**OHCHR Annual Thematic Study: Questionnaire on Article 26 of the *Convention on the Rights of Persons with Disabilities* (CRPD), on Habilitation and Rehabilitation**

1. **Does your country have laws, policies or guidelines on habilitation and rehabilitation, at any level of government, which ensure persons with disabilities, including women and children with disabilities to access services and goods, such as assistive devices (please identify and share the text of those provisions), clarifying as follows:**

* Canada has laws, policies and guidelines on habilitation and rehabilitation at all levels of government and works collaboratively with provinces, territories and community organizations to implement programs and guidelines to ensure persons with disabilities are aware of and have access to services in habilitation and rehabilitation.
* Canada implements its international human rights obligations through the Constitution and ordinary laws, as well as through a range of policies and programs at all levels of government. For more comprehensive information on Canada’s implementation of the *Convention on the Rights of Persons with Disabilities* (CRPD), please see Canada’s first report on the CRPD, which was submitted to the UN Committee on the Rights of Persons with Disabilities in February 2014.
* Canada has a federal system in which the Constitution confers legislative and executive powers on two levels of government, which are each sovereign in their respective spheres. There is a federal government for all of Canada, and a government for each province and territory.[[1]](#footnote-1) Matters concerning persons with disabilities fall under both levels of government, who work together and in collaboration with the non-profit and private sectors, and assume complementary roles in promoting and supporting the full participation of persons with disabilities in all dimensions of Canadian society.
* Accordingly, the CRPD is implemented through constitutional and statutory protections, and legislative, administrative and other measures including:
  + the *Canadian Bill of Rights* (the “Bill of Rights”), which applies to federal laws and protects fundamental freedoms, legal rights and equality before the law;
  + the Schedule B to the *Canada Act 1982* (the “Charter”), which applies to all government action and guarantees all individuals fundamental freedoms and rights, including an explicit equality rights guarantee for persons with disabilities;
  + Federal-Provincial/Territorial (F-P/T) human rights laws, which apply to the public and private sectors and prohibit discrimination on grounds such as disability, in regard to employment, the provision of goods, services and facilities customarily available to the public and accommodation;
  + specific F-P/T laws governing areas that impact persons with disabilities, for example, social benefits programs, disability insurance plans, housing programs; and
  + a broad range of F-P/T policies, programs and services aimed at improving accessibility, providing financial and other supports to persons with disabilities and reducing barriers to their full participation in Canadian society.
* Through the *Government Employees Compensation Act* (GECA), the federal government provides compensation benefits to federal employees (federal public service and most Crown corporations and agencies) who have sustained an occupational injury or illness in the course of their work.
* Workers’ compensation in Canada is a result of the recommendations of the Meredith Report (1913), which outlined a trade-off in which workers relinquish their right to sue their employer in exchange for compensation benefits. Benefits include salary replacement, health care and rehabilitation support as well as assistance to ensure an early and safe return to work. Most employees are covered by provincial/territorial legislation/regulations and through their respective workers’ compensation board.
* The *Veterans Well-Being Act (*formerly known as the *Canadian Forces Members and Veterans Re-establishment and Compensation Act)* provides rehabilitation services to eligible veterans with a physical or mental health problem resulting primarily from service in the Canadian Forces that is creating a barrier to re-establishment in civilian life. Under the Act, rehabilitation services or vocational assistance is provided to veterans who have been released on medical grounds in accordance with chapter 15 of the Queen’s Regulations and Orders for the Canadian Forces.
* The *Veterans Health Care Regulations* consist of a full range of medical, surgical, dental and related servicesthat will provide surgical or prosthetic devices or aids and their maintenance as well as home adaptations to accommodate the use of devices or aids. Generally, eligibility is based on being in receipt of Veterans Affairs Canada Disability Benefits (due to a service-related injury); various service qualifications, for example having served overseas in a theatre of war; or being determined to be income-qualified (low-income). The *Veterans Health Care Regulations* includes:
  + Treatment benefits – consist of a full range of medical, surgical, dental and related services;
  + Veterans Independence Program – addresses the needs of aging Veterans who prefer to remain in their own homes; and
  + Long-Term Care – provides benefits along a continuum of care from support at home to care in long-term care facilities.
* In accordance with the *Corrections and Conditional Release Act* (CCRA), the Correctional Service of Canada (CSC) has a legislative mandate to provide every inmate with essential health care and reasonable access to non-essential mental health care that will contribute to the inmate’s rehabilitation and successful reintegration into the community, in keeping with professionally accepted standards.
* On June 20, 2018, the Government of Canada introduced Bill C-81, *An Act to Ensure a Barrier-free Canada* (*Accessible Canada Act*), in the Parliament of Canada. Working within federal jurisdiction, the purpose of the proposed Act is to benefit all persons, especially persons with disabilities, through the progressive realization of a Canada without barriers. The proposed Act will achieve this through the proactive identification, removal and prevention of barriers to accessibility in priority areas such as the built environment, employment, service delivery, procurement, transportation, and information and communication technologies.
* Some services used by persons with disabilities are exempt from the Goods and Services Tax/Harmonized Sales Tax, including basic health care services, such as services of physicians, dentists and registered nurses, as well as occupational therapy and physiotherapy services. In addition, certain medical devices are tax-free, such as wheelchairs, walkers and other mobility aids specially designed for use by persons with a disability.
* In Manitoba, *The Accessibility for Manitobans Act* (AMA) was proclaimed in December 2013 with all party support. The main goal of this legislation is to identify, prevent and remove barriers to participation, particularly for persons with disabilities. In consultation with businesses and the community, AMA standards are being developed to lay out who has to do what, and by when, in five areas of daily living: Customer Service; Employment; Information and Communication; Transportation; and the Built Environment. The Customer Service Standard Regulation came into effect in November 2015. The government of Manitoba is conducting a mandatory review of the AMA as required by the legislation.
* In Nova Scotia, the *Accessibility Act* was proclaimed on September 18, 2017, with the goal of an accessible Nova Scotia by 2030. Under the Act, accessibility standards (regulations) can be developed in the following areas: the delivery and receipt of goods and services; information and communication; public transportation and transportation infrastructure; employment; the built environment; and education.
* In Ontario, the *Accessibility for Ontarians with Disabilities Act, 2005* allows the Ontario government to develop, establish and enforce specific accessibility standards. The Act aims to ensure all Ontarians have the chance to work, go to school, shop, travel and participate more fully in daily life in a more equitable way. The goal of the Act is to create an accessible Ontario by 2025.The Act applies to all provincially regulated organizations in Ontario with one employee or more. In addition to the Government itself, this includes the broader public sector, private and not-for-profit organizations.
* In Prince Edward Island, *The Miscellaneous Statutes Amendment Act* (Persons with Disabilities) was passed in June 2018 and changes the wording from “handicapped” to “persons with disabilities,” “handicap” to “disability” or “condition or disorder,” and “mental handicap” to “intellectual disability” in five major pieces of legislation: the *Employment Standards Act*, the *Engineering Profession Act*, the *Labour Act*, the *Mental Health Act* and the *Public Health Act*.
* Dans la province de Québec, l’article 61.1 de la *Loi assurant l’exercice des droits des personnes handicapées en vue de leur intégration scolaire, professionnelle et sociale* stipule que les ministères et les organismes publics qui emploient au moins 50 personnes et les municipalités de 15 000 habitants ou plus doivent adopter un plan d’action annuel pour les personnes handicapées. Le ministère de la Santé et des Services sociaux du Québec, les centres intégrés et les établissements non fusionnés sont assujettis à cette disposition. Les plans d’action visent à réduire les obstacles à la participation sociale des personnes handicapées dans les secteurs d’activité des organismes visés. Ils exposent les mesures réalisées au cours de la dernière année et celles envisagées pour la prochaine année dans le but de réduire les obstacles cernés.
* Les lois, politiques, et lignes directrices additionnels au Québec comprennent:
  + Loi assurant l’exercice des droits des personnes handicapées en vue de leur intégration scolaire, professionnelle et sociale
  + Loi sur les services de santé et les services sociaux
  + La politique À part entière : pour un véritable exercice du droit à l’égalité
  + La politique L’accès aux documents et aux services offerts au public pour les personnes handicapées
  + Cadre de référence pour l’organisation des services en déficience physique, déficience intellectuelle et trouble du spectre de l’autisme, vers une meilleure intégration des services pour les personnes ayant une déficience
  + Plan d’action sur le trouble du spectre de l’autisme 2017-2022, des actions structurantes pour les personnes et leur famille.
  + Guides de gestion pour l’attribution d’aides techniques aux personnes handicapées.
  + Chez soi : le premier choix : la politique de soutien à domicile
  1. **What are the working definitions in the law on “disability,” “persons with disabilities,” “rehabilitation,” and “habilitation” used to define policies and budget allocation on habilitation and rehabilitation, and what are the services and goods delivered under them?**
* Federal policies and programs for persons with disabilities serve a wide range of purposes, ranging from Canada Pension Plan Disability benefits, which provide income support to those who are unable to access employment opportunities, to the Veterans Affairs Canada’s (VAC) Rehabilitation Program, which provides rehabilitation and vocational assistance services and benefits to eligible Veterans and their families. Programs support different populations and define disability appropriate to their specific purpose and context. Examples of definitions are provided below.
* Under the Opportunities Fund for Persons with Disabilities program, the term “persons with disabilities,” is defined to mean individuals who self-identify as having a permanent physical or mental disability that restricts their ability to perform daily activities.
* According to the *Veterans Well-being Act,* “disability” means the loss or lessening of the power to will and to do any normal mental or physical act. Under the Act, rehabilitation includes:
  + “medical rehabilitation” – any physical or psychological treatment whose object is to stabilize and restore the basic physical and psychological functions of a person;
  + “Psycho-social rehabilitation” – any psychological or social intervention whose object is to restore a person to a state of independent functioning and to facilitate their social adjustment; and
  + “vocational rehabilitation” – any process designed to identify and achieve an appropriate occupational goal for a person with a physical or a mental health problem, given their state of health and the extent of their education, skills and experience.
* Physical disability is defined in the *Alberta Human Rights Act* as any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect or illness. This includes, but is not limited to, epilepsy; paralysis; amputation; lack of physical coordination; visual, hearing and speech impediments; and physical reliance on a guide dog, service dog, or wheelchair or other remedial appliance or device.
* Mental disability is defined in the *Alberta Human Rights Act* as any mental disorder, developmental disorder or learning disorder, regardless of the cause or duration of the disorder.
* In Alberta, employers, landlords, tenants and service providers are expected to make reasonable efforts to accommodate individuals with disabilities unless it would cause undue hardship. It may be possible to make adjustments to a building to accommodate persons with disabilities. Employers may also rearrange workloads so that duties that cannot be performed by an employee with a disability are assumed by another worker.[[2]](#footnote-2)
* In 2018, New Brunswick’s amendments to the legislation governing its Premier’s Council on Disabilities included a human rights approach to the definition of “person with a disability,” which is now defined as “a person who has long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder the person’s full and effective participation in society on an equal basis with others.”
* In the Northwest Territories, persons with disabilities may be eligible to receive a Disability and Incidental Allowance from the Income Assistance Program if they meet the definition of a person with a disability and financially qualify to receive Income Assistance. For these purposes, a person with a disability is defined as “a person with either physical or mental impairments that significantly restrict his/her ability to perform daily living activities, either permanently or periodically for extended periods, and medical treatment would not remove or heal his/her disability and because of these restrictions, requires assistance with daily living activities”.
* In Nova Scotia, the following definitions are used in Disability Support Program Policy:

1. Intellectual Disability: a disorder that includes an intellectual deficit, which creates difficulties in functioning in two or more activities of daily living and/or instrumental activities of daily living within the range considered typical for a person of the same age and gender. Each of the following criteria must be present:

a) Deficits in mental abilities such as reasoning, problem solving, planning, abstract thinking, judgment, academic learning and learning from experience. An intelligence quotient (IQ) below the population mean, which is typically an IQ score of approximately 70. There are four levels of intellectual disability: Mild: IQ of 50 to 70; Moderate: IQ of 39 to 55; Severe: IQ of 20 to 40; and Profound: IQ of 20 to 25.

