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Minutes of Proceedings and Evidence of the Standing Committee on

Human Rights and the Status of Disabled Persons

Pursuant to Standing Order 108(3) (b), consideration of the Economic Integration of Disabled Persons.

Chairman: Bruce Halliday

Vice-Chairmen: Jean-Luc Joncas, Neil Young

Members of the Committee who participated in this report

Louise Feltham Beryl Gaffney Allan Koury Beth Phinney





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The Clerk
Standing Committee on Human Rights
and the Status of Disabled Persons
House of Commons
Ottawa, Ontario
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The Standing Committee on Human Rights and the Status of Disabled Persons

Has the honour to present its

Fourth Report

In accordance with its mandate under Standing Order 108(3)(b), your Committee has examined the Economic Integration of Disabled Persons, specifically the question relating to Aboriginal people with disabilities, and has agreed to report the following:

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Members of the Committee



Bruce Halliday, M.P. Oxford (Ontario)

"Some people have said that what happens because of Parliamentary committee hearings is "democracy in action". In a way, this is true. Those of us who make the laws in this country try to get grassroots opinions on what is important. This kind of dialogue helps us to understand why Aboriginal people with disabilities are doubly disadvantaged. The problems are complex and challenging; they deserve the attention of all Canadians.

Neil Young, M.P. Beaches Woodbine (Ontario)

"There is absolutely no question that many Aboriginal peoples, including the people of Akwesasne, see themselves as a nation. Governments were the ones who came along many years ago and drew lines across the nations and divided them up. But that fact doesn't prevent us from ensuring that the people who live in that community have equal access to services, regardless of any line that happens to separate them."





Jean-Luc Joncas, M.P. Matapédia Matane (Québec)

"It is only recently that governments have taken an interest in drafting policies in favour of disabled persons. For example, in the province of Québec, it is only the last 20 years that governments have become more aware of the problem and have taken concrete measures in favour of the people with disabilities."

Beth Phinney, M.P. Hamilton Mountain (Ontario)

"I think our country and the people in Canada have just realized how serious this problem is. For many, many years people with disabilities were just put away in a corner somewhere and we didn't really give it our full attention. Now that we realize that their rights are equal to ours, we have a lot to do and long way to go."





Allan Koury, M.P. Hochelaga Maisonneuve (Québec)

"In February 1991, I made the recommendation for a royal commission on Aboriginal people. I had promoted a royal commission with a broad mandate. It was to include, as a complete package, everything that has to do with Aboriginal people, including those with disabilities."

Louise Feltham, M.P. Wild Rose (Alberta)

"I would like to thank the Aboriginal people who appeared during our study. They worked very hard to teach us about their communities. I think that the concerns of disabled people transcend all barriers. That is the most valuable lesson that we have learned over the years."





Beryl Gaffney, M.P. Nepean (Ontario)

"As Canada's legislators we have a moral responsibility to take serious constructive action. We can no longer allow the Aboriginal community to be the ping-pong ball in the jurisdictional debate between the federal government and the provinces."





CHAIRMAN'S PREFACE

Talking Circles are an ancient and honourable tradition among Aboriginal peoples in this country. People gathering for a meeting sit in a circle which, by virtue of its design and function, places no physical or even attitudinal barriers to discussion. Talking Circles help individuals respect and listen to one another. According to June Delisle, a Mohawk woman from Kahnawake, the circle does even more. She emphasized that "the only way we meet is in a circle, because there is no end to the circle and all people are equal."

The Standing Committee on Human Rights and the Status of Disabled Persons has called this report *Completing the Circle*. The Members chose this title because they believe that until the circle is complete, physical and attitudinal barriers will continue to exist and equality will still be a dream for Aboriginal people with disabilities.

Twelve years have passed since the last report dealing with Aboriginal people with disabilities was presented to Parliament. In many ways, these years have been insignificant compared to the length of time that Aboriginal people—including those with disabilities—have waited for justice and equality. Yet twelve years is too long a gap, given that the situation of many of these people has not improved during the past decade. Arbitrary legal classifications, such as those that separate status from non-status Indians, have too often served to confuse and complicate the lives of Aboriginal people with disabilities. Such barriers to progress must be eliminated. On behalf of the Members of the

Standing Committee, I hope that this report will have an impact on the way that the federal government deals with the concerns of Aboriginal people with disabilities.

As a Committee of Members of Parliament that tries to listen to all Canadians, we used this report to draw some broader conclusions about the way that the federal government can act to benefit citizens with disabilities. The achievement of this goal, not only during the preparation of this report but throughout the 34th Parliament, has been made possible by the dedicated efforts of the Members of this Standing Committee. As Chairman, I have had the privilege of associating with a distinguished group of colleagues from both sides of the House of Commons. I have greatly appreciated their non-partisan collaboration and commitment to the work of this Committee.

While we carried out our work, the Members of the Standing Committee were honoured to be part of a Talking Circle at Akwesasne, where we listened to the people from that community as well as to Aboriginal people with disabilities from across Canada. They told us their stories and offered us their wisdom. We thank them all for their tolerance and patience. For a Standing Committee, we have also received some rather unconventional testimony. We are grateful to Everett Soop, a Blood Indian with a disability, for illustrations especially developed for this report. In his covering letter, he wrote that "humor is never very far from tragedy, a panacea for all our sorrow... A cartoonist is not a crusader, but rather a tiller of the field where the battle is fought... We have wants and shortcomings. If I expose some of

these, I may expose some redeemable people to the possibility of a happier life."

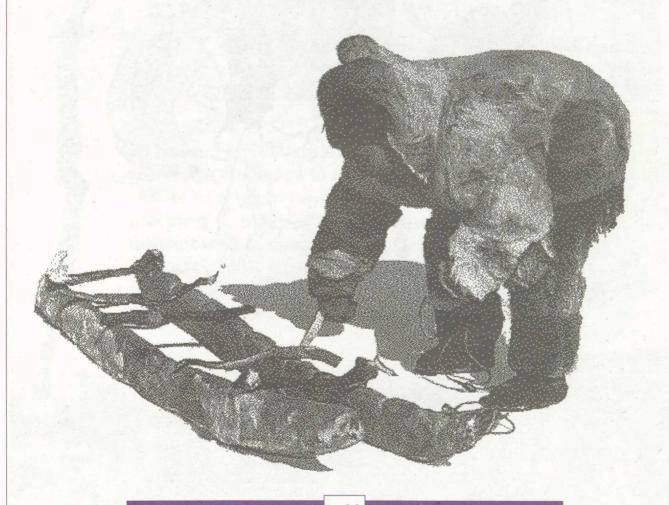
Exposing redeemable people to the possibilities of beneficial action is what reports of Standing Committees are all about. On behalf of this Committee, I can only urge those who read this report, to help us to complete the circle.

Bruce Halliday, M.P.

Bure Hallida

Chairman

Standing Committee on Human Rights and the Status of Disabled Persons



1. THE CHALLENGE

I will warn you now that if you bite into these questions of Aboriginal disability, you run the risk of raising the hopes of our friends in every corner of this land. You will invite frustration and anger from bureaucrats and politicians at every level of government and in [the] host of institutions. You will generate a multitude of excuses, buckpassing and finger-wagging as good talkers lead you down the garden path.

The task before you will not be an easy one. There is no quick cure-all, no magic formula to rub to make the problems go away...

Do you have the courage and compassion to do as your predecessors did in 1981?

Joanne Francis, National Aboriginal Network on Disability, *Minutes of Proceedings and Evidence*(hereafter, *Minutes*), Issue 39, p.32, 27 November 1990

In November 1990, this Standing Committee received a challenge to address the issues important to Aboriginal people with disabilities. In accepting it, this Committee knew it would have a difficult task to meet the standards established in February 1981, when the Special Committee on the Disabled and the Handicapped tabled its *Obstacles* report. Although the main *Obstacles*

report examined the concerns of Aboriginal people with disabilities as part of its overall study of Canadians with disabilities, the Special Committee soon became aware of the need for a full-scale analysis of the situation of this group of our fellow citizens. As Peter Lang, a member of the Special Committee, put it at the time:

While all disabled Canadians have obstacles to overcome, Native Canadians who are disabled often have more. If they live in the north or on reserves, they are isolated from services for the handicapped that are usually located in cities. And if they go to the cities to take advantage of these services, they must abandon a familiar lifestyle and community. As well, they often have to cope with the obstacle of prejudice.

Special Committee on the Disabled and the Handicapped, Follow-up Report: Native Population, December 1981 (hereafter Follow-up Report), p. 3

The Special Committee's *Follow-up Report* to *Obstacles* found that government initiatives undertaken to benefit Aboriginal people had

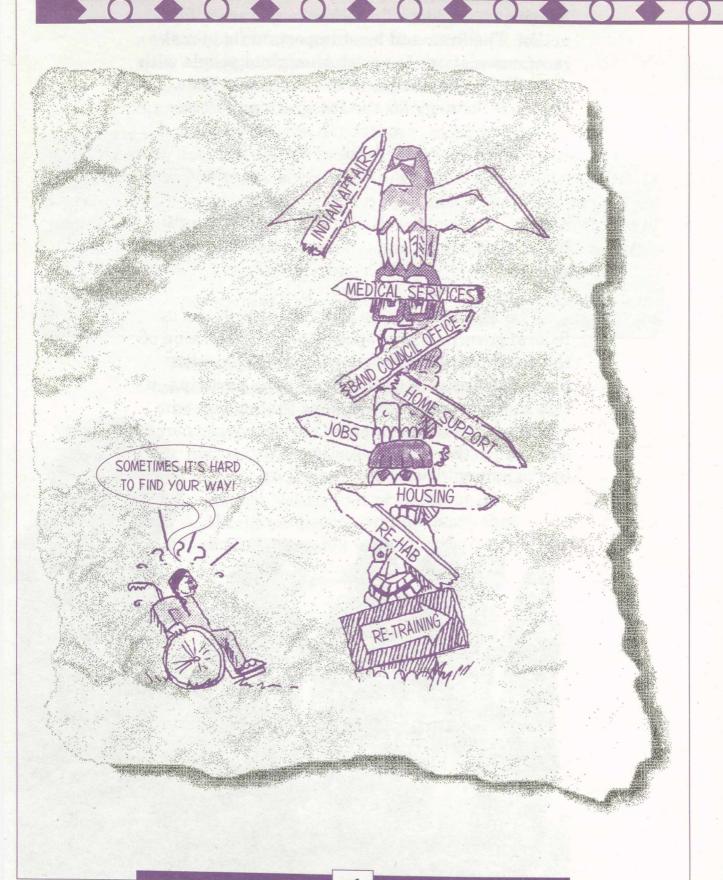
not necessarily helped those with disabilities. This second report concluded that only a real understanding of the history, values and perceptions of Aboriginal people would ensure that service programs were effective and productive.

