

Part Two: Scope of Communication Access Approaches and Supports for in Federally Regulated Contexts

Report from the Inclusive Design Research Centre

Project: Communication Access within the Accessible Canada Act

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[Executive summary 6](#_Toc131170156)

[Approaches to mitigating barriers from our experts 6](#_Toc131170157)

[Address attitudinal barriers 7](#_Toc131170158)

[Training and awareness in communication access 7](#_Toc131170159)

[Time for communication 7](#_Toc131170160)

[Respect the individual 7](#_Toc131170161)

[Improve transparency and clarity of available supports 7](#_Toc131170162)

[Recognize the role of communication support people 7](#_Toc131170163)

[Identify barriers introduced by technology-based approaches 7](#_Toc131170164)

[Provide one size fits one approaches 8](#_Toc131170165)

[Make services and processes accessible 8](#_Toc131170166)

[Harmonizing support programs 8](#_Toc131170167)

[About this report 9](#_Toc131170168)

[Information sources 9](#_Toc131170169)

[Communication and communication disabilities 10](#_Toc131170170)

[Building on past research 11](#_Toc131170171)

[Expert Interviews 12](#_Toc131170172)

[Attitudinal barriers 13](#_Toc131170173)

[Transparency and clarity of available supports 14](#_Toc131170174)

[Protocols for communication support people 15](#_Toc131170175)

[Assistive Technology Barriers 16](#_Toc131170176)

[Equal treatment instead of equitable treatment 17](#_Toc131170177)

[Inaccessible services and processes 18](#_Toc131170178)

[Financial Barriers 19](#_Toc131170179)

[Approaches to mitigating barriers from our experts 19](#_Toc131170180)

[Address attitudinal barriers 20](#_Toc131170181)

[Training and awareness in communication access 20](#_Toc131170182)

[Time for communication 20](#_Toc131170183)

[Respect the individual 20](#_Toc131170184)

[Improve transparency and clarity of available supports 20](#_Toc131170185)

[Recognize the role of communication support people 20](#_Toc131170186)

[Identify barriers introduced by technology-based approaches 20](#_Toc131170187)

[Provide one size fits one approaches 21](#_Toc131170188)

[Make services and processes accessible 21](#_Toc131170189)

[Harmonizing support programs 21](#_Toc131170190)

[Access to communication supports and services in federal contexts 21](#_Toc131170191)

[Service Canada 22](#_Toc131170192)

[Canada Revenue Agency 22](#_Toc131170193)

[Corrections, Justice, and Policing 23](#_Toc131170194)

[Perception of communication differences in context (attitudinal barriers) 24](#_Toc131170195)

[Support Persons and Intermediaries 24](#_Toc131170196)

[Support Persons 24](#_Toc131170197)

[Communication Intermediaries 25](#_Toc131170198)

[Provincial Court Approaches 26](#_Toc131170199)

[Accessing a Communication Intermediary 26](#_Toc131170200)

[RCMP and Policing 27](#_Toc131170201)

[Immigration 27](#_Toc131170202)

[Border Services 28](#_Toc131170203)

[Funding Support 28](#_Toc131170204)

[Nationwide Funding 29](#_Toc131170205)

[Charitable Organizations 30](#_Toc131170206)

[Device funding and device lending programs 30](#_Toc131170207)

[Self-directed funding program for attendant support 31](#_Toc131170208)

[Conclusions 31](#_Toc131170209)

[Glossary 32](#_Toc131170210)

[AAC (Augmentative and Alternative Communication) 32](#_Toc131170211)

[Ableism 32](#_Toc131170212)

[Access approaches 32](#_Toc131170213)

[Accommodations 32](#_Toc131170214)

[Aphasia 32](#_Toc131170215)

[Apraxia of speech (AOS) 32](#_Toc131170216)

[Clinical Services 32](#_Toc131170217)

[Communication 32](#_Toc131170218)

[Communication Access 33](#_Toc131170219)

[Communication Access Approaches 33](#_Toc131170220)

[Communication Device Funding 33](#_Toc131170221)

[Communication Disability 33](#_Toc131170222)

[Communication Disorder Assistant (CDA) 33](#_Toc131170223)

[Communication Intermediaries 33](#_Toc131170224)

[Communication methods 33](#_Toc131170225)

[Communication support 34](#_Toc131170226)

[Communication support personnel 34](#_Toc131170227)

[Communication supports 34](#_Toc131170228)

[Dysarthria 34](#_Toc131170229)

[Dysmaturity 34](#_Toc131170230)

[Dyslexia 34](#_Toc131170231)

[Echolalia 35](#_Toc131170232)

[FASD (Fetal Alcohol Spectrum Disorder) 35](#_Toc131170233)

[On-the-Job-trained (OJT) 35](#_Toc131170234)

[Perseveration 35](#_Toc131170235)

[Prosody 35](#_Toc131170236)

[Personal communication boards 35](#_Toc131170237)

[Preferred Communication Method 36](#_Toc131170238)

[Psychogenic Aphonia 36](#_Toc131170239)

[Appendix A: funding supports 37](#_Toc131170240)

[Funding and Services Phone Calls 37](#_Toc131170241)

[Ontario NIHB Phone call: 37](#_Toc131170242)

[Ontario Direct Funding Phone call: 37](#_Toc131170243)

[Saskatchewan NIHB Phone call: 37](#_Toc131170244)

[British Columbia phone calls: 38](#_Toc131170245)

[Quebec PMAT COM phone call: 38](#_Toc131170246)

[Newfoundland and Labrador Regional Health Authority phone call: 38](#_Toc131170247)

[New Brunswick Disability Support Program phone call: 39](#_Toc131170248)

[March of Dimes Canada phone call: 39](#_Toc131170249)

[British Columbia 39](#_Toc131170250)

[Alberta 40](#_Toc131170251)

[Saskatchewan 40](#_Toc131170252)

[Manitoba 41](#_Toc131170253)

[Ontario 42](#_Toc131170254)

[Quebec 43](#_Toc131170255)

[New Brunswick 43](#_Toc131170256)

[Newfoundland and Labrador 43](#_Toc131170257)

[PEI 43](#_Toc131170258)

[Nova Scotia 43](#_Toc131170259)

[Northwest Territories, Nunavut, and Yukon 44](#_Toc131170260)

[First Nations & Inuit 44](#_Toc131170261)

[Works cited 45](#_Toc131170262)

# Executive summary

Communication Access within the Accessible Canada Act refers to what the federal service must do to ensure that a person can effectively communicate and use their service. Communication Access includes responsive environments, aids, devices, strategies, and human support (Collier, 2020). Statistics Canada (McDiarmid, 2021) research shows that 61.5% of people with disabilities in their study encountered communication barriers when accessing federal services. For people with communication disabilities, the rates would be even higher and the need for communication access within federal organizations and businesses is urgent.

Addressing this issue is the central focus of a series of reports by the [Communication Access within the Accessible Canada Act](https://idrc.ocadu.ca/commacc/) Project (Communication Access Project). This scoping report is the second of three reports of the Communication Access Project. The project is led by [Inclusive Design Research Centre](https://idrc.ocadu.ca/) (IDRC) at [OCAD University](https://idrc.ocadu.ca/commacc/) with input and support from [Communication Disabilities Access Canada](https://www.cdacanada.com/).

In addition to research conducting for our first report, we conducted interviews with nine experts with lived experience with disability, continued to utilized CDAC research and guidance, expanded our environmental scan of academic and grey literature, and made cold calls to federal and provincial services to see what staff were able to tell us about available communication supports.

Our experts with lived experience of communication disabiltiy shared their experiences accessing services at different levels of government but focusing on federal services. They shared that they experience attitudinal barriers as well as communication access barriers such as lack of transparency regarding available supports, misunderstanding of communication support people, inaccessible technology, inequitable requirements, assumptions about what should work for them, services that fail to address communication access needs, and tangled and difficult to navigate funding support options.

With our experts we developed a list of recommendations for ways to improve communication access. This list is also included in our complete list of recommendations in our third report. The recommendations were:

# Approaches to mitigating barriers from our experts

In the course of our conversations with experts with lived experience of communication disability as well as other experts we engaged with through our research activities and advisory panel, we learned what those with close experiences with communication barriers thought would help to improve communication access. We’ve compiled their insights and suggestions here (these and other recommendations from our research and CDAC research will be shared in our third report, *Recommendations*).

## Address attitudinal barriers

### Training and awareness in communication access

1. Provide required training program for all public servants and government members related to communication access approaches.
2. Build awareness and understanding that people with disabilities have differences in how they like to communicate. People with the same disability are going to communicate in different ways and those ways should be considered valid in all contexts.

### Time for communication

1. Provide adequate time for all forms and methods of communication including online interactions which can “time-out” without adequate warning or time to respond.

### Respect the individual

1. Ensure that communication is mutually understood.

## Improve transparency and clarity of available supports

1. Information about services and supports provided should be easily found by direct links from the home page of the related service’s website
2. Information about available services and supports should be readily available for staff and visitors in all interaction modes (e.g., face to face, web chat, telephone, etc.)

## Recognize the role of communication support people

1. Adjust policies and processes that prevent the use of a communication support person to allow communication support while addressing concerns related to security, privacy, or influence.
2. Train staff to speak with the individual with the communication disability and not their support person.

## Identify barriers introduced by technology-based approaches

1. Technology used to support communication access (e.g. a web chat, digital form, etc.) must also be inclusive and accessible (e.g., usable by people who need alternative access formats such as switches or screen readers).
2. Policies to prevent access barriers should not be so prescriptive that they stifle or prevent adoption of innovations (e.g., Google’s euphonia project shows promise as a voice recognition system).
3. Human alternatives to technology-based approaches should always be available as well as other technology-based approaches.

## Provide one size fits one approaches

1. Provide multiple options for communication and collection of information (e.g., print, email, chat, phone, synchronous, asynchronous, signature alternatives, etc.)
2. Provide opportunities for people with communication disabilities to state what supports will work best for them.

## Make services and processes accessible

1. Provide information about requirements/necessary information or documentation as early as possible in a process. For example, in the online environment when a process is timed, provide a list of requirements to complete the process before it starts.
2. Use plain language and where appropriate for some individuals, use yes/no questions.

## Harmonizing support programs

1. Communication access supports and approaches should be part of all budgets for services accessed by the public.
2. The burden for communication access should not be borne by the person with a communication disability, this includes time, effort and financial burdens.
3. Because access to communication supports greatly impacts the accessibility of interactions with federal services, there is a need to make this access more even across Canada. Federal and provincial services for communication access and supports require harmonization so that federal services across Canada can be provided more equitably and evenly to individuals with communication disabilities wherever they live.

# About this report

This scoping report is the second of three reports of the [Communication Access within the Accessible Canada Act](https://idrc.ocadu.ca/commacc/) project (Communication Access Project). The project is led by [Inclusive Design Research Centre](https://idrc.ocadu.ca/) (IDRC) at [OCAD University](https://idrc.ocadu.ca/commacc/) and is funded by [Accessibility Standards Canada](https://accessible.canada.ca/). Our work is deeply informed by the work of Communication Disabilities Access Canada (CDAC).

The goal of Communication Access Project is to inform development of communication access standards and regulations under the [Accessible Canada Act](https://parl.ca/DocumentViewer/en/42-1/bill/C-81/royal-assent). Communication Access Project research addresses gaps in understanding of the accessibility needs of people with communication disabilities and how to meet diverse communication accessibility needs especially within federally regulated contexts. For this project, the scope of communication disability is limited to speech, language, and communication disabilities due to life-long or acquired cognitive and/or neurological disabilities. Communication needs that require sign-language interpreters for those experiencing deafness or hearing loss are not part of this project.

