

Social Planning Council of Ottawa

Disability Profile of the City of Ottawa

A Profile of Persons with Disabilities in Ottawa
Based on the 2006 Census

November, 2010

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Summary

A Snapshot of Disability in Ottawa

Ottawa's disability prevalence increased during the period 2001-2006. In 2006, 149,425¹ people in Ottawa had disabilities, representing 17.7% of Ottawa's population. This represents a 20.7% increase since 2001 (25,625 more individuals). The prevalence of disability in Ottawa was 2.2% higher than the overall prevalence in Ontario².

The large cohort of persons with disabilities are of working age. Over half of people with disabilities in Ottawa were within the working age groups 20-64 in 2001-2006, a significant 16% of the city's working age population in 2006. This highlights the importance of effective workplace and labour market policies related to accommodation of disabilities. The second age group of importance are seniors. One third of persons with disabilities are over the age of 65. Many of them have developed age related disabilities.

One third of both unattached individuals and families³ reported disabilities in 2006. This included 5,555 lone-parent households (the majority were women). In addition, families and unattached individuals (35,520) who are single income households⁴ are at a higher risk of poverty. Nearly three quarters of unattached individuals live alone, and thus are at risk of isolation.

Diversity of the Population with Disabilities

People with disabilities are culturally and linguistically diverse. In 2006, 3,250 persons with disabilities were of Aboriginal identity, representing 2.2% of all people with disabilities. 25% were immigrants — most arrived in their early years and have age related disabilities. A significant percentage belongs to racialized groups, who often faced multiple discriminations. In 2006, 15.1% were visible minorities⁵ (Canadian-born and immigrants).

There was a very significant increase in Francophones⁶ with disabilities 2001- 2006. The number of Francophones with disabilities in Ottawa increased by 47.9% between

¹ Data for Ottawa-Gatineah CMA (Ontario Part)

² Statistics Canada, 2007, p. 20.

³ Economic families.

⁴ Private households.

⁵ These groups are defined in the Employment Equity Act as "persons, other than Aboriginal peoples, who are non-Caucasian in race or non-white in colour."

⁶ The Social Planning Council uses a custom definition of "Francophone" which was negotiated with representatives of the Francophone community and then used to purchase custom data from Statistics Canada. Please see the definition in the Glossary of Terms.

2001 and 2006 (10,340 individuals) compared to an overall increase in the Francophone population of only 21%. In 2006, Francophones with disabilities totalled 31,915 (21.0% of Ottawa's total Francophone population). Their prevalence of disability was, 3.4% higher than that of the general population. A leading challenge for unilingual Francophones with disabilities in Ottawa is accessing French-language services. Of even greater concern is the access to services of Francophones who belong to vulnerable groups.

This language service gap reflects the importance of access to services for people with disabilities in French or other non-official languages. In 2006, 3,345 persons with disabilities were unilingual Francophones and 4,120 did not speak English or French. The top five non-official mother tongues of persons with disabilities in this year were: Arabic, Creoles, Spanish, Somali and Vietnamese.

Key Factors that Impact the Economic Exclusion of People with Disabilities

- a) **Access to education.** Barriers to access education remain. This compromises the level of education, labour market integration and future economic security of persons with disabilities. Individuals with disabilities often take more years to complete their education because of their disability. Supports to ensure the completion of their education are crucial. In 2006, people with disabilities 25-64 years who had not completed a certificate, diploma or degree doubled the percentage in the general population (16.3% vs. 8.1%). In this age group, persons with disabilities surpassed the percentage in the general population with high school and trades education. The largest gap was at university level (31.2% vs. 43.6%).
- b) **Access to quality employment and adequate income.** Dramatic changes in the labour market in the past twenty years have eroded the quality of jobs. Persons with disabilities face additional obstacles to access employment that exacerbate their economic exclusion. This is particularly the case of young adults who face difficult transitions from school to work.

Growth of non-standard jobs. The growth of non-standard jobs is an increasing concern for the overall population. Precarious characteristics of non-standard jobs off-set the flexibility they could provide for persons with disabilities (e.g. part-time work). 43.3% of persons with disabilities aged 15 years and over worked part-time or part-year in 2006, an increase from 41.6% in 2001. Research findings indicate that many people with disabilities willing to work full-time cannot find suitable jobs and the accommodation they require.

Having a job does not guarantee an adequate income. 7,060 employed persons with disabilities still lived in poverty before taxes in 2005 (13.3% vs. 10.1% in the general population). This was also the case of 2,115 workers with a full-time/full-year job. The phenomenon of "working poor" is primarily the result of low wages in jobs held

by workers in their prime working years. 74.4% of working poor individuals with disabilities were aged 25-54.

Self-employment as an option without adequate support. 7,275 persons with disabilities were self-employed in 2006. 15.1% of self-employed in the general population. There is interest on this employment alternative. However, benefit rules, funding and lack of service providers with the appropriate expertise act as barriers. Small entrepreneurs who belong to ethnic minorities and visible minority groups also lack access to appropriate culturally and language sensitive services.

Home based work as an alternative without adequate accommodation. In 2006, 15.8% (4,970) of Ottawa residents 15 years and over working at home were persons with disabilities. For some, this is a personal choice while for others it is the result of the lack of workplace accommodation. In most cases the working-at-home employee has to bear all accommodation expenses, an impossible task for those with low income.