This includes persons with a developmental disability, which is a disorder characterized by substantial impairment in several key areas of development, for example: social interaction, communication, behavioural presentation.

A learning disability is not the same as an intellectual or developmental disability, as average or above average intellectual functioning is required for a learning disability; and

b) Impairments in functioning within two or more aspects of activities of daily living or instrumental activities of daily living: for example, communication, social participation, functioning at school or at work, or personal independence at home or in community settings; and

c) Onset before the age of 18 years.

1. Long-Term Mental Illness: a diagnosis of chronic and persistent mental illness which affects a person’s thinking, feeling or behaviour and creates significant difficulties in functioning in two or more aspects of activities of daily living or instrumental activities of daily living within the range considered typical for someone of the same age or gender.

3. Physical Disability: a long-term, chronic and persistent physical limitation that creates significant difficulties in functioning in two or more aspects of activities of daily living or instrumental activities of daily living within the range considered typical for someone of the same age or gender. The physical disability substantially limits functional independence and results in the person requiring ongoing support and skill development.

4. Persons with an Acquired Brain Injury, which results in damage to a person’s brain that occurs from events after birth rather than as part of a genetic or congenital disorder, may be included in one of the above three categories depending on their functional assessment.

* In Ontario, the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008* (SIPDDA) governs the development and delivery of programs, services and supports for persons with developmental disabilities. According to SIPDDA,a person has a developmental disability if he or she has the prescribed significant limitations in cognitive functioning and adaptive functioning (described below), and those limitations originated before the person reached 18 years of age, are likely to be life-long in nature, and affect areas of major life activity, such as personal care, language skills, learning abilities, the capacity to live independently as an adult or any other prescribed activity.
* SIPDDA defines adaptive and cognitive functioning as follows:
  + “adaptive functioning”: a person’s capacity to gain personal independence, based on the person’s ability to learn and apply conceptual, social and practical skills in his or her everyday life;
  + “cognitive functioning”: a person’s intellectual capacity, including the capacity to reason, organize, plan, make judgments and identify consequences.
* Au Québec, les termes sont définis de la façon suivante :
  + « Handicap » : un désavantage résultant d'une déficience, soit une perte, une malformation ou une anomalie d'un organe, d'une structure ou d'une fonction mentale, psychologique, physiologique ou anatomique. Le handicap peut être soit réel ou perçu et, puisque l’accent est mis sur les effets de la distinction, exclusion ou préférence plutôt que sur la nature précise du handicap, la cause et l’origine du handicap sont sans importance. (Commission des droits de la personne et des droits de la jeunesse)
  + « Personnes handicapées »: toute personne ayant une déficience entraînant une incapacité significative et persistante et qui est sujette à rencontrer des obstacles dans l’accomplissement d’activités courantes. (Loi assurant l’exercice des droits des personnes handicapées en vue de leur intégration scolaire, professionnelle et sociale article g)
  + « Adaptation/réadaptation » : Les services d'adaptation/réadaptation consistent en un ensemble d'activités permettant la réalisation du potentiel optimal de la personne en lien avec ses aspirations et objectifs en agissant à la fois sur le développement de ses habiletés, sur la compensation de ses incapacités et sur la réduction des obstacles environnementaux. Ils visent à assurer une participation sociale optimale. Ces services sont circonscrits dans le temps et prennent fin à la reprise des habitudes de vie ou dès l'atteinte des objectifs de participation sociale. (Cadre de référence pour l’organisation des services en déficience physique, déficience intellectuelle et trouble du spectre de l’autisme) Ces services peuvent être spécifiques, spécialisés ou surspécialisés.

1. **What are the public entities in charge of delivering and monitoring habilitation and rehabilitation services and goods for persons with disabilities?**

* In Canada, "*public entities*" that deliver habilitation and rehabilitation in the areas of health, education and in other social services areas include provincial/territorial departments, organizations, and community-based government funded groups.
* Within the Government of Canada, Employment and Social Development Canada has a unique role as the lead federal department on disability issues through the Office for Disability Issues. Many other Departments and Agencies, including Veterans Affairs Canada and Public Safety Canada, administer and deliver programs, services and benefits in support of persons with disabilities.
* At the provincial and territorial levels, there are also a number of bodies that deliver and monitor habilitation and rehabilitation goods and services for persons with disabilities.
* The Government of Alberta works in partnership with Alberta Health Services, school authorities, interested First Nations and other community partners to share available resources, thereby:
* improving access to supports and services;
* building the capacity of communities including school staff, service providers and families; and,
* improving the integration and coordination of supports and services.
* The Government of Alberta provides publicly funded habilitation and rehabilitation programs and services delivered by Alberta Health Services to all persons with disabilities, based on clinical evaluation. The province also funds the ongoing training and education of habilitation/rehabilitation program professionals and staff.
* In Nova Scotia, the main provincial public entities are the Department of Community Services and the Department of Health and Wellness.
* Au Québec, tous les ministères et organismes publics dispensateurs de services ont la responsabilité de desservir les personnes handicapées en tant que citoyen à part entière. De ce fait, il n’existe pas de ministère spécifiquement responsable de la prestation de services aux personnes handicapées.

1. **Are there conditions or restrictions to access, or being eligible to, receive free or affordable habilitation and rehabilitation services and goods, on an equal basis with others, on grounds of refugee status, migration status, income, origin, sex, gender, or other status?**

* The *Canadian Charter of Rights and Freedoms*, which forms part of Canada’s Constitution, guarantees equality before and under the law and equal protection and benefit of the law, without discrimination based on mental or physical disability and other grounds. Among other things, this protection has been interpreted by the courts to mean that, where the government provides a service, it must do so in a way that does not discriminate on the basis of race, national or ethnic origin, colour, religion, sex, sexual orientation, age, mental or physical disabilities, and other analogous grounds.
* In addition, all governments in Canada – federal, provincial and territorial – have adopted legislation prohibiting discrimination on various grounds in regard to the provision of goods and services, such as the provision of habilitation and rehabilitation goods and services, in both the public and private sectors. Generally, these human rights codes prohibit discrimination on the following grounds: race or colour, religion or creed, age, sex, sexual orientation, gender identity, family or marital status, physical or mental disability, national or ethnic origin, and ancestry or place of origin. Some codes include other prohibited grounds of discrimination such as gender expression, genetic characteristics, political belief, association, pardoned conviction, record of criminal conviction, source of income and others.
* The Government of Canada habilitation and rehabilitation programs and services are offered to persons with disabilities on an equal basis based on the eligibility factors of each program. The Government of Canada funds a number of habilitation and rehabilitation programs to support persons with disabilities in attaining and maintaining vocational ability. For example:
  + The **Enabling Accessibility Fund** (EAF) provides funding for eligible capital projects that increase accessibility for persons with disabilities in Canadian communities and workplaces, creating more opportunities for persons with disabilities to participate in community activities, programs and services, or access employment opportunities. Eligible recipients include not-for-profit organizations, for-profit organizations, municipalities, indigenous organizations (including band councils, tribal councils and self-government entities), and territorial governments.
  + The **Opportunities Fund for Persons with Disabilities** program funds a wide range of programs and services to support persons with disabilities, including skills training, job placements, wage subsidies and preparation for self-employment, and works with employers to hire persons with disabilities. Eligible program participants include individuals that self-identify as having a physical or mental disability that restricts their ability to perform daily activities, and are legally entitled to work in Canada according to the relevant federal and provincial legislation and regulations. This group includes Canadian citizens, permanent residents and persons who were granted a refugee status in Canada.
  + The **Veterans Affairs Canada’s Rehabilitation Program** provides medical, psycho-social and vocational rehabilitation and vocational assistance services and benefits to eligible Veterans and their families to assist them in their re-establishment in civilian life. The Health Care Program, under the *Veterans Health Care Regulations,* is designed to improve or maintain the physical, mental and social well-being of eligible veterans and their families, promote independence, and help them to remain at home and in their own communities by providing a continuum of care.
  + The **First Nations and Inuit Home and Community Care Program** provides basic home and community care services to eligible First Nations and Inuit communities. The program provides assessment and case management services, nursing, personal care supports, and respite to caregivers.
  + A new **Pre-Apprenticeship program,** announced in Budget 2018, will help Canadians gain work experience, make informed career choices and develop the skills needed to find and keep jobs in the trades. The initiative will encourage groups facing barriers, including women, Indigenous peoples, newcomers and persons with disabilities, to explore and prepare for careers in the skilled trades.
* At the provincial and territorial level, the *Alberta Human Rights Act* protects against discrimination on the grounds of mental disability and physical disability:
  + No person shall:

(a) deny to any person or class of persons any goods, services, accommodation or facilities that are customarily available to the public; or

(b) discriminate against any person or class of persons with respect to any goods, services, accommodation or facilities that are customarily available to the public, because of the race, religious beliefs, colour, gender, gender identity, gender expression, physical disability, mental disability, age, ancestry, place of origin, marital status, source of income, family status or sexual orientation of that person or class of persons or of any other person or class of persons.

* In Nova Scotia, a person with a disability (see section 4.1 of the Disability Support Program (DSP) Policy) may apply to the DSP if the applicant:

a) is 19 years of age or over;

b) is lawfully entitled to be in or to remain in Canada;

c) makes their home in and is a resident of Nova Scotia; and

d) has a valid Nova Scotia Health Card.

* An applicant’s eligibility for financial assistance shall be determined by the Care Coordinator through a financial assessment, in accordance with the Financial Eligibility Policy. An applicant’s individual circumstances are considered in the assessment and, therefore, the provision of assistance is determined on a case by case basis. An applicant who is eligible for DSP based on their functional assessment, but who is ineligible based on their financial assessment, may access a DSP support option as a private payer.
* Au Québec, il n’y a pas de restriction ou de condition pour accéder aux biens ou aux services d’adaptation ou de réadaptation. Le réseau de la santé et des services sociaux est non discriminatoire. Certains services peuvent être modulés en fonction du revenu. Pour avoir droit à des services d’adaptation ou de réadaptation, la personne doit être inscrite au régime d’assurance maladie. De façon générale, toute personne désireuse de s’installer au Québec, de façon permanente ou temporaire, est assujettie à un délai de carence de 3 mois avant d’obtenir sa carte d’assurance maladie et de bénéficier des services de l’assurance maladie et de l’assurance hospitalisation.
* Avant son arrivée, cette personne est invitée à souscrire à une assurance privée temporaire. À noter, toutefois, que certains services peuvent être rendus gratuitement pendant le délai de carence s’ils concernent les services :
  + nécessaires aux victimes de violence conjugale ou familiale ou d'une agression sexuelle;
  + liés à la grossesse, à l'accouchement ou à l'interruption de grossesse;
  + liés à la vaccination avec les vaccins prévus au Programme québécois d'immunisation et selon le Protocole d'immunisation du Québec ou lors de campagnes de vaccination spéciales;
  + nécessaires aux personnes aux prises avec des problèmes de santé de nature infectieuse ayant une incidence sur la santé publique.
* Le gouvernement du Québec a également adopté plusieurs politiques visant à faciliter l’intégration sur le marché du travail des femmes, personnes immigrantes, des Autochtones, des travailleurs expérimentés et des personnes handicapées, notamment la première Stratégie nationale sur la main-d’œuvre 2018-2023.