In this report we:

1. Identify services, supports, device funding, and access approaches that individuals need for communication including generic access approaches and supports that organizations can provide for accessible communication.
2. Identify context-specific access approaches and supports (e.g., justice, commerce, services)
3. Identify gaps in services and access approaches to support individuals with communication disabilities (e.g.: lack of funded communication assistance)
4. Suggest approaches for creating responsive accessible services that may be considered in development of standards.

Although the scope of Canadian federally regulated goods and services is quite large, in the tradition of inclusive design thinking which prioritizes extreme or edge cases, we focus on communication access within critical contexts such as policing, justice, and border services. This approach enables us to learn from and address situations in which those already vulnerable from disabling communication environments and systems are most at risk for further trauma.

# Information sources

The scoping report is informed by six information areas:

1. an advisory panel,
2. interviews with subject matter experts,
3. interviews with experts with lived experience with disability,
4. CDAC research,
5. environmental scan of academic and grey literature, and
6. Cold calls to federal and provincial services

At the start of the project, an advisory group of stakeholders who have lived experience of communication disability and representatives of disability organizations from across Canada was formed. We continued to grow the advisory group in the first year of the project to better represent intersecting identities and perspectives. The advisory group advises on methods, data sources, and helped identify people with relevant experience that could be approached for a guided interview for the Framing report.

An environmental scan was conducted to learn about communication access funding and supports across Canada. We included provincial programs because they have an impact on the experience of Canadians accessing federal services. The information from this scan is complemented by earlier research in the project focused on incidence and prevalence of communication disability in Canada and shared in our Framing report.

We wanted to work with experts with lived experience of communication disability to better understand supports available and their experiences with federal services as well as to co-design recommendations for approaches to communication access. In considering the most inclusive approach to surfacing these experiences and the co-design, we chose to use one-on-one unstructured interviews which would include a “magic wand” question to think about possible access approaches and recommendations for standards development. We conducted ten unstructured interviews with individual participants representing a variety of perspectives. Findings from these collaborative sessions are included in this report and inform the recommendations for the project.

# Communication and communication disabilities

CDAC defines communication as an interactive, two-way process that includes both understanding and being understood. Communication involves a range of communication methods in face-to-face interactions, over the telephone, online and via reading and writing (CDAC, n.d.a). Communication disability has many facets: the ways we communicate, the conditions in which we communicate (e.g. interacting with familiar and/or unfamiliar people; communicating in informal or formal situations), the many functions that are part of communication (e.g., muscles, listening, processing what has been said / written / remembering, problem solving, expressing what one wants to communicate using appropriate vocabulary, syntax) and the many ways that communication differences may manifest*.* The population of people with communication disability is very diverse; when it comes to communication access approaches, one size does not fit all. By our estimate between 4.1 and 4.8 million Canadians have a communication disability. For this project, the scope of communication disability is limited to speech, language, and communication disabilities due to life-long or acquired cognitive and/or neurological disabilities. For more information on Communication and Communication Disabilities, please see our first report, *Framing Communication Accessibility in the Canadian Context.*

# Building on past research

In 2018 CDAC conducted a community consultation on federal accessibility with Canadians who have speech, language, and communication disabilities. In the resulting report, [*Public (Community) Consultation on Federal Accessibility Legislation*](https://www.cdacanada.com/wp-content/uploads/2018/01/Final_Community_Consultation_for_Federal_Accessibility_Legislation_Digital_2.pdf), it is noted that almost all participants identified the need for more “speech-language pathology, audiology and augmentative and alternative communication services for people with [speech and language communication disabilities] as well as funding for communication devices that people may need when using federal services.” Participant input made it clear that both clinical services and communication methods are required to have effective communication when using federal services (Collier, 2018). An earlier report conducted on assistive devices in Canada included the perspectives of consumers on the barriers experienced in accessing assistive devices (Gordon et al., 2007). In the study Gordon and colleagues identified regulatory regimes to be complex and overlapping and because of these different funding regimes across the provinces and territories “there is uneven access to assistive devices by consumers across the country”. A [national jurisdictional scan of assistive technology programs](https://agewell-nce.ca/wp-content/uploads/2019/01/age-well_jurisdictional-scan_2017_June-30_FINAL.pdf) looked at programs that provide direct funding and/or services related to supporting the use of assistive technology (Schreiber, 2017). Schreiber and colleagues noted the most common assistive devices that are funded and serviced in the government funding programs address mobility, further supporting the need for more specific support and funding programs aimed at addressing communication access and supports.

Navigating public services can be a challenging experience, adding a condition or disability that affects communication creates further barriers that can compromise an individual’s rights. Individuals have a legal right to full and equitable access of public services, services that can affect income, legal rights, health and safety, among other things. Navigating public services requires steps that can include website navigation, phone calls, reading documents, filling forms, among other tasks. When individuals cannot access, engage with, or complete these tasks they are faced with more steps to try and understand, find, and acquire supports or access approaches — if an individual is even aware that access approaches and supports are available.

There is a pressing need for a clearly marked accessibility section on federal and provincial service websites. This section should outline available services and supports, such as teletypewriters or accessibility support lines. Offering a type of intake dialogue to learn needs and preferences is one way to help individualize access to services for individuals encountering communication disabilities. CDAC developed a questionnaire intended to be used by people with disabilities and their service providers to describe needs and preferences (CDAC, 2020a, 2020b). Building a questionnaire that is individualized for service contexts (e.g., asks only for information needed to facilitate communication access and supports) and offering other ways of collecting information such as a phone call or web chat can support individual needs.

# Expert Interviews

We conducted nine guided interviews with experts with lived experience of communication disability. Participants were recruited through email invitation to IDRC community mailing lists and our advisory group was asked to share the invitation to participate with their communities and networks. Experts who represent diverse experiences of communication disability were selected from 74 respondents. We selected nine participants that would achieve a mix of communication disability, intersecting identities and the federal service that they had interacted with and wanted to discuss. We were interested in individual experiences and generating ideas for accessible approaches and not in making generalizations for the population of people with communication disabilities, thus our group is small. Interview participants included people who:

* are from British Columbia, Alberta, and Ontario
* have Aphasia after stroke, Apraxia, and Cerebral Palsy or related co-morbidities including low vision, hearing loss, and chronic pain from accidents and surgeries
* identify as being on the Autism Spectrum, having Cerebral Palsy, and as a member of the LGBTQ+ community
* are caregivers to relatives with communication disabilities and also identify as being on the autism spectrum
* use AAC devices
* have a family member who support communication

During the guided interviews we asked participants to tell us about their experiences in accessing federal and provincial government services, including the barriers encountered, the access approaches that were available to them, and what their wish is for more accessible services. We understood that some participants would be using AAC as well as communication attendants to support them in the interview. We followed inclusive design practices and asked our experts for their input on preferences and needs for the interview process. This included how they preferred to conduct the interview (e.g., conference platform), offering breaks during the interview, and giving the option for extra time, including scheduling a second call to complete the interview. We offered a $100 per hour (minimum $100) honorarium and provided compensation for unpaid support people who supported them with communication during the interview. Questions were provided ahead of time for those who preferred time to consider and prepare responses and ideas.

Many of the barriers outlined in CDAC publications were echoed in what we heard from our lived experiences experts. Supporting individuals with communication disabilities requires that societal and attitudinal barriers be addressed across all federal service contexts. The words of the experts with lived experience of communication disability represent the frustrations, needs, and recommendations for communication accessibility in Canada, particularly when accessing federal goods and services.

## Attitudinal barriers

In-person or synchronous communication for someone with a communication disability can be fraught with misunderstanding and imbued with impatience and derision. Attitudinal barriers were the most prevalent topics of conversation in this series of interviews, ranging from being ignored to being hung up on by the CRA’s relay service helpline. While the conversations moved between federal services and daily activities, the experience in all contexts is relevant for understanding how to mitigate and prevent communication barriers to federal services. In our Framing Report, we indicated that communication access requires everyone to be more flexible in all aspects including how long it may take someone to communicate. *Refusing to take the time to understand someone implies that the individuals isn’t worth listening to and that what they want to communicate has no merit.* Limited or inflexible notions of reasonable time to communicate is such a barrier that one of our experts has a pre-recorded message to request patience at the start of an interaction:

Whenever I go out to the store, I need to ask someone to get something for me, so I need to play a pre-made [text to speech] message that says, “please be patient with my typing". If I did not play that, the interaction would fall apart, and they would just walk away.

When people are not aware of and not trained in communication access, it can serve as a potent source of demoralization and loss of agency for the individual with communication disability. The disparity felt by people with communication disabilities cuts deeply, as articulated by one of our experts, “I'd like people from “higher social classes,” to understand that we are valuable citizens, and we should have proper accommodations” (Fullerton, 2023).

One interviewee voices the sentiment that interactions like these [fraught with impatience] may be “why people with AAC [devices] may not go out as much.” Even with appropriate AAC supports in place, attitudinal barriers maintain and bolster the communication access barrier that the AAC is supposed to mitigate. Withdrawal from and lack of participation in society is a compounding impact of communication access barriers.

Depending on the nature of their communication disability, people with communication disability may not understand or may be misunderstood in an interaction. Out of misplaced politeness or impatience, staff choose to ignore the misunderstanding. The result is loss of personal agency, individual rights, and dignity: “they don’t take time to listen, may misunderstand. They might smile and nod and pretend to understand, but [my partner] knows when people are pretending” (Anonymous, 2023g)

Experts with Cerebral Palsy who rely on AAC devices for communication, such as [Tobii Eyegaze](https://www.tobiidynavox.com/collections/devices) or other text-to-speech devices, talked about encountering impenetrable barriers when making important phone calls, such as with banks or support services. One said, “It is tricky with banking, they need to identify me and it's not easy.... They assume I am a scam caller... it is almost impossible to do phone calls by myself, I’m also hard of hearing [which compounds the barriers]” (Anonymous, 2023h).

Many of our experts talked about having to bring their “best self” to important interactions. This would include feeling their best but also staying their “best” in the face of mounting barriers and frustrations. One of our experts has chronic pain due to partial spinal injury, which impacts their ability to communicate; they talked about having to be at and stay at their best to get service: “I have to be at my best for accessing services or preparing for an interview host for that matter. Otherwise, there is the perception that you are not worth dealing with if the information doesn’t come quickly and efficiently”(Anonymous, 2023c). One expert went so far as to raise the suspicion that tediousness and emotion is used as a tool to discourage the accessing of services.

Just as time and patience are required for AAC users or speakers who have a condition that affects speech, these are also required for individuals who do not have visible or obvious communication disabilities. Communication requires both being understood and understanding. Some individuals need time and a calm environment to support their understanding of the interaction, others have disabilities that affect how they understand what another person is saying, and they require specific supports and a range of strategies to facilitate their understanding.

Along with lack of adequate time to provide responses, these lived experience experts faced impatience, assumptions about their veracity and negative judgements about their right to service.

## Transparency and clarity of available supports

A recurring theme in our conversations with experts with lived experience of disability is that there is a certain amount of resourcefulness and luck that is necessary to find the right resources and communication access supports. One expert who has dysarthria due to cerebral palsy and uses a mobile device shared an experience they had on the provincially regulated, Vancouver Sky Train public transit network in British Columbia as an example:

The SkyTrain service in BC has staff who are trained to assist people with disabilities, ... they ride the train with you or help with the elevator. Not a lot of people know about it. I had to search it up myself. I only found out about it through a Facebook group. BC transit should be more clear and open about available services.