This Standing
Committee has a unique
mandate from the House of
Commons to "propose,
promote, monitor and
assess initiatives aimed at
the integration and equality
of disabled persons in all
sectors of Canadian society."
We feel obligated, in this
report, to take up the

challenge to apply our mandate to the issues related to Aboriginal people with disabilities. Our hearings have identified three major areas for action. The first, and most important, is to make recommendations to assist Aboriginal people with disabilities. The second is to ensure that the National Strategy for the Integration of Persons with Disabilities, proposed in our 1990 report *A Consensus for Action*, applies equally to Aboriginal people. Finally, we wish to take advantage of this report's specific focus on Aboriginal people with disabilities to monitor the National Strategy and to analyse how well it is working.

The Members of this Committee look to the federal government to speed up the recognition of the particular needs of Aboriginal people with disabilities as well as to ensure their participation in society overall. We hope that our interim report of 18 June 1992 and *Completing the Circle* will reduce the need for further intervention by Parliamentarians into their lives.





2. THE CURRENT SITUATION— 'THE SAME OLD STORY'

A lot of things have happened since 1981, but they seem to be window dressing types of things. The potential for improvement with very little investment is great... Disabled Aboriginal people are frozen out of the processes that most affect their lives. They do not participate in community affairs for the obvious reasons or for those that are not so obvious. They still operate in the shadows of the bureaucracies. They live a life of isolation, a life of loneliness. It does not have to be this way if we could just help them to get organized and to raise a voice.

Joanne Francis, Minutes, Issue 39, p.31, 27 November 1990

This Committee's recent hearings confirmed that, while some things have changed since 1981, there has been little measurable progress in many areas. Although some recommendations have been implemented and others may not suit current circumstances, *Obstacles* and the *Follow-up Report* provide significant benchmarks for measuring real progress for Aboriginal people, just as they do for all people with disabilities.¹

Using this yard-stick, significant barriers remain. System-wide problems within

^{1.} Obstacles and the Follow-up Report still constitute the most comprehensive examination of disability ever undertaken in Canada. The two reports made 22 recommendations for improving the lives of Aboriginal people with disabilities. These recommendations urged the federal government, particularly the Department of Indian Affairs and Northern Development, to pay more attention to the problems of disability through direct consultations with Aboriginal people. Both reports emphasized, however, that Aboriginal people know what they need from outside their own culture. The role of the federal government must, therefore, be to work with Aboriginal communities in the development of local initiatives.

government bureaucracies, together with the harsh realities of poverty, unemployment, social and geographical isolation and inadequate living conditions, continue to contribute to the high incidence of disability amongst Aboriginal people. As well, these same factors make organizing and obtaining adequate services and programs more difficult.

The work of main-line federal departments to deal with these problems seems quite impressive when it is viewed in isolation and assessed at face value. In appearances before the Committee, officials from the Departments of Indian Affairs and Northern Development, National Health and Welfare and the Secretary of State carefully outlined both specific initiatives for Aboriginal people with disabilities and the benefits from normal departmental programs. These witnesses left us with the immediate impression that the federal government is actively devoted to solving problems related to disability amongst Aboriginal people.

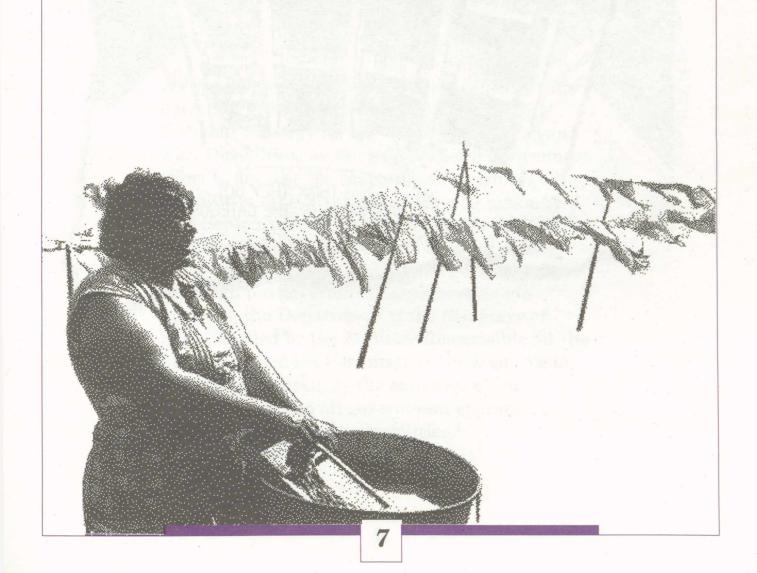
Closer scrutiny, however, revealed major gaps because the issues faced by this group of people can be appreciated only by listening to their voices. Witnesses from across this country demonstrated the most significant change that has taken place since 1981: the voice of Aboriginal people with disabilities has grown much louder and much stronger. Indeed, those from across Canada and from the United States that Members of the Committee listened to at Akwesasne in November 1991 were extremely well-informed about the nature of their battle for change. They were also articulate in proposing solutions for resolving their struggle. Over and over again, Aboriginal people with disabilities

recounted their scepticism about promises made by the federal government. Talk has been plentiful, but actions have been few and far between.

Aboriginal people with disabilities told this Committee that they need resources and technical assistance to enable them to effect change within their own communities. As Chief Henry Delorme stated in 1988:

It is an Indian voice I raise. It is Indians I want to influence. And eventually it will be Indians who develop the political will to meet the needs of my disabled brothers and sisters.

The Proceedings of the Disabled Native Persons Think Tank, Cornwall, Ontario, 1988





3. BUREAUCRATIC BARRIERS— 'PASSING THE BUCK'

Indian and Inuit people do not understand or appreciate the concept of different government departments. Their own communities are small and unified, and the notion of huge, separate bureaucracies is foreign to their traditions and daily experience. They become confused by a situation in which it takes several major organizations to provide several minor services.

Special Committee on the Disabled and the Handicapped, Obstacles, February 1981, p. 134

Strategic Shortcomings

Without exception, departmental officials who appeared before the Committee heralded the National Strategy for the Integration of Persons with Disabilities as the major federal government effort to address the concerns of Canadians with disabilities. The Strategy, which was announced on 6 September 1991, promises to devote \$158 million until 1996 to the goals of equal access, economic integration and effective participation. Although ten government departments are involved, the Department of the Secretary of State, headed by the Minister Responsible for the Status of Disabled Persons, has the lead role in co-ordinating not only the activities of the Strategy, but also all government operations related to people with disabilities.²

In November 1991, as part of the National Strategy, the Departments of Indian Affairs and Northern Development (DIAND) and National Health and Welfare each launched initiatives for Aboriginal people with disabilities who live on reserves. While the Committee appreciates these initiatives, it recognizes that they are essentially limited to gathering information and to 'co-ordination'. DIAND will

provide \$5 million over five years to improve the co-ordination and accessibility—and to promote the design and delivery—of existing programs and services. Regional offices will work with Aboriginal organizations to determine how to achieve these objectives. Health and Welfare Canada, for its part, is planning to use \$1.3 million to speak with Aboriginal organizations, as well as with elderly and disabled people on reserve, in order to gather information for the development of home care standards, training requirements and management structures.

While the Departments will not fund or deliver new programs or services, the mere existence of these initiatives will undoubtedly raise expectations and may eventually lead to frustration. As Richard Frizell, Director, Social Development, B.C. Region, Department of Indian Affairs and Northern Development, reported in January 1992:

^{2.} Officials from the Department stressed that "the emphasis of the department's action is first, on involving all Canadians and mobilizing community action; second, on sharing informantion and solutions; third, on improving national information about disability; and fourth, on co-ordinating federal action." [*Minutes*, Issue 10, p.6, 18 February 1992].

During our preliminary consultations, frustration has been strongly expressed about the lack of a funding base for service delivery. Several individuals at the band level have stated that a clear understanding exists in their community regarding the needs of band members with disabilities and that what is now required is the establishment of appropriate services... As we proceed with the current initiative, increased pressures will be generated for the provision of services in areas for which DIAND does not currently assume responsibility.

Material provided by the Department of Indian Affairs and Northern Development, 17 March 1992

Perhaps the Departments should pay attention to the band members who are already expressing frustration.

This Committee has concerns about the extent to which the federal government has not listened in the past to the people most affected by its programs. We were disappointed to learn, for example, that while the DIAND initiative directly responds to needs identified by Aboriginal people with disabilities, DIAND did not significantly involve Aboriginal people in the planning stages that established the initial design. According to Normand Levasseur, Acting Director General of DIAND's Social Development Directorate:

There's been no formal consultation with the native network.

Basically, we took part of their report that identified one of the big problems, being the lack of availability and co-ordination [of services].

We took that component of the report. Before the government made a decision that Cabinet go with a new program, we did not go specifically to them and ask where we should go. We were able to take part of their report and use it as the best knowledge we had.

