODA Standards:

- The <u>Information and Communications Standards</u>
- The Employment Standards
- The <u>Transportation Standards</u>
- The <u>Design of Public Spaces Standards</u>
- The <u>Customer Service Standards</u>
- In addition, two new AODA standards are being developed:
- The <u>Health Care Standards</u>
- The Education Standards

To learn more <u>www.e-laws.gov.on.ca</u>

Also visit What are AODA Standards?



8. Prince Edward Island (PEI)

• PEI Human Rights Act:

In PEI, people are protected by law from many types of discrimination under the Human Rights Act. The Act describes what acts of discrimination are prohibited, and tells the Commission how to investigate and resolve complaints of discrimination. The Act also tells the Commission to work to prevent discrimination from happening in the first place by educating the public on their rights and responsibilities.

To learn more visit They're your rights to know.



9. Quebec

Charter of Human Rights and Freedoms

The Charter is the human rights legislation that governs human rights in the province of Quebec.

To learn more, click here https://www.legisquebec.gouv.qc.ca/en/document/cs/C-12

 Act To Secure Handicapped Persons In The Exercise Of Their Rights With A View To Achieving Social, School And Workplace Integration

Quebec was the first province to pass an accessibility law in 1978, requiring public sector organizations, such as government agencies and municipalities, to meet certain accessibility requirements. This legislation was amended in 2004.

To learn more, visit <u>legisquebec.gouv.qc.ca</u>.



10. Saskatchewan

• The Construction Codes Act (CCA):

The CAA and its regulations ensure the inside of buildings meet a standard of accessibility. However, Saskatchewan does not currently have standards to ensure accessibility in other areas. While the CCA will continue to oversee the accessibility of building interiors, the new legislation will cover accessibility in outside built spaces (such as parks, crosswalks, and parkades) and a number of other key area

The key areas proposed to the public for Saskatchewan's accessibility legislation were:

- Service animals
- Design of public spaces
- Information and communication
- Public sector employment
- Public sector procurement
- Public transportation

Territories



1. Northwest Territories

• Northwest Territories (NWT) Employment Standards Act and Regulations:

People with disabilities in the NWT have the right to equal protection as workers under NWT Employment Standards. This means that people with disabilities have the right to equal compensation for work done, protection from forced labour, and safe working conditions.

To learn more visit The NWT Disability Framework.



2. Nunavut

• The Nunavut Human Rights Act (the Act):

The Act was passed into law by the Nunavut Legislative Assembly on November 05, 2003. The Act protects the equality rights of Nunavummiut and safeguards an equal opportunity to enjoy a full and productive life free from discrimination and harassment. The Act continues the promotion of equal rights for Indigenous people with disabilities, with a focus on the Inuit Qaujimajatuqangit (IQ) framework.

To learn more visit Human Rights Act, SNu 2003, c 12.



3. Yukon

• The Yukon Human Rights Act (the Act):

The Act promotes and protects human rights in the Yukon. The Act protects specifically from discrimination against people on the basis of ancestry, including colour and race, national origin, religion or creed, age, sex, including pregnancy, gender identity or gender expression, sexual orientation, physical or mental disability, criminal charges or criminal record, political belief, association or activity, marital or family status, source of income

and actual or presumed association with any of these grounds. People are protected from discrimination in areas of employment, receiving goods and services (including government and private business), housing, leasing or renting, membership in, or representation by, trade unions or professional associations and public contracts.

To learn more, click here HUMAN RIGHTS ACT RSY 2002, c. 116.

Tips on Making your Agency More in Line with the Accessible Canada Act and your Provincial/Territorial Disability Legislations

In this section you will learn how to:

Include accessibility from the start ✓

Improve productivity and innovation through thinking about accessibility ✓

Things to consider when supporting staff and clients

Access to a Safer Workplace

While the Sector recognizes that no one can guarantee that a workplace is completely barrier-free and safe, it is important that we work together to co-create safer spaces for staff and clients. A safe space is one where staff and clients feel that they can talk about any issue, barriers, access needs, or disability without feeling judged or micromanaged.

Management is responsible for ensuring that staff know their rights. In turn, staff is responsible for letting clients know about their rights and responsibilities.