The interviewee goes on to say that the provincial funding for disability supports in British Columbia is underutilized by those who could benefit the most from it. “Only 1000 people with Disabilities are on BC’s CSIL (Choices in Supports for Independent Living) Individualized Funding Program. I would think there would be way more people using it.”

The difficulty in finding out about available supports within federal services was repeated in our primary (cold call) and secondary (environmental scan) research. We repeatedly had difficulties finding out about supports that were available for people with communication disabilities from the service staff that we spoke to as well as on the web sites that we visited; this illustrates how challenging it is for some people with communication disabilities (because of the nature of their disability) to get information.

## Protocols for communication support people

Many people with communication disability rely on trusted people, often caregivers, to support their communication. Sometimes staff working in services do not accept the communication assistance provided by a support person even when authorized by the individual with a disability. This is understandable in some cases, as service providers have an obligation to hear directly from the individual. However, this can be a significant barrier when a person with a communication disability relies on a trusted person to assist them to convey their message and renders the individual with a communication disability unable to communicate and participate. In a related IDRC project related to financial inclusion, two collaborators reported having their accounts frozen by CRA staff when the staff person overheard account credentials being conveyed to the support person who was assisting. One reported that this had happened four times even as they explained/pleaded for understanding of the use of a support person. In these cases, protocols that manage communication support people are not in place. This places a burden on people with disabilities to go in person to service locations where they may be better able to have their communication access needs met.

Similarly, one expert who also acts as a support person, reported an experience accompanying a relative to a polling station in the 2021 Canadian Federal election. The expert’s relative has aphasia after a stroke, and apraxia that makes it difficult for them to read and sign documents, alongside issues with comprehension. At the polling station the expert was prevented from accompanying their relative to the voting booth. This is the story in their words:

Usually I read her the ballot, and she tells me who she wants to put down ... We have always done it like this as I’m the caregiver, now we can’t participate in the democratic process … Maybe it was someone overzealous, new, or just didn’t understand.

In fact, Elections Canada allows a support person to assist in voting. Barriers must be addressed from a systems perspective—when a change is made to improve access, any point in the system that is connected to that change such as polling station personnel and their training/knowledge must also change. The expert knew someone who ran polls in the past, and that their training only lasted a few days and commented that this barrier could be “attributed to lack of training and reference, and not malice” (Anonymous, 2023d).

We spoke with two experts who are partners, both have cerebral palsy and one partner acts as a communication support for the other. They talked about their experience with Canada Border Services Agency when being called up for processing at an airport: “they let up one person at a time. If [my partner] is not in a wheelchair and is called up, they might stop me from accompanying him since he does not look disabled. He does need help advocating.” Anecdotes about communication support people being disallowed due to possible security and safety threats in critical settings were frequently shared or learned about in all of our research.

## Assistive Technology Barriers

For many reasons, many people with communication disabilities do not use digital assistive technologies. Some individuals prefer to use analogue methods such as letter / picture boards, speech interpretation by someone who knows them well, comprehension support using supported conversation techniques for people who have aphasia. Others will have physical disabilities require specialized devices operated by customized switches or joysticks that are mounted on personalized wheelchairs. These are typically “prescribed” by specialized clinical teams of trained speech language pathologists, occupational therapists and AAC technicians. For individuals who fall between these two options, mainstream technologies (e.g., smartphones, tablets, computers and their applications) may be utilized.

Many people with communication disabilities have co-morbid conditions which can present more barriers in everyday life. Not all communication supports and AAC are designed with full inclusion and accessibility in mind. One expert identified as having dysarthria and a visual impairment; she encounters barriers to accessing AAC that are designed to support communication, particularly mobile phone applications. Rather than cope with software that doesn’t adjust appropriately for her vision needs, she finds it most expedient to just type on her cell phone in large-sized font to help people understand what she is saying (Misasi, 2023).

Voice recognition software is especially challenging for people with communication disabilities such as dysarthria. Voice recognition systems are often not able to understand any voice that is not within the optima. Telephone and other automated systems that rely on voice commands can be especially frustrating and impossible for some people with communication disabilities to use. These problems extend to many other individuals such as speakers who speak the command language with a foreign accent. Fortunately, there are advances in training AI to recognize different speech patterns and recognize voice impairments. One participant had this to say about The Google relay program [Project Euphonia](https://sites.research.google/euphonia/about/): “It understands my cerebral palsy-related slur — can repeat and relay what I say to my smart speaker. Technology is slowly rolling out with more people, accents, disability speech impairments who have trouble using the voice detection on phones and tablets” (Cohoon, 2023). It is important that while standards prevent technology-based access barriers, that they also provide space for new technological innovations and approaches.

With the uneven funding for communication supports across Canada and the gatekeeping that allows technology be used for work but not personal use and vice versa, there can be financial barriers in accessing assistive technologies and/or the specialized accessibility features of technology. For example, many mobile applications that support communication use a freemium payment model: they are free for basic features but have the option to pay a premium for extra features. One example shared by an expert was of paying premiums in text to speech software for a human-sounding voice: “Often times I have to pay for the higher quality ... so by the time that you have found exactly what you’re looking for … you’re looking generally at two to three hundred dollars” (Janz, 2023). In a [co-design under the IDRC’s We Count project,](https://wecount.inclusivedesign.ca/initiatives/ai-and-at-apps/) that examine AI-powered assistive technology mobile applications, several individuals referred to the extra costs for people with disabilities for tools that they need as a “disability tax.” Even selecting a female-sounding voice costs extra in some of the ATs examined (We Count 2019).

Another expert echoed this sentiment when it came to supporting their relative with Aphasia, Apraxia, and low vision:

Part of the issue is that we have tried some apps and stuff in the past, that part of the issue is that because she has difficulty reading and understanding at times, she doesn't know which button [to press] … even with the apps, they're not as accessible as you like them to be.

A lot of apps rely on the ability of the person to read ... some of them were cost prohibitive because they could be really expensive, and we wouldn’t know if they would actually be helpful for her (Anonymous, 2023d).

Technology that is designed to support communication can create financial barriers to access. Some technologies even have additional charges to access specific features that may appeal to users who are different from the “average, non-disabled male.” In addition to financial barriers, technology that is designed for communication disability without considering other intersectional identities and disabilities will also create barriers to access.

## Equal treatment instead of equitable treatment

Dr. Heidi Janz, former chair of Ending of Life Ethics Committee for the Council of Canadians with Disabilities, shared her experience of discrimination and ableism when testifying before Parliamentary, Senate, and joint committees studying Federal Bill C-7 on medical assistance in dying. Dr. Janz uses AAC to speak which takes longer than spoken speech. For an equitable opportunity to give her testimony, Dr. Janz requested extra time over the five-minute limit. She was denied as it would not be fair to other people with disabilities who were only given five minutes.

Dr Janz decided to submit a text-to-speech recording to the parliamentary technical support staff. It was 45 seconds over the time limit, so she sped it up to get it within the time they wanted.

The sign language interpreter was like no no no there was no way we can do that. It would have to be slowed down. But the thing is that in slowing it down, it morphed the noise. So, I went from sound like Stephen Hawking on Speed to sounding like Stephen Hawking on Valium. I think that did much for my credibility as a witness. And honestly, I felt very demeaned by the whole process. They do not make it very accessible. And honestly, I believe that’s on purpose, but that might be beyond this conversation (Janz, 2023).

To make matters worse, the parliamentary tech support took the recording and slowed it down instead of asking Dr. Janz.

We had no control over how fast or how slow it was beyond what I originally sent to them.... When I use my text-to-speech program, I can set the rate of speech for how it talks, how fast it pronounces the words, how much of a pause between each word.... I can set it up to sound like almost a human talking. But then they took it and made it sound totally, completely different than how I had set it up. And what bothers me the most about it is that it really undermined my testimony and it's also the fact that when I sent it to them, I said if it’s too fast let me know and I will slow it down. And they took it, and they said no, no it's fine. And then they messed with it and made it sound how I didn’t want it to sound.... They should have contacted me first or, even better, given me the 2 extra minutes (Janz, 2023).

Dr. Janz goes on to mention that there were no adjustments to her access approaches for the three consecutive occasions on which she provided testimony. Not only is this an example of disregarding and disrespecting the agency of a person with a communication disability, it also demonstrates that equal treatment (everyone gets five minutes maximum) is not the same as equitable treatment. For individuals who communicate more slowly due to a communication disability, the five-minute allotment becomes an unequal few minutes very easily. Rather than speak in person as she preferred and risk her AAC communication method taking too long, Dr. Janz was forced to record and submit her statement ahead of time.

## Inaccessible services and processes

Many of the experts spoke of the anxiety associated with accessing government services due to communication access barriers. They cited issues like lack of accessibility protocols for things that are submitted like forms and other documentation, feeling that requesting communication access approaches and supports exacerbated issues and finding that trying to get access increased financial and time commitments beyond what people without communication disabilities experienced. This impact is especially harmful when the barriers arise from applying for disability supports or benefits. Cohoon discussed his sense that applications for government services were more about accomplishing an arduous task than providing required information; he said, “many more people will need disability support benefits in years to come. Making sure that this [government application] isn’t full of inaccessible paperwork meant to discourage, so that only those privileged enough to keep their emotions and anxiety down long enough can apply”. He goes on to say that this aspect of bureaucracy is not necessarily “ableism, but “peopleism” [against people] in general ... it just makes it hard for everybody. Is it the information you want, or the performance*?”* (Cohoon, 2023).

A cross-cutting frustration for our experts is the burden of having to prove having a disability to access supports to use a service, especially when disability is not visible. In many cases, this requirement could be lifted by designing systems that are more inclusive and can flex for different needs. Our experts told us that systems and services are designed with assumptions about capacity and the assumption that everyone uses the same tools in the same way. Documents were mentioned frequently as being a challenge especially when there were not adequate alternatives to physical forms which can be difficult to hold and complete. Good alternative formats that are accessible online were especially appreciated and noted as an interaction with government services that worked well.

## Financial Barriers

Our research and that of others shows that funding for communication supports is uneven across Canada and is a serious barrier to access. Funding usually requires a mix of NGO, provincial and federal support programs; but there is no consistent mix across the provinces. We also know that the employment rate among persons aged 25 to 64 with a mild disability was 68%, compared with 54% of those with a moderate disability, 42% of persons with a severe disability and 26% among those with a very severe disability (Statistics Canada, 2017). Thus, we can expect that individuals with communication disabilities are more likely to find it hard to get employment which makes the financial barrier more difficult and dire. Provincial support programs may help and hinder financial security. For example, Ontario’s disability support program (ODSP) limits the additional income a recipient can earn without impacting their ODSP support which makes temporary and precarious employment opportunities not worth the effort. One expert we spoke with, who facilitates a drop-in support group for people with disabilities in the Greater Toronto Area, cites mental health, anxiety and depression supports as the main asks for the majority of participants. Up until February 2023, any income earned above $200 was clawed back at a 50% rate. This financial precarity and employment challenges were frequent sources of stress for their visitors. In Ontario, the first $1000 is now exempt from claw back for ODSP recipients and anything above that is clawed back at a 75% rate (Ontario, 2023). The expert included the rising cost of living as a barrier (Anonymous, 2023e) for accessing communication supports.