Minutes, Issue 8, p.24, 11 February 1992

Frustration in the Aboriginal community will also likely result from the activities of the Department of National Health and Welfare. Apart from gathering information, that Department is also devoting \$2 million under the National Strategy to improving access on reserves by retro-fitting existing health facilities. All new facilities will meet the standards of the Canadian Standards Association. The Department indicates that 267 facilities require retro-fitting at a total cost of \$7.5 million. But Treasury Board has only provided \$1.2 million (\$280,000 per year for the next four years) and the Department's Medical Services Branch has committed \$888,000 from its capital budget (\$222,000 each year for the next four years). Given this small budget, only 20 per cent of the facilities that require renovation will be retro-fitted under the Strategy. In order to meet existing needs, the Department has requested an additional \$6 million from Treasury Board

This Committee is troubled that the Medical Services Branch of Health and Welfare Canada is equating physical accessibility with the elimination of barriers for Aboriginal people with disabilities. Indeed, departmental officials admitted that they are placing too much attention on ramps and retro-fitting and not giving enough consideration to other disability concerns that the Department could easily address. Neil Faulkner, Assistant Deputy Minister, Medical Services Branch, told us that "clearly, as a medical branch, we're going to have to dialogue more with people in that community to understand their needs"³

^{3.} *Minutes*, Issue 9, p. 23, 13 February 1992.

Fragmented Programs

The National Strategy notwithstanding, the government has taken a strikingly fragmented approach to Aboriginal issues—let alone disability issues—within the federal system. Areas of responsibility for various groupings of Aboriginal people are scattered amongst different departments and there is definitely no concentrated focus on disability.

Despite the fact that both DIAND and Health and Welfare Canada provide adult care services to Aboriginal people on reserve and have signed a memorandum of understanding, significant gaps exist in these services. DIAND funding focuses primarily on in-home care (e.g. homemaker services, meals and social support) as well as on institutional care such as nursing homes. The Medical Services Branch of Health and Welfare Canada delivers community health services (e.g., public health nursing, immunization and nutritional programs). Neither Department has accepted the obligation to provide all the component parts of a complete adult care system. Because there is no organizational structure for comprehensive program development or management, services are developed unevenly and delivered inconsistently across the country.

Although these inadequacies pertain only to one governmental program, the Committee has seen signs that they are indicative of larger, system-wide, failings and buck-passing between departments. DIAND officials told us that the Department's social assistance programs make services for special non-medical needs available to Aboriginal people on reserve (e.g., aids for

independent living and adaptations for special access). Any special medical aid must, however, come from the Non-Insured Benefits Program of Health and Welfare Canada.⁴

The Non-Insured Benefits Program attempts to fill the gaps where provincial insured services are unavailable, but this federal program is very limited and its application is often confused and arbitrary. For example, the Canadian Paraplegic Association (CPA) pointed out to the Committee that services to assist Aboriginal persons with spinal-cord injuries in Manitoba and Alberta have, for a number of years, received funding under this program. But when the CPA attempted to acquire similar funding in Saskatchewan, the Department of National Health and Welfare changed its mind and argued that these services are now not considered primarily health-related and, therefore, are ineligible for the Non-Insured Benefits Program. To ease the transition, Health and Welfare Canada has allowed its Alberta and Manitoba regions to renew their contracts with the CPA for

a single year; however, all funding to the CPA will cease on 31 March 1994.

The work of the Department of the Secretary of State, Native Citizens'
Directorate, raises another question. To what extent has the Secretary of State and Minister Responsible for the Status of Disabled Persons ensured that all the activities of the Department incorporate the needs of persons with

4. This program provides a range of medically necessary health services to status Indians and Inuit people regardless of their place of residence.

disabilities? For example, this Committee received no concrete assurances that the Aboriginal Friendship Centre Program⁵ has effectively eliminated barriers for people with disabilities.

The Department of the Secretary of State also demonstrated that its activities with regard to Aboriginal people with—and without—disabilities are not necessarily 'plugged in' to the work of other government departments. For example, departmental officials did not understand the implications of a recent agreement between DIAND and the province of Alberta to equalize services provided to Aboriginal people on and off reserve. Although this Department has responsibility for co-ordinating the National Strategy, and all issues relating to disability, Georges Proulx, Assistant Under Secretary of State, Social Development and Regional Operations, tried to explain why his Department did not have any input into this unique initiative. He told us that:

They (DIAND) probably felt that it was within their department and their authority, and did not see fit to consult us on this...

I suppose that the part of that agreement that touched on disabled persons was only a small part of the agreement, and that probably explains why they did not consult us. We try to monitor and keep a watch on disabled persons issues. Obviously, some things escape us.

Minutes, Issue 10, p.25, 18 February 1992

^{5.} Friendship centres, run by and designed for, Aboriginal people provide vital information to those who have newly arrived in, or are simply passing through, an urban area. Without the centres, migrating Aboriginal people would otherwise face a number of barriers in gaining access to services or information.

Popular Frustration

During the hearings that this Committee held at Akwesasne, Aboriginal people from across Canada told us repeatedly about the general lack of funds to meet the needs of people with disabilities in their communities. Witnesses described difficulties in providing appropriate education to Aboriginal children with disabilities. They also alerted us to problems with current rehabilitation and training programs to ensure the entry or reentry of persons with disabilities into the workplace.

Grand Chief Mitchell of the Mohawk Council of Akwesasne outlined his own difficulties in obtaining funding for broader-based programs such as adult education and nurses' training. He explained that, all too often, the Mohawk Council must 'make do' because of the lack of comprehensive government funding and co-ordination. For example, on a visit to the Canada Manpower district office in Cornwall, Ontario, officials told him that, although his most recent project proposals were approved, priorities had shifted to other needs and the projects were delayed. Chief Mitchell stressed that he was continually finding himself last on the federal funding list. He said:

This upsets me; what more can you do to try to get retraining or get people trained for a specific occupation? You try to find the funds, try to cut through all the red tape and the proposals and the plans that you have to put together, and you finally get them close to the reservation, only to have people tell you that because there was a [public service] strike in Canada, because there are other people who have far more influence, they would have to take precedence over your people.

Minutes, Issue 7, p.26, 19 November 1991

The Committee's View

Weak Links

The Committee sees the situation not just as a case of federal departments protecting their fiefdoms, but also as a clear illustration of the ad hoc approach that departments are taking to the needs of people —in this case, Aboriginal people with disabilities. In our other reports, we have condemned this approach—that is why we called for a national strategy in our 1990 report A Consensus for Action. We have also pointed out that policies and programs for people with disabilities have to be integrated—with each other and with all government initiatives. In our most recent report, As True as Taxes, for example, we recommended that social, economic and tax policies that deal with persons with disabilities should be linked to remove disincentives to economic participation.

For those considered to have more than one disadvantage, such as Aboriginal people with disabilities, the ad hoc approach has proven to have almost irreversible implications and consequences, despite recommendations that this situation be addressed. Both Obstacles and the Followup Report recognized, and made recommendations about, the lack of coordination within the federal government that artificially separates health care issues from other related problems such as inadequate housing, transportation and employment. In turn, this failure to co-ordinate contributes directly to the high incidence of disability

within Aboriginal communities. More than a decade after the *Obstacles'* recommendations, departmental programs remain 'add on' considerations that are often introduced when services to Aboriginal people are withdrawn by the provinces. Although the government has established a National Strategy for the Integration of Persons with Disabilities, the Committee found no cohesive action.

Consultation and co-ordination within the federal bureaucracy remain weak links in promoting better lives for Aboriginal people with disabilities. The lack of clear departmental responsibilities, an absence of strong program structures, fragmented service development and inconsistent standards are all too evident, despite sincere intentions. The National Aboriginal Network on Disability accurately pointed out in 1990 that:

The good intentions of one [department] are often undone by the good intentions of another, and the end result is we do not benefit as

Aboriginal people with disabilities.

Minutes, Issue 39, p.11, 27 November 1990

Bureaucratic barriers constantly frustrate Aboriginal people with disabilities. James (Smokey) Tomkins stated in 1990 that

There are jurisdictional boundaries and the Aboriginal person then becomes a ping-pong ball.

Minutes, Issue 39, p.29, 27 November 1990

Collection and Use of Data

Programs, policies and even departmental structures themselves cannot deal with the 'real' world, if they are based on obsolete, inaccurate or incomplete information about that world. Furthermore, the political and bureaucratic 'will' to apply that data must exist so that government can target its actions to achieve the maximum effect. These detailed data are all the more critical when they are needed to devise programs that assist a neglected group like Aboriginal people with disabilities.

eglected the disabilities

All departmental officials who came before the Committee stated that they were working with Statistics Canada in efforts to obtain more reliable information about Aboriginal people.

Although they could not provide complete data, not one of these officials disagreed with the accepted fact that the incidence of disability amongst Aboriginal people remains far greater than amongst other Canadians. Neil Faulkner, Assistant Deputy Minister, Medical Services Branch, Health and Welfare Canada summarized some of the data available when he told us that:

The incidence of disability among the Canadian Indian population is two to four times the national average. Two-thirds of these relate to agility and mobility, 25% are as a result of accidents, 17% as a result of an aging process, 10% are congenital, and 22% are visually impaired. Of course, a number of people suffer from multiple disabilities.

Many of these people live in rural or remote areas. Of the 579 First Nations we serve, nearly 80% are not accessible by road. As a result, community-based services available to other Canadians are not as available to people in these communities.

Even where reserve residents are closer to urban centres with a broad range of community services, perceived real cultural barriers often inhibit First Nations people from using these services. In addition, off-reserve service agencies may be reluctant or unable to provide services on reserve.

Minutes, Issue 9, p.7, 13 February 1992

Obviously, given the fragmented nature of the services that we described earlier in this report, the federal government needs more specific information about the nature and extent of disability amongst Aboriginal people in order to target its programs. DIAND, for example, explained that it does not automatically collect data on Aboriginal people with disabilities as a result of the way that its social assistance programs are established. Because DIAND programs are available to those who meet eligibility criteria, they are not set up to collect specific information on people with disabilities.