- c) **Accessible, safe and affordable housing.** There is a profound shortage of quality and affordable housing that impacts the safety and independence of persons with disabilities. 5,705 families and 3,530 unattached individuals with disabilities lived in houses requiring major repairs in 2006. The economic capacity of individuals and families to afford the costs of home modifications is a key factor. 6,855 renter households and 6,490 owner households spent 30% or more of their income on rent or mortgage payments. This is the accepted measure of unaffordable housing. As well, 8,840 unattached tenant households and 2,145 owner households were in unaffordable housing.
- d) **Incidence of poverty,** people with disabilities are overrepresented among the poor. Barriers to access employment and inadequate employment supports translate into a high incidence of poverty. A ‘safety net’ that does not respond to economic reality accentuates the problem. In 2006, 21.0% of people with disabilities lived on a low income (before taxes) in Ottawa, compared to 15.2% in the general population. The poverty rate after taxes showed some improvement (17.0%). One income households, including unattached individuals and lone-parent families exhibited the highest poverty levels. Their poverty rates were 42.6% and 52.1%, respectively. Inadequate support for caregiver families is a main factor on the overrepresentation of children living in poverty. 27.4% of children under 15 years with disabilities lived in poverty, compared to 19.2% in the general population.
- e) **The ‘safety net’ response to economic reality,** policies, income, education and employment support programs have not adequately addressed economic inclusion of persons with disabilities. Restrictive eligibility criteria, the system’s complexity and disability benefits that place individuals below the poverty line have left persons with disabilities with no alternatives, but poverty. As a result, the system itself is contributing to a process of exclusion, stigmatization and perpetuated poverty. Of urgent concern are:
- Low ODSP and OW benefit level

- Low approval rates in ODSP Ontario applications that force people with disabilities to apply to OW
 - Pending cuts to the Ontario Special Diet Allowance
 - A fact that most people out of work in Ontario do not qualify for employment benefits (This severely impacts people with disabilities who are at a higher risk of work interruptions and non-standard jobs).
 - Inadequate supports to caregiver families to respond to changes in the labour market, the housing market, and the demographic trends, such as the impact of the aging population on caregiving.
- f) **Access to adequate supports and services.** Appropriate supports are commonly difficult to access at different transitional stages of the life cycle. Service and agency silos are on themselves a major barrier. There are significant disruptions in access to services as young children move into the school system and again out of high school in the transition to young adulthood. People with disabilities face many barriers as they are more in and out of employment that affect people with non-standard jobs. As well, there are significant challenges to successfully aging for people with disabilities.

Disability Across the Stages of Life

Children and youth with disabilities are culturally and linguistically diverse. In 2006, 6.7% of children and youth in Ottawa aged 0-19 had disabilities. The largest cohort was of youth aged 15-19 (32.8%). Their diversity included children and youth of Aboriginal identity (3.7%), Aboriginal ancestry (7.9%), immigrants (10.5%), visible minorities (28.3%) — both Canadian-born and immigrants and Francophones (18.3%). These children face challenges in accessing special education services that take into consideration language and cultural differences.

Working age individuals aged 20-64 with a higher participation rate. In 2006, 85,700 (16.0%) working age persons 20-64 reported disabilities. Their participation rate increased on this age group (63.4%), but their unemployment rate continued to be high (7.0%). Working age persons with disabilities are overrepresented in part-time and temporary jobs and comprise a significant portion of the full-time/full year working poor. In 2005, there were 1,845 (6.1%) workers 25-64⁷ in this category. Lack of accessibility and accommodation, inadequate supports, attitudes and prejudices are significant obstacles to access employment for persons with disabilities. 57.3% were not in the labour force in 2006, almost twice of the percentage in the general population (30.5%).

A significant percentage of seniors with disabilities act as unpaid or informal caregivers. In 2006, 49,770 seniors 65 years and over had disabilities in Ottawa (53.4%). 3,305 (5.2%) were employed and 1,350 were self-employed. Unpaid work included 6,765 seniors providing childcare and 8,455 providing senior care. The role of seniors taking care of other seniors is expected to increase with the aging population trend. This in-kind

⁷ Data for Ottawa Census Subdivision.

contribution fills the gap of services in the system, particularly the lack of cultural and language sensitive services. Seniors' unpaid childcare may include their own children or the support to younger families to enter the labour force, particularly in the case of immigrant families.

The housing design in both the private and social market, fails adequately to incorporate elements that would facilitate aging in place. As seniors' mobility decrease and accommodations in the house are not possible, they have few options, particularly if they are low income. Some seniors with no alternatives become trapped in their rooms, when their mobility deteriorates. Contributing to this situation is the deficit of social housing that offers some units adapted for persons with disabilities. In 2009, there were approximately 10,000 households on the waiting list for social housing. Estimated waiting times are between 5-8 years. In 2006, 1,230 senior families and 815 unattached seniors with disabilities lived in low quality housing (requiring major repairs). Poverty levels and unaffordable housing were key factors. 14.0% seniors with disabilities lived in poverty.

