7. Efforts were made to have Canada-based international development organizations along with CIDA incorporate disability as a conscious part of their agenda. Though very mixed in success, there is evidence that a gradual shift has taken place in the nature of development projects related to disability - from predominantly medical rehabilitation and "sheltered workshop" in orientation towards a greater emphasis on community inclusion.

These and other activities reached their peak in the late 1980s. They ebbed in early 1990s as the attention of governments shifted to other agendas, particularly those of reducing public spending and promoting trade within the context of globalization. One couldn't say that disability has been totally lost in these changes as a number of disability related international development initiatives are ongoing, but its centrality as a focus of attention within the international agendas intentionally pursued by the Government of Canada certainly has been placed in doubt.

A number of tensions can be identified that are in evidence throughout the book. Probably first and foremost is the tension between non-governmental organizations and government. There appears to be considerable evidence in the documentation that change and innovative ideas tend to come from the non-governmental sector. Clearly governments have an important role in supporting and perpetuating this change by creating a legislative or contextual framework in which the change can gain credibility. Nevertheless the innovative and new ideas tend to come from non-governmental sector and very often from the fringe areas. This would argue that there is a value in acknowledging and supporting the innovation of the voluntary sector. Considerable work is being done at this time regarding supporting the role of the voluntary sector, its struggles and challenges within Canadian society at the present time. There appears to be substantial evidence in the book that government should welcome the initiative from the non-governmental sector rather than seeing it as a threat or discouraging lobbying efforts.

Another tension that surfaces throughout the book is the tension between the consumers or recipients of services and professionals. Consumer organizations often emerged out of dissatisfactions with the services and the role of professionals in those services. At times these two sectors have been in conflict with each other. This has on occasion been necessary in order to influence change. At other times however, the consumers and professionals working together have been a very powerful influence for motivating change. This is in particular evidenced more recently in the partnership between the disability community and the academic community that is creating a new model around promoting of disability studies both in Canada as well as internationally.

The tension between the medical model and social model of disability surfaces again and again in the different chapters. The medical focuses on the problems of the individual and a uni-disability approach, whereas the social model emphasizes the societal and attitudinal barriers faced by disabled people.