In 1990, the National Aboriginal Network on Disability (NAND) argued that to reflect the circumstances of Aboriginal people accurately, the collection of data on Aboriginal people with disabilities must be community-based and carried out in close consultation with, and wherever possible by, those people. Community participation is required because an unclear understanding of the definition of 'disability' and cultural differences between survey takers and survey participants has hampered the process of gathering information. Without this community

participation, the high potential for collection of incorrect data is increased even further by social and cultural differences among Aboriginal peoples. Joanne Francis of NAND pointed out that:

We are depending on individuals to identify themselves as Aboriginal people. With so much controversy over who is native and who is not, and to what degree and all of that, as far as the status of Aboriginal people — i.e., the Métis, Innu, status, non-status, registered, non-registered—is concerned, that is where the figures conflict...

Statistics Canada was not able to get a very accurate account of the numbers of disabled Aboriginal people with their last survey [in 1986], for a number of reasons, some of which were because the survey takers were not allowed on every reserve or were restricted to certain communities that were more easily accessible to them, versus the communities located in the north, which has a very high incidence of disability, north of 60...

Hopefully, with our being of assistance and able to consult with Statistics Canada on this approaching post-census survey [in 1991], we hope that we will perhaps be able to assist them in creating a better tool that would be more acceptable and better received by native communities.

Minutes, Issue 39, p.28, 27 November 1990

Some of the data collection problems seem to have been remedied by the comprehensive postcensal survey conducted by Statistics Canada in the fall of 1991. Statistics Canada consulted extensively with Aboriginal people, including those with disabilties, who provided advice on the content and wording of the survey. Hopefully, the proof of this collaboration will surface when Statistics Canada releases its data over the next year.⁶

Data on Aboriginal persons with disabilities, along with information on language, health and social issues will be released in May 1993. Data on Aboriginal employment, education and expenses will be released in September 1993, and information on mobility and housing will be made public in early 1994.

Although more information is needed to fine-tune solutions, the collection process must not serve as an excuse for inaction. Existing information indicates clearly the severity and complexity of barriers that continue to disrupt the lives of Aboriginal people with disabilities. Rather than waiting for pressure to be applied, action plans can—and must—be developed to signal a new proactive approach. Because the National Strategy has received political support at the highest levels, turf wars among bureaucrats should not prevent this initiative from benefiting people with disabilities. Aboriginal people have the right to a comprehensive and integrated approach to removing the barriers associated with disability.

Such an approach to Aboriginal disability issues within the federal government would ultimately save money, given that the present process spends increasing amounts of money on ad hoc attempts to address varying regional needs. Interdepartmental co-ordination is also the best method of preventing disability. Government approaches to disability are too often healthoriented and curative in nature. Identifying and eliminating the social, economic, political and cultural causes of disability for Aboriginal people is just as critical as removing the obstacles that currently limit their full participation in mainstream community life. As the *Obstacles* Committee recognized in 1981, "the least costly disability is the one which does not occur" [Follow-up Report, p. 52].

The Committee recommends that:

In light of the seriousness of the situation and the need for immediate and comprehensive action to deal with issues related to Aboriginal people with disabilities, the Ministers of Indian Affairs and Northern Development, Health and Welfare, other departments that have programs that deal with Aboriginal people and the President of the Treasury Board should cooperate with the Minister Responsible for the Status of Disabled Persons in order to:

- a. Ensure immediate action to co-ordinate federal programs and activities that are directed towards, or are used by, Aboriginal people with disabilities. The Minister Responsible for the Status of Disabled Persons, in collaboration with the other Ministers, should make public a specific plan of action to deal with the co-ordination of federal activities related to Aboriginal people with disabilities no later than 1 November 1993.
- b. In consultation with Aboriginal people with disabilities, create a working group composed of senior managers of all responsible departments (including the Privy Council Office,



Treasury Board and the Federal-Provincial Relations Office) to establish and to monitor an integrated approach to policy and program formulation and development for Aboriginal people with disabilities. This working group should ensure that individual federal departments and agencies collect and use upto-date and appropriate data in devising policies and programs for Aboriginal people with disabilities.

Where Does the Buck Stop?

The problems of fragmented programs and the lack of detailed data to establish policy in the area of Aboriginal disability stem from the failure of the federal government to set up an effective overall mechanism to ensure ongoing and consistent monitoring, advocacy and co-ordination for disabled persons in relation to all federal policies, legislation and regulations. In our previous report, *A Consensus for Action*, this Committee suggested, but did not recommend, that a national strategy on disability issues should include a centralized structure that permitted co-ordination and accountability. According to our analysis:

The history of the recommendations of parliamentary committees concerned with disability have shown us that what is needed now is more muscle at the centre of government...

A voice at the centre is imperative because, ...disabled persons' units, directorates and secretariats appear to function on the margin of their respective departments. In short, they are not effectively integrated into the central decision-making process of government...

We therefore urge the immediate appointment of a ranking official of the PCO to assume responsibility for disabled persons and to perform the relevant ongoing functions related to cabinet activities. This official could serve as the link to cabinet of a high-level committee that is composed of representatives, perhaps deputy ministers, of other central agencies and significant departments. This could ensure that all government agencies take action, as required.

Standing Committee on Human Rights and the Status of Disabled Persons, $A\ Consensus\ for\ Action$, June 1990, pp. 18-19

Although a Deputy Ministers' Committee on Issues Concerning Persons with Disabilities was struck in response to our suggestion, it has only held two meetings in the past eighteen months. According to Georges Proulx, Assistant Under Secretary of State, bilateral dealings between deputy ministers have been more appropriate and effective. Now, we have learned that the coordination function has passed to a Committee of Assistant Deputy Ministers who, in very many instances, have delegated it to junior depart-

Obviously, the message from this Standing Committee has either been ignored or has been garbled in the transmission. Bilateral meetings are fine for dealing with bilateral issues. They are, however, inappropriate as a means of ensuring the effective coordination of a National Strategy involving ten government departments. Furthermore, a coordinating committee, where the alternate to the substitute to the alternate of the deputy minister attends the meetings, is not what we had in mind.

mental officials.

The continuous participation of officials at the working level is necessary to implement any strategy successfully, but unlike deputy ministers, officers at this level cannot make decisions stick.

Currently, although co-ordination is flawed, the more important issue of accountability appears to have been lost in the shuffle. In the Committee's view, officials at the working level cannot be held accountable at the political level for the success or failure of a strategy.

Clearly, any comprehensive policy framework in the area of disability—including Aboriginal disability—remains incomplete if it does not include some measure of accountability as well as some monitoring mechanism. Citizens should know that their concerns are being appropriately considered and integrated into the overall policy and program development of all government

departments. They also have a right to know how the money that is spent, either through normal government programming or through the National Strategy, is providing direct benefits to them. Disabled people across the country—including Aboriginal people with disabilities—too often hear of grandiose schemes being launched in Ottawa, only to find that by the time the program or service actually reaches the local level, there is not enough money left to make it worthwhile.

Since the federal government has not yet put into place an accountability mechanism, this Standing Committee will attempt to fill the gap temporarily. Therefore, we propose that the

> Minister Responsible for the Status of Disabled Persons, and all other ministers involved in the National

Strategy and in disability issues, prepare an annual report to Parliament. This report should contain a section that deals specifically, and in detail, with departmental activities related to Aboriginal people with disabilities. After tabling in the House of Commons, this report should be referred to this Standing Committee and to other appropriate parliamentary committees.

2 The Committee recommends that:

- On behalf of the Government of Canada, the Minister Responsible for the Status of Disabled Persons should table in Parliament an annual report on the National Strategy for the Integration of Persons with Disabilities and other government activities related to persons with disabilities. This annual report should contain details of grants and contributions, as well as program and policy initiatives related to persons with disabilities. This annual report should contain a section that deals specifically with activities taken to benefit Aboriginal people with disabilities. The annual report to Parliament should be referred to this Standing Committee and its successors, as well as to other relevant Parliamentary Committees.
- b. The Clerk of the Privy Council and Secretary to the Cabinet, the Secretary of the Treasury Board and the Secretary to the Cabinet for Federal-Provincial Relations should each name one senior official with sole and specific responsibility for all persons with disabilities. In the case of the Treasury Board, this official should report through the Program Branch.



4. JURISDICTIONAL BARRIERS— 'A TANGLED WEB'

Federal/Provincial Logiams

If an Aboriginal person goes in to MSSH [Ministry of Social Services and Housing], which is the [provincial] social services agency in British Columbia, and says he needs help, he needs this and that, he isn't working and is disabled, they will look at you—unfortunately, if you're brown like I am it's pretty hard to disguise the fact you're an Indian—and the first thing they say is, you're an Indian, you had better go and see the [federal] Department of Indian Affairs, it has nothing to do with us.

If you live in Victoria, which is where I live, the Department of Indian Affairs office is in Nanaimo, which is about 70 miles away...

Anyway, you go up there and they say, okay, but the way we see your problem is that it's a medical problem and Medical Services [Health and Welfare Canada] is back in Victoria.

So now you have to go back to Victoria. You then go to Medical Services... and they say, oh yes, we can help you—where do you live? Well, if you're like 50% of the Aboriginal people or status people in B.C., you live off the reserve. So you say I live in the city of Victoria. Oh, what are you doing here? You had better go back to MSSH. You say, well, I've been there. They say, they're the people you have to look to ...

After you've been around the circle a couple of times, you just say to heck with it and give up.

Ian Hinksman, Director of the B.C. Aboriginal Network on Disability Society, *Minutes*, Issue 19, pp.77-78, 22 April 1992 Aboriginal people must not only contend with the fragmented nature of federal programs, but have to overcome the barriers imposed by federal/provincial jurisdictions. Like other disability issues, those related to Aboriginal people either cross federal/provincial boundaries or lie in an area of exclusive provincial responsibility.