1. **Does legislation or policy establish indicators or markers to assess the level of coverage of habilitation and rehabilitation services and goods for persons with disabilities, particularly in mainstream and universal policies, disaggregating data by sex and age or other ground?**

* Different programs and initiatives outlined in this response have markers and indicators based on the objectives of the service or goods provided. Such indicators and markers include program evaluation, surveys, and program beneficiary feedback.
* Data from the Statistics Canada’s Canadian Survey on Disability (CSD) provide an evidence-based foundation to serve disability and social policy analysts at all levels of government, as well as associations for persons with disabilities and researchers working in the field of disability policy and programs. The CSD is used to plan and evaluate services, programs and policies for Canadian adults with disabilities to help enable their full participation in society. In particular, this information on adults with disabilities is essential for the effective development and operation of the Employment Equity Program, since survey data serves as a benchmark on issues of employment equity for persons with disabilities in Canada as compared to the overall Canadian population.
* In Nova Scotia,the Disability Support Program (DSP) establishes five levels of support: Minimal, Moderate, High, Enriched, and Intensive. Participants/applicants are placed in one of these five categories following a functional assessment conducted by a Care Coordinator. For more information on the levels of support, please see section 7 of DSP Program Policy.[[3]](#footnote-3)
* Le Québec possède des banques de données concernant la prestation de services.

1. **Does the law, policy or practice allow for persons with disabilities to be institutionalised by the decision of a third party, against their will, based on rehabilitation (including psychiatric treatment, medical necessity, or need for care)?**

* The Charter and federal, provincial and territorial human rights legislation protect against detaining individuals solely on the ground of physical or mental impairment, notably through prohibitions on arbitrary detention and discriminatory treatment. Detention of any individual must be based on objective grounds provided for by law.
* The *Correctional Services Release Act* (CCRA) requires that treatment shall not be given to an inmate unless the inmate voluntarily gives informed consent, and an inmate has the right to refuse treatment or withdraw from treatment at any time.
* Under the CCRA, where an inmate does not have the capacity to understand, the giving of treatment to an inmate shall be governed by the applicable provincial mental health legislation. Physical restraint for health purposes may be required as a last resort, after all other alternatives have proven ineffective.
* In Alberta, under the *Personal Directive Act*, individuals may choose a representative to make personal, non-financial decisions on their behalf, including where the individual lives. The *Adult Guardianship and Trusteeship Act* provides options and safeguards to protect vulnerable adults who require support in making decisions, including the ability of the Court to appoint a guardian to make personal decisions on behalf of a represented adult, such as where they live. The *Adult Guardianship and Trusteeship Act* also contains provisions for specific decision making, which covers situations where an adult loses capacity and a health professional believes they cannot provide consent on a health care or temporary placement/discharge decision. The health care professional selects an individual from a ranked list, who can then make the health care or placement decision on the adult’s behalf.
* Alberta’s *Protection of Children Abusing Drugs Act (*PChAD) allows a legal guardian to ask the Court for a protection order that takes a child under the age of 18, whose alcohol or drug abuse is likely to result in significant harm to themselves or others, to a protective shelter for up to 10 days, even if the child does not want to go.
* Under the *Mental Health Act* in Alberta, a physician can issue an admission certificate to a facility within 24 hours of examination, if the patient is suffering from a mental disorder and is likely to cause harm to others or him/herself or suffer substantial deterioration. The admission certificate provides authority to apprehend the individual named in the certificate and take them to a facility for care.
* In Nova Scotia, an applicant/participant is required to provide consent to the Disability Support Program (DSP) eligibility processes. If it is determined (through a consent evaluation) that the applicant is not capable of making a decision regarding the initial and ongoing eligibility processes, consent must be obtained from a substitute decision- maker before proceeding further. For more information on consent, please see sections 6.3 and 6.4 of DSP Program Policy.[[4]](#footnote-4)
* Le Code civil du Québec prévoit que le Tribunal peut ordonner la prestation de soins ou l’hébergement d’une personne jugée inapte au sens du Code. Le respect de l’intégrité physique étant un principe fondamental des droits canadien et québécois, il est impossible d’ordonner la prestation de soins ou l’hébergement d’une personne handicapée apte à refuser les soins.

1. **Do legislation or policy differentiate between “primary prevention of impairments” and “secondary prevention of impairments” when allocating resources specifically targeting persons with disabilities?**

* In allocating resources for services and interventions related to habiltation and rehabilitation, Canada does not differentiate between "primary prevention of impairments" and "secondary prevention of impairments". All disabilities are treated equitably in resource allocation.
* Nova Scotia differentiates between "primary" and "secondary prevention of impairments" when allocating resources specifically for persons with disabilities, although Department of Health and Wellness addresses both primary and secondary preventions. Some secondary preventions are addressed by Community Services, while the Disability Support Program (DSP) funds secondary preventions if a person is eligible for certain special needs under policy criteria. The *Social Assistance Act* governs the DSP but is not specific to secondary preventions. An example of secondary prevention under DSP policy is the funding of special diets to improve or prevent decline in a diagnosed condition.
* Au Québec, il n’y a pas de distinction faite entre ces deux types de prévention.

1. **Does legislation or policy specifically provide for rehabilitation and habilitation services and goods for persons with disabilities in prison? Are there restrictions for the use of assistive devices while in prison?**

* The *Canadian Human Rights Act* and similar provincial and territorial laws prohibit discrimination in the provision of services on the basis of disability and other grounds. This protection applies to prisoners with disabilities in federal, provincial and territorial penitentiaries and prisons.
* A cornerstone of Canadian anti-discrimination law is the duty to accommodate the needs of persons with disabilities to the point of undue hardship. This duty recognizes the right of persons with disabilities to the same opportunities as those without disabilities, and requires service providers to do whatever is reasonably possible to accommodate this right. Accommodation must be tailored to individual needs. It might take the form of physical adjustments to buildings or sign language interpretation, for example.
* Correctional Services Canada (CSC) is legislatively mandated to provide inmates with essential health care and reasonable access to non-essential mental health care that will contribute to the inmate’s rehabilitation and successful reintegration into the community.
* Offenders in prison with disabilities are provided with accommodation, as the duty to accommodate individuals with disabilities is established in Canada’s legal framework. Emphasis is placed on the obligation to accommodate all Canadians, including offenders with disabilities. As a result, CSC is mandated to ensure that correctional policies and assessments accommodate offenders with disabilities (as per Commissioner’s Directive 700 Correctional Interventions, Paragraph 4).
* In keeping with professionally accepted standards and subject to legislative mandate, the Government of Canada provides every inmate with essential health care and reasonable access to non-essential mental health care that will contribute to the inmate’s rehabilitation and reintegration into the community.
* The Government of Canada’s model of care is consistent with the World Health Organization’s Continuum of Care, which aligns health care services with patient needs. This allows inmates to receive the most appropriate level of care when they need it.
* The Government of Canada announced funding to modernize the federal correctional system by supporting the rehabilitation and reintegration of Indigenous offenders. This funding will address the overrepresentation of Indigenous offenders in the criminal justice system and help previously incarcerated Indigenous Peoples heal, rehabilitate and find employment in the community.
* The Government of Alberta has developed a Provincial Framework for Adult Offender Education Programs and an Inmate Education Program. While the program does not exclusively cater to persons with disabilities who are incarcerated, many offenders have diagnosed and undiagnosed disabilities. The programming delivered to inmates in provincial correctional centres includes adult basic education, academic upgrading, life skills management (including addictions and anger management), short-term skills training, and pre‑apprenticeship programming.
* In Nova Scotia, the Department of Community Services does not fund individuals while they are incarcerated. In practice, however, the supports needed by participants under such circumstances are often included in transition plans. This also includes participants returning to the community and/or Disability Support Program (DSP) supports. The DSP includes policies regarding temporary and extended absences; for example, a participant’s bed will be held for 30 days in the event of an absence.
* Au Québec, conformément à l’article 61.1 de la [Loi assurant l’exercice des droits des personnes handicapées en vue de leur intégration scolaire, professionnelle et sociale(RLRQ, chapitre E-20.1)](http://legisquebec.gouv.qc.ca/fr/ShowDoc/cs/E-20.1) le gouvernement du Québec s’est doté d’un plan d’action annuel afin d’accroître l’accessibilité des services offerts aux personnes handicapées. Dans le « Plan d’action à l’égard des personnes handicapées 2017-2018 », l’action 6 prévoit que pour les établissements de détention existants et en construction, les services correctionnels sont responsables de suivre l’intégration des composantes d’adaptation des bâtiments lors de la réalisation de projets d’aménagement. Ainsi, les nouveaux établissements de détention disposent des équipements nécessaires pour l’accueil des personnes handicapées.
* Par ailleurs, au quotidien des mesures peuvent être prises par le personnel carcéral afin d’accommoder dans la mesure du possible les personnes dont la condition nécessite certains aménagements physiques par exemple.

1. **Does legislation or policy differentiate between health-related and non-health related rehabilitation and habilitation services and goods? What are the non-health related services and goods (for example in the field of education or employment) and how those services match under the working definition of rehabilitation and habilitation?**