Gender and Disability

More women (54.7%) than men have disabilities, particularly in their older years. This emphasizes the importance of gender sensitive services for persons with disabilities. Women have exceeded men's education attainment. More women than men with disabilities have postsecondary education. However, women's employment continues to be concentrated on traditional fields of education with a significant gap on science-based occupations compared to men. Women earn less than men. Their lower median employment income is 78.2% of that of men. This is significantly related to a lower percentage working full-time/full-year work (46.5% vs. 53.5%). Their economic exclusion is observed on their overrepresentation on incomes under \$20,000 and higher poverty rates than those of their male counterparts (57.6% vs. 42.3%).

Introduction

This report presents a portrait of disability in the City of Ottawa as reflected in the 2006 census. It is divided into five sections:

- A snapshot of disability in Ottawa, highlighting the number of people with disabilities and some concepts to understand what disability in Ottawa means.
- An overview of factors that impact the inclusion of persons with disabilities.
- An exploration of the diversity of the population with a disability in Ottawa,
- An examination of disability in the life cycle, highlighting age groups that reflect eligibility criteria to programs and services.
- Conclusions.

The primary data of this report is based on custom data purchases of the 2006 Census from Statistics Canada. The second source of data is Community Social Data Strategy⁸, Urban Poverty Project 2006 (2006 Census). Please note that income and therefore poverty data provided in 2006 is based on incomes in the full-year prior to the census survey (i.e. 2005 in the case of the 2006 census).

Most of the report is based on Statistics Canada boundary of the census metropolitan area (CMA), identified by Statistics Canada, as “Ottawa-Gatineau Census Metropolitan Area (Ontario Part). This is an area slightly larger than the City of Ottawa proper (census subdivision), and includes a few areas within Russell Township on the east. In a few clearly defined cases we have used data for the census subdivision of the City of Ottawa. We use CMA data because comparable data was not available to us at the census subdivision level.

This report is complemented by a mapping supplement exploring the geography of disability in Ottawa. These are available on the Community Information and Mapping System at www.cims-scic.ca and at www.spcottawa.on.ca/publications_eng.

We gratefully acknowledge the United Way / Centraide Ottawa, which has generously provided funds to the Social Planning Council to produce this report.

The analysis of this report reflects the opinion of the SPCO.

We hope that the findings of this report will assist policy makers, service providers and community members to advocate, develop and support the inclusion of persons with disabilities. The evidence presented in this report indicates that disability affects the entire society, whether one has a disability or not. The inclusion of persons with disabilities has a direct impact on the current and future economic growth of the City and the quality of life of its residents. “Workers with disabilities are part of the solution of predicted labour shortages and associated economic decline” (John Dale, 2009a &b).

⁸ For more information on the Community Social Data Strategy contact the Canadian Council on Social Development or visit <http://www.csd-sacass.ca>.

1. A Snapshot of Disability in Ottawa

What do we mean by a Disability?

We believe that it is not the specific limitations that make people disabled, but systemic barriers that excludes and make them unable to function in society. Deborah Stienstra (2002) reaffirms this fact. “The physical or mental differences.....are not significant in and of themselves. They become significant only in the capacity of societies to accommodate or address these differences”. Our analysis focuses on issues that need to be addressed to achieve the full participation of persons with disabilities in the society. “If your basic needs are met through appropriate income and access, then ‘disability’ becomes something completely different” (SPCO, 2006b, p.10).

We define exclusion as a dynamic, complex, and multi-dimensional process as a result of which certain groups find themselves on the margins of society. This is demonstrated by outcomes of lower economic and social status, combined with a lack of power to change these outcomes. Exclusion is a process and an outcome. It is experienced at both the individual and community level. Conversely, social inclusion assures each citizen that he or she will be provided with the opportunity to fully participate in realizing aspirations. Social inclusion relies on active civic participation to identify the barriers to access and to ensure that people have a collective sense of belonging to their society.

Instead of using the term “persons with a disability”, Statistics Canada uses the term “person with an activity limitation”. Statistics Canada defines this as: Any limitation on activity, restriction on participation or reduction in the quality or type of activities because of a physical, mental or health problem. Activity limitation includes difficulties in hearing, seeing, speech, walking, climbing stairs, bending, earning or any other difficulty in carrying out similar activities, and conditions or health problems that have lasted or are expected to last six months or more.

Through this report we use “activity limitation” and “disability” interchangeably, although they are slightly different. It should be noted that the expression “with disabilities”, “with a disability”, “with activity limitation” and “with activity limitations” include those with one or more disabilities. It is important to note that the data does not include people living in institutions

Prevalence of disability⁹ increased during the period 2001-2006

The population with disabilities experienced a significant increase during the period 2001-2006 in Ottawa and in the country as a whole. In 2006, 149,425 people in Ottawa¹⁰

⁹ Disability prevalence/incidence/rate is the percentage of individuals in the general population who have a disability.