History has imposed complications that make the circumstances of Aboriginal people with disabilities intractable and frustrating. Over the years, Aboriginal people in this country have been arbitrarily grouped in categories that define their relationship with the federal and consequently, provincial governments. As Neil McDonald of Cross-Cultural Consultants put it:

It's important to understand that being an Indian in Canada has nothing to do with biology or culture. Being an Indian in Canada has to do with the law...

When the federal government took jurisdiction over the Indians in 1867, not only did they [the government] have to find out who the Indians were, they had to come up with some kind of a tool to govern the Indian people. And... what they came up with, as you well know, was the Indian Act.

Minutes, Issue 6, pp.13,15, 29 October 1991

The *Indian Act* sets out a category of Aboriginal people who are known as status Indians—that is those people registered as "Indians" for the purposes of the Act. Many also came to fall under the statute as a result of treaties that their chiefs signed with the federal government. The *Indian Act* preserves Indian lands from being sold and regulates the lives of Indians who live on these lands. Neil McDonald gave a sense of the effect of the Act:

[Prior to 1867] the primary organizing structure of native life was the extended family. When the federal government came into their lives, they imposed the Indian Act. The federal government institutionalized the band as a form of government. Basically, what happened was a number of extended families were put together [as a band] to live on lands now called reserves. Often several extended families were put on these reserves and were given a book of rules, the Indian Act, by which they governed themselves...

They had to elect officials to govern them. They were allowed to govern on condition that the [federal] Indian agent, so to speak, approved everything they did...

Over 100 years, or 120 years, you can imagine the kind of conflict that leaves in the community. This imposition of the Indian Act, the band structure, and extended families being forced to live with each other...

Minutes, Issue 6, pp.14-15, 29 October 1991

Among the *Indian Act's* legatees are status Indians who occupy reserve lands in isolated regions of this country. Reserve communities generally comprise fewer than 500 persons and their residents receive services through local governments made up of chiefs and band councils.

The *Indian Act*, however, is far from inclusive. For one reason or another, many Aboriginal people never obtained the status of 'Indian' under the Act. Either they were never registered or they lost their status under various provisions of the Act and have never applied for, or are ineligible for, reinstatement. The Métis people, for example, although now recognized as Aboriginal people in

the *Constitution Act*, 1982, have never been subject to the terms of the *Indian Act*. As a result, they are ineligible for services offered to status Indians. Like the Métis, Inuit people in this country are excluded from the *Indian Act*, but the Inuit acquired a special relationship with the federal government from a 1939 ruling of the Supreme Court of Canada. The Court held that they are entitled to the same services provided to status Indians.

The federal government has used these arbitrary legal classifications to determine eligibility for federal services; those who are excluded have to turn to reluctant provincial governments. Generally, the federal government has taken the position that its responsibilities extend only to providing services to status Indians on reserve and to the Inuit. It expects the provinces to provide services to status Indians who do not ordinarily live on reserve as well as to all non-status Indians including the Métis. For their part, the provinces use section 91(24) of the Constitution Act, 1867, to argue that all legal responsibility for services to Aboriginal people rests with the federal government.7

The federal/provincial jurisdictional logjam shows up most graphically in the provision of health and social services to Aboriginal people. Under the *Constitution Act, 1867*, the delivery of these services falls under provincial authority but, because of the cost, provincial governments have generally refused them to status Indians who live on reserve⁸. Consequently, the federal government has made some, but not all, of the services provided to other Canadians available to status Indians on reserve.

In all of this wrangling, both levels of government appear to have forgotten the needs of the people themselves. In this complex and overlapping web of service structures, some people even find themselves falling through the cracks and unequally treated compared to their fellow citizens.

The story of Donna Good Water and her daughter, Little Mountain, illustrates the effect of this squabbling on people's lives. Little Mountain has cerebral palsy. Her mother expressed enormous frustration at the difficulties in gaining access on reserve to respite care and home care—provincial services that are readily available in the neighbouring municipality. Because this woman and her daughter are status Indians, living on reserve, they are not entitled to provincial benefits,

^{7.} Section 91(24) of the *Constitution Act, 1867*, grants to the federal Parliament exclusive jurisdiction over "Indians and lands reserved for Indians." The courts have determined that both status Indians and the Inuit are "Indians" within the meaning of this section. The courts, however, have not yet settled the question of whether or not the Métis are covered by section 91(24).

^{8.} The provinces generally provide these services to non-status Indians, the Métis and to status Indians off-reserve. There is, however, still some controversy between the federal government and certain provinces over who is responsible for the Inuit and for status Indians migrating from reserves to urban centres.

but the federal government still refuses to provide for them. Ms. Good Water told us that:

I really believe that if Little Mountain were white, living in the city of Vernon [British Columbia], she would be just like the other children in her class and be provided with all these services, which is their natural right. But because she's native and status, living on the reserve, she's not entitled to it...

I have given this a lot of thought and I've gone through a lot of frustration, a lot of anger with this whole process, and I think that we [status Indians] are a federal government responsibility. I really believe the federal government should be making dollars accessible to the native handicapped children residing on reserve.

We should have home [care] programs that are comparable to the provincial home [care] programs. We're not getting it in B.C... I can vote in the provincial election in B.C. but I can't get the services. I believe that I am entitled to it as a Canadian citizen.

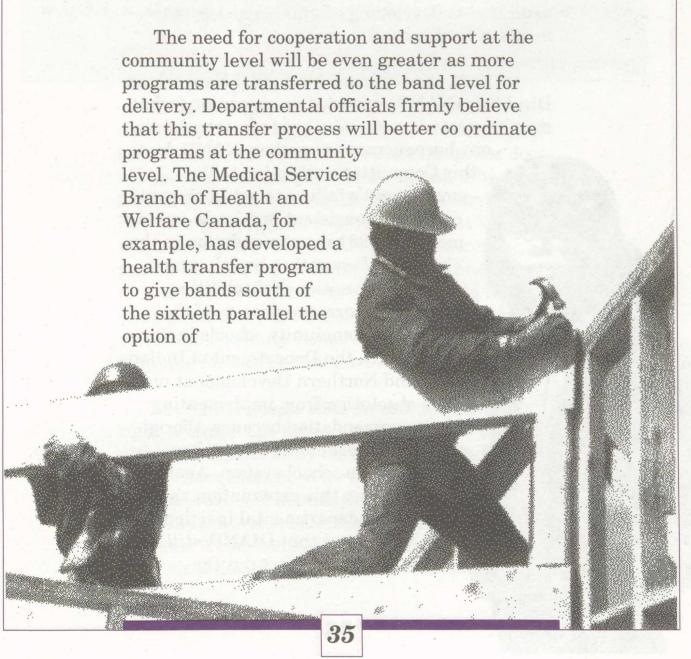
Minutes, Issue 7, p.37, 19 November 1991

Too Many Layers?

The jurisdictional situation of Aboriginal people with disabilities could become even murkier as a result of the proposed transfer from the federal government to First Nations of the administration and delivery of health and social services on reserves. Will this benefit Aboriginal people in general and people with disabilities in particular?—or will it add another layer for potential jurisdictional infighting and delay?

The warning signs show that, even where the federal government has not yet transferred services to the community level, the extent to which federal programs meet the needs of Aboriginal people with disabilities often depends

on the support of community leaders. The band leadership must not only have information about relevant programs but also must make the needs of disabled persons a priority in the community. For instance, the Department of Indian Affairs and Northern Development's (DIAND's) On-Reserve Housing Program uses the Social Housing Program of Canada Mortgage and Housing Corporation to provide accessible housing to Aboriginal people with disabilities. DIAND pointed out, however, that the demand for accessible housing varies from region to region and from band to band.



assuming control of federal Indian health services. Interestingly enough, Aboriginal people have not unanimously praised these plans. Some see the transfer of services as a positive step. Others fear that the whole process is a smoke screen that allows the federal government to give up its responsibilities for Indian health care and to implement drastic cost-cutting measures. People in Aboriginal communities are also concerned about the time frame and the inadequate assistance from Medical Services Branch staff at the pre-transfer planning stages. Specifically, they worry about the limited resources that are dedicated to developing comprehensive assessments of health needs.

In 1990, the National Aboriginal Network on Disability (NAND) provided an example of what may happen when services are transferred from

one bureaucracy to another. NAND drew this Committee's attention to the government's failure to act in an organized and consistent fashion to implement the 1981 recommendation in the Follow up Report that health promotion and prevention of disabilities should form permanent parts of the curriculum in community schools. According to NAND, the Department of Indian Affairs and Northern Development now claims absolution from implementing this recommendation because Aboriginal band governments have taken control of the school system. Apart from viewing this explanation as an excuse for departmental inaction, NAND argued that DIAND still has an obligation to carry out the

recommendation and to educate Aboriginal children about health promotion and prevention.

Similarly, this Committee has recently heard apprehensions about the decentralization of health and social services for Aboriginal people with disabilities. Ian Hinksman, Director of the B.C. Aboriginal Network on Disability Society, told us that:

I somehow feel that giving it to them [the band leadership] is like the government trying to give it out. It seems to disappear somewhere in that process... Some bands would make good use of it; I'm afraid others would do something that really doesn't have too much to do with the disabled people.

Minutes, Issue 19, pp.81-82, 22 April 1992

In light of these cautionary statements, this Committee hopes that the transfer of health and social services to First Nations' communities does not serve as an excuse for inaction either by the federal government or by the band leadership. For their part, federal departments must keep in mind that effective transfers must be accompanied by adequate training, financial and technical assistance. In addition, there should be some guarantee that the community leadership will make disability issues a priority in any planning for locally delivered services.

Aboriginal people with disabilities have every right to expect the federal government to assume ultimate responsibility for their needs and concerns. Since their need for services cuts across federal/provincial boundaries, the federal government must assume leadership in removing these barriers. A comprehensive federal approach to Aboriginal disability issues should include

federal / provincial plans of action for coordinating efforts with respect to Aboriginal people. Given the fact that we can expect more services to be delivered by bands, a federal government / band council action plan is also necessary.