* There are distinctions between health and non-health-related interventions for habilitation and rehabilitation. Non-health related services and goods (employment and education) relating to habilitation and rehabilitation include:
  + Through the **Workforce Development Agreements (WDA)**, annual funding is provided to the provinces and territories for the development and delivery of programs and services that help Canadians get training, develop their skills and gain work experience. Of the $5.23 billion in federal funding that provinces and territories will receive from 2017 to 2023, $1.38 billion has been earmarked for employment and training programs for persons with disabilities. This is a joint program with the provinces and territories, which have committed to contribute an additional $1.19 billion towards programming for persons with disabilities over the same time period.
  + The **Opportunities Fund for Persons with Disabilities** program funds a wide range of programs and services to support persons with disabilities, including skills training, job placements, wage subsidies and preparation for self-employment, and works with employers to hire persons with disabilities.
  + The **Veterans Affairs Canada’s (VAC) Rehabilitation Program** provides medical, psycho-social and vocational rehabilitation and vocational assistance services and benefits to eligible Veterans and their families to assist them in their re-establishment in civilian life.
  + **The Canada Student Loans Program (CSLP) -** The Government of Canada, through the CSLP, provides a number of student financial assistance (SFA) supports to help persons with disabilities obtain post-secondary education. These supports aim to make post-secondary education more affordable for students with permanent disabilities, and to help offset exceptional education related costs associated with permanent disabilities. Students with permanent disabilities are eligible for all non-repayable Canada Student Grants (CSG) as well as Canada Student Loans. In addition, targeted SFA supports for students with disabilities include: the CSG for Students with Permanent Disabilities which provides dedicated annual funding to reduce the costs facing students with permanent disabilities participating in a post-secondary program; the CSG for Services and Equipment for Students with Permanent Disabilities which provides funding to help offset exceptional, education-related costs associated with permanent disabilities, such as for a note-taker or technical aids; the Repayment Assistance Plan for Borrowers with Permanent Disabilities which makes it easier for students to manage their student loan debt by reducing or covering their monthly affordable payment; and the Severe Permanent Disability Benefit for borrowers with a severe permanent disability who are unable to repay their Canada Student Loans may be eligible to have their debt cancelled. The federal government works collaboratively with the provinces and territories to administer programs under the CSLP.
* In 2015-16, the Government of Alberta’s Persons with Developmental Disabilities Program invested $39.3 million to support adults with developmental disabilities to be involved in the labour market.
* Under Alberta’s Assured Income for the Severely Handicapped program, assistance is provided to cover health needs for individuals with disabilities, their spouses or partners and their dependent children. The program provides a monthly living allowance, monthly child benefit and funding for personal benefits over and above the monthly living allowance to eligible adults with a severe and permanent disability that impacts their ability to earn a livelihood.
* Employment is also promoted through the Alberta Employment First Strategy, which includes:
* webinars to promote and support employment for persons with disabilities;
* four pilot projects to evaluate promising practices; and
* employment of 20 Albertans through the government Internship Program for Persons with Disabilities.
* The Government of Alberta provides dedicated funding for labour market training initiatives for persons with disabilities. For example, it provides Disability-Related Employment Supports (DRES) for Albertans 16 years and older seeking employment who have a disability. DRES is offered in four categories:
* Job search supports: including a sign language interpreter so that individuals with hearing impairments can attend job interviews;
* Workplace supports: include a job coach, worksite modifications or assistive technology;
* Educational supports: including sign language interpreters, tutors, note takers, assistive technology, etc.; and
* Other supports.
* Alberta has a Psychological Health and Safety Committee that develops programs and supports for all occupational stress injuries, including post-traumatic stress disorder for first responders in the public Emergency Medical Services system (paramedics). There is also a Critical Incident Management (CISM) program and Road to Mental Readiness (R2MR) program.
* The Alberta Human Rights Commission has published an interpretive bulletin called *Duty to Accommodate Students with Disabilities in Post-Secondary Educational Institutions*.[[5]](#footnote-5) All Alberta post-secondary institutions adhere to the provisions set out in both the *Alberta Human Rights Act* and the Interpretive Bulletin by:
  + identifying accommodation policies for students with disabilities;
  + ensuring that staff and students have a working knowledge of their accommodation policy; and
  + responding in a timely manner to requests for accommodation.
* The goal of accommodating students with disabilities is to ensure full participation in all aspects of their educational experience through:
* accessible facilities;
* flexible course delivery formats;
* individual services (for example, interpreters and note takers);
* assistive technologies (hardware and software); and
* flexible formats for exams, and other methods of student evaluations.
* The Government of Alberta provides targeted funding to Post-Secondary Institutions to support services and accommodations to students with disabilities.
* Alberta Student Aid administers three grants for students with permanent disabilities:
* *Canada Student Grant for Students with Permanent Disabilities*.
* *Canada Student Grant for Services and Equipment for Students with Permanent Disabilities*, for exceptional education-related services or equipment; and
* *Alberta Grant for Students with Disabilities*.
* Albertans with disabilities often require adult foundational learning (i.e. literacy, academic upgrading, and English as a second language) in order to succeed in accessing post-secondary education and find meaningful employment. Advanced Education provides over $72 million in learner funding supports to barriered learners each year.
* The Government of Alberta also provides funding support for specialized programming for students with developmental disabilities. These programs provide life skills and vocational training as well as opportunities to participate in all aspects of campus life while receiving appropriate supports and services. One such program is the Transitional Vocational Program (TVP):
* TVP is designed to provide learners with developmental disabilities the life skills and vocational training they need to successful access employment and live independently in the community.
* In 2016-2017, approximately 80 students were supported in TVP at 4 post-secondary institutions.
* The Government of Alberta supports the Inclusive Post-Secondary Education (IPSE), which provides supports that assist learners with developmental disabilities to participate in academic programming (certificates, diplomas or degrees) as well as labs, group work, practicum, co-ops, internships and other activities that are part of the program. Outside of the classroom experience, students also have an opportunity to participate in various clubs and campus activities. In 2016-2017, 107 students at 20 institutions participated in IPSE.
* Sections 45 and 47 of *Alberta’s School Act* outline broad responsibilities related to students, including the obligation to provide each student enrolled in a board-operated school with an education program that will give them the opportunity to meet the standards of education set by the Minister.
* In delivering Kindergarten to Grade12 education and special education programs, school authorities must meet a number of standards, in addition to provincial legislation, policies, and funding criteria. Students have access to a range of assistive technology that supports learning, based on needs assessments by the appropriate specialists.
* In British Columbia, a broad range of employment support services, such as pre-employment and supported employment services, are available for persons with severe mental illness and/or substance use problems. These services are funded in part through the new Workforce Development Agreements (formerly the Labour Market Agreement for Persons with Disabilities). Pre-employment support services provide skill development and upgrading interventions in order to increase employment and independent living skills, community and social integration, and enhance confidence. Supported employment services include employment assessment, work experience opportunities, job counselling and on-the-job coaching. These services are provided within the context of the broader mental health and substance use programs, such as community and tertiary care mental health and substance use services.
* Since the release of its Accessibility 2024 Action Plan in 2014, the Government of British Columbia has undertaken numerous measures to increase the levels of employment of persons with disabilities in the province. For example, the provincial government has:
  + declared September to be Annual Disability Employment Month;
  + developed a disability strategy to enhance accessibility for hiring and advancement of persons with disabilities within the provincial public service;
  + created a Presidents Group to engage the business community in increasing employment for persons with disabilities;
  + continued to invest in innovative post-secondary training for persons with disabilities; and
  + committed $3 million in annual funding for assistive technologies to help people with disabilities gain meaningful employment. *Technology at Work*, an assistive technology program, complements the Employment Program of British Columbia by providing streamlined access to assistive technology for individuals with imminent work or volunteer opportunities or who may be at risk of losing their job.
* The Government of Manitoba’s *marketAbilities* Program – a vocational rehabilitation program – assists persons with disabilities to prepare for, obtain, and maintain employment. The program is available to Manitobans over the age of 16 with disabilities. Within the continuum of services provided under the program, Supported Employment Agencies have expertise in finding employment for persons with disabilities in integrated settings and providing them and their employers with ongoing support.
* Since 2010, the Government of Newfoundland and Labrador has provided annual funding to three community-based organizations to provide employment counselling and employment-readiness supports to approximately 800 adults who are blind and/or deaf. These organizations will receive $280,000 in funding for fiscal 2018-19.
* The Government of Newfoundland and Labrador also provides funding for students with intellectual disabilities through the *School to Work Transitions Program*, which serves approximately 20 secondary school students annually. The program offers secondary school students with intellectual disabilities the opportunity to participate in supported employment during evenings, weekends, or during the summer, to support the successful transition from school to work. The program provides supports that range from orientation and work analysis, to full-time support from a job trainer.
* As a public service employer, the Government of Newfoundland and Labrador has a Long Term Disability Insurance benefit program, which provides support and benefits to employees who have opted into the program. If an employee develops a permanent disability, they can also apply for a medical disability retirement, which allows them access to a disability pension based on their years for service and pensionable earnings. In addition, if they have any accumulated sick leave benefits, they would also be able to access those prior to commencing their pension benefit.
* The Government of Newfoundland and Labrador also offers the support of the Employee Safety and Wellness Division through their Managers of Integrated Disability Management as well as a Human Resource Consultant, who support employees through the disability recovery process utilizing any benefits and supports that may be available through the collective agreement language, accommodation policies and return to work policies, where appropriate. An Employee Assistance Program (EAP) is also available for employees who require support.
* The Government of Newfoundland and Labrador also offers the professional services of the Employee Assistance and Respectful Workplace Program (EARWP) administered by the Public Service Commission. The EARWP is responsible for providing counseling and consultation supports to employees and managers for issues that are either affecting or have the potential to affect work performance. Services under these two program areas include: early intervention, assessment and referral; mental health awareness, education, and counseling; psychological first aid for individual and groups exposed to traumatic workplace events; on-site support during workforce adjustment; conflict coaching, mediation, and training in the areas of respectful workplaces and conflict resolutions skills; as well as advisory services to human resource professionals, unions, and senior managers in relation to the psychological health and safety of employees.
* The Government of Newfoundland’s poverty reduction efforts intended to benefit persons with disabilities comprise initiatives to increase the labour market participation and reduce barriers to employment, including:
  + a wage subsidy program;
  + employment-related disability supports;
  + internships to promote technology; and
  + school-to-work transition supports (all $1.0M).
* The Government of Northwest Territories, through Labour Market Transfer Agreements, provides supports to persons with disabilities requiring aids and assistive devices in instances where these are the barrier to their employment, as well as support to third party organizations to deliver community and regional programs intended to provide persons with disabilities the supports, services and skills required to participate in the labour market.
* The Government of Northwest Territories’ *Duty to Accommodate Injury and Disability Policy* outlines their legal duty to accommodate employees, including persons with disabilities, to the point of undue hardship. This Policy has accompanying Duty to Accommodate Injury and Disability Guidelines for managers to reference so they may understand their roles and responsibilities in how to implement their legal duty to accommodate. Furthermore, the Duty to Accommodate Advisor provides advice, direction and training to managers on duty to accommodate issues, including both emergent and reintegration of employees with disabilities in the workplace.
* Additional financial supports for persons with disabilities are available through the Student Financial Assistance program, which provides financial assistance to eligible Northwest Territories residents to assist with postsecondary education-related expenses.
* In Nova Scotia, the Community Services policy under the Disability Support Program differentiates between health-related and non-health-related rehabilitation. Funds are issued under a special needs policy for health-related items with specific criteria and categories, such as medical equipment. An example of non-health-related rehabilitation funding would be eligibility for employment supports that are fully or partially funded by the Department of Community Services.
* Nova Scotian students with disabilities enrolled in post-secondary education and training are supported with grants for services (such as Sign Language Interpreting), and equipment (such as assistive technology) to address barriers in the educational environment.
* Other targeted education and employment programming for Nova Scotian adults with disabilities includes on-campus disability services at public universities and colleges, summer employment programs, experiential employment programs, self-employment guidance, exploration of training and labour market options in the skilled trades and technologies areas, pre-vocational employment programs for youth on the Autism spectrum, inclusive education programming at college and university for youth with intellectual/cognitive disabilities.
* The Ontario Disability Support Program (ODSP) is a provincial social assistance program that provides income support and employment supports to eligible Ontario residents who have disabilities.
* ODSP employment benefits include the Employment Start-Up Benefit, which helps cover the cost of starting employment; the Employment Transition Benefit, which assists in the transition from ODSP to employment; and, the Work Related Benefit, which provides $100 per month to help with costs associated with employment or training. ODSP earnings exemptions allow individuals to keep more of their income support. The earnings exemptions include the first $200 earned and a 50% partial exemption on earnings over $200.
* ODSP provides a range of employment supports that are intended to remove disability-related barriers to competitive employment including: pre-employment and life skills training; job search; placement; coaching; advancement; retention services; and work-related technical aids.
* Persons do not have to be receiving ODSP income support to be eligible for employment supports. To be eligible for employment supports, a person must have a disability that makes it hard to find or keep a job; be a resident of Ontario and legally entitled to work in Canada; be 16 years of age or older; and be willing and able to prepare for and accept employment.
* In the field of education, many school boards in Ontario have school-based teams that suggest teaching strategies to teachers who have students with special education needs. The teams often have expertise in such areas as speech and language development, psychology, physical and occupational therapy and social work.
* In Prince Edward Island, the Housing Action Plan establishes a vision and five goals with immediate and longer-term action items encouraging collaboration, partnerships, and coordination amongst all levels of government, community organizations, and private sector developers. The vision of the plan is that all Islanders, including those with disabilities, have timely access to safe, accessible, appropriate, and affordable housing that meets the diversity of their needs and maximizes their ability to be healthy, productive, and successful. It includes five goals: increasing availability of diverse housing options; build capacity for affordable housing; sustain communities by ensuring that there is sustainable appropriate housing to enable Islanders to remain in their community of choice; enable coordination and collaboration; establish strong governance to build on best practices and continue to evaluate.
* Au Québec, considérant la responsabilisation de chaque ministère et organisme public dans la prestation des services d’adaptation et de réadaptation, il existe une distinction entre les biens et les services liés à la santé et ceux qui n’y sont pas liés.
* Outre le réseau de la santé et des services sociaux, le réseau de l’éducation dispense également des services d’adaptation, en lien avec les responsabilités qui lui sont conférées en vertu de la Loi sur l’instruction publique (RLRQ c. I-13.3), qui garantit le droit à l’éducation pour tous les enfants. L’école publique du réseau des commissions scolaires est gratuite et accessible à tous les jeunes sans égard aux sexes, aux origines, etc.
* La commission scolaire a l’obligation d’« (...) adapter les services éducatifs à l’élève handicapé ou en difficulté (...) selon ses besoins, d’après l’évaluation qu’elle doit faire de ses capacités (...) » (art. 234 de la LIP). La commission scolaire doit aussi adopter « (...) une politique relative à l’organisation des services éducatifs offerts à ces élèves qui assure l’intégration harmonieuse dans une classe ou un groupe ordinaire et aux autres activités de l’école de chacun de ces élèves lorsque l’évaluation de ses capacités et de ses besoins démontre que cette intégration est de nature à faciliter ses apprentissages et son insertion sociale et qu’elle ne constitue pas une contrainte excessive ou ne porte pas atteinte de façon importante aux droits des autres élèves. »
* Afin de permettre aux commissions scolaires d’organiser les services d’enseignement, complémentaires et particuliers, le gouvernement du Québec leur alloue annuellement diverses sommes (Règles budgétaires). Ces règles visent une répartition équitable des ressources entre les différents milieux.
* Par ailleurs, le gouvernement du Québec gère divers programmes d’aide financière visant à adapter le domicile des personnes handicapées ou des personnes ayant une déficience permanente ainsi qu’à favoriser l’accessibilité des bâtiments, et ce, afin de leur permettre de se maintenir à domicile et d’accomplir les activités de la vie quotidienne (à domicile ou à l’extérieur).
* Le Programme d’adaptation de domicile prévoit une aide financière pour l’exécution de travaux d’adaptation du domicile visant à permettre à une personne handicapée ayant une déficience permanente d’entrer et de sortir de son domicile, d’y accomplir ses activités quotidiennes et ainsi, de favoriser son maintien à domicile.
* Le programme Petits établissements accessibles s’adresse à toute personne, morale et physique, propriétaire ou locataire d’un bâtiment ou d’une partie de bâtiment affecté à des activités commerciales, d’affaires ou de réunion. Il vise à améliorer l’accessibilité des personnes à mobilité réduite ou handicapée aux petits établissements par l’octroi d’une aide financière.
* Enfin, les travaux RAM (de remplacement, d’amélioration et de modernisation) visent à améliorer l’accessibilité des immeubles lors d’une rénovation majeure ou d’une demande d’adaptation; à adapter le logement aux besoins spécifiques d’une personne en situation de handicap; et à favoriser l’adaptabilité des logements lorsque les travaux de rénovation le permettent.
* In Saskatchewan, financial supports, funded in part through the Workforce Development Agreements (formerly Labour Market Agreements for Persons with Disabilities), are also available to individuals to address their specific needs. Through these investments, a broad range of programs, services and supports are available such as:
  + Vocational counselling;
  + Employment preparation, job placement, job coaching, and work experience, transition from education to employment; and
  + Individualized supports to address disability-related costs at school or work, such as special equipment or tutoring support.
* The Government of Saskatchewan offers the following programs and services that may assist persons with disabilities access social and public housing:
  + Saskatchewan Rental Housing Supplement: a monthly payment that helps families with low-to-moderate income, and individuals with disabilities, access quality and affordable rental housing.
  + Social Housing Rental Program: provides safe and adequate housing to families, seniors, and people with disabilities who have low incomes. This program subsidizes rent according to the degree of financial need.
* In Yukon, the Stepping into Kindergarten program allows schools to promptly identify students that require additional support. An early literacy intervention for 6- and 7-year-olds facilitates identification of learning disabilities, so that students can be helped as soon as possible.
* Yukon’s Department of Education is increasingly using laptops and other handheld devices to assist children with communication deficits. It also provides an FM sound system in schools.