A space that promotes knowing your rights and responsibilities allows employees and/or clients to discuss topics related to accessibility and disability. These conversations should happen periodically and be welcomed. People do not often disclose if they have any specific needs, but if they know their rights and perceive that their workplace is a safe space, there is more opportunity for them to tell if they need any kind of support. The creation of an accessible space is important to foster belonging.

*A safe space is a space where a person can come in, exist, and thrive, without having to hide any of their identities or aspects/facets of themselves. Your agency, and the space which you occupy, should always be moving towards being safer. Also, it is not up to the agency or the workers to dictate whether a space is safe or not, much like allyship, it is up to the people you serve to decide whether your space is safe. If they feel unsafe, hear them out and make changes accordingly.

Consider power dynamics inside your organizations.

Real and perceived power exists in every workspace. It is important to understand how power dynamics impact how staff work together and support clients. Recognizing power also means a deep awareness and care around the language used in the workplace.

Consider who has power (real/perceived). Are they part of the dominant group? Do we feel comfortable naming it? What about our frontline workers? Who are we hiring? Which clients receive support? Does everyone feel valued and supported? Answering these questions honestly can help us as we work together to co-create an accessible workplace.



Untold Stories of Newcomers with Disabilities in Canada

Stories provide insight into the individual lived experiences of others and help us understand the person. They have the potential of eliciting compassion and bringing about changes through understanding. Using the work of critical disability studies scholars, OCASI took great care in sharing the narratives of five newcomers with disabilities. Over the next pages, we introduce each participant and share the stories they have told us about themselves, their lives, migration journeys, experiences before coming to Canada and their experiences in Canada. Reflect on the following questions as you read through the stories;

- What were the main challenges?
- How would you intervene in this situation centering the client?
- What type of support and/or resources might be helpful for service providers to address these challenges?
- How might your organization benefit from embedding the Accessible Canada Act into the development of policies, practices, and procedures?



Adam, New Brunswick, Moncton, Canada

Adam is a 22-year-old Syrian refugee to Canada. He lived in Syria for the first 13 years of his life with his six sisters and three brothers. Adam mentions that his family were farmers and enjoyed being outdoors. At the age of 7, Adam began going to school until Grade 6. Adam knew early on that people in his family had a genetic condition where they could lose their vision as they got older.

At the age of 12, Adam began to lose his vision which brought about many obstacles and made him feel depressed. There was little to no support for people with visual disabilities in Syria. Adam, like others with vision loss struggled to navigate a world without accessible support and resources. He found schooling inaccessible, did not receive any additional support from his teachers and was forced to drop out.

Leaving Syria for Jordan

In 2012 when the war began in Syria, his family made the difficult decision to move to Jordan. In 2014, Adam and his family left for Jordan where they lived in a refugee camp for the next five years. They chose Jordan because the country had the same culture and language spoken in Syria. Adam shares that the Syrian people are a peaceful people that want a peaceful life. The journey from Syria to Jordan was treacherous, given the inaccessibility of navigating this journey as a disabled person.

In Jordan, he lived in a refugee camp with his family. As refugees, they did not have the same rights as permanent residents or citizens. The only place they could belong was in the camps. His routine at the refugee camp consisted of staying in the camp, sleeping, and waking up. He tried to go to school in Jordan, but it was inaccessible for a person with a visual disability. He tried to go to private school in Jordan, but it was too expensive. All of this made him frustrated, and he eventually gave up trying to go to school.

Moving to Canada

Adam and his family were supported by the United Nations to relocate to Canada. In 2019, Adam and his family (mom, sister, and brother) arrived in New Brunswick, Moncton, Canada. He felt as though things in Canada would be better. However, his life as a newcomer was difficult as he did not know the language, people or culture.

Navigating settlement services

Through a settlement organization, he met people from Syria and began to learn English, making it easier for him to communicate with others. Unfortunately, he felt the settlement service providers did not understand the unique challenges his family experienced with multiple people being visually impaired and did not provide them with the information needed to successfully navigate life in Canada. He also felt that those within his cultural

community could have done more for him. He recalls an incident where his mom was very sick and feeling helpless when turning to the settlement providers.

Adam shared that he is grateful for the disability-specific services he had access to in New Brunswick and service providers' willingness to support him and share valuable information with him. Adam feels that knowing English makes life easier to navigate when you are new to Canada.