¹⁰ Data for Ottawa-Gatineau CMA (Ontario part)

had disabilities, representing 17.7% of Ottawa’s population. This was a 20.7% increase in the number of people with disabilities since 2001 (25,625 more individuals). The prevalence of disability in Ottawa was 2.2% higher than the prevalence in Ontario¹¹. Two major factors that influenced this increased were the aging population trend and an increased social acceptance of disclosing a disability, particularly in the case of learning and mild disabilities (HRSDC, 2009). The table below presents the prevalence of disability in Ottawa during the period 2001-2006.

| Prevalence of Disability or Disability Rate by Age Group, Ottawa-Gatineau CMA (Ontario part), 2001-2006 | | |
|--|------------------------|---------------|
| Age Group | Disability Rate | |
| | 2001* | 2006** |
| Total Population | 15.5% | 17.7% |
| Children 0-19 | 5.8% | 6.7% |
| 0-4 | 3.7% | 4.4% |
| 5-14 | 6.4% | 7.1% |
| 15-19 | 6.5% | 8.0% |
| Working-age 20-64 | 13.7% | 16.0% |
| 20-54 | 11.7% | 13.5% |
| 55-64 | 26.0% | 27.7% |
| Seniors 65+ | 46.7% | 47.9% |
| 65-74 | 39.3% | 40.6% |
| 75+ | 55.3% | 55.6% |
| * Data for Ottawa City | | |
| ** Data for Ottawa-Gatineau CMA (Ontario Part) | | |
| Source: Disability and Community Profiles, Statistics Canada, 2001 & 2006 Censuses | | |

Maps 1 and 1A show the number and percent of people with a disability in the Ottawa-Gatineau Census Metropolitan Area in 2006, by Census Tract.

The Participation and Activity Limitation Survey (PALS) shows that the highest prevalence rates by type of disabilities across Canada in 2006 were pain, mobility, and agility/dexterity. These disabilities are more prominent among the senior population. The table below presents the prevalence by type of disability in Canada for the population 15 years and over.

¹¹ Provincial data from the *Participation and Activity Limitation Survey (PALS) 2006 and 2001*, Statistics Canada.

| Prevalence by Type of Disability for Adults 15 Years and Over in Canada, 2006 | |
|--|------------------------|
| Type of Disability | Disability Rate |
| Pain | 11.7% |
| Mobility | 11.5% |
| Agility/Dexterity | 11.1% |
| Hearing | 5.0% |
| Seeing | 3.2% |
| Learning | 2.5% |
| Psychological | 2.3% |
| Memory | 2.0% |
| Speech | 1.9% |
| Developmental | 0.5% |
| Other | 0.5% |
| Source: PALS, Statistics Canada, 2006, p.29 | |

More than eight out of ten Canadians are affected by multiple or cross-disabilities. In 2006, 81.7% persons with disabilities 15 years and over reported two or more disabilities. The presence of multiple disabilities impacts the severity of the disability of an individual. In 2006, one in four (39.8%) adults with disabilities in this age group had severe or very severe disabilities. 60.2% had mild or moderate disabilities (Statistics Canada, 2007, p.35-36).

Large cohort of persons with disabilities are of working age

In general, the percentage of the general population with disabilities is smaller for younger age groups and increases substantially for older age groups. In 2006, one third of people with disabilities in Ottawa were 65 or over. We can expect the number of persons with disabilities to increase as Ottawa's population ages. There is a concern that the health system is not equipped to meet the service demands of the growing population of seniors with disabilities (CCDS, 2009b). Women are more likely to have a disability than men. Among other factors, this is related to higher percentage of women among seniors. In 2006, 45.3% of people with disabilities in Ottawa were men and 54.7% were women.

The incidence of disability increases with age. However, the analysis indicates that the large age cohort is in the working age population. Over half of people (85,700) with disabilities in Ottawa were within the working age groups 20-64 in 2001-2006, a significant 16% of the city's working age population in 2006. This highlights the importance of effective workplace and labour market policies related to accommodation of disabilities. The second age group of importance are seniors. The following table presents the distribution of people with disabilities by age group between 2001-2006.

| Distribution of People with Disabilities by Age Group, Ottawa-Gatineau CMA (Ontario part), 2001-2006 | | | | |
|---|-------------------------------------|----------------|-------------------|---------------|
| Age Group | Population with Disabilities | | | |
| | Number | | Percentage | |
| | 2001* | 2006** | 2001 | 2006 |
| Total Population | 119,855 | 149,425 | 100.0% | 100.0% |
| Children 0-19 | 11,300 | 13,940 | 9.4% | 9.3% |
| 0-4 | 1,645 | 2,025 | 1.4% | 1.4% |
| 5-14 | 6,460 | 7,340 | 5.4% | 4.9% |
| 15-19 | 3,195 | 4,575 | 2.7% | 3.1% |
| Working-age 20-64 | 66,995 | 85,700 | 55.9% | 57.4% |
| 20-54 | 49,010 | 59,690 | 40.9% | 39.9% |
| 55-64 | 17,985 | 26,010 | 15.0% | 17.4% |
| Seniors 65+ | 41,550 | 49,780 | 34.7% | 33.3% |
| 65-74 | 18,880 | 21,855 | 15.8% | 14.6% |
| 75+ | 22,670 | 27,925 | 18.9% | 18.7% |
| * Data for Ottawa City | | | | |
| ** Data for Ottawa-Gatineau CMA (Ontario Part) | | | | |
| Source: Disability and Community Profiles, Statistics Canada, 2001 | | | | |

One third of families and unattached individuals have a disability

In 2006, one third of Ottawa's families¹² had a disability (72,255). 25.2% were couple families with children under 18 years (18,175) and 7.7% (5,555) lone-parents (the majority were women). As well, nearly one third (35,520)¹³ of unattached individuals in Ottawa had a disability. They are one income households¹⁴ at a higher risk of poverty. Nearly three quarters of unattached individuals live alone, and thus are at risk of isolation.