1. **Are there specific provisions in law establishing time-bound rehabilitation and habilitation services, in order to periodically evaluate if it provides for the purpose of the rehabilitation?**

* To support veterans with disabilities, Veterans Affairs Canada (VAC) has implemented improvements to programming and services, including having no time limit for access to vocational rehabilitation for spouses/common law partners of veterans with a diminished earnings capacity or survivors. Applicants no longer have to deal with the pressure of applying for the rehabilitation program while dealing with the disability or death of a loved one. Currently, VAC offers a Rehabilitation and Vocational Assistance Program to veterans and their families, which provides comprehensive medical, psycho-social, and vocational rehabilitation services and vocational assistance to enable individuals to successful transition to civilian life by restoring their ability to function in the home, community and workplace.
* In Nova Scotia,Community Services (Disability Support Program) will complete an initial assessment and also a reassessment when there is a change in a participant’s level of support need. Or, when there are no significant changes in a participant’s level of support, a review is to be completed every two years. The assessment and review helps to identify what available supports the individual may need or from which they could benefit.
* Au Québec, aucune disposition ne limite dans le temps les services d’adaptation et de réadaptation.

1. **Does legislation provide for redress mechanisms and appropriate compensation for human rights violations occurring in rehabilitation and habilitation contexts, including malpractice, violence, ill-treatment, forced medication, forced institutionalisation or other?**

* Persons with disabilities can bring a claim before human rights commissions and tribunals or courts to enforce their right to equality. This has resulted in developments in Canadian law, for example, through decisions upholding the equal rights of persons with disabilities to health care services, education, transportation and accessible federal government websites for persons with visual impairments.
* Persons with disabilities whose constitutional rights have been infringed or denied may make a claim before courts empowered to determine allegations of rights violations and grant meaningful remedies. These rights include the right to life, liberty and security of the person and the right not to be deprived thereof except in accordance with the principles of fundamental justice, as well as the right to substantive equality on the basis of several grounds, including disability. Any laws, policies and programs that are found to be inconsistent with rights guaranteed under the Charter can be struck down. The court where the action is brought may grant a range of remedies, such as an order or declaration, costs and damages, including compensation.
* In the event of a successful discrimination complaint under one of the federal, provincial or territorial human rights codes, the law can provide four kinds of remedy:
  + an order to stop the discrimination;
  + an order to take systematic measures to prevent such discrimination from happening in the future;
  + an order to grant rights or privileges that were lost or inaccessible, such as reinstatement into a lost job; and
  + monetary awards for lost income, pain and suffering, and expenses.
* The *Victims Bill of Rights Act* (VBR) enshrined rights for victims of crime at the federal level in four areas – information, protection, participation and the right to seek restitution - by enacting the *Canadian Victims Bill of Rights*. The VBR also made related amendments to the *Criminal Code* and *Corrections and Conditional Release Act* (CCRA) to provide greater specificity to those rights in the criminal justice process. This includes the addition of s. 140(13) to the CCRA, which allows victims who are unable to attend Parole Board of Canada hearings in person to access audio-recordings upon request. The VBR also amended the *Canada Evidence Act* to facilitate testimony by a witness over the age of 14 years with a mental disability whose mental capacity to testify is being challenged. These witnesses may not be asked questions regarding their understanding of a promise to tell the truth in order to determine if they have the capacity to testify.
* Persons with disabilities can bring a claim before F-P/T independent administrative tribunals, human rights commissions and tribunals or courts to enforce their rights. This has resulted in developments in Canadian law, for example, through decisions upholding the equal rights of persons with disabilities to health care services, education, transportation[[6]](#footnote-6) and accessible federal government websites for persons with visual impairments.[[7]](#footnote-7)
* The *Alberta Human Rights Act* outlines the following responses to complaints:
  + Settlement of complaint

21(1) Where the Commission receives a complaint, the director shall, as soon as is reasonably possible, attempt to effect a settlement of the complaint by means of a conciliator or through the appointment of a person to investigate the complaint.

(2) Where a conciliator is unable to effect a settlement of the complaint, the director may appoint a person to investigate the complaint.

* + Powers of tribunal

32(1) A human rights tribunal

(b) may, if it finds that a complaint has merit in whole or in part, order the person against whom the finding was made to do any or all of the following:

(iv) to compensate the person dealt with contrary to this Act for all or any part of any wages or income lost or expenses incurred by reason of the contravention of this Act;

(2) A human rights tribunal may make any order as to costs that it considers appropriate.[[8]](#footnote-8)

* The Nova Scotia Human Rights Commission is an independent government body that administers the *Human Rights Act* and provides a mechanism for human rights complaints to be addressed formally. The *Protection for Persons in Care Act* in Nova Scotia is an extra safeguard from abuse for residents 16 years of age and older who are residing in homes for special care under the *Homes for Special Care Act*. Protection for Persons in Care activities are aimed at protecting individuals through intervention after abuse or neglect has occurred. The *Homes for Special Care Act* provides requirement for Licensing of residential settings for persons with disabilities, in order to protect the health, safety and well-being of Nova Scotians receiving away-from-home care. Licensing activities are designed to reduce the risk of harm to children, youth and adults residing in licensed residential facilities or homes by ensuring compliance with minimum standards.
* Au Québec, plusieurs mécanismes et recours sont prévus en cas de violation des droits de la personne dans ce contexte, notamment :
* Protecteur du citoyen
* Comité des usagers
* Commissaire aux plaintes de chaque établissement
* Commissaire aux plaintes des instances gouvernementales
* Les tribunaux de droit commun
* Par ailleurs, en cas de discrimination fondée sur le motif handicap ou l’utilisation d’un moyen pour pallier le handicap ou en cas d’exploitation de la personne handicapée, la victime peut déposer une plainte à la Commission des droits de la personne et des droits de la jeunesse (art. 74 de la Charte des droits et libertés de la personne). La plainte peut également être portée, pour le compte d’une victime ou un groupe de victimes, par un organisme voué à la défense des droits et libertés de la personne ou au bien-être d’un groupement. La Commission des droits de la personne et des droits de la jeunesse peut de même enquêter de sa propre initiative.
* La Commission agit de façon à favoriser un règlement à l’amiable entre les parties, souvent par la voie de la médiation (art. 78 de la Charte des droits et libertés de la personne). Si elle n’y parvient pas, elle peut, au terme de l’enquête, s’adresser à un tribunal « en vue d’obtenir, compte tenu de l’intérêt public, toute mesure appropriée contre la personne en défaut ou pour réclamer, en faveur de la victime, toute mesure de redressement qu’elle juge alors adéquate. » (art. 80 de la Charte des droits et libertés de la personne). En cas d’atteinte illicite et intentionnelle, le tribunal peut en outre condamner son auteur à des dommages-intérêts punitifs. (art. 49 de la Charte des droits et libertés de la personne).