Before Covid

Before Covid-19 began, Adam would go out to Arab places. He felt welcomed by the Canadians he would interact with, especially his teachers who helped him in many ways, including learning English and motivating him to do his best. While his vision loss makes it difficult for him to navigate the world around him as places and spaces are not built with people with vision loss in mind, he is determined to discover and navigate the world by himself. He feels that a person must be determined to navigate and learn. For him, his vision loss is not the obstacle, inaccessibility is. He wants to live his life like everyone else.

Living through Covid

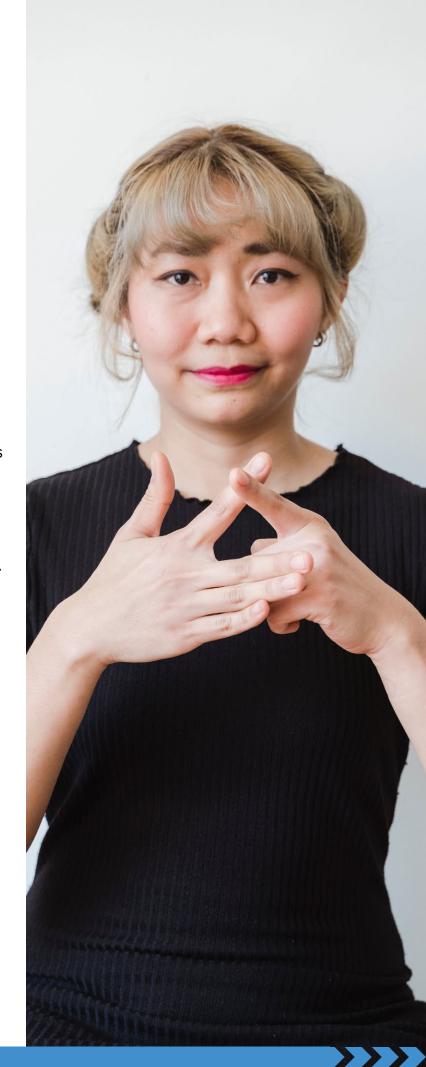
For Adam, Covid-19 has presented new challenges, especially learning online. There are not many supports he's been made aware of for people with visual disabilities. In addition, he is trying to sponsor his brother but was told because of Covid-19 the sponsorship process will take two years before it can start. For Adam, it is hard to wait to know when he will be reunited with his brother.

Supports for im/migrants with disabilities

Adam feels that the settlement organization he and his family worked with could have done more to make them feel as though they belonged. He was hopeful that because they were from the same cultural background, they would have understood what the family needed, but in some ways, he felt as though he was a burden. He thinks **it's important** that service providers understand how they make others feel and the important role they play in supporting the settlement of newcomers, especially those who experience compounded barriers.

Jane, Saskatoon, Saskatchewan, Canada

Jane is a 34-year-old woman who was born and raised in Zhengzhou, China. When she was one years old, she got a fever and was taken to the hospital where she had an allergic reaction to the medical intervention she received. From there, her hearing became impaired. Her mother took care of her by providing much of her early learning and care. She was treated as a "normal kid" and did not receive any additional supports from others; however, she experienced several challenges living in a world that does not support people with hearing loss.



When describing her hearing loss, she shares that she does have some hearing but was constantly bullied as a child because of her disability. In high school, the bullying stopped, and she was expected to keep up with school with no additional support from her teachers. The expectation placed on her was to be *normal* by learning in the same way as her hearing peers. She found this extremely stressful and began to rely on reading lips so she could communicate with others and get her work done.

While attending university, she met her husband, who also has a hearing impairment. Once they were married, he wanted to move to Canada as he felt Canada would offer them a better life given their disabilities.

Moving to Canada

Jane's husband and in-laws moved to Saskatoon, Saskatchewan, Canada first as permanent residents while she stayed behind and worked in China before joining them in 2019. She mentions that the move to Saskatoon has not been an easy journey but because she experienced a lot of difficulties in China, she felt she could overcome barriers in Canada. However, being a new immigrant brings challenges, especially as someone with a hearing loss and language barriers. The barriers she is currently experiencing are different from those she experienced in China.

Jane shares that when she arrived in Saskatoon, she was able to connect with a settlement agency that provided her with the support she needed to begin her life in Canada (e.g., setting up a bank account, understanding the medical system, getting a driver's license, registering for daycare, etc.). Moreover, she connected with new immigrants from China in her neighborhood who knew how to navigate Canadian society. They recommended services they had accessed that they felt Jane and her family would benefit from.