# Approaches to mitigating barriers from our experts

In the course of our conversations with experts with lived experience of communication disability as well as other experts we engaged with through our research activities and advisory panel, we learned what those with close and direct experiences with communication barriers thought would help to improve communication access. We’ve compiled their insights and suggestions here (these and other recommendations from our research and CDAC research will be shared in our third report, *Recommendations* *for Improving Communication Access in Federally Regulated Contexts*).

### Address attitudinal barriers

#### Training and awareness in communication access

1. Provide required training program for all public servants and government members related to communication access approaches.
2. Build awareness and understanding that people with disabilities have differences in how they like to communicate. People with the same disability are going to communicate in different ways and those ways should be considered valid in all contexts.

#### Time for communication

1. Provide adequate time for all forms and methods of communication including online interactions which can “time-out” without adequate warning or time to respond.

#### Respect the individual

1. Ensure that communication is mutually understood.

### Improve transparency and clarity of available supports

1. Information about services and supports provided should be easily found by direct links from the home page of the related service’s website.
2. Information about available services and supports should be readily available for staff and visitors in all interaction modes (e.g., face to face, web chat, telephone, etc.)

### Recognize the role of communication support people

1. Adjust policies and processes that prevent the use of a communication support person to allow communication support while addressing concerns related to security, privacy, or influence.
2. Train staff to speak with the individual with the communication disability as the primary interlocutor and not their support person.

### Identify barriers introduced by technology-based approaches

1. Technology used to support communication access (e.g., a web chat, digital form, etc.) must also be inclusive and accessible (e.g., usable by people who need alternative access formats such as switches or screen readers)
2. Policies to prevent access barriers should not be so prescriptive that they stifle or prevent adoption of innovations (e.g., Google’s euphonia project shows promise as a voice recognition system).
3. Human alternatives to technology-based approaches should always be available as well as other technology-based approaches.

### Provide one size fits one approaches

1. Provide multiple options for communication and collection of information (e.g., print, email, chat, phone, synchronous, asynchronous, signature alternatives, etc.)
2. Provide opportunities for people with communication disabilities to state what supports will work best for them.

### Make services and processes accessible

1. Provide information about requirements/necessary information or documentation as early as possible in a process. For example, in the online environment when a process is timed, provide a list of requirements to complete the process before it starts.
2. Use plain language and where appropriate for some individuals, use yes/no questions.

### Harmonizing support programs

1. Communication access supports and approaches should be part of all budgets for services accessed by the public.
2. The burden for communication access should not be borne by the person with a communication disability, this includes time, effort and financial burdens.
3. Because access to communication supports greatly impacts the accessibility of interactions with federal services, there is a need to make this access more even across Canada. Federal and provincial services for communication access and supports require harmonization so that federal services across Canada can be provided more equitably and evenly to individuals with communication disabilities wherever they live.

# Access to communication supports and services in federal contexts

We conducted reviews of communication supports and services at federal and provincial levels in the areas of legal and justice services, police services, immigration and border services, and employment services. During our research it became clear that provincial practices were important to include for two key reasons: 1) provincial practices can influence accessibility of the experience of federal services depending on the level of funding support in their province; 2) provincial and regional practices are within the Canadian context and may help to identify promising practices as well as illuminate communication access barriers within these contexts.

We know that communication access and supports in federal and provincial service contexts can be inconsistent and, in some cases, not available. Our research findings show that there are needs in the following areas:

* awareness of communication access and supports,
* clarity on how to access communication supports,
* understanding of what communication access means both broadly and nuanced, and
* accessibility information and accessible options specifically for communication access.

Clarity of available services and supports for both the person receiving the service and the person doing the servicing, was a recuring theme. Bobi Shimoda, an SLP and practicing communication intermediary in the legal domain offered their perspective during a subject matter expert interview:

I think one of the main roadblocks [to communication access] is a lack of knowledge of the services that are available. Also, a lack of understanding of what's required to pay for it. If people don't know to ask for it because they don’t know about Speech Language Pathology, they're probably thinking I can't afford to pay for that. In each of the cases I've been involved, it has been a provincial governmental body that has paid for our [communication intermediary] services. We liken it to a sign language interpreter or a language interpreter. Those sorts of supports are paid for by the province, so we liken it in that way. (Shimoda, 2022)

## Service Canada

For many Canadians, the first point of entry for federal services is via the internet. Since web sites are often a first access point, it is important that they follow accessibility and plain language guidelines. Web sites are an especially important access point for people with communication disabilities because it can be reviewed at one’s own pace and without the added burden of travel. It can also be the place where individuals learn about the different ways that services are provided so that they can choose the access format that works best for them. This information should be clearly stated and linked from the home page.

[Service Canada’s website](https://www.canada.ca/en/employment-social-development/corporate/portfolio/service-canada.html), a primary portal for Canadians to access federal services such as employment insurance, passport applications, and public pensions, does not offer alternative delivery methods to access information, built in accessibility features, or a contact to request access supports. For example, the [Social Insurance Number (SIN)](https://www.canada.ca/en/employment-social-development/services/sin/apply.html) page has no section addressing accessibility or access to alternative formats for the application process. There is no phone number to call if additional supports are required to access and interact with the content.

## Canada Revenue Agency

While the Canada Revenue Agency (CRA) website offers [“help for persons who have a hearing or speech impairment”](https://www.canada.ca/en/revenue-agency/services/forms-publications/publications/rc4064/disability-related-information.html#toc1), the supports include Teletypewriter (TTY) and operator-assisted relay service, but no opportunity to request other ways of communicating.

Other areas of CRA are starting to show greater communication accessibility. For example, CRA is making the [Disability Tax Credit](https://www.canada.ca/en/revenue-agency/campaigns/accessibility-plan.html) (DTC) application processes digital with the goal of making the form fillable online and in plain language. They also plan to offer an alternative option to complete the form over the phone if an individual is not able to complete the online application.

CRA conducted consultations with persons with disabilities, organizations that support disabilities, and CRA employees with disabilities to formulate their [2023 – 25 accessibility plan](https://www.canada.ca/en/revenue-agency/campaigns/accessibility-plan.html). The plan details 23 barriers and their plans to address them. Barrier 21 indicates that many documents and manuals do not offer accessibility information or are not offered in accessible formats. Actions include creating risk assessment documents in an alternative format and “accessible infographics in future statistical reports to make web published data and Open Government reports clearer and more effective to Canadians.”

One of the objectives outlined in the plan is to improve the design and delivery of their programs and services. CRA have identified that persons with disabilities who use assistive devices are limited to their options of online contact (Barrier 17). To address this CRA plans to implement a chat bot and live agent chat service. The action indicates that the chatbot and chat service will have “necessary features that persons with vision, hearing and cognitive disabilities can use successfully.” While these are communication access supports that may be used by some people with communication disabilities, missing from this plan is communication access and supports that specifically address the needs of people with communication disability. For example, addressing security protocols for a third party communication assistant over the phone or message relay services with operators trained in speech to speech interpretation for people with dysarthric speech.

## Corrections, Justice, and Policing

Critical contexts for communication access are corrections, justice, and policing. The Canadian judicial system has four levels:

First there are provincial/territorial courts, which handle the great majority of cases that come into the system. Second are the provincial/territorial superior courts. These courts deal with more serious crimes and also take appeals from provincial/territorial court judgments. On the same level, but responsible for different issues, is the Federal Court. At the next level are the provincial/territorial courts of appeal and the Federal Court of Appeal, while the highest level is occupied by the Supreme Court of Canada (OSCE, 2022).

The Federal Court specializes in areas such as intellectual property, maritime law, federal–provincial disputes, and civil cases related to terrorism. The Tax Court specializes in hearing appeals from tax assessments. The Federal Court of Appeal reviews the decisions of both these courts. In fact, it is the highest court of the land for about 95 percent of all cases. Provincial courts try most criminal offences, money matters and family matters (Department of Justice Canada, 2019).

### Perception of communication differences in context (attitudinal barriers)

One of the most significant challenges individuals with communication disabilities face is being viewed as incompetent or lacking legal capacity solely based on their communication style. Unfortunately, laws that regulate legal capacity in Canada can have significant limitations for individuals with communication disabilities, potentially resulting in the denial of their exercise of legal capacity due to a lack of communication supports or ignorance of the value of AAC supports in decision making processes. Strategies such as support persons, picture displays, or taking more time to make decisions can assist individuals in communication disabilities when communicating and making decisions. However, not all jurisdictions recognize the role of support people in decision making. Capacity assessors are not trained in providing communication supports to both reveal capacity and exercise capacity. Without appropriate communication supports (communication device, board, and / or human communication assistance) capacity assessors *cannot* determine a person’s capacity resulting in third parties making decisions for individuals with communication disabilities, resulting in a loss of their control and oftentimes feelings of frustration (CDAC, July 2020).

### Support Persons and Intermediaries

A support person can assist people with communication disabilities understand information, make decisions, and communicate their partner's needs, ideas, and questions. Some, but not everyone with SLCDs requires support to make decisions; they may require support to communicate their decision. When support to make a decision is required, it must be done within the context of the person’s overall communication access needs. It is important for legal services to understand and acknowledge supported decision making and co-decision making.

#### Support Persons

A trusted support person can be a family member, spouse, or friend and can be a critical need for people with communication disabilities. A support person can assist with understanding information, decision making and communication of needs, ideas, and questions. Informal or non-symbolic communicators may rely on their communication partner to understand, interpret, and act upon their expression and communication preferences (CDAC, July 202b). The focus of supported decision-making is on the supports and access approaches that can be provided to assist individuals in exercising control over decisions that affect them (Law Commission of Ontario, 2017).

Supported decision-making is a model that aims to promote the full equality of persons with disabilities, including their dignity, autonomy, and ability to participate in society on an equal basis with others. This model enables individuals with disabilities to exercise control over decisions that affect them through supports provided by persons with whom they have relationships of trust and intimacy, without any loss of legal capacity. Co-decision making is another decision-making arrangement incorporated into statutory schemes by Alberta and Saskatchewan (Law Commission of Ontario, 2017) that allows adults who can make decisions for themselves with assistance to do so. It is intended as a less restrictive alternative to guardianship, and a judge may appoint a co-decision maker where an adult requires assistance in decision-making.

#### Communication Intermediaries

In police, legal and justice situations, there is often the need for a formal communication support person to ensure that the victim, witness or offender has the supports they may need to authentically communicate in these contexts. In Canada, the term Communication Intermediary © is a qualified Speech-Language Pathologist who is trained by CDAC to support people communicating in justice situations (CDAC, n.d.e). If a person with a communication disability needs AAC supports when navigating legal situations and does not have or require a designated supports person, a Communication Intermediary (CI) can be a good support (CDAC, n.d.c). CIs work for the end-user (police, Crown, etc.) and always in the presence of the end-user, except during the communication assessment stage. Intermediaries play an important role in legal processes by conducting communication assessments, writing reports on communication abilities, and providing communication aids, facilitating communication between individuals with speech, language, and/or cognitive-communication disabilities and justice professionals, and direct communication support throughout all stages of the justice process (ISAAC, 2012).

CDAC established a communication intermediary program in 2017 based on and adapted for use in Canada from the UK model. Communication Intermediaries provide communication access for people who have speech and language disabilities, similar to the way sign language interpreting services are provided for people who are Deaf or hard of hearing.