1. **Do you have examples from your country on:**
   1. **How habilitation and rehabilitation services and goods are provided, including guidelines and tools to facilitate implementation and assessment of its compliance with human rights of persons with disabilities? (ensuring participation of persons with disabilities in policy design; ensuring participation of the person concerned in the preparation and delivery of the service or goods; person centred control of the service, including the provision of free and informed consent of the person concerned; non-discrimination against and among persons with disabilities on any ground; accountability mechanisms; capacity building for and empowerment of persons with disabilities to exercise control of the services, among others)?**

* The Government of Canada recognizes the importance of meaningful involvement with the disability community to help develop more informed and more effective policies and programs for Canadians with disabilities.
* Canada seeks to reduce barriers and increase opportunities for persons with disabilities, to ensure their full participation in our society. The equal rights of persons with disabilities are protected by the *Canadian Charter of Rights and Freedoms*, which forms part of our Constitution. Persons with disabilities are also protected from discrimination in the context of employment and access to goods and services, housing and other areas through federal, provincial and territorial human rights legislation.
* The Government of Canada, in collaboration with its provincial and territorial partners, consults Canadian civil society and Indigenous organizations as part of its UN reporting process. It seeks the views of a broad range of civil society and Indigenous organizations on a draft outline of the reports that Canada submits to the UN. These organizations are invited to identify priority issues that could be addressed in the reports. Canada also consults these organizations with respect to Canada’s appearances before UN human rights bodies and on the recommendations received from these bodies.
* In developing the *Accessible Canada Act*, tabled June 20, 2018, the Government of Canada consulted broadly with Canadians, both online and in-person. The consultations covered a range of broad issues, including*:*
* Feedback on the overall goal and approach of the legislation;
* To whom the legislation could apply;
* What accessibility issues and barriers the legislation could address;
* How compliance with the legislation could be monitored and enforced; and
* Other approaches the Government of Canada could adopt to improve accessibility.
* An example of a tool used to ensure accountability and non-discrimination is GBA+. In 1995, the Government of Canada committed to using GBA+ to advance gender equality in Canada, as part of the ratification of the United Nations’ Beijing Platform for Action. GBA+ is an analytical tool used to assess how diverse groups of women, men and gender-diverse people may experience policies, programs and initiatives. The “plus” in GBA+ acknowledges that GBA goes beyond biological (sex) and socio-cultural (gender) differences, considering intersecting factors such as race, ethnicity, religion, age, sexual orientation and mental or physical disability. GBA+ provides decision makers with the means to continually improve their work and attain better results for Canadians by being more responsive to specific needs and circumstances. In February 2018, the Government of Canada announced that the systematic use of GBA+ would inform federal policy, program development and implementation, and other activities, including gender-based budgeting and inclusive consultations.
* Canada’s Settlement Agreement is committed to providing survivors of residential schools and their families with mental health and emotional support services to help them as they heal. The Government has committed to fund these services, including mental health and emotional supports to survivors and their families for the duration of the Indian Residential School Settlement.
* The Non-Insured Health Benefits Program is a national program that provides coverage to First Nations and Inuit for specified medically necessary items and services that are not covered by other plans and programs. In 2018, the Government reiterated its commitment by announcing funding to preserve access to medically necessary health benefits and services through this Program. While not limited to persons with disabilities, the Program is particularly important to persons with disabilities and major health conditions. The major benefit categories are: dental care, eye and vision care, medical supplies and equipment, drugs and pharmacy products, mental health counselling, and assistance with medical transportation to access medically necessary services.
* Veterans Affairs Canada’s (VAC) Rehabilitation Program and Health Care Program are accessed through local field offices across the country, or major Canadian Air Force bases and wings. Rehabilitation and health care services are usually provided through a network of local experts and based on the Veteran’s or other program participant’s provider of choice.
* The Government of Alberta’s legislated programs to support persons with disabilities include the following:
* Assured Income for the Severely Handicapped;
* Persons with Developmental Disabilities;
* Family Support for Children with Disabilities (FSCD) Program;
* Premier’s Council on the Status of Persons with Disabilities;
* Provincial Parent Advisory Committee for the FSCD Program;
* Advocate for Persons with Disabilities;
* Aids to Daily Living;
* Motor Vehicle Accident Claims Program - Section 17; and
* *Adult Guardianship and Trusteeship Act* – Co-decision making provisions (Office of the Public Guardian and Trustee).
* The Government of Alberta programs and initiatives to support persons with disabilities include:
  + Alberta Employment First Strategy;
  + Residential Access Modification Strategy;
  + Disability Related Employment Supports;
  + Disability Related Program Supports;
  + Alberta Brain Injury Initiative; and
  + Fetal Alcohol Spectrum Disorder Initiative.
* The Government of Alberta also has the following programs through which supports for habilitation and rehabilitation can be accessed:
  + Seniors Benefit - provides monthly financial support to seniors with low incomes.
  + Special Needs Assistance for Seniors - provides financial assistance to eligible seniors with low income toward the cost of appliances, and some health and personal supports.
  + Seniors Home Adaptation and Repair - allows eligible senior homeowners to finance home repairs and adaptations through a low-interest home equity loan.
  + Motor Vehicle Accident Claims - provides for the payment of medical expenses up to $95,000 for victims injured by uninsured or unknown drivers in motor vehicle accidents. Funds cover treatment, services or the cost of appliances and treatments used in the complete or partial restoration of the person’s muscular activity or co-ordination, or to give the person complete or limited mobility.
  + Maintenance Enforcement Program - collects court-ordered child, spousal and partner support, and enforces as needed. This includes special health, education or accommodation related expenses as provided for in a court-order or agreement.
* In Alberta, the Human Rights Education and Multiculturalism Fund provides support for educational programs and services that promote an environment where all Albertans can participate in and contribute to the social, economic and cultural life of the province. In addition, a key function of the Fund is to provide grants to community organizations for projects that foster equality and reduce discrimination.

The Alberta Human Rights Commission has many programs and services to educate and engage with Albertans and Alberta organizations in human rights and diversity. Information and promotional resources, education programs and other services, such as workshops, displays, online learning, and consultations with organizations, help to build awareness of human rights principles and law and support individuals and organizations to create discrimination-free, welcoming and inclusive communities, organizations and workplaces.