A silver lining for Jane has been the support she has received from people in her community and the organizations she has connected with. Technology and her ability to use it have made communication easier. She uses the phone to translate from Chinese Mandarin to English whenever she needs to communicate with someone. She is also able to find services and support she can access through the internet.

Living through Covid

Jane and her family have been severely impacted by Covid-19. During the lockdown, she was afraid to go out, especially as a new parent as she was worried for her young child whether her child would have normal experiences and be able to socialize with other children. She was unable to make friends and share the highs and lows about being a new parent, making her feel even more isolated. When she did venture outside, everyone was mandated to wear a mask, and so she was unable to communicate by lip reading, so she had to find different ways of communicating with others.

One of the biggest challenges Jane has experienced as a new immigrant is understanding Canadian laws and the support available to her as a parent and for her child, especially during Covid-19. Being a new mom during Covid-19 has been very challenging as she does not know where to go and whom to ask questions. To find answers to her questions, she spends a lot of time googling her questions. Speaking about services, she used an online platform called We Chat which is the equivalent of Facebook Messenger. She has also made online friends who she can speak with in Chinese Mandarin. It was also through this messenger that she connected with settlement workers who provided her with support.

Social experiences

Jane mentions throughout the interview that she is a quiet person; however, it does not mean that she doesn't want to have friends. As a person with hearing loss, she has struggled to communicate with others making it difficult to make friends. Right now, her main priority is being a mom and caring for her young child. She feels that when her child is older and more independent, she will join the labour force and pursue other interests.

Beneficial supports for new immigrants with disabilities

When speaking about the support new immigrants with disabilities could benefit from accessing, Jane mentions the **importance of service providers being able to communicate in sign language.** For Jane, sign language considers the needs of different people and enables others to access information more quickly.



When she was born, her left leg was not fully developed, which impacted how she walked. Reflecting on her childhood, she shared that she always felt she could do anything; however, she was reminded by others that she was different. Other kids would laugh and stare at her disability; however, others' perceptions about what she could do did not stop her from participating in sports and excelling at school. She wanted to prove she was no different from people without disabilities and live like everyone else. Jheanelle feels that her perseverance in school and sports allowed her classmates to see a positive side of disability and that she belonged in these spaces.

In 2003, Jheanelle's father, who lived in Canada, applied to sponsor her and her brother. Initially, Immigration Refugee and Citizenship Canada deemed her medically inadmissible and presumed her a burden on Canada's health and social services because of her disability. Her brother moved to Canada while she was forced to stay behind. That feeling of being labeled a burden would shape her relationship with her disability.

That same year, her leg was amputated. In reflecting on her experiences, she shares that she rushed her recovery to keep up with her peers. During this time, she also began high school and became more self-conscious of her disability as she was using crutches. Additionally, she was trying to get a prosthetic leg as her family did not have the financial resources to privately purchase one for her and were collecting donations.

For her, becoming a teenager made her more self-conscious of her disability. Her differences were amplified, and so she tried to find ways to hide her disability or pass as able-bodied. She began to wear long pants and skirts as a way of passing. Eventually, she received her prosthetic leg and would be deemed admissible to Canada, joining her father, brothers, stepmother, and sisters.

Moving to Canada

In 2008 Jheanelle moved to Toronto, Ontario Canada to attend Grade 12. Her stepsister was the same age as her, making the transition smooth as Jheanelle had an ally at school. Moreover, she had a strong social support system through her extended family giving her more social capital than what she had in Jamaica. Her dad connected with his network in Canada, allowing him to support Jheanelle in accessing/navigating the health care sector when she arrived.

Jheanelle shares that there are more public health care services in Canada to support someone with her needs, but such support was limited in Jamaica. In Jamaica, she had

to get donations to cover the cost of the prosthetics, while over here, she had options. Moreover, the equipment used is different.

Given the familial support in Canada, Jheanelle feels that she had an easier transition than most immigrants. In Canada, her dad and stepmom knew where to go and what resources and services to access for her disability-related needs. In Jamaica, Jheanelle never had accommodations. She shares that there are not many resources for people with disabilities. Because she had to do so much without support growing up in Jamaica, she struggles even when those supports are available.