Communication intermediaries can:

* Explain how a person communicates
* Clarify a person’s level of understanding
* Assist the person to understand questions
* Assist the person to communicate their answers (CDAC, n.d.d, n.d.c)

Since 2017, 500 Speech Language Pathologists have been trained as intermediaries to assist victims, witnesses and offenders communicating in police, legal and justice situations. In 2022, the program was transferred by CDAC to Communication Access to Justice. At this time there are approximately 100 CIs in Canada that are listed on the public registry which is available at <https://www.cajust.ca/ci-registry>. There are no CIs listed for Saskatchewan, Newfoundland, Prince Edward Island, Yukon, and Northwest Territories on that registry. So, while this is a great legal resource for people with communication disabilities, many people in Canada face a geographical barrier to accessing a Communication Intermediary.

Police services should ensure that all officers are trained in how to communicate with people who have communication disabilities, and know how and when to engage a CI.

The cost of engaging a communication intermediary can and should be paid by the police, legal or justice service as part of their accessibility costs.

#### Provincial Court Approaches

Provincial courts in Ontario and [British Columbia](https://www.ontario.ca/locations/courts) have taken actions to streamline courthouse access and supports by having accessibility coordinators assigned to each courthouse. Individuals can contact coordinators by email, mail, phone, TTY, or Video Relay Service. Access and support requests must be submitted two weeks in advance to allow time for judicial approval. Accessibility accommodations are considered a change to procedural steps and requirements and have to receive approval from a judicial official. During our phone call, the accessibility coordinator at the Hamilton courthouse indicated that there is no additional cost for communication supports. There is an added time constraint and additional stress put on the person seeking AAC supports: if support requests are not submitted in time, they may not have a fair appearance in court.

Ontario Courts comply with [OPS customer service accessibility policy](https://www.ontario.ca/page/ontario-public-service-ops-accessible-customer-service-policy). When we connected with the [accessibility coordinator](https://www.ontario.ca/locations/courts) for the region of Hamilton we were told the only way to get an accessibility request form was through an accessibility coordinator. A fillable MSWord form was sent to us by email. The process then requires the individual requesting the accommodation to fill out the form and email it back to the accessibility coordinator. The coordinator was unaware of any communication access supports other than sign language interpreter. This lack of awareness occurs despite online training materials, and participation of CIs on the Court Accessibility Committee. The Attorney General’s Office has failed to adequately distribute information about CI services to court accessibility coordinators. However, these services have and continue to be used in informed areas such as Toronto, Parry Sound, Sudbury and Ottawa. This issue needs further exploration and research.

#### Accessing a Communication Intermediary

In the justice system The Canada Evidence Act regulates the rules of evidence in court proceedings under federal law. It states that the “presumption that all adults with a physical or mental disability can qualify for testimonial access approaches”, and it is up to the court to determine capacity: “if a witness has difficulty communicating by reason of a physical or mental disability, the court may order that the witness be permitted to give evidence by any means that enables the evidence to be intelligible” (Department of Justice Canada, 1985).

We heard from one of our subject matter experts during a guided interview, who is a practicing communication intermediary, that they have experienced court officials making decisions on whether or not an individual requires a support or access approach, and that the decisions are being made on behalf of the individual once legal proceedings have already started.

One case in particular, R v. Doncel (2022), had a complainant with a severe communication disability, who first had to testify without the services of a CI. The Judge indicated that only if he felt they weren’t being understood, would he allow the use of a CI. In Shimoda’s view, Judges like precedent, and with CIs being a newer introduction to the court system, there is still a trust that needs to be established.

### RCMP and Policing

Many legal and justice contexts are very unique, have a different infrastructure and often involve a more formal approach for communication assistance that would not be appropriate for public health, CRA, Service Canada. The Royal Canadian Mounted Police ([RCMP](https://www.rcmp-grc.gc.ca/en/about-rcmp)) is Canada’s national police service and operates within 3 main areas of responsibility: Contract and Indigenous Policing; Federal Policing; Specialized Policing Services. The RCMP works in over 700 detachments in 150 communities across the country. It also provides policing services in more than 600 Indigenous communities (RCMP, n.d.)

The RCMP do not have protocols for supporting AAC communication. In 2022, a pilot project to help RCMP officers better serve those living with speech, language and communication disabilities was run by Stacey McRuer, the Communication Devices Program coordinator at Deer Lodge Centre, along with an SLP, an OT and a police officer with lived experience of an acquired communication disability. The program included a seminar of tips on best practice when speaking with someone with a communication disability. The goal is to run similar workshops and develop a national RCMP program (RCMP Gazette, 2022).

In addition to this training, there is a need for police services to be trained on how and when to engage a communication intermediary, it is possible that in some cases, individuals with communication disability who are victims, witnesses or accused, will not know that they have a right to request a communication intermediary and can have independent supports to find and engage a CI. Consider the scenario where, an abuser, is a family member or personal support worker), they may be considered by the police to be “close” to the individual and, therefore, seen to be “the ideal person to assist with communication” when, in this case, they would be the worst person to assist.

While not Canadian, an approach such as the SAFE registry from Hamilton Township, NJ provides a promising practice. The S.A.F.E (Secure Awareness for First Encounters) program provides officers with quick access to critical information, such as communication style for registered individuals who may be on the autism spectrum or have a communication disability. Additionally, all registrants receive a sticker to place on their car to bring quick awareness to responders (TAPinto Hamilton/Robbinsville, 2022).

## Immigration

The [Immigration Refugees Citizenship Canada (IRCC) website](https://www.canada.ca/en/immigration-refugees-citizenship/corporate/publications-manuals/operational-bulletins-manuals/permanent-residence/express-entry/applications-received-on-after-january-1-2015-alternative-application-process-persons-disabilities.html) offers an accommodation assessment for foreign nationals with a physical or mental disability who face a barrier in creating a profile and submitting an online application. Applicants must provide documentation such as a medical certificate to have an accommodation considered. To access the assessment process individuals are instructed to link through to the [IRCC Call Centre](https://www.canada.ca/en/immigration-refugees-citizenship/corporate/contact-ircc/client-support-centre.html). We accessed the call centre to get a better sense of the journey to access services. The call centre was confusing and did not produce any relevant results to access and supports. Clicking the “Call Centre” button has the expectation of connecting to a human representative or at the very least having options to indicate the barrier being faced and the accommodation needs. The link opens a generic response box that does not have any accommodation or accessibility options. There is an option for AI chat bot assistance, however the autogenerated conversations options when asked about accessibility does not result in any relevant resources. So, while the IRCC states that they have alternative applications, the process to access it is disabling — the information and the user experience do not align with expectations.

The [Immigration, Refugee and Citizenship Canada](https://www.canada.ca/en/immigration-refugees-citizenship/corporate/accessibility/plan.html) (IRCC) has developed a plan to address accessibility barriers for people with disabilities arriving to Canada. While the plan identifies lack of access approaches offered to candidates in hiring process, unclear guidelines for addressing barriers persists.

## Border Services

The Canadian Border Service Agency (CBSA) has legislation under the [Accessible Transportation for Persons with Disabilities Regulations](https://laws-lois.justice.gc.ca/eng/regulations/SOR-2019-244/index.html) (ATPDR). The legislation outlines travellers are entitled to communication of information in alternative formats including electronic formats compatible with adaptive technology, audio format and visual format. Specifically, [CBSA](https://www.cbsa-asfc.gc.ca/travel-voyage/disability-handicap-eng.html) must assist travellers upon arrival and help them navigate the border clearance process, including assistance in completing declarations and providing verbal or visual cues or additional instructions. [The Canadian Air Transport Security Authority](https://otc-cta.gc.ca/eng/publication/requirements-applicable-canadian-air-transport-security-authority-and-canada-border) (CATSA) is responsible for making reasonable efforts to not separate individuals from their device during border screening and allow individuals to keep their assistive devices with them (i.e., communication aid). CATSA is required to assist with proceedings through the border clearance process, including verbal or visual cues, or additional instructions.

# Funding Support

[AccessATCanada](https://www.accessassistivetech.ca/home) provides information on funding support for assistive technology across Canada (current as of 2020).

This section reviews government funding for access to communication supports and alternative and augmentative communication (AAC) across Canada, including national, provincial, territorial and charity programs.

We researched websites, contacted offices, left messages, and spoke to offices to understand what funding and supports is available specifically for communication disabilities and what the processes are to access the funding for communication disabilities. We encountered extreme differences at every touch point explored: clarity of how to find funding on websites and how to access funding, funding protocols and rules, and the knowledge service representatives have around funding programs, AAC and communication disability. Searching for funding protocols and rules online often directed us to PDFs of policies or other programs policies. In some cases, policies and procedures are written in formal and technical language (legalese). Talking with offices sometimes resulted in some clarity of a funding process and in some cases we had conflating information on process. If you live in Ontario, you will have more funding opportunities and clinical supports than if you live in Yukon or New Brunswick. British Columbia and Manitoba are taking direct actions to address the specific needs of AAC funding by supporting programs such as CAYA while other regions identify the need for financial support for people with disabilities. Most often funding efforts are focused on mobility disabilities. We learned about long waitlists for programs that support communication supports funding ranging from eight months to two years.

The wide variety of rules and funding approaches we encountered in our study is nothing new. “Jurisdictional Confusion” and “Restrictive Provincial Funding Regimes” are two key barriers identified in *Assistive Devices in Canada: Ensuring Inclusion and Independence*, a study conducted by Arch Disability law Centre (Gordon et al., 2007). These barriers continue to be issues in 2022.

To access funding some devices are categorized by levels and need to be authorized and prescribed by clinicians such as SLPs. For example, in Ontario under the ADP (Assistive Device Program) there are three levels: 1. Individual authorizers, 2. general AAC service, and 3. expanded AAC service. Each level has relevant product manuals (device listings) and relevant authorizer qualifications listed” (Assistive devices program, n.d.) Bobi Shimoda shared their experience with the AAC prescribing process for funding:

In order for the Assistive Devices Program (ADP) to provide funding for devices, they have to be prescribed by a Level 3 augmentative communication clinic. There's different levels of authorizers for devices. As a clinician, working in a private clinic, I can get my first level authorizer’s data. So, I could prescribe low tech devices and some devices that are electronic, but they're more considered low tech, so if you're going to go up to a higher level of device, something like a Dynavox at Tobii Dynavox and things like this that are more sophisticated, we always refer to the AAC clinic. So, whenever clients have access issues or other high-level needs, we would refer to those clinics. Those clinics would be the ones that would know the most about what devices are available. (Shimoda, 2022)

What we have learned is that lists of available AAC devices and detailed funding parameters associated with the various funding programs across the country are not always available at the public level, it is only once an individual has entered the system to be assessed by an authorizer or assessor for eligibility are more details available.

## Nationwide Funding

Federal funding supports can be used for alternative and augmentative communication in provinces with an absence or minimal communication specific funding. Persons 18 years of age or older with severe and prolonged impairment in physical or mental functions can apply for is the disability tax credit (Canada Revenue Agency, 2022). To apply for the disability tax credit, applicants must provide an evaluation from a medical practitioner determining that they have difficulty speaking as to be understood by a familiar person in a quiet setting and/or difficulty performing mental functions necessary for everyday life. Applicants can claim specific medical expenses relating to Communication (e.g., Bliss symbol boards, electronic speech synthesizers, talking boards)(Canada Revenue Agency, n.d.) for a non-refundable tax credit up to an amount of $8,870.