* Alberta’s Age-Friendly initiative encourages and supports communities to be more inclusive and welcoming for aging populations, and helps seniors live more active, independent and happier lives. Age-friendly is a grassroots, community-driven process that involves the participation of citizens of varying ages and abilities in the planning and designing of policies, services and structures related to the physical and social environment to help seniors age actively.
* Alberta’s Dementia Friendly Initiative is working to engage and educate community partners about dementia and to help lessen the stigma and remove barriers experienced by people living with dementia in the community.
* Voice of Albertans with Disabilities (VAD) is an Alberta non-profit organization that actively promotes full participation in society and provides a voice for Albertans with disabilities. VAD has recently completed a project that focuses on making health and medical services more accessible to Albertans with disabilities. VAD has also completed the Creating Accessible Hotels in Alberta project, which includes sections on current practice, accessibility tools, and recommendations for action. Funding for these projects was provided in part by the Human Rights Education and Multiculturalism Fund.
* Alberta’s provincial museums, interpretive centres and archives have been made, where possible, accessible for individuals with mobility limitations (some mobility-free barriers exist in certain designated historic buildings). Admission are waived for aides accompanying persons with disabilities. Provincial museums and interpretive centres are continually improving aspects of accessibility, including for visually-impaired and hearing impaired audiences.
* The Government of Alberta offers community grants and evaluates organizations and projects on an equal basis using the same criteria, including accessibility. Consideration is given to projects that provide services/access for specific underserved populations within the province, including but not limited to:
  + individuals with physical or mental health challenges;
  + persons living with addictions;
  + seniors and persons with physical challenges facing transportation barriers; and
  + children and adults with developmental disabilities.
* The Government of British Columbia funds a comprehensive system of mental health and substance use services for all British Columbians, including a range of psychosocial rehabilitation services to assist persons with severe mental illness and/or substance use problems in their recovery to manage their illness and adjust to the functional deficits in the domains of employment, education, leisure, wellness and basic living skills.
* British Columbia provides funding support for medical equipment and devices for disability assistance clients to assist with mobility. This may include scooters, power or manual wheelchairs, hearing aids, eyeglasses, orthoses, a guide dog supplement for individuals who are blind, etc. It also funds the *Communication Assistance for Youth and Adults* (CAYA) program. The CAYA project began operating in 2005 with the goal of addressing the needs of young adults with severe communication disabilities as they were leaving the education system where tools and support had been provided. For individuals aged 19 or older, CAYA provides equipment and services, free of charge, to enable them to communicate.
* Other initiatives undertaken by the Government of British Columbia include:
  + *Single Parent Employment Initiative* that helps single parents receiving income and disability assistance to secure sustainable employment. This includes funding for training, child care, transportation, etc.;
  + Partnering with Community Living BC (CLBC) that has made advancing employment for persons who have developmental disabilities a strategic priority over the past five years;
  + The Community Action Employment Plan (CAEP) that was developed with extensive stakeholder input in 2012 and launched in 2013. Since that time the number of working-aged, CLBC eligible individual reporting employment income has increased from approximately 2,200 to 4,000 people (21% of the people that CLBC serves). CAEP is a multifaceted strategy in recognition of the complexity of the issue of low employment of individuals with developmental disabilities.
  + One key activity has been to evaluate the success of CLBC employment services and to use the data to focus a continuous quality improvement activity. CLBC employment services are funded through the former Labour Market Agreement for Persons with Disabilities, which is now consolidated into the Workforce Development Agreements.
  + Another key activity has been to design a “wrap around” service that supports people to pursue employment as well as other personal goals such as community inclusion, relationships and personal development. CLBC has been using a human-centred design methodology to involve individuals with developmental disabilities, their families, and other stakeholders in the design.
* The Government of British Columbia’s measures to support persons with disabilities with low income include:
  + During 2015-16, British Columbia assisted individuals with mental health and/or substance use challenges experiencing homelessness through rent supplements and obtaining housing.
  + Additionally, the government helped 5,880 adults with special needs through transitional, supported and assisted living housing.
* In addition, British Columbia’s*Employment and Assistance for Persons with Disabilities Program* provides monthly disability assistance and supplements that support greater independence for persons with disabilities, including supplements related to employment, housing, transportation, children and family needs, health, and financial crisis.
  + The ministry invests $1.235 billion annually in disability assistance, up from $733 million invested annually a decade ago.
* The Government of Manitoba has a number of programs and services from which habilitation and rehabilitation supports can be accessed:
  + It provides financial support to children in care with disabilities, including an *Exceptional Circumstances* Fund announced in 2018-19, which includes covering disability aids for children in care.
  + Children’s disABILITY Services provides access to early intervention through its Child Development Counsellors for preschool children who are in care and who would otherwise meet the eligibility criteria of Children’s disABILITY Services if they were living with their family.
  + The Employment and Income Assistance Program provides financial support for mobility/disability aids for its clients.
  + The Extension of Income Assistance for Persons with Disabilities Benefit (IAPD) provides $105.00 per month to persons enrolled under Employment and Income Assistance’s to help them better meet the additional costs of living with a disability in the community.
  + In addition to the monthly benefit, persons with disabilities enrolled in the Income Assistance for Persons with Disabilities Benefit can qualify to receive additional benefits, ranging from earnings exemptions, to money for work clothing, transportation, child care, and telephone costs as well as a monthly amount to assist with the costs of volunteering and being engaged in the community.
* In 2014-15, Manitoba provided funding (forgivable loan) for the development of Marie Rose Place, an apartment complex that provides support for immigrant and refugee women with low-to-moderate incomes. The Marie Rose Place includes 36 two-bedroom units and four one-bedroom units, including four apartments that are fully accessible for residents with disabilities. Manitoba also provides rent supplements for tenants, which bridge the gap between what an individual or family can afford to pay and the actual cost of housing.
* In July 2014, the Government of Manitoba established the Disability and Health Supports Unit to centralize and standardize the assessment and procurement of medical supplies, equipment and therapeutic diet/nutritional supplement needs required by participants of Employment and Income Assistance, Community Living disABILITY Services, and Children’s disABILITY Services.
* Newfoundland and Labrador provides rehabilitation services to all individuals based on need and availability of service providers. Supplies and equipment are available under the Special Equipment Program. The Government of Newfoundland and Labrador’s Special Assistance Program provides basic medical supplies and equipment to assist with activities of daily living for individuals living in the community who meet clinical and financial eligibility criteria for the program. Benefits of the program include medical supplies, oxygen and related equipment and supplies, orthotics such as braces and burn garments; and equipment such as wheelchairs, commodes or walkers.
* The Government of Newfoundland and Labradorinitiativesto assist first responders and military veterans dealing with post-traumatic stress disorder include:
  + Mental health and addictions counselling is available in 59 outpatient counseling offices located throughout the province. Of those sites, 35 offer mental health walk-in clinics called *DoorWays*. Individuals can call their local mental health and addictions office or the Provincial HealthLine at 811 for hours of operation.
  + A regional health authority, Eastern Health, offers a Traumatic Stress Service as part of their mental health and addictions programming. Individuals, including first responders and military veterans, who are experiencing complex symptoms from traumatic life events can avail of specialized group-based and individualized counselling.
  + Individuals can also access the Mental Health Crisis Line, which offers 24/7 telephone crisis intervention services, or the Warm Line, which offers pre-crisis peer support.
* Additional income supports for persons with disabilities in Newfoundland and Labrador include:
  + Board and lodging supplement for adults with disabilities who reside with a family member ($6.5M); and
  + Earnings exemption for income support clients with disabilities.
* In the Northwest Territories, services for persons with disabilities are delivered both by the Government of the Northwest Territories and non-governmental organizations on their behalf.
* The Government of the Northwest Territories provides publicly funded rehabilitation services including Occupational Therapy, Physiotherapy, Speech Language Pathology and Audiology Services. These services are delivered in hospital, community, residential care and school settings.
* Rehabilitation Services in the Northwest Territories provides case management support for children with complex disabilities, including coordinating access to community based services with non-governmental organizations (e.g. the Canadian National Institute for the Blind, the Hard of Hearing Association, and the Northwest Territories Disabilities Council). It facilitates assessment, procurement and the fitting of medical equipment and supplies for persons with disabilities across the Northwest Territories.
* Funding for medical equipment and supplies for Northwest Territories residents with disabilities is available through the Government of Canada’s Non-Insured Health Benefits Program, the Government of the Northwest Services Supplementary Health Benefits Program and Métis Health Benefits Program, and employer benefit programs.
* In the Northwest Territories, Supportive Living is a housing service where adults with a physical and/or mental disability live in small groups under the supervision of paid staff while maintaining as much independence as possible. Depending on their needs, residents may receive assistance with: safety and security; personal care; life skills; medication monitoring; employment; respite; and service coordination. In the Northwest Territories, persons requiring 24-hour support and supervision may qualify for Supportive Living. Adults who are able to live independently may be eligible for home support services.
* In the Northwest Territories, the Income Assistance Program also exempts funds accumulated in or received from a registered disability savings plan as defined under the *Canada Disability Savings Act*.
* In Nova Scotia, standards for delivering and receiving goods and services may address several things, including how service providers interact with persons with disabilities; use of assistive devices when accessing services; how persons with disabilities obtain goods and services; and how service providers are trained to serve persons with disabilities.
* In Nova Scotia, input from stakeholders is sought on policy changes, as appropriate. This includes through surveys, first voice sessions, and regular meetings with service providers to discuss how services could be improved to meet the needs and desires of the participant. Independence, person-centered service, and empowerment are key client outcomes.
* In Ontario, the *Accessibility for Ontarians with Disabilities Act* and its regulation ensure the participation of persons with disabilities in policy design for accessibility. For example:
  + Standards Development Committees must be appointed to develop and review accessibility standards to be considered for adoption into regulation. These committees must be made up of persons with disabilities or their representatives, representatives of affected sectors and representatives of impacted ministries.
  + Municipalities with a population of 10,000 or more must establish an Accessibility Advisory Committee. These committees must advise the municipalities on the requirements of the Act, review site plans and drawings, and perform any other functions specified in regulations created under the Act.
  + Transit organizations must hold annual public meetings involving persons with disabilities to participate in a review of the organization’s accessibility plan.
  + When constructing or redeveloping outdoor play spaces, organizations must consult on the needs of children and caregivers with various disabilities.
* Ontario has created five sets of standards in regulation in the areas of customer service, information and communications, transportation, the design of public spaces and employment. Two new accessibility standards are currently under development for the healthcare and education sectors.
* Organizations are required to train persons in their organization on the requirements of the accessibility standards, as well as on disability-related obligations under the *Ontario Human Rights Code*.

* The Act includes accountability mechanisms. Every year, the Ontario government audits a selection of organizations to ensure they are complying with their legal requirements. If an organization is found to be non-compliant, the government will offer tools, resources and other supports to help the organization understand and meet their requirements. In cases where an organization continues to be non-complaint, the government will enforce the law using the measures outlined in the Act, including monetary penalties.
* The Ontario Disability Support Program (ODSP) is a provincial social assistance program that provides income support and employment supports to eligible Ontario residents who have disabilities.
* To be eligible for ODSP income support, individuals must be at least 18 years old; be an Ontario resident; be in financial need; and meet the program’s definition of a person with a disability, or be a member of a [Prescribed Class](http://www.mcss.gov.on.ca/en/mcss/programs/social/odsp/income_support/PrescribedClasses.aspx)*.[[9]](#footnote-9)*
* ODSP income support may help with the following health-related benefits
  + Prescription drugs;
  + Basic dental care;
  + Vision care – Eye examinations, including frames and lenses;
  + Hearing aids and hearing-related items and services, such as alerting systems;
  + Batteries and repairs for mobility devices;
  + An amount to cover the consumer portion of the Ministry of Health and Long-Term Care’s Assistive Devices Program;
  + Medical transportation;
  + Surgical supplies and dressings; and
  + Diabetic supplies.
* In addition to the above benefits, the Home and Vehicle Modification Program is administered by the March of Dimes Canada on behalf of the Ministry of Children, Community and Social Services. The program provides eligible individuals and families with assistance towards home and vehicle modifications for Ontarians with mobility restrictions to enable them to continue living safely in their homes, avoid job loss and participate in their communities.
* Ontario funds a range of habilitation services that support individuals to develop or improve skills and functioning for daily living. These include, but are not limited to, supports/services for activities of daily living (making meals, getting dressed, personal hygiene, taking medication); training to help with life skills (managing money, banking, navigating transportation options); community participation (social/recreational activities, work, volunteering); and, professional/specialized services provided by a psychologist, social worker, speech language pathologist, Adult Protective Service Worker and/or other professionals.
* In Ontario, the Assistive Devices Program (ADP) provides funding assistance for Ontario residents who have long-term physical disabilities requiring assistive devices for at least six months. The ADP’s funding is intended to support client access to personalized assistive devices appropriate for the individual’s basic needs. The ADP provides funding towards assistive devices such as wheelchairs and walkers, home oxygen, hearing aids, respiratory equipment, insulin pumps, orthotic devices, limb prostheses and ostomy supplies. In most instances, the ADP pays 75% of the cost of devices and the client is responsible for 25%. For some supply categories, such as insulin pump supplies, ostomy supplies, breast prostheses and needles and syringes for seniors, the ADP pays a grant directly to the client.
* In Prince Edward Island, comprehensive programs and services are available for both habilitation and rehabilitation within the health system and in partnership with other human service sector and community based agencies, including measures to support persons with disabilities.
* In Prince Edward Island, the Access Ability was recently launched to replace the Disability Support Program. Its goal is to ensure more Islanders get the help they need to reach their full potential. The program is intended to provide personalized support and focus on empowering individuals and their families. The five program components are supports for personal daily living, housing supports to foster greater independence, community supports to find and keep employment and skills and/ or active participation, supports to caregivers, and financial supports for basic living expenses. The program has been designed to include physical, intellectual, neurological, sensory and mental health support. The program has increased resources to facilitate increased connections to programs and services based on individual goals, as well as increased financial rates for home and vehicle modifications. The Access Ability program works in partnership and on the advice of a community based advisory board.