Research findings suggest that single parenthood of persons with disabilities, is influenced by restricted benefits eligibility criteria. Economic pressure exerted by social programs on partners, can lead to divorce or separation. In 2006, a slightly higher percentage of persons with disabilities were separated, compared to the general population (4.4% vs. 3.3%). The incidence of divorce was notably higher as well (10.4% vs. 7.3%). "The financial benefits are to divorce and break-up the family. That needs to change" (NCOR, 2001, p.10). The table below presents the disability rates of families and unattached individuals in the City of Ottawa.

¹² We use in this report data for economic families. Please see definition in the Glossary of Terms.

¹³ Data for Ottawa-Gatineau CMA (Ontario Part)

¹⁴ Refers to any one person or group of persons residing in a private dwelling.

| Disability Rates for Families, Individuals and Unattached Individuals, City of Ottawa, 2006 | | |
|--|--------------------------------------|----------------------------|
| | Persons with Disabilities | Disability Rate |
| Type of Family or Household | | |
| All economic families (includes other families) | 72,255 | 32.7% |
| Two income families: | | |
| Couples without children under 18 years | 39,885 | 37.6% |
| Couples with children under 18 years | 18,175 | 23.6% |
| Families or households likely to have only one income: | | |
| Lone parent families with children under 18 | 5,555 | 29.5% |
| Unattached people** | 41,790 | 29.9% |
| Living Arrangements** | | |
| Unattached people living alone | 30,280 | 33.6% |
| **Data from Ottawa-Gatineau CMA (Ontario Part) | | |
| Source: CSDS UPP06 Table 10EF-A, EQ1550-O5A and Disability Profile, Statistics Canada, 2006 Census | | |

2. Diversity of the Population with Disabilities¹⁵

As in the general population, persons with disabilities are very diverse in terms of culture and language. Despite the value of this diversity, some population groups have historically faced particular barriers, which contribute to their economic exclusion. These groups (also called equity seeking groups¹⁶) include the Aboriginal population, immigrants (especially recent immigrants) and visible minority groups. Persons with disabilities who belong to these groups face additional barriers.

The literature indicates that the Aboriginal population is at a higher risk of having a disability. In 2006, the incidence of disability (26.5%) in the total Aboriginal identity population in Ottawa surpassed the disability rate of both Ottawa and Ontario (17.7% and 15.5%, respectively). The census indicates that 3,250 persons with disabilities were of Aboriginal identity, representing 2.2% of all people with disabilities. The percentage of people with disabilities who identified as having Aboriginal ancestry was higher (4.5%). National research shows that Aboriginal adults with disabilities are almost twice as likely to be out of the workforce as Aboriginal adults without a disability. A main factor of economic exclusion of the Aboriginal population is the history of colonization between Canada and Aboriginal residents. This included the creation of the system of reserves, the legacy of the residential schools, and a history of different social and legal rights. Further research is needed to understand the specific circumstances of people with disabilities in Ottawa of Aboriginal identity, and the implications for services.

¹⁵ Data in this section is from Ottawa-Gatineau CMA (Ontario Part)

¹⁶ Depending on the legislation or policy, the definition of equity seeking group may also include women, Francophones, and gay, lesbian, bi-sexual and trans-gendered people. They may or may not include immigrants explicitly, except to the extent that they are within the other groups (e.g. visible minority).

In 2006, 25% of people with disabilities were immigrants in Ottawa; slightly higher than the percentage of immigrants in the general population (at 22.2%). Only 2.3% were recent immigrants. In the same year 1,125 refugees had their claims accepted and were granted permanent resident status. Their experience of persecution and torture increases their likelihood of having a disability (SPCO, 2009 ps.11 & 31). Research studies indicate that refugees do not have adequate access to services that assist their integration.

Data by period of arrival indicates that immigrants who arrived many years ago have developed disabilities related to age. As well, further research would be necessary to determine if the patterns of disability are related to the type of work undertaken by many immigrants who arrived in earlier periods, such as construction. Factors that contribute to the economic exclusion of immigrants and refugees are policies and practices particular to these populations. Included are delays in the naturalization process, some restrictions on who can work, inflexible sponsorship policies, poor recognition of foreign acquired credentials.

Research findings note that people with disabilities who belong to visible minority groups, often face multiple discriminations. They are more likely to be exposed to more severe unequal treatment and this influences their underutilization of services. Among the contributing factors are language barriers and incompatibility of the mainstream service system for this group of population (Stienstra, D. 2002). Census data shows that a significant percentage of the population belong to racialized groups. In 2006, 16.0% of the general population were visible minorities – Canadian-born and immigrants (SPCO, 2008, p.61-64). 15.1% of total population with disabilities were visible minorities. These groups are defined in the Employment Equity Act as “persons, other, than Aboriginal peoples, who are non-Caucasian in race or non-white in colour.”¹⁷

Mental health associations state that research on evidence-based practice programs in Ontario has been critiqued for a lack of attention to the experiences and needs of racialized populations with disabilities, particularly in mental health issues (CAMH & CMGA, 2010, P.6). It is critical that governments, service providers, the private sector and the society in general understand the diversity of people with disabilities. Thus, more appropriate and comprehensive policies, programs and services should be developed

The language composition reflects the importance of services for people with disabilities in non-official languages. In 2006, 4,120 did not speak English or French. The top five non-official mother tongues of persons with disabilities in this year are: Arabic, Creoles, Somali, Vietnamese and Spanish. The table below presents the population with disabilities by visible minority group.