## Charitable Organizations

Some charitable organizations also contribute to filling gaps in funding options for people seeking communication support funding. These programs are often designed to work with existing supports, not to replace them. [March of Dimes](https://www.marchofdimes.ca/en-ca/programs/atech/tfg#:~:text=March%20of%20Dimes%20Canada's%20Tech,independent%20use%20of%20accessible%20technology.) offers a service, Tech for Impact, for people in financial need who are seeking assistive technology devices (e.g., eye gaze technology, communication boards). Eligibility is based on household income. For example, a single person making over $21,899 is not deemed financially burdened and is ineligible for the funding.

## Device funding and device lending programs

The device funding programs we reviewed either partially or fully fund devices. Some programs have a public facing approved product list of communication devices. For example, AADL (Alberta Aides to Daily Living) program funds 75% of the cost of devices and has a [list of devices published on the internet in PDF format.](https://open.alberta.ca/dataset/14eb397b-4f46-4ef0-b4e3-a83f9b8b5a30/resource/10ea0efc-c2ba-4f17-bd41-0e78abedc235/download/health-aadl-apl-as-speech-generating-communication-devices-aug-2022.pdf) The communication device lending model, like CAYA (Communication Assistance for Youth and Adults), a British Columbia program mandated by the provincial government, and Quebec’s PMATCOM (Programme ministériel des aides techniques à la communication) lends communication equipment for a period of time from a “loan bank of AAC devices”. Some funding programs don’t fully cover the cost of a device or repairs further burdening people with communication disabilities who often face financial limitations.

Device-funding models have layers of approval that include eligibility assessments such as assessment processes by professional health care specialists (e.g., speech-language pathologists and occupational therapists) as well as fund administration assessments. For example, the PMATCOM process is outlined as including a step where assessments are internally “studied by a group of expert clinicians who in turn pass on their recommendations”. These layers can take up to a year to process (e.g., CAYA reports up to an 8 month wait time) at which time technology and/or individual needs may have evolved making original requests redundant.

Our research indicates that funding support for communication support devices is uneven across Canada and provided in a piecemeal fashion by organizations, charities and government. The fragmented nature of funding makes it challenging to discover and once it is discovered then eligibility requirements vary and waitlists are long. We provide more information about our exploration of available supports in Appendix A.

## Self-directed funding program for attendant support

[Direct Funding](https://www.dfontario.ca/) in Ontario and Choice of Supports for Independent Living (CSIL) in British Columbia are self-directed funding programs that give individuals control over who they hire to provide person assistance. Direct Funding enables individuals with disabilities to hire, train, and schedule their own attendants to suit their needs. Since attendants are trained on the job, they do not require specialized experience or educational training. In Ontario attendants are often found through Kijiji and online job boards. There is also a [Consumer Attendant Roster](http://cilt.ca.previewyoursite.com/cilt_database_site/attendant_system/public/attendant_home.asp) where prospective attendants and “consumers” can find each other.

The first person to receive funding in Ontario through the Direct Funding program when it was administered through CILT (Centre for Independent Living in Toronto) participated in a Communication Access Project interview. They told us that this type of funding enables them to privately hire and train attendants to suit their communication needs. Previously, they had to rely on staff provided by Attendant Care organizations who assigned support on an ad hoc basis. The challenge was supporting workers lacked “training and decorum and didn’t use my preferred communication method”. With the Direct Funding program, they have been able to hire long-term employees who are trained directly by the person with the disability — individualizing and customizing support based on their needs and preferences.

# Conclusions

Communication Accessibility is an unmet need within federal service. Access to communication supports and services is fragmented and unevenly distributed across Canada. Approaches to provide communication access within federal services must consider the varied levels of need and access and seek to mitigate it through accessible services but also through partnerships and collaborations with the provinces and other agencies to produce more even access to supports in the first place. Canadians need communication access support through clinical services, devices, and communication assistants before they interact with federal services. The nine experts and ten+ service providers that we spoke with helped us to describe the needs and experiences as well as helped us to understand what can be done to improve communication access. The recommendations from this report and other recommendations from our research have been compiled in a recommendations document which completes the series of reports in the Communication Access Project.

# Glossary

## AAC (Augmentative and Alternative Communication)

AAC refers to tools, strategies, and devices that are used to support communication in all the ways an individual may communicate besides talking. AAC includes both digital and analog devices, such as synthesized voice, communication boards, flash cards, and hand drawing; a communication device can be dedicated (e.g., Tobii Dynavox) or non-dedicated (e.g., smartphone).

## Ableism

Ableism is discrimination and social prejudice against people with disabilities or who are perceived to be disabled. (*Wikipedia*, 2023)

## Access approaches

Access approaches refers to parts of a design or systems or changes in existing designs or systems to make them more accessible and inclusive. Access approaches are design decisions that support accessibility and inclusion.

## Accommodations

Originally, accommodations referred to the changes that may be required to support a person with disabilities in accomplishing requirements or goals in a given situation. The word has fallen out of favour in the disability community as not properly express that access is a right. In this report we use the term access approaches.

## Aphasia

Aphasia is a brain disorder that affects communication (talking and understanding), as well as reading and writing. Aphasia usually happens after a stroke or head injury and can “mask a person’s inherent competence”. Symptoms can include incomplete sentences, word substitution, unrecognizable words, and not understanding a conversation or written material. (Aphasia Institute, n.d.)

## Apraxia of speech (AOS)

Apraxia is a brain disorder that can be acquired or present from birth. Acquired AOS can result from a stroke, head injury, or tumor and occur together with other conditions such as dysarthria and aphasia. Symptoms can include difficulty pronouncing words, inconsistent errors in speech, repeating words, errors in tone, stress, or rhythm (prosody). (NIDCD, 2017)

## Clinical Services

Refers to the diagnostic, therapeutic, and rehabilitative services provided by healthcare professionals to individuals with communication disabilities.

## Communication

Communication is an interactive, two-way process that involves both understanding and being understood. Communication occurs synchronously and asynchronously such as face-to-face interactions, communication over the telephone or an alternate to telephone, at meetings, case conferences, and online learning. Communication is required when accessing, reading, and understanding information, as well as when completing forms and signing documents. (Adapted from CDAC, n.d.e)

## Communication Access

Refers to the ability of individuals with communication disabilities to access information, services, and facilities through various means, including speech, sign language, text, and other forms of communication.

## Communication Access Approaches

Refers to the different approaches and techniques used to promote communication access for individuals with communication disabilities, including universal design, person-centered communication, and alternative and augmentative communication.

## Communication Device Funding

Refers to the financial assistance provided by the government or other agencies to individuals with communication disabilities to obtain assistive communication devices and technologies.

## Communication Disability

Refers to a condition that affects an individual's ability to communicate effectively through speech, language, or other forms of communication. This may be due to developmental, acquired, or progressive conditions, such as autism, cerebral palsy, stroke, or traumatic brain injury.

## Communication Disorder Assistant (CDA)

CDAs are support workers who work with speech-language pathologist (SLPs). They have a post-graduate CDA diploma or certificate, and, in most cases, prior work or volunteer experience in the field of communication disorders. (CDAAC, n.d.)

## Communication Intermediaries

Communication intermediaries (CIs) are registered speech-language pathologists (SLPs), trained to facilitate two-way communication between individuals with speech, language and/or cognitive-communication disabilities and justice professionals. Like language translators and interpreters, CIs act as neutral officers of the court. They provide the support needed for individuals with communication disabilities to have equitable access to legal, police, corrections, and justice services in Canada. (Communication Access to Justice*,* n.d.)

## Communication methods

Communication methods for people who have speech and language disabilities may include speech, vocalization, mouthing, body positioning, facial expressions, eye gaze, gestures, mime, sign language, adapted signs, writing, drawing, typing, selecting, or pointing to pictures, photographs, symbols, written words and letters on a board or device. People who are Deaf, deafened, or hard of hearing may use speechreading, lipreading, sign language and captioning in real time. (Adapted from CDAC, n.d.e)

## Communication support

Communication support is human support that an individual may or may not require. Support can be provided by a Communication Assistant and must be approved by the individual who requires support. person who knows the individual well, such as a family member or support worker and who has been authorized by the person to assist them with communication. In some situations, communication support may be formal and provided by a Speech-Language Pathologist. In justice situations, a Communication Intermediary may be required, which is Speech-Language Pathologist who is trained to work in these settings. (Adapted from CDAC, n.d.e)

## Communication support personnel

Communication support personnel are staff provided by attendant care facilities. They can generally provide non-medical assistance with activities of daily living in the home, such as dressing, bathing, eating, and helping with range of motion. (March of Dimes Canada, n.d.)

In some cases, such as through services like [Direct Funding Ontario](https://www.dfontario.ca/), patients are considered employers, who are fully responsible for managing their own employees (attendants) within a budget developed on an individual basis. (Direct Funding, n.d.)

## Communication supports

Refers to the strategies, tools, and resources used to enhance communication for individuals with communication disabilities. These may include communication boards, sign language interpreters, speech-generating devices, and other assistive technologies.

## Dysarthria

Dysarthria affects the muscles used for speech production. Muscles may be weak or cannot be controlled. Symptoms include slow or slurred speech.

## Dysmaturity

Dysmaturity is a common characteristic of individuals diagnosed with [FASD](#_FASD), and it is not outwardly visible. Dysmaturity refers to “widely varying levels of maturity in different areas of development, such as expressive language and language comprehension, social and self-care skills, and awareness and regulation of emotions.” ([CAMH](https://www.camh.ca/en/health-info/mental-illness-and-addiction-index/fetal-alcohol-spectrum-disorder), n.d.)

## Dyslexia

Dyslexia is neurobiological and is “characterized by difficulties with accurate and/or fluent word recognition and by poor spelling and decoding abilities.” Other characteristics include reading comprehension. (International Dyslexia Association, n.d.)

## Echolalia

Echolalia is the unsolicited repetition of vocalizations made by another person (when repeated by the same person, it is called palilalia). In its profound form it is automatic and effortless. It is one of the echophenomena, closely related to echopraxia, the automatic repetition of movements made by another person; both are "subsets of imitative behavior" whereby sounds or actions are imitated "without explicit awareness". Echolalia may be an immediate reaction to a stimulus or may be delayed.

Echolalia occurs in many cases of autism spectrum disorder and Tourette syndrome. It may also occur in several other neurological conditions such as some forms of dementia or stroke-related aphasia. (*Wikipedia*, 2022)

## FASD (Fetal Alcohol Spectrum Disorder)

FASDs refer to a collection of diagnoses that represent a range of effects that can happen to a person including hyperactive behavior, difficulty with attention, poor memory, learning disabilities, speech and language delays, intellectual disability, and poor reasoning and judgment skills. (CDC, 2022; CAMH, n.d.)

## On-the-Job-trained (OJT)

Supportive personnel with a variety of educational backgrounds including high school diploma, college diploma and/or certificate (other than CDA), undergraduate degree or training as a speech language pathologist (SLP) or audiologist from a different country than Canada.

An OJT’s education or training may be concentrated in one area (e.g., B.A. in Linguistics) or may be geared toward a certain population (e.g., early childhood education (ECE) diploma). OJTs are not specifically trained in the field of communication disorders and support. (CDAAC, n.d.)

## Perseveration

Perseveration is when someone “gets stuck” on a topic or an idea. It is a term often associated with Autism, but it can also be a symptom of a brain injury, ADHD, and is sometimes present for people with Aphasia. People who perseverate often say the same thing or behave in the same way repeatedly. They can get also get stuck on their emotions, actions, and thoughts. (Morin, n.d.; *Wikipedia*, 2023)

## Prosody

Prosody is the patterns, rhythms, and intonations in spoken language.