3 The Committee, therefore, recommends that:

The federal government should prepare, no later than 1 November 1993, a tripartite federal / provincial-territorial / band governmental action plan that will ensure ongoing consultation, cooperation and collaboration on all issues pertaining to Aboriginal people with disabilities. This action plan must contain specific agendas, realistic target dates and evaluation mechanisms. It should deal with existing or proposed transfers of the delivery of services to ensure that these transfers meet the needs of Aboriginal people with disabilities.



Akwesasne

Although jurisdictional problems confront Aboriginal people across Canada, their impact is magnified on the Akwesasne reserve near Cornwall, Ontario. This reserve straddles two countries (Canada and the United States), two provinces (Ontario and Quebec) and one state (New York). While the people of Akwesasne do not recognize the boundaries that divide their reserve, they must constantly struggle with the social and economic barriers that different jurisdictions impose.

Governments have recognized the jurisdictional disadvantages and problems experienced by the Mohawk people of Akwesasne and in 1988, created a Special Akwesasne Task Force. Representatives of the members-Ontario, Quebec. Canada and the Mohawk Council of Akwesasnejointly agreed in 1990 to spend \$25 million to deal with the social, economic, health and recreational needs of the community. This Committee, however, is concerned that guarantees must be in place to ensure inter-departmental co-ordination among the federal departments with responsibility for the areas covered by the Memorandum of Agreement. 9 We also wonder about the level of accountability for federal / provincial cooperation. A federal / provincial territorial / band action plan (as proposed in Recommendation three of this report) is acutely needed to deal with the situation of the people of Akwesasne. The

^{9.} The Department of Indian Affairs and Northern Development is responsible both for the Task Force and for the Agreement; therefore, Health and Welfare Canada only participates on the Task Force when health issues are on the agenda. Given the ad hoc and fragmented approach that this Committee has seen in the nature of the administration of federal programs, we are concerned that the failure of comprehensive government action may continue to impede effective service delivery at Akwesasne.

establishment of a tripartite plan should constitute a federal government priority.

This Committee received evidence that dealing with international jurisdictions further disrupts the lives of the people at Akwesasne. In addition to tripartite action, a specific Canada-United States strategic action plan is required. Julie Jacobs, whose daughter Hillary has a bone disease known as osteo-genesis imperfecta, told us of the complications that the international boundary at Akwesasne has caused for her. Ms. Jacobs, who works on the Canadian side of the Akwesasne reserve and lives on the American side, reported the incredibly complicated insurance arrangements that she must make to deal with Hillary's medical expenses. It was explained that:

We, as employees [of the Akwesasne Mohawk Board of Education], have a group insurance, and... it's mandatory. As employees we have to pay into it, and there's a component in that that is disability, or some disability insurance coverage that goes beyond what the OHIP and Quebec insurance would be able to pay...

...because of where she resides... she is not able to make use of that. But the money is still going into that fund.

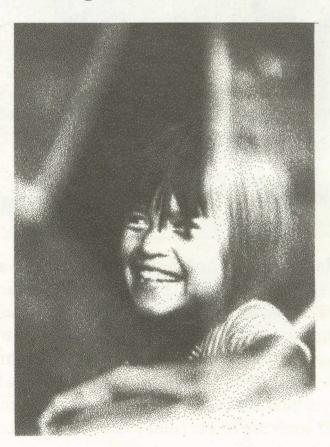
Minutes, Issue 7, pp. 13-14, 19 November 1991

This Committee
believes that this type
of situation must be
tackled with a view to
rationalizing the
international circumstances of the people

of Akwesasne. We are aware that the governments of Ontario, Quebec and New York State have set up an Ad Hoc Committee on Akwesasne with the Government of Canada as a participating observer. Canada, however, has undertaken no discussions with the United States to facilitate formal arrangements to deal with the situation.

4 The Committee, therefore recommends that:

The Government of Canada should initiate discussions with the Government of the United States for the purpose of developing a Canada-United States plan of action to co-ordinate efforts by both governments to deal with the needs of the people of Akwesasne. The action plan should include, but not be restricted to, setting out ways of co-ordinating health and social services.





5. CONSULTATION—

- 1. We believe all activities that affect Aboriginal people with disabilities must be directed by and meaningfully involve them.
- 2. We believe that all activities of this nature must build on the capacity of Aboriginal people with disabilities to contribute to their society, both within their neighbourhood and all the way up to the national level.
- 3. We believe that all activities undertaken in partnership with political organizations, consumer groups and educational institutions should be conducted—within the legal, financial, and ethical framework—as if they were relationships between equals.
- 4. We believe all activities should serve to empower Aboriginal people with disabilities. They should help to develop their skills, their knowledge, and instill in them a greater sense of confidence in their ability to influence policies and programs that ultimately affect their lives.
 - 5. The last principle that we strongly support is that all activities should respect the regional and cultural diversity of First Nations across this country.

Statement of Principles by the National Aboriginal Network on Disability, *Minutes*, Issue 39, p.7, 27 November 1990

In its statement of principles, the National Aboriginal Network on Disability (NAND) said it all: the people most affected by decisions want a say in the process. In its 1990 presentation to this Committee, NAND emphasized that the nature—and lack—of consultations between the federal bureaucracy and Aboriginal people continues to obstruct the effective delivery of services to those

with disabilities. Despite the recommendations in *Obstacles* and in the *Follow up Report*, consultation continues to consist of little more than bureaucrats and Aboriginal people talking at one another. All too frequently, this does not lead to constructive action but instead causes polarized views and disagreement about a common course of action.

This report has outlined examples of the flaws in the process of consultation. None is more revealing than the Department of Indian Affairs and Northern Development's admission that it did not consult Aboriginal people about its initiative under the National Strategy for the Integration of Persons with Disabilities, even though it directly responded to recommendations made by them.

The Committee believes that real consultation means more than permitting Aboriginal people to pass comments on pre-approved government programs. It must involve the direct and equal participation of Aboriginal people in the design,

planning and implementation of any disability strategy. This means listening to the grass roots, the disabled consumers, as well as organizations that represent

Aboriginal people with disabilities at all levels.

The work of this

Committee has shown us that Aboriginal people with disabilities know their needs and the best means of meeting them.

Where the federal government continues to deliver services, public servants must show sensitivity to the values and perceptions of Aboriginal people. This Committee heard too many witnesses tell of departmental representatives who were ill-informed about Aboriginal people in general—not to mention those with disabilities. Those who provide services cannot be productive if their clientele does not accept them. Sometimes, good intentions and narrowly-defined technical expertise are not enough to produce results.

When more and more communities take responsibility for providing services, community and band leaders will be called upon to demonstrate awareness and sensitivity to all community members—including those with disabilities. The process of education, inspiration and meeting challenges must go on amongst Aboriginal leaders as it must for all Canadians. Consultation and participation of those affected by decisions is as critical at the community level as it is at the federal.

As a Committee, we have observed that, where consultation and participation is meaningful, programs are successful. For example, the Pathways to Success program shows how cooperation can work. This program, a joint venture between the Department of Employment and Immigration and Aboriginal people, functions under the auspices of a National Aboriginal Management Board. The Board currently uses Employment and Immigration programs in efforts to support Aboriginal training and employment across the country.

Recently, NAND successfully lobbied the National Aboriginal Management Board to make disability issues one of its priorities and to involve disabled consumers in consultation and in the implementation of programs. As a result, on 11 January 1993, the Minister of Employment and Immigration announced that his Department would provide \$100,000 from its allocation under the National Strategy to assess the training and employment needs of Aboriginal people with disabilities. NAND will run this six month project and will identify and examine successful employment initiatives and recommend ways to eliminate barriers to training and work. According to James (Smokey) Tomkins, the Executive Director of NAND, "this decision is the result of unprecedented cooperation and understanding between Employment and Immigration Canada, the six major national Aboriginal organizations and the National Aboriginal Network on Disability."10

This Committee encourages the federal government, band leaders, Aboriginal people, and all those with disabilities to build upon this success. While NAND has focused this Committee's attention on the important issues, we believe there is still room for greater input.

 Government of Canada News Release, "National Aboriginal Organization receives funding to assess employment needs of Aboriginal people with disabilities," 11 January 1993.

5 This Committee recommends that:

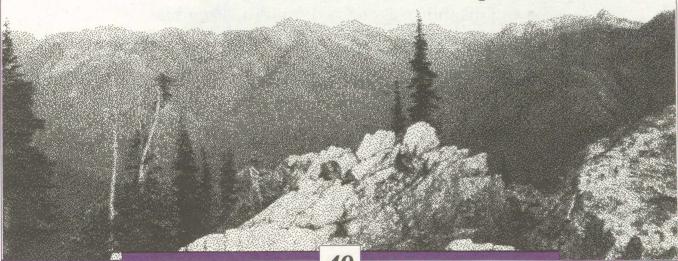
- The Ministers of Indian Affairs and Northern Development, Health and Welfare Canada and the President of the Treasury Board should cooperate with the Minister Responsible for the Status of Disabled Persons to set up, no later than 1 November 1993, a working group to determine the support in the community for a Canadian Council on Aboriginal People with Disabilities. This Council would advise the government on issues related to Aboriginal people with disabilities and raise awareness within Aboriginal communities and all levels of government on issues related to disability. Seventy-five per cent of the members of this working group should be Aboriginal people with disabilities. The remaining twenty-five per cent should be representatives of national Aboriginal organizations and representatives of band leadership. The membership of the working group should reflect regional balances. The working group should report no later than 31 March 1994.
- b. If the working group so recommends, the government should immediately establish a Canadian Council on Aboriginal People with Disabilities, or put in place any other mechanism recommended by the working group, in order to ensure that government departments are obliged to consult Aboriginal people with disabilities about relevant policies and initiatives.

EVEN WHEN YOU'RE ON THE RIGHT TRACK, YOU CAN GET RUN OVER IF YOU JUST SIT THERE!