The feeling of being a burden would shape her interactions with peers and her desire to be independent and not ask for support when needed. It also impacts how she moves in public spaces and understands the world around her. For example, in the past, she tried to hide her disability and access needs to not burden friends and family. It wasn't until being diagnosed with Lupus that she had to confront these internalized negative feelings of needing help. When she began her Master's degree, she connected with other people with disabilities, which was validating in terms of being herself without worrying about how someone would perceive her because of her disability, understanding disability culture and disability acceptance, and also helping to navigate ableist systems. Jheanelle regrets not having the opportunity to connect with other disabled immigrants when she first came to Canada.

Navigating life through Covid

As the realities of Covid-19 set in, Jheanelle was finishing up her Master's degree and awaiting fitting for a new leg. Before Covid-19, she started the process of fitting for a new leg. Many of her appointments were canceled and fitting for her new leg was pushed back months later during the pandemic. A lot of the conversation around that time surrounded what services were deemed essential, and some services used by people with disabilities like her got rounded up into non-essential services by the province. However, without such services, she struggled to navigate this new world.

Supports needed for im/migrants with disabilities

For Jheanelle, it's important to understand that **people with disabilities are diverse and have many different identities, all which impact their experiences.** Considering the needs of newcomers with disabilities when creating programs and services will ensure that no one gets left behind.



Robel, Winnipeg, Manitoba, Canada

Robel is a 39-year-old Eritrean immigrant with a hearing disability born in Sudan. At the age of 10, he along with his Sudanese parents and siblings moved to Eretria where they became refugees due to the war in Sudan.

Speaking about this childhood, Robel shares that he was born with normal hearing. At the age of four, he contracted an illness, became sick and eventually became completely deaf in the left ear and has 30% hearing in the right ear. He shares that he is "half and half" because one side is completely deaf, and on the other side, he is "hard of hearing." He identifies as being Deaf and hard of hearing. Growing up with a hearing disability was extremely challenging for Robel as he found it difficult to communicate with his family, he couldn't hear what they were saying, so he learned how to read lips. He could read well, so he understood when others wrote things down.

At school, he never met or interacted with other Deaf people, which made studying challenging. However, after finishing high school, he met some Deaf people and realized he could communicate through sign language, so he began to learn it.

As he was finishing the 4th grade, his parents made the decision to leave Sudan and return to Eretria. Robel found life in Eretria difficult as there was a lot of oppression and violation of human rights. He was forced to join the army in Eretria. After 7 years in Eretria, he escaped back to Sudan, but it eventually became unsafe for him to stay in Sudan, so he made the decision to flee.

Three years ago, Robel, his wife and son were living in Uganda, where with the support of relatives, they learned what was needed to apply for refugee status in Canada. Before moving to Canada, Robel spent a lot of time reading about living in Winnipeg, Canada so they could be prepared for anything.

Settlement Services

Regarding navigating social services in Winnipeg, Robel shared that he really wanted to find services for Deaf people, so he went to a settlement organization in Manitoba. Through the organization, he completed a course on Canadian culture and life in Canada. After that, he had his English language skills tested and was connected to an organization that supports people with disabilities. Robel feels that having disability and settlement services in the same organization enabled him to receive support in a timely manner. The settlement organization also connected him with other disability organizations to help him learn American Sign Language. He also worked on his English language skills and speech to support him in getting a job.

Living life

Robel's life in Winnipeg involves spending time with his family and friends and going to work. He feels a sense of inclusion in the community he lives in. While Robel feels included at work, he shares that it is not without challenges as a Deaf Eritrean immigrant man. When people at work are new and have not interacted with Deaf people before, they can be dismissive and ignore him. He tries to remain patient, but it does get disheartening when people choose to ignore him.

Life through Covid-19

Life through Covid-19 has presented challenges for Robel and his family. He mentioned that before, it was easy to go out, now a pass is required that needs to be scanned to show that you are vaccinated. Also, with everyone wearing a mask, he can no longer read lips and struggles to communicate with others. A trick he has learned to navigate this new world is always making sure he has his phone on him so he can share what he wants to say through a text. This also allows others he interacts with to text him back, making information accessible.

Supports needed for immigrants with disabilities

When discussing how immigrants with disabilities can be supported, Robel mentioned **the importance of full accessibility when navigating settlement and disability services**. He found service providers supportive as they helped him navigate life in Canada and get the support needed so he could be successful beyond settlement. In essence, having various services (disability and settlement) in the same place with service providers who are compassionate made all the difference.