## Personal communication boards

A communication board is a device that displays photos, symbols, or illustrations to help people with limited language skills express themselves. The user can gesture, point to, or blink at images to communicate with others.

Communication boards are one type of augmentative or alternative communication (AAC) device. They can be simple, handmade boards or computerized programs. They can be useful in schools, homes, healthcare environments, or any community setting. (Healthline, 2020)

## Preferred Communication Method

Refers to the person’s preference in using their communication methods in a specific situation. For example, in some situations, a person may prefer to use a letter board or answer yes and no questions rather than using their speech generating communication device. (CDAC, n.d.e)

## Psychogenic Aphonia

Psychogenic aphonia is loss of voice due to emotional or psychological stress.

# Appendix A: funding supports[[1]](#footnote-2)

This information is from our scan of funding supports across Canada. We focused on provincial and federal funding programs so other programs organized by NGOs, non-profits or municipalities are not well represented here. A similar scan was conducted from 2015-2017 by the AGE-WELL Network Centre of Excellence and has a broader scope. The results of this scan are available at <https://agewell-nce.ca/wp-content/uploads/2019/01/age-well_jurisdictional-scan_2017_June-30_FINAL.pdf>

## Funding and Services Phone Calls

We made cold calls to several services as part of our scan. Our intention was to see if staff were aware of communication access options were available. When speaking to offices within programs and organizations, the researcher disclosed they were looking for information for research purposes. Many individuals were happy to help, but we recognize that this approach in no way duplicates the experience of someone who has a communication disability. Our goal wasn’t to simulate their experience but to learn from the source what services they understood were available. The researcher’s phone number was not concealed.

### Ontario NIHB Phone call:

We spoke with an [Ontario Non-Insured Health Benefits Representative](https://www.sac-isc.gc.ca/eng/1579274812116/1579708265237) and learned that NIHB does not solely fund communication assistive devices and that the person looking for the support would need to go through ADP and then the NIHB would fund the other 25% not covered. They do not cover speech language pathology therapy. If the service is not covered under the ADP or other government services, then they would look to fund the recommendations. Funding amount is on a case-to-case basis.

### Ontario Direct Funding Phone call:

We spoke with a representative at the [Direct Funding Ontario](https://www.dfontario.ca/) Support office about general funding allocation through the program. We were informed that each funding case varies in the amount that is allocated, but the general amount is enough to cover the average salary of a Personal Service Worker. They confirmed that there is a large waitlist of 2 years, so they encouraged applicants to apply as soon as possible as individuals are accepted off of the waitlist in chronological order. Additionally, they informed that this is a good funding option because while it may seem intimidating to do the bookkeeping and administrative work individually, they offer support to ensure the applicant is capable.

### Saskatchewan NIHB Phone call:

National non-insured health benefits (NIHB) is a national funding program but has different phone numbers for different provinces. We called the NIHB Saskatchewan office to see if funding was administered differently throughout the country. The Saskatchewan office that informed us that devices are fully funded when an SLP intake form clearly demonstrates a need. The SLP will send this intake form to [Bridges Canada](https://www.bridges-canada.com/) who submits the request to the NIHB program. We were told that for funding to be successful it can be helpful if a trial run for the induvial and their support is successful.

### British Columbia phone calls:

We spoke with a representative at [CAYA](https://cayabc.net/eligibility/) to learn and clarify information about how the program works. We were told that this program is a loan program that distributes a spectrum of technical devices to assist with communication. To apply for the program, an SLP associated with CAYA performs an assessment to determine which support(s) are needed. The SLP submits the assessment to CAYA on behalf of the applicant and when approved CAYA distributes the device. We were told that there is no cost for the loan program, and it is funded through the Ministry of Social Development and Poverty Reduction. We asked about wait times for the program and were told that there is a 2-24 month waiting period with an average of 8 months. An individual can use an assigned device indefinitely until they no longer require it, which will then be returned and given out again.

We spoke with a representative at [WorkBC Assistive Technology Services](https://workbc-ats.ca/?gclid=CjwKCAjw_YShBhAiEiwAMomsEILAa1uUisp6Kfsr3IiXqBpG8974CsfDI8imijda72nB25bqX1EeExoCkmMQAvD_BwE) to find out more information about the financial contribution model. We were told that there is a requirement that individuals need to be working when they apply because in most cases it is expected that the individual pays for a portion of the device. A financial needs assessment is completed and submitted when applying to determine how much the applicant is able to contribute to funding the assistive device. In some cases, it may be determined that the individual cannot contribute any money towards the device due to their financial situation and the device may be fully funded through the program. At the end of the call, the representative reiterated that the device is to be mainly used for the workplace or employment purposes. So, while it may be useable in the home, in order to be funded, the device has to be mainly used in the work environment.

### Quebec PMAT COM phone call:

A call with an accessibility advisor at [PMAT COM](https://www.pmatcom.qc.ca/home.html) (Programme ministériel des aides techniques à la communication / Ministerial Program of Technical Aids for Communication) encountered a language barrier between English and French speakers. The understanding taken from the conversation is the process to access AAC is mainly completed by healthcare professionals. When asked about the wait time for a device we were told there is no wait time, but there was confusion about what was meant by wait time and where the wait time is in the process. We did not feel confident that we were getting correct information because of the language barrier.

### Newfoundland and Labrador Regional Health Authority phone call:

We called the [Regional Health Authority in St. Johns](https://www.gov.nl.ca/hurricaneinfo/healthauthorities.htm) to inquire about AAC and the Special Assistance Program. The first person we spoke with did not have very much information about assistive devices and communications supports. When asked how the funding process worked, they told us we would need to contact an intake nurse for more information. They transferred our call and the person indicated they not heard of a communication support (i.e., communication board) being funded and are more familiar with wheelchair and mobility devices being funded. The indicated that funding is done on case-to-case basis and supports are generally fully funded, but we would need to contact the intake nurse for more info.

We called again a couple of days later to clarify some information and learned that the Special Assistance Program does not cover communication supports — we were told it caters to home alterations and access approaches such as feeding tubes and lifts. The Regional Health Authority gave us the number of an OT to call who confirmed that this program does not cover speech supports and was not aware of any funding thatwould aid in communication supports.

### New Brunswick Disability Support Program phone call:

We called Disability Support Program, in the Department of Social Development, to find out if they cover any communication devices and learned that they only cover in house supports and access approaches , such as wheelchair access. If an individual is looking for an assistive communication device, they would need to make a claim through their provincial healthcare care under [medical coverage claims inside NB](https://www2.gnb.ca/content/gnb/en/departments/health/MedicarePrescriptionDrugPlan/content/medicare/CoverageandClaimsInsideNewBrunswick.html). The process was informal and challenging to navigate at times. All intake is done over the phone with no eligibility criteria listed. We were told “there is no standard application process for a [health card through Social Development](https://socialsupportsnb.ca/en/program/social-development-health-card). If you receive supports through Social Development (i.e., Social Assistance, Long Term Care Program) your eligibility will be assessed by the program.”

### March of Dimes Canada phone call:

We spoke with the March of Dimes about their [Tech for Impact](https://www.marchofdimes.ca/en-ca/programs/atech/tfg) Fund — a program that awards money to individuals to purchase assistive technology. We were told that there is an overwhelming number of applicants, and the $50,000 fund is awarded through a semi-annual draw where individuals could be lucky to receive the $2,000 per person allotted sum.

## British Columbia

The government of British Columbia is taking major strides to address the needs of adults with severe communication disabilities. The BC government has funded CAYA and the Assistive technology program through the Ministry of Social Development and Poverty Reduction. The Choice in Supports for Independent Living program and WORKBC through the Ministry of [Post-Secondary Education and Future Skills/.](https://www2.gov.bc.ca/gov/content/governments/organizational-structure/ministries-organizations/ministries/post-secondary-education-and-future-skills)

Communication Assistance for Youth and Adults ([CAYA](https://cayabc.net/)), a provincially mandated program is an AAC loan program for “severe communication disability” funded through the [Ministry of Social Development and Poverty Reduction](https://news.gov.bc.ca/releases/2022SDPR0034-000838). Eligibility requires assessment by CAYA contracted SLPs who determine which AAC device or accessory best suits the applicant. Training and technical support is also provided. https://cayabc.net/eligibility/

The Choice in Supports for Independent Living ([CSIL](https://www2.gov.bc.ca/gov/content/health/accessing-health-care/home-community-care/care-options-and-cost/choice-in-supports-for-independent-living#:~:text=Choice%20in%20Supports%20for%20Independent%20Living%20(CSIL)%20is%20a%20self,their%20own%20home%20support%20services.)) program is a self-directed funds model funded by Ministry of Advanced, Education, Skills and Training. Once approved individuals hire and manage support workers with the goal of tailoring for their specific needs and preferences. To be eligible for CSIL funding, individuals must have a permanent disability and require significant assistance with activities of daily living. They must also be able to manage their own care and be willing to take on the responsibility of hiring and managing their own support workers. Once approved for CSIL funding, individuals are provided with a budget to cover the cost of their support workers. They are responsible for finding, hiring, training, and managing their own support workers, as well as scheduling and coordinating their care. The CSIL program is designed to promote independence and self-determination for individuals with disabilities, and to provide them with more control over their lives.

Students in postsecondary education programs may have access to funding for assistive technology through the [Assistive Technology British Columbia](http://www.at-bc.ca/about-atbc/our-services/) (ATBC) offers assistive technology resources including assessments, assistive equipment, and funding partners. Funded through the Ministry of Social Development and Poverty Reduction. There are two main avenues in which enrolled students with a permanent, persistent, or prolonged disability that demonstrated financial need can apply receive financial support. ATBC offers the Canada Student Grant for Service and Equipment, which provides up to $20,000 per year for services and/ or equipment. The other service that ATBC offers is the Public Postsecondary Loan (PPL) program which loans assistive technology equipment.

[WorkBC Assistive Technology Services](https://www.workbc.ca/discover-employment-services/assistive-technology-services) provides assistive devices, equipment, technology, and communication and hearing devices related to work. The program requires applicants to be currently working and provide a monetary contribution to the program. A financial needs assessment is completed before the application process to determine how much funding each person will receive. Sometimes the funding fully covers devices and sometimes it is a minimal amount but it is all based on the financial assessment.

## Alberta

The [Alberta Aids to Daily Living](https://www.alberta.ca/alberta-aids-to-daily-living.aspx) (AADL) provides speech generating devices for people with severe communication disabilities. The program is a cost-share framework where individuals are responsible for 25% of the product cost (Low-income or individuals receiving income supplement benefits may be exempt from cost sharing). AADL works with Alberta Blue Cross and Alberta Health Services and is funded by the province. The AADL has the [Speech Generating Communication Device Benefit](https://open.alberta.ca/dataset/14eb397b-4f46-4ef0-b4e3-a83f9b8b5a30/resource/0f575d91-509a-4f63-b0bf-0166d864c388/download/health-aadl-program-manual-section-as-2022-06.pdf). [Eligibility for AAC](https://www.alberta.ca/assets/documents/aadl/aadl-speech-information-sheet.pdf) requires individuals be assessed by clinicians in an approved [Speech Generating Communication Device Service Centre](https://www.alberta.ca/assets/documents/aadl/aadl-sgcd-centres.pdf) (SGDS).