6. A 'ROYAL' OPPORTUNITY

At the present time, there is another way to ensure that Aboriginal people with disabilities have a say in determining their future. It is a major opportunity that must not be missed. On 27 August 1991, the Prime Minister announced the formation of the Royal Commission on Aboriginal Peoples co-chaired by Georges Erasmus, former National Chief of the Assembly of First Nations and the Honourable René Dussault, Justice of the Quebec Court of Appeal. Under terms of reference that were recommended by former Chief Justice Brian Dickson of the Supreme Court of Canada, the Commission has begun to study solutions to the issues that confront Aboriginal people. During its current hearings across the country, Aboriginal and non-Aboriginal people and organizations are voicing their concerns and offering their solutions to the wide range of issues that fall within the Commission's mandate.

The Commission has the power to investigate and to make recommendations concerning social

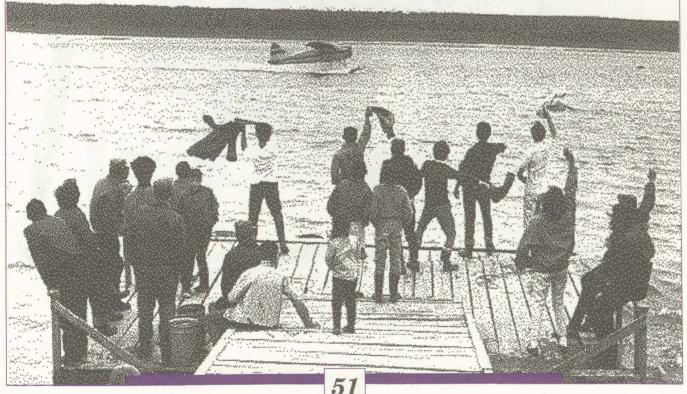


issues, the constitutional and legal position of the Métis, the special difficulties of life in the North, the problems of developing a viable economic base, unemployment, access to labour markets, discrimination in employment and the control of primary and secondary education on reserves and in native communities. Given the Commission's broad mandate, its extensive research program and public hearings, this Committee believes that the Royal Commission possesses a unique opportunity to make practical recommendations to greatly improve the lives of Aboriginal people in this country.

In this intensive study, the terms of reference of the Royal Commission can be considered to include, but do not specifically mention, the concerns of Aboriginal people with disabilities. This Committee is concerned, that the Members of the Royal Commission are not focusing strongly enough on the specific issue of disability. It is not sufficient to equate disability issues with the provision of health care. We believe it is imperative that all issues important to Aboriginal people with disabilities be addressed head-on and in greater detail than we can provide in this report. Although this report outlines the issues in broad brush strokes, the Commission is in a position to paint a picture with details. If the issue of disability is omitted from the Commission's work, its final report could prove to be of limited value, not only for Aboriginal people with disabilities, but also for their families, their friends and their communities.

This Committee recommends that:

The Royal Commission on Aboriginal Peoples should immediately undertake to ensure that the unique perspective of Aboriginal people with disabilities is an integral part of its overall work and final recommendations. The Royal Commission should consider the issue of disability within the full scope of its mandate, and not simply from a health care perspective. The final recommendations made by the Royal Commission to improve the lives of Aboriginal people should deal with disability where relevant.



51



LIST OF RECOMMENDATIONS

RECOMMENDATION 1 (page 22)

In light of the seriousness of the situation and the need for immediate and comprehensive action to deal with issues related to Aboriginal people with disabilities, the Ministers of Indian Affairs and Northern Development, Health and Welfare, other departments that have programs that deal with Aboriginal people, and the President of the Treasury Board should cooperate with the Minister Responsible for the Status of Disabled Persons, in order to:

(A)

Ensure immediate action to co-ordinate federal programs and activities that are directed towards, or are used by, Aboriginal people with disabilities. The Minister Responsible for the Status of Disabled Persons, in collaboration with the other Ministers, should make public a specific plan of action to deal with the co-ordination of federal activities related to Aboriginal people with disabilities no later than 1 November 1993.

(B)

In consultation with Aboriginal people with disabilities, create a working group composed of senior managers of all responsible departments (including the Privy Council Office, Treasury Board and the Federal-Provincial Relations Office) to establish and to monitor an integrated approach to policy and program formulation and development for Aboriginal people with disabilities. This working group should ensure that individual federal departments and agencies collect and use up-to-date and appropriate data in devising policies and programs for Aboriginal people with disabilities.

RECOMMENDATION 2 (page 27)

(A)

On behalf of the Government of Canada, the Minister Responsible for the Status of Disabled Persons should table in Parliament an annual report on the National Strategy for the Integration of Persons with Disabilities and other government activities related to persons with disabilities. This annual report should contain details of grants and contributions, as well as program and policy initiatives related to persons with disabilities. This annual report should contain a section that deals specifically with activities taken to benefit Aboriginal people with disabilities. The annual report to Parliament should be referred to this Standing Committee and its successors, as well as to other relevant Parliamentary Committees.



(B)

The Clerk of the Privy Council and Secretary to the Cabinet, the Secretary of the Treasury Board and the Secretary to the Cabinet for Federal-Provincial Relations should each name one senior official with sole and specific responsibility for all persons with disabilities. In the case of the Treasury Board, this official should report through the Program Branch.

RECOMMENDATION 3 (page 38)

The federal government should prepare, no later than 1 November 1993, a tripartite federal / provincial-territorial / band governmental action plan that will ensure ongoing consultation, cooperation and collaboration on all issues pertaining to Aboriginal people with disabilities. This action plan must contain specific agendas, realistic target dates and evaluation mechanisms. It should deal with existing or proposed transfers of the delivery of services to ensure that these transfers meet the needs of Aboriginal people with disabilities.

RECOMMENDATION 4 (page 41)

The Government of Canada should initiate discussions with the Government of the United States for the purpose of developing a Canada-United States plan of action to co-ordinate efforts by both governments to deal with the needs of the people of Akwesasne. The action plan should include, but not be restricted to, setting out ways of co-ordinating health and social services.

RECOMMENDATION 5 (page 47)

(A)

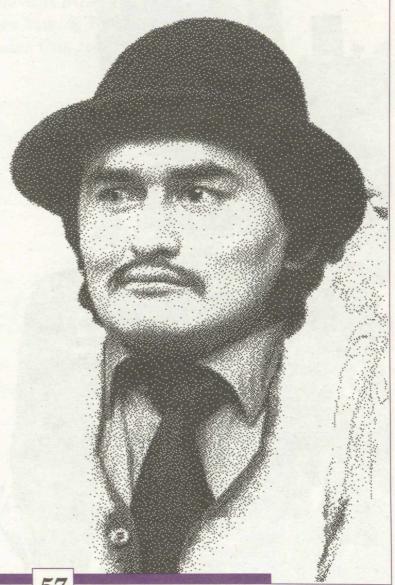
he Ministers of Indian Affairs and Northern Development, National Health and Welfare and the President of the Treasury Board should cooperate with the Minister Responsible for the Status of Disabled Persons to set up, no later than 1 November 1993, a working group to determine the support in the community for a Canadian Council on Aboriginal People with Disabilities. This Council would advise the government on issues related to Aboriginal people with disabilities and raise awareness within Aboriginal communities and all levels of government on issues related to disability. Seventy-five per cent of the members of this working group should be Aboriginal people with disabilities. The remaining twenty-five per cent should be representatives of national Aboriginal organizations and representatives of band leadership. The membership of the working group should reflect regional balances. The working group should report no later than 31 March 1994.

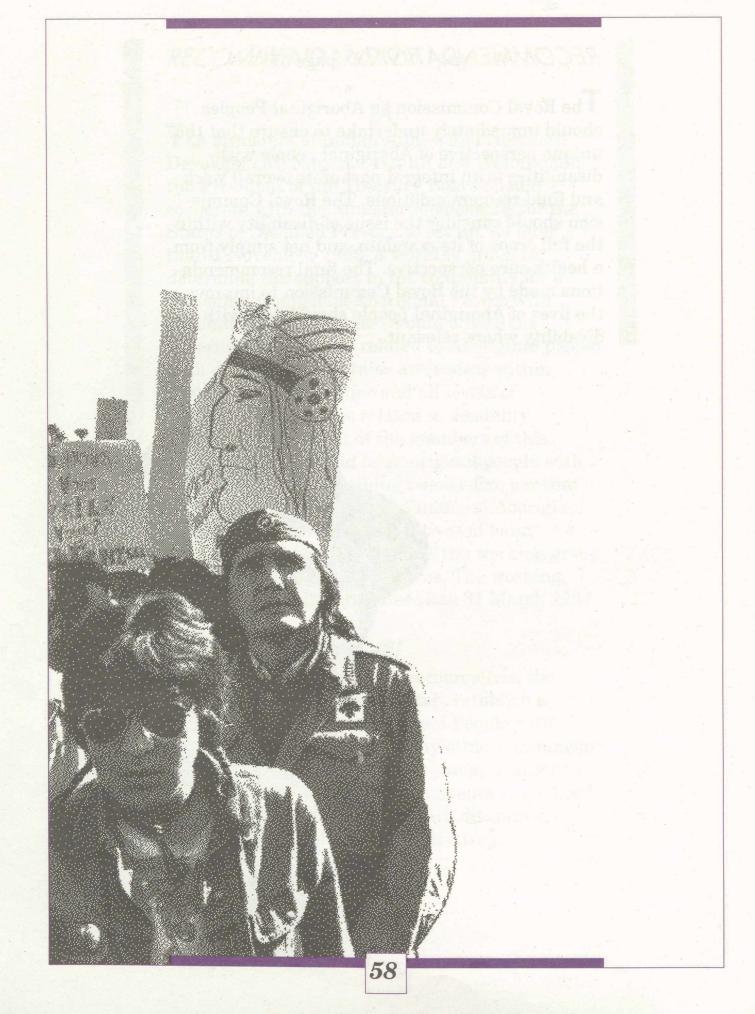
(B)

If the working group so recommends, the government should immediately establish a Canadian Council on Aboriginal People with Disabilities, or put in place any other mechanism recommended by the working group, in order to ensure that government departments are obliged to consult Aboriginal people with disabilities about relevant policies and initiatives.