¹⁷ Please see the expanded definition in the Glossary of Terms.

| Visible Minority Groups (Immigrants and Canadian Born) with Disabilities, Ottawa-Gatineau CMA, 2006 | | |
|--|-------------------------------------|-------------------|
| Visible Minority Groups | Population with Disabilities | Proportion |
| Chinese | 4,765 | 21.1% |
| South Asian | 3,685 | 16.3% |
| Black | 5,040 | 22.4% |
| Filipino | 735 | 3.3% |
| Latin American | 970 | 4.3% |
| Southeast Asian | 1,650 | 7.3% |
| Arab | 3,580 | 15.9% |
| West Asian | 810 | 3.6% |
| Korean | 155 | 0.7% |
| Japanese | 215 | 1.0% |
| Visible minority, n.i.e. | 360 | 1.6% |
| Multiple visible minority | 585 | 2.6% |
| Total | 22,550 | 100.0% |
| % of total population with disabilities | 15.1% | |
| Source: Disability Profile, Statistics Canada, 2006 Census | | |

In 2006, 31,915 Francophones¹⁸ had a disability in Ottawa, representing 21.0% of Ottawa's total Francophone population. The prevalence of disability among Francophones is slightly higher (21%) than in the general population (17.7%). Francophones make up 21.4% of people with disabilities but only 18.9% of the total population. The distribution by age groups indicates that 8% of Francophones with disabilities were children and youth (0-19), 58% were working age (20 – 64) and 34% were seniors 65 years and over.

There was a very significant increase in Francophones with disabilities 2001 – 2006. The number of Francophones with disabilities in Ottawa increased by 47.9% between 2001 and 2006 (10,340 individuals) compared to an overall increase in the Francophone population of only 21%. The increase in the number of Francophones with disabilities is comprised of:

- an 84% increase in the number of children and youth (by 1,165 people),
- a 51% increase in the working age population (by 6,242) and
- a 38% increase in the number of seniors (by 2,947 people).
- The significant increase between 2001 and 2006 is a result of many factors including 1,535 Francophones with disabilities arriving in Ottawa from elsewhere in Ontario;
- 1,100 Francophones with disabilities arriving in Ottawa from other provinces;
- 400 external migrants arriving in Ottawa, and
- The aging of the Francophone population, given that the incidence of disability increases with age.

¹⁸ The Social Planning Council uses a custom definition of "Francophone" which was negotiated with representatives of the Francophone community and then used to purchase custom data from Statistics Canada. Please see the definition in the Glossary of Terms.

A main challenge for unilingual Francophones with disabilities in Ottawa is accessing French-language services. In 2006, 3,345 were unilingual Francophones. Of even greater concern is the access to services of Francophones who belong to equity seeking groups. 7.7% were of Aboriginal ancestry, 11.7% immigrants and 9.1% visible minorities.

The table below illustrates the cultural and language diversity of the population with disabilities in Ottawa.

| Disability Rates for Diverse Groups of Population and by Knowledge of Official Languages, Ottawa-Gatineau CMA (Ontario Part) 2006 | | |
|--|----------------------------------|------------------------|
| | Persons with Disabilities | Disability Rate |
| Equity Seeking Groups | | |
| Aboriginals | | |
| Aboriginal Identity | 3,250 | 25.1% |
| Aboriginal Ancestry | 6,760 | 21.8% |
| Immigrants | | |
| Total Immigrants | 37,400 | 20.8% |
| Recent Immigrants | 3,485 | 11.7% |
| Visible Minority Population | 22,550 | 13.9% |
| Francophones | 31,915 | 21.0% |
| Knowledge of Official Languages | | |
| English only | 93,035 | 19.0% |
| French only | 3,345 | 20.8% |
| English and French | 48,920 | 15.3% |
| Neither English nor French | 4,120 | 39.9% |
| Source: Disability Profile, Statistics Canada, 2006 Census | | |

3. Key Factors that Impact the Economic Exclusion of People with Disabilities

People with disabilities face additional barriers in their social and economic inclusion. While the nature of the individual's disability significantly affects labour market participation, other factors play an important role.