Sam, Vancouver, British Columbia, Canada

Sam is a 34-year-old immigrant woman who self-identifies as being visually impaired, having attention deficit hyperactivity disorder and Autism. She was born in a small town in Iran, where she grew up in a large family. Sam has a genetic condition along with two of her siblings, where they slowly lose their vision as they age. Reflecting on her childhood, she shared that she could do everything and navigate life without any struggles when she had her vision. As she got older, she was bumping into objects, unable to read different fonts, and needed the support of others to move around. Braille was not an option for her growing up as she did not have access to it. Sam shares that she did not receive any accommodations or assistance in school from her teachers. which made life harder. Some classmates volunteered to help her with her studies, and she received emotional support from a friend in school, making her feel that she could manage her life.

As Sam got older, she began to recognize her sexual orientation was different from other girls, but she did not have the words to articulate what all of this meant, nor did she have access to information to help her understand her feelings for other girls. She felt isolated and alone as she tried to make sense of her feelings for other girls as she grew up in a religious, traditional patriarchal family. For her, navigating these feelings as someone with a disability made her feel as though she was suffering.

At 18, she began traveling as a part of a team around the province with other visually impaired people. She learned that there were other people like her, and she was fortunate as she had friends. After high school, she went to University of Tehran and finished her bachelor's degree in Communications and Public Relations. As she got older, she began to use a cane to support herself.

After Sam finished university, she wanted to find a job but was told that she did not need to work as she would have a husband to care for her. As a young woman, she experienced a lot of unwanted attention from men and experienced different forms of violence. She felt as though she didn't have freedom of choice because she is a blind woman. As she asserted her independence, her dad threatened to cut her off financially. She shared that she wanted to change her life, learn English, and learn music.

In Iran, she had a secret girlfriend, but she started to feel that life was getting dangerous for her, that her family knew about her girlfriend. Given that it's illegal to be in a same sex relationship, she became fearful for her life and knew she had to leave Iran.

At 25, Sam fled Iran and lived in Turkey as a refugee. Life in Turkey as a blind refugee woman was difficult as she did not know the language, did not know anyone, and did not have any money. She would move between refugee camps and witness the violence inflicted on refugees and the hopelessness many people felt. This made her depressed and suicidal. Eventually, she contacted a 2SLGTBQIA community in Toronto, Canada. The organization worked with her to process her paperwork to apply to come to Canada as a refugee. She noticed that many refugees without disabilities got into Canada or the United States while she had to wait longer.

Coming to Canada

At 28, Sam moved to Canada and settled in Vancouver. As someone who experienced a lot of traumas, she thought Canada would provide much more care and assistance, but she had to advocate for everything she now has. She did not receive the support she needed to start a new life. She initially stayed at a welcome center in Vancouver. Because she is

blind, they were unable to find a room for her. Reflecting on her story, she feels that she was forced to move in with another refugee where they rented a room. She moved around a lot, trying to find a safe place to live without much support from service providers. Most of the places she lived in were not accessible for people with visual disabilities, and many service providers did not understand her unique experiences as a refugee who had experienced significant trauma. Eventually, with the support of other Iranians, she found a safe place to live which she feels saved her life as her basic need of having shelter was met.

Finding a job

While Sam does appreciate the safety Canada has offered her, she feels that most settlement services are not created for immigrants with disabilities. While disability services do not take into consideration the unique challenges newcomers experience. She gives the example of trying to register to learn English and not being accepted because of her visual disability. She was told that because she is blind, they could not accommodate her. She wants others to know the additional barriers she has experienced as a blind immigrant woman making it difficult for her to live a more independent life.

Living through Covid-19

During Covid-19, Sam said she learned a lot of technology which has helped her navigate this new reality. She learned a lot of information was inaccessible online, and it takes others longer to respond to her. She also started to practice music which was her coping mechanism. While there were home care services for the elderly, those same supports were not in place for someone like Sam because she was under 65. If she needs home services, she needs to pay out of pocket. Even though she is advocating to get support with processing her immigration papers, cooking, cleaning, and shopping, she is not receiving this support.

Life now

Right now, Sam is dating, but, outside of her partner, she does feel lonely. She does not have places to socialize and hang out with others. She feels if there was a cafe or restaurant for people with special needs who would be able to hang out together, be there for each other and feel safe, their needs would be met.