RECOMMENDATION 6 (page 51)

The Royal Commission on Aboriginal Peoples should immediately undertake to ensure that the unique perspective of Aboriginal people with disabilities is an integral part of its overall work and final recommendations. The Royal Commission should consider the issue of disability within the full scope of its mandate, and not simply from a health care perspective. The final recommendations made by the Royal Commission to improve the lives of Aboriginal people should deal with disability where relevant.





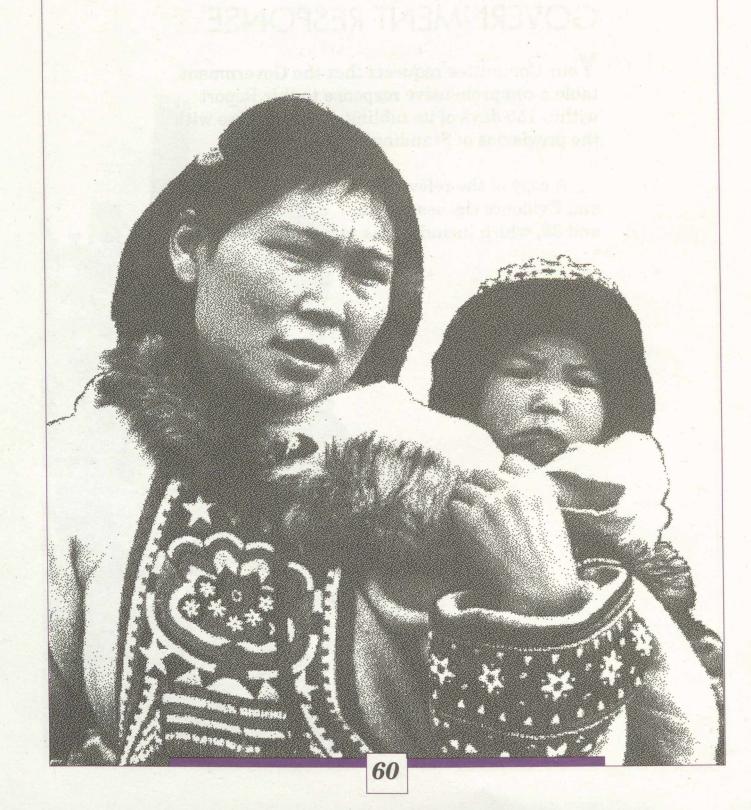
REQUEST FOR A GOVERNMENT RESPONSE

Your Committee requests that the Government table a comprehensive response to this Report within 150 days of its tabling, in accordance with the provisions of Standing Order 109.

A copy of the relevant Minutes of Proceedings and Evidence (Issues Nos. 6, 7, 8, 9, 10, 19, 30, 31 and 33, which includes this report) is tabled.

Respectfully yours,

Bruce Halliday, M.P. Chairman



ACKNOWLEDGEMENTS

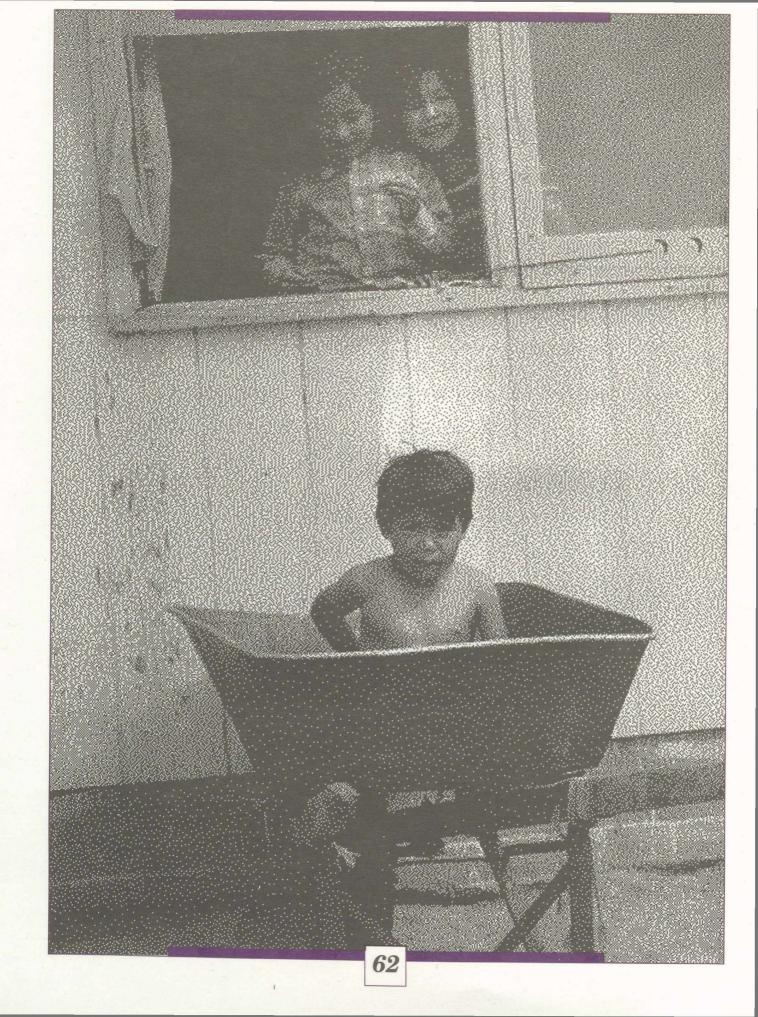
As with the other reports prepared by this Committee, the Members of the Standing Committee on Human Rights and the Status of Disabled Persons have been able to call upon the capable assistance of many people.

The Chairman and Members of the Committee extend their thanks to the witnesses who provided us with their insights into, and their knowledge of, this subject.

As well, our thanks go to the staff of the Committee. Nancy Holmes of the Law and Government Division of the Research Branch, Library of Parliament was the researcher and principal drafter of this report. William Young provided the Committee with the benefit of his experience and skills in preparing reports to Parliament. Lise Laramée, the Clerk of the Committee, organized our activities and managed the production of this report.

The Chairman also wishes to express his appreciation to Skip Brooks who, since the time of *Obstacles*, has maintained an interest in promoting action to address the issue of disability in the Aboriginal community. Vaughn Bender, the legislative assistant to the Chairman, has continued to help the Committee in conducting its business.

Finally, the Members would like to thank Jim Turner of PixelGraph Studio, whose skill in the graphic arts is evident in the design of this report.



LIST OF WITNESSES

	ISSUE :	NO. DATE
Cross-Cultural Consultants Inc. Neil McDonald, Consultant	6	Tuesday, October 29, 1991
Akwesasne Mohawk Nation Mike Mitchell, Grand Chief Ernest Benedict, Chief (Elder) Tina Terrance Carol Papineau Diane Cook Boots	7	Tuesday, November 19, 1991
River Desert Reserve, Maniwaki Josephine Morin Charlotte King	7	Tuesday, November 19, 1991
Ontario March of Dimes Grace Teskey, Counsellor, Native Community Service	7	Tuesday, November 19, 1991
National Aboriginal Network on Disability Joanne Francis, President Wendall Nicholas, Executive Secretary	7	Tuesday, November 19, 1991
Métis & British Columbia Aboriginal Network on Disability Charles Wellburn	7	Tuesday, November 19, 1991
Okanagan Tribe of British Columbia Donna Good Water	7	Tuesday, November 19, 1991
Department of Indian and Northern Affairs Canada Bill Van Iterson, A/Assistant Deputy Minister, Indian Services Normand Levasseur, A/Director General, Social Development Branch	8	Tuesday, February 11, 1992

ISSUE N	O. DATE
ees,	Thursday, February 13, 1992
te,	Tuesday, February 18, 1992
19	Wednesday, April 22, 1992
30 nd	Wednesday, March 10, 1993
	10 te, al 30 and

Health and Welfare Canada

Jean-Jacques Noreau, Deputy Minister Ian Green, Assistant Deputy Minister, Social Services Program and Health Services and **Promotion Branch** Peter Lawless, Senior Policy Advisor, Disabled Persons Unit Pierre Blais, Acting Director, Medical Services Branch Pierre Fortier, Director General, Policy and Legislation, Income Security Program Branch

Thursday, March 11, 1993

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MINUTES OF PROCEEDINGS

WEDNESDAY, MARCH 24, 1993

(58)

The Standing Committee on Human Rights and the Status of Disabled Persons met *in camera* at 3:52 o'clock p.m. this day, in Room 701, La Promenade, the Chairman, Bruce Halliday, presiding.

Members of the Committee present: Beryl Gaffney, Bruce Halliday, Jean-Luc Joncas, Beth Phinney and Neil Young.

Acting Member present: André Harvey for Louise Feltham.

In attendance: From the Research Branch of the Library of Parliament: Nancy Holmes and William Young, Research Officers.

Witness: From Pixelgraph Studio: Jim Turner, Consultant.

In accordance with its mandate under Standing Order 108(3) (b), the Committee resumed consideration of the Economic Integration of Disabled Persons (See Minutes of Proceedings and Evidence dated Tuesday, June 13, 1992, Issue No. 2).

The Committee resumed consideration of its draft report on Aboriginal People with Disabilities.

It was agreed, - That, the draft report, as amended, be adopted as the Committee's Fourth Report to the House and that the Chairman present it to the House.

It was agreed, - That, the Chairman be authorized to make such grammatical and editorial changes to the Report as may be necessary without changing the substance of the Report.

It was agreed, - That, pursuant to Standing Order 109, the Committee request the Government to table a comprehensive response to the Report within 150 days.

It was agreed, - That, in addition to the 850 copies printed by the House, the Committee print 3150 copies of its Report.

At 5:00 o'clock p.m., the Committee adjourned to the call of the Chair.

LISE LARAMÉE
Clerk of the Committee



MANUTES OF PROCEEDINGS

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