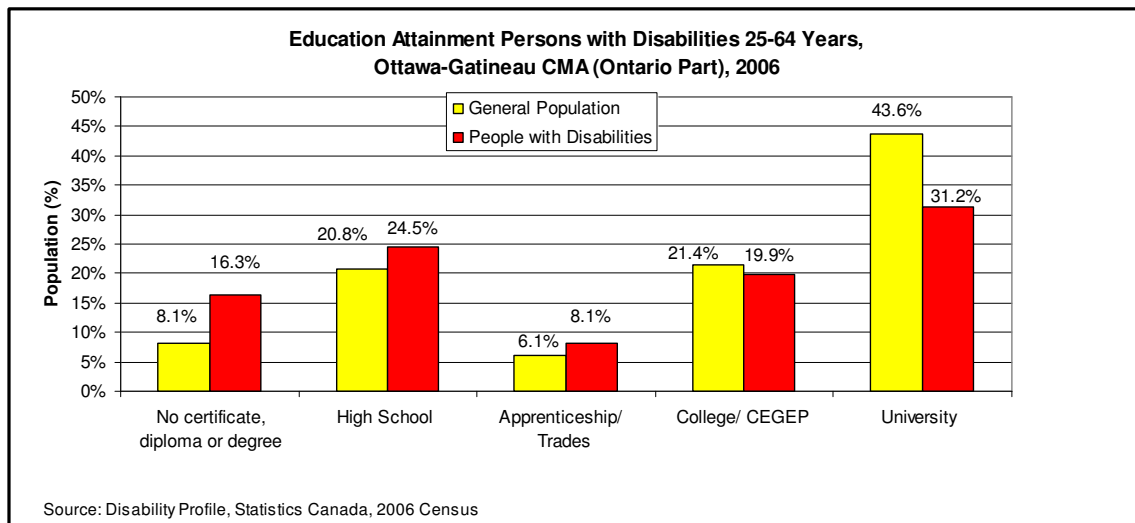
A full examination of sources of economic exclusion of people with disabilities is beyond the scope of this study. However, we provide a brief overview of key factors that contribute to their economic exclusion in six basic areas. These are:

- a) Access to education
- b) Access to quality employment and adequate income
- c) Accessible, safe and affordable housing
- d) Incidence of poverty

- e) Response of the ‘safety net’ to economic reality
- f) Access to adequate supports and services

a) Access to education

Census data shows a significant gap on the education attainment of people with disabilities compared to the general population. The school plays a key role in identifying and accommodating students with learning disabilities, which are often diagnosed within the school setting. A main barrier is insufficient special education programs in Canada’s school system (HRSDC, 2010). A significant concern is the high percentage (45.3%) of youth 15-24 years who have not completed a certificate or diploma. This was 9% higher than the percentage in the general population (36.3%). While, this would be expected for younger students in this age group, in other cases is the result of delays in education, related to disability and lack of accommodation in the school system. In the case of individuals aged 25-64 the percentage who had not completed their education was lower, but still doubled the percentage in the general population (16.3% vs. 8.1%). This outcome compromises their labour market integration and future economic security. In this age group, persons with disabilities surpassed the percentage in the general population with high school and trades education. The largest gap was at university level (31.2% vs. 43.6%). The following chart illustrates the education attainment of persons with disabilities aged 25-64.



Children with disabilities from vulnerable or minority population groups are at a higher disadvantage in the education system, particularly in elementary and secondary school. They are more likely to not have their accommodation needs met, and to be suspended as a result of disobedient or disruptive behaviour that may be out of their control. “Black male students are particularly vulnerable to sanctions such as removals due to stereotypes involving aggressive behaviour” (OHRC p. 22-27). Contributing to this situation is the fact that children with psychological, emotional or behavioural conditions are more likely to experience difficulties in obtaining special education (Statistics Canada, 2008a). As well, parents of newcomer children with disabilities do not have the tools to advocate for

their children. They lack information about available services and supports, are stressed by the integration process and may not speak an official language. More than half (53.4%) immigrant children with disabilities in Ottawa arrived at the age of 5-14. This age group includes adolescents who struggle with identity formation between their native culture and the host country. Moreover, cuts on ESL programs have resulted on students been incorrectly placed into special education programs and misdiagnosed as having learning disabilities (OHCR p.22-27 & SPCO focus groups). Unilingual Francophones and Aboriginal students with disabilities also face challenges in accessing special education services that take into consideration language and cultural differences.

Support for children with disabilities in the transition from secondary to postsecondary school is a major issue. Students are moving from a more structured accommodation process in the primary and secondary school systems to a self-advocacy system in postsecondary education. However, the lack of compliance of transition plans, inadequate information and support to students are barriers to achieve a successful transition. Students need this support to navigate the complexity of the system and lack of harmonization of programs and services. They also need support on issues related to disclosing their disability, stating their needs of accommodation and standing for their rights (OHRC, 2003).

Transition from postsecondary education to work does not have adequate support. Research findings indicate that some students feel that career and employment services at colleges and universities are poorly equipped to assist them in this transition. Some of the problems identified are: extensive assessment to meet eligibility criteria, services primarily geared to non-professional positions and inadequate financial supports (CCDS, 2004). Education and employment have a positive impact on managing symptoms, cognitive abilities, self-esteem and social networks that break down isolation of persons with disabilities, particularly those with mental illnesses. However the stigma of mental illnesses and lack of appropriate interventions are barriers that prevent them to secure their first job (CAMH & CMHA Ontario, 2010).