She is still trying to find work but feels that because Canada does not have a lot of newcomers with disabilities, many lack knowledge on how best to support them and set them up for success.



Glossary of Terms

- **Ableism:** The discrimination of someone based on their perceived or real disabilities (can be individual or systemic).
- Access barriers: something that prevents people from accessing goods and services
- Accommodation: changes to goods and services that make them accessible
- **Ally:** An ally is a member of the dominant group who acts against oppression out of a belief that eliminating oppression will benefit the targets of oppression and dominant group members.
- Anti-Black racism: Anti-Black racism speaks to the particular racism that exists and is used to discriminate both individually and systemically against Black/African/Caribbean people (in Canada). A particular form of racism that exists worldwide due to colonialism. Anti-Black racism is the assumption that Black people and people of darker skin are less favorable and less than people of lighter skin. This type of discrimination can be found in all colonized and previously colonized nations (Mullings et al., 2016).
- **Anti-oppression:** focuses on ending socio-economic oppression. It is a broad term used to describe a framework that addresses the various barriers that exist within society that prevent people from reaching their full potential and from societies being universally accessible. Anti-oppression requires continued learning and unlearning.
- Anti-racism: is action-based and requires tangible steps to creating a more just society.
 One cannot be anti-racist in theory; practice, continued learning AND unlearning are required. Unlearning means to recognize our biases, internalized forms of oppression and how we can work towards being less oppressive humans, communities, and societies.

- **Bias:** An inclination, learning, opinion, perspective, preference, or prejudice formed without reasonable justification that then influences a person's or group's ability to evaluate a particular situation accurately or objectively; an unfounded preference for or against. It must be noted, however, that every piece of writing, image, and audiovisual production has a bias, and it is important that authors, readers or viewers be able to identify this bias.
- **Classism:** Discrimination of group of persons sharing a similar social position and certain economic, political, and cultural characteristics.
- **Colonialism:** The policy or practice of acquiring full or partial political control over another country, occupying it with settlers, and exploiting it economically. In the late 15th century, the British and French explored, fought over, and colonized places within North America which constitutes present day Canada (Canadian Race Relations Foundation)
- Collecting your people: refers to when people within your various communities express themselves in ways that are oppressive and discriminatory, and being able to re-educate them, as a peer and on their level. The burden of education should never be on the people who are oppressed, it is on the allies who know that they will be better listened to, responded to and will be taken more seriously than those people who are being oppressed.
- Convention refugee a person who meets the refugee definition in the 1951 Geneva Convention relating to the Status of Refugees. This definition is used in Canadian law and is widely accepted internationally. To meet the definition, a person must be outside their country of origin and have a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion. (Canadian Council of Refugee)
- **Culture:** Totality of ideas, beliefs, values, knowledge, norms, communication styles and way of life of a group of individuals who share certain ethnic, historical, linguistic, racial, religious and social background. Culture is a complex and dynamic organization of meaning, knowledge, artifacts and symbols that guide human behavior. It accounts for shared patterns of thoughts and action, and contributes to human, social and physical survival.

- **Cultural Competence:** A set of congruent attitudes, behaviors, and policies that come together in an agency, system, or among professionals to enable them to feel that they can work effectively with various individuals. Although helpful, cultural competency still centers whiteness and Eurocentric ways of being as the norm and "others" of all other cultures.
- Cultural Diversity: Diversity is a broad term that refers to the variety of differences among people. Often used within the context of culture, education, organizations or workplaces it is used to refer to differences among individuals and groups. Diversity is commonly understood in terms of dimensions that include, but are not limited to race, age, place of origin, religion, ancestry, skin colour, citizenship, sex, sexual orientation, ethnic origin, disability/ability, marital, parental or family status, same-sex partnership status, gender identity, creed, educational background, literacy level, geographic location, income level, cultural tradition and work experience (Adapted from Inclusive Community Organizations: A Tool Kit, 2004).
- **Disability Justice:** a framework of understanding ableism that looks at the different parts of someone's identity (intersectionality) and status in society and how that impacts their lived experience with disability. Disability is also due to societal barriers and not because the person is lacking.
- **Discrimination:** The manifestation of prejudice. The granting and/or denying of civil liberties and opportunity to individuals or groups with respect to access to services, goods and facilities, education, employment, and health care. Discrimination may occur based on age, developmental or mental disability, ethnicity, gender, marital or family status, nationality, physical, race, religious or political affiliation, or sexual orientation. Discrimination becomes more blatant when two or more factors (e.g., economic status, class and/or racial visibility) coincide. This behavior results in minorities being mistreated/mistreated or excluded.
- **Dominant Group:** Refers to people whose social identity confers on them unearned power and privilege. Most of us have one or more dominant identities. In most parts of Canada, dominant identities are white, male, English-speaking, heterosexual, ablebodied, Christian, affluent and middle class, thirty to sixty-five years of age, university educated, from central Canada.