* In Prince Edward Island, various technical aids and assistive devices may be cost shared with individuals and families to help address unmet needs with the recommendation of a Health Care Practitioner such as an Occupational Therapist, Physiotherapist, Audiologist, Speech Language Pathologist, etc.
* The Government of Prince Edward Island has established a Critical Incident Stress Management Network of trained providers available to all first responders to seek to prevent and mitigate response to trauma. Improvements have been made to link local military veterans to the Regional Operational Stress Injury Clinic through telehealth, facilitated by provincial Community Mental Health.
* Au Québec plusieurs mesures sont en place pour garantir la prestation de biens et de services d'adaptation et de réadaptation facilitant la mise en œuvre et le contrôle du respect des droits de l'Homme, notamment:
* La Politique À part entière : pour un véritable exercice du droit à l’égalité
* Le Cadre de référence pour l’organisation des services en déficience. physique, déficience intellectuelle et trouble du spectre de l’autisme, vers une meilleure intégration des services pour les personnes ayant une déficience.
* De plus, au Québec, le *Plan 2015-2019 des engagements gouvernementaux* (PEG) vise à favoriser la mise en œuvre de la politique *À part entière : pour un véritable exercice du droit à l’égalité* (2009) et à assurer la cohérence de l’ensemble des programmes destinés aux personnes handicapées et à leur famille. L’engagement 40 du PEG porte particulièrement sur l’accès aux soins de santé : « Soutenir l’autonomie décisionnelle et fonctionnelle des personnes handicapées en offrant des services de soutien à domicile coordonnés, intégrés et de qualité, conformes à l’évaluation de leurs besoins, à leur profil d’autonomie et à leur PSIAS [Plan de services individualisé et d’allocation de services] ».Il vise à élaborer un plan d’intervention ou de services (avec l’outil PSIAS) pour chaque personne évaluée, en respectant ses préférences et celles de ses proches, ainsi qu’à mettre à jour le plan lorsque la personne fait l’objet d’une réévaluation.
* Par ailleurs, en vertu du Code civil du Québec (art. 11 et suiv.), les personnes handicapées âgées de 14 ans et plus (considérées aptes à donner un consentement), ont le droit de choisir ou de refuser les soins requis par leur état de santé. Cependant, dans une situation d’exploitation de la personne handicapée (art. 48 de la Charte des droits et libertés de la personne), une plainte peut être portée, pour le compte de la victime, par un organisme voué à la défense des droits et libertés de la personne ou au bien-être d’un groupement, sans son consentement (art. 74 de la Charte des droits et libertés de la personne). Une fois la plainte reçue par la Commission, afin d’assurer le respect des droits de la victime, tels le droit à la sauvegarde de sa dignité (art. 4 de la Charte des droits et libertés de la personne) et le droit au respect de sa vie privée (art. 5 de la Charte des droits et libertés de la personne qui inclut le droit de prendre ses propres décisions), celle-ci recherche son consentement dans la mesure du possible tout au long du processus.
* Dans le réseau scolaire, des mécanismes de traitement des plaintes sont prévus dans les commissions scolaires (Loi sur l'instruction publique, RLRQ c. I-13.3, art. 220.2).
* The Government of Saskatchewan provides funding to community-based organizations and post-secondary education institutions for the provision of disability-related programs, supports, and services.
* The Saskatchewan Ministry of Education supports 14 Early Childhood Intervention Programs (ECIP) across the province. ECIP is a home visiting program targeting families with children aged 6 and under who are experiencing, or are at risk of experiencing a developmental delay. The ECIP programs work in collaboration with regional health authorities, school divisions and community partners to provide an array of supports and services related to the medical, developmental, social and educational needs of children and their families.
* In 2010 and 2011, Saskatchewan provided $16,000 to the Red Cross for its anti-bullying/bully prevention workshops for students and school staff. These are focused on bullying behaviour that is related to disability.
* Military veterans in Saskatchewan can access services related to post-traumatic stress disorder through the health regions. How post-traumatic stress disorder impacts individuals varies considerably, and so there are a range of mental health supports available. For example:
  + Adult Mental Health Clinics in the Regina area, which were delivered by the Regina Qu’Appelle Health Region (RQHR) prior to the establishment of a single province-wide health authority are part of a continuum of treatment and support services available for adults age 18 and over. They provide a wide range of community-based services for people who are having significant problems related to their mental health and well-being. All services are provided free of charge.
  + The *Wellness and Support Program* focuses on relapse prevention and provides assistance maintaining health and wellbeing through a variety of services including individual sessions and a weekly wellness group.
  + The *Wellbeing Program* is an online therapy program offered in partnership with the University of Regina. It assists individuals in managing symptoms of anxiety and/or depression more effectively.
  + More generally, the Extended Care/Veterans Program, located at the Wascana Rehabilitation Centre in Regina, provides specialized supportive and long-term care services to 259 residents on seven units.
* The *Saskatchewan Aids to Independent Living* (SAIL) program provides assistance to persons with physical disabilities to live a more active and independent lifestyle. It also helps people in the management of certain chronic health conditions. The *Universal Benefits Program* offers a variety of supports to individuals, including the *Mobility and Assistive Devices (Special Needs Equipment) Program*. First Nations individuals in Saskatchewan are not eligible to access SAIL programs.
* The Government of Saskatchewan’s Assured Income for Disability (SAID) program provides benefits to individuals having a ‘significant and enduring’ disability, which is assessed through medical information and a disability impact assessment. To apply, applicants must be a Saskatchewan resident, be 18 years of age or older, lack financial resources to meet basic needs, and have a disability that is permanent, substantially impacts daily living activities, and which results in requiring assistance (assistive device, assistance of another person, assistance of a service animal or other accommodation).
  + Eligible beneficiaries receive a living income, which is a fixed amount of monthly income that can be used as the beneficiary chooses. Typically, it would be used to supplement costs for shelter, food, basic transportation or other items.
  + Eligible beneficiaries may also receive the disability income, which is designed to help with costs related to the impact of disability, and the exceptional need income, intended to help with a number of special circumstances (e.g. clothing recommended by a health professional, special food items recommended by a specialist, etc.).
* In the Yukon, the Services to Persons with Disabilities Unit provides supports for employment, education, peer support and rehabilitation programs.
  1. **Do you have examples from your country on strategies to increase coverage of habilitation and rehabilitation services and goods, including in rural or isolated areas?**
* Access to mental health supports can be particularly hard to attain for public safety officers in rural and remote areas. The Government of Canada has committed funding to work with the Canadian Institute for Public Safety Research and Treatment to develop an Internet-based Cognitive Behavioural Therapy pilot as a means of providing greater access to care and treatment for public safety officers across Canada.
* The Government of Canada has also committed to investments in Indigenous health, including public health, mental health, long‑term care and necessary items and services, which are essential components of the reconciliation process. This includes making progress toward First Nations health service delivery to isolated areas. In recognition that health systems must be more responsive to community needs, the Government provides funding for care facilities to serve the health needs of remote and isolated James Bay communities. The creation of new health care infrastructure will give people in this area better access to quality public health, mental health and long-term care closer to home—and under First Nations control.
* In Nova Scotia, transportation is funded under the Disability Support Program (DSP) Special needs policy to cover costs of travel which helps with access in more rural communities that may have less resources locally. For example, medical appointments outside of the area and travel to employment can be funded. The Independent Living Support (ILS) Program in Community Services (DSP), which provides up to 31 hours of support a week in an individual’s home/apartment, allows for individuals to choose a community to live and a service provider. The pool of service providers has been increased to allow for more flexibility and choice for ILS participants. ILS participants can choose to live anywhere in the province. There is currently a strategic focus in the DSP to work on assisting families and individuals to access respite supports for which they have eligible funding under specific DSP policies. Respite supports assists DSP participants and families by providing a break to care givers or by providing individualized funding opportunities for supports for eligible DSP participants. Coverage is largely influenced by participant choice regarding where they live and/or want to live.
* Le gouvernement du Québec a mis en œuvre diverses stratégies visant à augmenter la couverture de biens et de services d’adaptation et de réadaptation, notamment:
* Plan 2015-2019 des engagements gouvernementaux visant à favoriser la mise en œuvre de la politique À part entière.
* Plan stratégique du ministère de la Santé et des Services sociaux.
* Orientations ministérielles en matière de santé et de services sociaux, dont les modes d’allocation des ressources.
* Cadre de référence pour l’organisation des services en déficience physique, déficience intellectuelle et trouble du spectre de l’autisme, vers une meilleure intégration des services pour les personnes ayant une déficience.
  1. **Do you have examples from your country on methodologies to improve quality and budget efficiency of habilitation and rehabilitation services and goods?**
* In November 2015, the Minister of Veterans Affairs was charged with improving existing benefits for Veterans with service-related disabilities including: disability compensation, financial benefits, employment supports and education, counselling and training for families who provide care and support to veterans living with physical and/or mental health issues.
* Veterans Affairs Canada has seen an increase in the number of applications for disability benefits since 2015. To keep up with the rise in demand and to ensure that veterans get services and benefits when they need them, the Government of Canada has proposed funding to increase service delivery capacity.
* The Government also recognizes that psychiatric service dogs can play an important role in helping Canadians cope with conditions like post-traumatic stress disorder, and has proposed to expand the Medical Expense Tax Credit to recognize costs for these animals for the 2018 and future tax years.
* In 2017, the Government announced the Pension for Life plan, a program designed to reduce the complexity of support programs available to veterans and their families. It proposes a broader range of benefits, including financial stability, to Canada's veterans, with a particular focus on supports for veterans with the most severe disabilities.
* In Nova Scotia, the Disability Support Program (DSP) is currently undergoing a transformation process to provide a higher quality of services and goods. This includes program evaluations aimed at increasing budget efficiency and value for money. DSP has identified specific system and participant outcomes that will help to measure success.
* Le gouvernement du Québec a adopté l’outil général Mode d’allocation des ressources 2016-2017 dont certaines sections concernent la déficience physique (pages 86 et 87), la déficience intellectuelle et trouble du spectre de l’autisme (pages 98 et 99) et la santé mentale (pages 102 à 106).

1. **Does your country monitor and collect disaggregated data by disability, sex and age with respect to access and quality of habilitation and rehabilitation services and goods?**

* Canada’s federal Disability Data Strategy is designed to collect detailed population statistics on issues covered by the CRPD.
* Since 2012, Canada’s Disability Data Strategy continues to be rolled out including the Canadian Survey on Disability (2012 and 2017) as well as disability screening questions on a variety of other Canadian national surveys.
* The strategy is beginning to produce a wider range of statistics (in terms of areas of inquiry corresponding to the Articles of the CRPD), with many of these results coming to maturity by 2020‑21. The wider range of coverage of key results will not be available until then.
* In 2021, Canada will be in a position to report on most articles of the CRPD using data from the Disability Data Strategy. However, it is expected that data on children with disabilities and new data sources to monitor our accessibility legislation will not be ready for that time. The Government of Canada is exploring options to ensure that sufficient data will be collected on children with disabilities in the future.
* The Canadian Health Survey on Children and Youth, a pilot children’s health survey covering those aged 1 to 17, has recently been introduced; however, it is not expected to provide substantial information on children with disabilities.
* The Disability Screening Questions instrument is central to the Canadian Survey on Disability, and focusses solely on adults (aged 15 years and older) with disabilities. The methodology required to sample a large population of persons with disabilities dictates that this survey must follow closely the Canadian Census of the Population, which is held every 5 years (the last of which was conducted in 2016). The Canadian Survey on Disability was first conducted in 2012, followed by an improved 2017 version of the survey, with initial results expected to begin flowing in November 2018.
* In Nova Scotia, the Department conducts program evaluations which involve the use of participant data to assess and improve the quality of services and goods.
* Le Québec dispose de banques de données concernant les différentes prestations de services de santé et de services sociaux. Par ailleurs, l’Institut de la statistique du Québec possède des données issues des enquêtes populationnelles qu’ils mènent de façon générale et particulière.

1. For more information on Canada’s federal structure, see Canada’s Common Core Document. [↑](#footnote-ref-1)
2. Alberta Human Rights Commission: <https://albertahumanrights.ab.ca/Documents/MentalPhysicalDisab.pdf> [↑](#footnote-ref-2)
3. Nova Scotia Disability Support Program Policy: <https://novascotia.ca/coms/disabilities/documents/Disability_Support_Program_Policies.pdf> [↑](#footnote-ref-3)
4. Nova Scotia Disability Support Program Policy: <https://novascotia.ca/coms/disabilities/documents/Disability_Support_Program_Policies.pdf> [↑](#footnote-ref-4)
5. Alberta Human Rights Commission, <https://www.albertahumanrights.ab.ca/Documents/Bull_Duty_to_accom_students.pdf> [↑](#footnote-ref-5)
6. Canadian Transportation Agency, Decision No. 6-AT-A-2008 (2008), online: www.otc-cta.gc.ca/eng/highlights-one-person-one-fare-policy-decision [↑](#footnote-ref-6)
7. *Canada (Attorney General) v. Jodhan* 2012 FCA 161, online: decisions.fca-caf.gc.ca/en/2012/2012fca161/2012fca161.html [↑](#footnote-ref-7)
8. Alberta Human Rights Commission, Remedy information sheet, https://www.albertahumanrights.ab.ca/Documents/Remedy.pdf

   [↑](#footnote-ref-8)
9. Prescribed classes are specific categories of people who do not have to go through the disability adjudication process to qualify for ODSP Income Support. People in these categories must still apply and meet all other ODSP eligibility requirements to be found eligible for ODSP Income Support. [↑](#footnote-ref-9)