happen as a result of careful pre-planning, nor did it happen accidentally. It involved some combination of prior history and experience, skills in leadership, intentionality and being in the right place at the right time.

A Brief History of the Rise of Disability as a Topic of Note

The story of disability as a topic of note is one of the rise and ebb of the tides of consciousness on the part of the general public and of policy makers. In part it is a story of the rise of advocacy for and by disabled people on issues of concern to them, particularly as these contributed to inclusion in society. To a greater extent it is a story of much larger forces at work-sometimes within Canada, at other times in significant arenas elsewhere. Taken as a whole, the last half of the twentieth century can be said to be a story of the gradual convergence and continuity of interests on the part of disabled people and advocates, the general public and public policy makers in Canada. In turn, this set the stage for activity and leadership internationally.

One can't understand disability-related developments in Canada without some sense of developments elsewhere, particularly in the years following WWII. Canada's eyes typically turned south to learn from advances in rehabilitation medicine developed in response to the needs of returning war veterans. They turned to Europe to learn from advances in vocational rehabilitation and other programs, also driven in response to the need for "sheltered work" by disabled war veterans. The horrors of Naziism contributed to development and adoption by the United Nations of its Universal Declaration of Human Rights (1948). In turn, this reflected a growing readiness by disabled war veterans, survivors of polio, parents of children with developmental disabilities and others in western democratic countries to demand their own rights. Advances in science during and after the war along with growth in post-war domestic economies, particularly in the U.S., contributed to an optimism that problems such as polio, tuberculosis and psychiatric impairment too could be addressed. The March of Dimes campaign begun in the late 1930s in the US, and championed by Eleanor Roosevelt, came to Canada in 1950 and the idea that the contribution of "just one dime" could help find a prevention for polio became the model for fund raising, joining average citizens with researchers and advocates. When the polio vaccine was developed by Dr. Jonas Salk in 1953, optimism that other disability and social issues could be solved by science was reinforced in Canada as elsewhere.

The following gives a summary of a selected number of major developments within Canada and elsewhere as they seemed to have a bearing on our role internationally. First to be developed were several organizations which arose out of an earlier wave of optimism, in the late 19th and early 20th century, when extensive effort was given to pursuing better ways to "treat and cure" disability. Those concerned with blindness, mental health and "crippled children" (later identified with Easter Seal campaigns) had their beginnings early in the century. Virtually all other disability emphases had their beginnings during or shortly after WWII. The anti-polio campaign (and the March of Dimes) began just before the war, but became intensified after. Returning disabled war veterans, both in the US and Canada, were determined not to be set aside as had largely happened after WWI, and in Canada began the Canadian Paraplegic Association in 1945. The groups concerned with physical impairment came together as the Canadian Rehabilitation Council for the Disabled (CRCD) in 1962.

Concern with cognitive impairment, too, was heightened after the war. Aided by a number of widely publicized exposès of the terrible conditions in large "mental hospitals" in the US, and the war-time experience in Britain where residents of similar institutions had become part of the labour