- **Equality:** Treating people the same based on the assumption that everyone is the same and has the same needs.
- **Equity:** Treating people differently based on their different needs in order to ensure their equality of access.
- **Identity:** A subjective sense of coherence, consistency, and continuity of self, based in both personal and group history.
- **Immigrant** a person who has settled permanently in another country. Immigrants choose to move, whereas refugees are forced to flee (Canadian Council of Refugee) (Canadian Council of Refugee).
- **Imperialism:** The formal or informal economic and political domination of one country over the other.
- Intersectionality: the way(s) in which various forms of oppression intersect and create unique lived experiences for all people. In order to be truly anti-oppressive, one must do work to understand the ways in which oppressions intersect, and to also realize that everyone's experiences of oppression(s) are unique and are not to be assumed.
- **Marginalization:** Behaviors, actions, policies, and social institutions that serve to keep various forms of power and privilege away from specific individuals and groups
- Mental Health: absence of "mental illness", ability to feel good and healthy mentally
- **Neurodivergent:** Someone who has a variation outside of the norm of how they function in terms of mood, thought patterns, socializing abilities and general mental functioning.
- **Oppression:** The domination of one individual or group by another, more powerful, individual or group, using cultural, economic, physical, psychological, or social threats or force, and frequently using an explicit ideology to justify the oppression
- **Permanent resident** a person who has been granted permanent resident status in Canada. The person may have come to Canada as an immigrant or as a refugee. Permanent residents who become Canadian citizens are no longer permanent

residents (Canadian Council of Refugee).

- **Privilege:** an "unearned advantage" that works "to systematically over-empower certain groups" in our society. Privilege assigns dominance simply based on race, sexuality, or gender, among other factors of identity.
- **Race:** A social construct with real-life consequences relating to the colonial construction of different perceived ethnicities and races.
- **Racism:** The discrimination and prejudice of someone based on their race or ethnicity; racism requires societal/systemic oppression.
- Refugee a person who is forced to flee from persecution (Canadian Council of Refugee)
- **Refugee claimant** a person who has made a claim for protection as a refugee. This term is more or less equivalent to asylum-seeker and is standard in Canada, while asylum-seeker is the term more often used internationally. (Canadian Council of Refugee)
- **Religion:** The ways in which a person or community chooses to worship and have faith.
- Sanism: The discrimination of people with real or perceived mental health challenges
- **Sexism:** Discrimination and prejudice against someone of a certain sex
- **Systemic Discrimination:** The institutionalization of discrimination through policies and practices which have become historically entrenched in systems (systemic), resulting in barriers to equality of opportunity for members of underrepresented groups.
- **Screen reader:** Software used to convert text on a computer screen to audio, often used by people who are blind, with visual impairments, or with learning disabilities.
- **Service animal** An animal, typically a dog, that has been trained to assist a person who has a disability.

- Signing/ Sign Language Any means of communication through bodily movements, especially of the hands and arms, used when spoken communication is impossible or not desirable.
- Tokenism the practice of making only a perfunctory or symbolic effort to
 do a particular thing, especially by recruiting a small number of people from
 underrepresented groups in order to give the appearance of sexual or racial equality
 within a workforce.
- **Trans/Transgender** People whose gender identity is different from the gender they were thought to be at birth.
- **Universal Design** The design and composition of an environment so that it can be accessed, understood and used to the greatest extent possible by all ..
- **Visible Minorities** Someone (other than an Indigenous person as defined above) who is non-white in colour/race, regardless of place of birth.
- White Passing/Privilege It is when someone perceives a BIPOC person (Black, Indigenous and People of Color) as a white person, for whatever reason.
- Xenophobia Dislike of or prejudice against people from other countries



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