The [approved device list](https://open.alberta.ca/dataset/14eb397b-4f46-4ef0-b4e3-a83f9b8b5a30/resource/10ea0efc-c2ba-4f17-bd41-0e78abedc235/download/health-aadl-apl-as-speech-generating-communication-devices-aug-2022.pdf.) is available to the public level and is grouped by the following categories: alphabet-based devices, simple static display devices, dynamic display devices, iPad-based speech generating communication devices, surface touch bundles, mounting equipment, access equipment, complex access equipment, and device repair (one per year).

## Saskatchewan

[Saskatchewan Assured Income Disability (SAID)](https://www.saskatchewan.ca/residents/family-and-social-support/people-with-disabilities/income-support-for-people-with-disabilities) is an income support program for people who lack financial resources to provide basis needs and have a significant and enduring disability that is either permanent, substantially impacts daily living, and results in a person requiring assistance in the form of a device, person, service animal or other.

There are three main components of SAID: 1) The living income which is a fixed amount of money to be used at recipients' discretion, 2) The disability income which is intended to help with costs related to the impact of disability, and 3) The exceptional need income which helps individuals with several different circumstances. To apply for SAID one can apply online, via phone or visit their local Social Service Office.

SAID is awarded based on financial need, so to apply one must present information about their living situation, financial earnings, and other benefits they are receiving. There is an exemption cut off, where if individual makes more than $6000, couples more than $7200 and families more than $8,5000, then [SAID Funding](file:///C:/Users/shalainesedres/Downloads/SAID-income-exemptions-QAs-Nov2020.pdf) is reduced by a dollar for each dollar earned once the exemption limit is reached.

[Self-Directed Funding (SDF)](file:///C:/Users/shalainesedres/Downloads/SDF+Guidebook.pdf) is a Community Living Service Delivery (CLSD) funding option the provides individual the opportunity to hire their own supports. SDF was designed to enable individual to have greater choice, control, flexibility and independence. To be eligible for funding the applicant must be diagnosed with an intellectual disability with an onset before the age of 18. Eligibility is based on previous medical documentation and assessment report conducted by a qualified medical practitioner. Funding can be used to provide residential supports or community Inclusion Supports/Day Programming. CLSD awards funding based on a prioritization process with the most urgent cases being fast tracked.

The [Kinsmen Foundation Charity](https://telemiracle.com/kinsmen-foundation/) is a charity that runs a telethon to collect money to fund assistive communication devices. The organization meets 9 times a year to discuss funding awards to applicants.

## Manitoba

The Employment and Income Assistance Department offers a few funding avenues for individuals seeking AAC funding. [The Communication Devices Program](https://deerlodge.mb.ca/clinics-at-dlc/cdp/) provides individual with severe communication disorders access to speech generating devices and related equipment. The CDP's mandate is to ensure that SGDs are available and affordable to all eligible adults in Manitoba, and it is funded by the Employment and Income Assistance Department of the Manitoba Government. The program offers a range of services, including clinic loans for clinicians, no-cost trials of SGD systems, prescription and rental of SGD equipment, and the option to purchase rented equipment after 4 years at a reduced cost. The program also requires that clients or their support team are capable of caring for the equipment. To ensure affordable supports, the program offers a no-cost trials of SGD, there is a monthly fee of $20 with the option after 4 years to purchase at a reduced cost. [via phone with someone at Deer Lodge]

[The Telecommunication program](https://www.gov.mb.ca/health/mhsip/telecommunications.html) is a Manitoba Health program that provides financial assistance for telecommunication equipment to conduct telephone conversations by keyboard and display terminal instead of voice. To be eligible individuals need to have a speech impairment as diagnosed by a medical practitioner specialist in otolaryngology. Manitoba Health covers 80% of the equipment cost up to a maximum of $428. There is a $75 deductible on all claims, and initial claims must be accompanied by a diagnosis from a medical practitioner specializing in otolaryngology or an audiologist. The program reimburses for one telecommunications device every five years.

[The Disability and Health Support Unit](https://www.gov.mb.ca/fs/dhsu/) (DHSU) provides financial assistance to eligible low-income Manitobans. The unit may offer funding for technical aids and devices to overcome disability related barrier to training and employment. These [aids and devices may include](https://www.gov.mb.ca/wd/ites/vrmanual/166.3.html), but are not limited to, specialized computers, adaptive software, hearing aids, communication devices, and mobility aids. Requests for funding totaling more than $1,000 must be supported by price quotations from three suppliers, with priority given to Manitoba suppliers.

## Ontario

The main funding program for AAC in Ontario is the [Assistive Device Program](https://www.ontario.ca/page/assistive-devices-program) (ADP). The program covers 75% of the cost of a device and individuals pay for the remaining 25% (in some cases, ADP will cover the entire cost if the individual receives financial support from Ontario Works, Ontario Disability Support Program or Assistance for Children with Severe Disabilities). The [category list of AAC](https://www.ontario.ca/page/communication-aids#section-1) are voice prostheses, voice amplifiers and electrolarynges, communication display boards, speech-generating devices, writing aids, assistive-technology software and hardware for writing aids and speech generating devices, and mounting equipment. The [program also covers](https://www.ontario.ca/page/communication-aids#section-1) mounting for communication aids used to attach communication aids to a wheelchair or table. The program does not consider income, making the only requirement for applying to be having a long-term disability.

In most cases the other 25% of cost is paid, however, in some cases, ADP can cover the entire cost if the individual receives financial support from Ontario Works, [Ontario Disability Support Program](https://www.ontario.ca/page/ontario-disability-support-program-employment-supports) or Assistance for Children with Severe Disabilities. ODSP can help with some of the costs that the Assistive Devices Program does not cover. The Assistive Devices Program does not cover the assessment fee for assistive devices, but ODSP may cover the assessment fee if no other source covers it. You need to get pre-approval from your local ODSP office for all assessment fees over $500.

[Direct Funding](https://www.dfontario.ca/) is a self-directed funding model that enables individuals with physical disabilities to hire, train and schedule attendants to suit their needs. Anne Abbot, the first non-verbal recipient of the fund. Through Centre for Independent Living in Toronto (CILT), the original fund administrator, Anne was able to hire and train attendants to suit her communication needs, and not rely on assigned attendant care facility staff, a less personalized experience. There remains an enormous wait list of 2 years for an interview reflecting the reality of minimal funding options for AAC supports.

## Quebec

"Programme ministériel des aides techniques à la communication" (PMAT COM) (English Translation: "Ministerial Program of Technical Aids for Communication) is a device lending model. The [assistive technology devices covered](https://www.pmatcom.qc.ca/home.html) by PMATCOM fall under five (5) categories: Speech aids (e.g., voice amplifiers), AAC aids, adapted telephones, computer access, environmental control devices. PMATCOM distributes and recovers devices and individuals are expected to renew their equipment loan annually. Eligibility is determined by a SLP or OT who send their assessments and recommendations directly to PMATCOM.

## New Brunswick

Searching for AAC funding proved challenging when the government site included minimal information about disability funding options. [The Disability Support Program](https://www2.gnb.ca/content/gnb/en/services/services_renderer.200972.Disability_Support_Program.html) was the only promising support for AAC funding.

## Newfoundland and Labrador

There are no AAC specific funding programs in the province of Newfoundland.

After looking for possible general funding programs for disabilities that may be used for AAC supports, the only promising program was the [Special Assistance Program](https://www.gov.nl.ca/hcs/personsdisabilities/fundingprograms-hcs/#sap). However, after a phone call with a regional health authority, it was disclosed that this programs mainly focuses on mobility devices and they have not yet supported a person with a communication disability. After being directed to get in contact with a healthcare professional (e.g., speech language pathologist) they submit to the program. It seemed that there are no protocols or awareness around communication disability and funding for AAC supports.

## PEI

[AccessAbility Supports](https://www.princeedwardisland.ca/en/information/social-development-and-housing/accessability-supports) (AAS) (previously Disability Support Program). The program includes financial support, vocational training, personal supports, technical aids, and assistive devices, including [communication devices](https://www.princeedwardisland.ca/sites/default/files/publications/2.6_technical_aids_and_assitive_devices.pdf) (type of device is not clear at the public level). Individuals can apply for AAS if they are “a person with [a disability diagnosed by a medical practitioner](https://www.princeedwardisland.ca/sites/default/files/publications/1.1_eligibility.pdf).” To qualify for funding a [Support Needs Assessment](https://www.princeedwardisland.ca/sites/default/files/publications/1.3_support_assessment_policy.pdf) (SNA) is conducted based on disability support and financial support needs. The assessment is conducted by a coordinator who provides direction and case management support. Support may be fully funded or partially funded.

There are no clear guidelines for amounts, specific types of devices, or instructions for who to get in touch with to start the application process.

## Nova Scotia

[The Disability Support Program](https://novascotia.ca/coms/disabilities/index.html) (DSP) serves individuals with intellectual disabilities, long-term mental illness and physical disabilities in a range of community-based, residential and vocational/day programs.

The [Flex Program](https://ocaduniversity.sharepoint.com/teams/Team_CommunicationAccess/Shared%20Documents/General/REPORTS%20(1,2%20%26%203)/Report%20Archive/REPORT%202_Scope%20of%20Accommodations%20%26%20Supports/v) is one program within the DSP that provides self-directed and self-managed funds of $500- $3800 per month to allocate to supports. It is unclear if communication support workers and AAC qualify as supports under the Flex Program.

## Northwest Territories, Nunavut, and Yukon

The Northwest Territories [funding program public resource page](https://www.gov.nt.ca/en/services/funding-programs?field_funding_eligibility_tid%5B0%5D=211&page=1) has many categories to search for funding within — but it does not have a disability category. Looking further into the [Income Assistance Program](https://www.ece.gov.nt.ca/en/services/income-security-programs/income-assistance-program) for possible disability funding opportunity (AAC in particular) reveals criteria limited to shelter and utility needs and does not include disability supports in its public facing information.

When making a call to the coordinator, they were out of office and no other staff had funding information.

In Nunavut most funding options for people with disabilities focus on mobility funding and supports (e.g., The Nunavut Solutions Grant).

Yukon has access to the [Robert R. Heinrich Equipment Loan Program](https://www.alsbc.ca/programs-services/equipment-loan-program/) through ALS Society of British Columbia, a charitable organization. Eligibility to receive AAC requires a request from a healthcare professional. Once received equipment is prepared for shipment within two days.

## First Nations & Inuit

The [Non-insured Health Benefits](https://www.sac-isc.gc.ca/eng/1572537161086/1572537234517) (NIHB) for First Nations and Inuit is a program funded by the Government of Canada to provide eligible First Nations and Inuit with coverage for a range of health benefits. The program available to registered First Nations people living on reserve, recognized Inuit and eligible First Nations people and Inuit living off reserve. The program covers the costs of communication devices. In provinces that do not have communication specific funding such as Saskatchewan, the NIHB will provide full funding for the AAC support. If the province has a program that funds AAC supports, then the NIHB will cover costs not covered through the other funding option. For example, in Ontario, a communication board would be 75% funded through the ADP program and the other 25% would be supplemented by the NIHB. Many health benefit providers are enrolled with NIHB and paid directly by the program for eligible benefits provided to NIHB clients, making the application process easier for people with disabilities. By the Canadian government establishing this program, [AAC supports may be funded](https://www.sac-isc.gc.ca/eng/1590092102471/1590092155266#s12-3) in Territories with limited disability funding.

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1. AccessATCanada is a searchable database of AT funding and service programs in Canada and can provide additional information <https://www.accessassistivetech.ca/home> [↑](#footnote-ref-2)