The experience that youth with disabilities have in the school system influences their labour market outcomes. It is very important for youth to build their work experience while still at school. Programs than link students with flexible work schedule opportunities and internships are important to accommodate their needs and build their work experience. A key factor is funding to cover their cost of accommodation. The Canadian Centre on Disability Studies (2004) identifies the lack of work experience and internship opportunities as main obstacles for employment of persons with disabilities. In some cases accommodation in internships are seen as too costly for the short term commitment and more difficult to obtain.

b) Access to quality employment and adequate income

In 2006, there was a slight increase in the participation rate of people with disabilities 15 years and over in the workforce (from 40.0% to 43.0%). However, this was still

significantly lower than the participation rate for the general population (69.6%). Several factors affect labour market participation of people with disabilities. Included are: the lack of appropriate accommodation in many jobs, discrimination including stereotyping about their abilities and inaccessibility of the built. Additional factors include; interruptions in their work history related to the disability, and a shortage of appropriate forms of supported employment for diverse disabilities.

“We accept our disabilities. Other people are the obstacle. We always have to prove that we can do the work despite our disabilities, whether visual, auditory, physical or intellectual. I’ve got a brain, you know – I can do that kind of work!” (SPCO 2006b, p.19).

Of 57,235 persons 15 years and over with disabilities in Ottawa’s labour force, 92.6% were employed and 7.4% unemployed. Their unemployment rate surpassed the rate of the general population (5.8%). The more affected were young adults 15-24 years who face difficult transitions from school to work¹⁹. Their unemployment rate rose to 16.1%..

Maps 2 and 2A show the distribution across the census tracts in the Ottawa-Gatineau Census Metropolitan Area of people with disabilities who were unemployed in 2006.

Access to decent employment is an important strategy to improve the economic situation of people with disabilities. However, dramatic changes in the labour market in the past twenty years have eroded the quality of jobs. An extensive literature has documented the impact of the globalization of the economy and labour market, particularly the growth of non-standard or precarious jobs (all jobs that are not full-time²⁰). In 2006, the percentage of persons with disabilities working full-time/full-year decreased slightly from 2001 (52.0% down to 49.0%). The related increase in those working part year or part time may or may not be of concern (41.6% up to 43.3%). This depends on whether the change was voluntary or involuntary. Research findings indicate that many people with disabilities willing to work full-time cannot find suitable jobs and the accommodation required. As a result, they may have involuntary part-time work. In 2006, more than one-quarter of people with severe or very severe disabilities reported that they activity limitation did not completely prevent them from working. On the other hand, this group experiences the highest percentage of unmet needs (Statistics Canada, 2008b).

The economic situation of people with disabilities changed negligibly between 2000-2005, improving very marginally based on some indicators and deteriorating slightly based on other indicators. It is encouraging that the median employment income of people with disabilities rose slightly in 2005, compared to 2000 (\$27,471 up to \$28,359). Nevertheless, it was 17.7% below that of the general population (\$34,424). The table below presents the labour market outcomes for people with disabilities 15 years and over.

¹⁹ For additional information please see *Challenging Transitions: A Profile of Early School Leavers Aged 15-24 in Ottawa in 2006*, Social Planning Council of Ottawa 2008 www.spcottawa.on.ca/publications_eng

²⁰ For more information on non-standard or precarious jobs, please see the Glossary of Terms

| Labour Market Outcomes for People with Disabilities 15 Years and Over, Ottawa-Gatineau CMA (Ontario Part), 2001-2006 | | | |
|---|---------------------------------|-------------|------------------------|
| | People with Disabilities | | General |
| | 2001 | 2006 | Population 2006 |
| Participation Rate | 40.0% | 43.0% | 59.6% |
| Unemployment Rate | 8.0% | 7.0% | 5.8% |
| Worked Full-Year, Full-Time | 52.0% | 49.0% | 56.0% |
| Worked Part-Year or Part-Time | 41.6% | 43.3% | 39.0% |
| Median Employment Income 2000 & 2005* | \$27,471 | \$28,359 | \$34,424 |
| * Data for the City of Ottawa | | | |
| Source: CSDS Urban Poverty Project, Table 6A, 2001 and 2006 Censuses | | | |

Poverty indicators show that in many cases having a job does not guarantee an adequate income. In 2005, there were 7,060 employed persons with disabilities who lived below the Low Income Cut-Off Before Taxes. Their incidence of poverty was higher than that of the general population (13.3% vs. 10.0%). In the same year, there were 2,115 full-time/full-year working poor persons with disabilities. Their incidence of poverty surpassed that of the general population (6.5% vs. 5.0%). The phenomenon of “working poor” is primarily the result of low wages in jobs held by workers in their prime working years. 74.4% of working poor individuals with disabilities were 25-54 years. This report uses the “Low Income Cut-Off (LICO) to analyze poverty and low income in Ottawa. The LICO is calculated by Statistics Canada and is widely recognized as the most commonly used indicator of low income. Those below the LICO are likely to spend 55% of their income (20% more than the average) on food, shelter and clothing.²¹

Research studies indicate that employers’ attitudes and prejudices are a significant obstacle to access employment. Janalee Morris (2000) states that the higher percentage of persons with disabilities who are not in the labour force,²² cannot be explained only by employment specific barriers. Other factors including discrimination and attitudinal barriers may discourage them to obtain employment. In 2006, the percentage of persons with disabilities 15 years and over who were not in Ottawa’s labour force in the total work activity was almost twice that of the general population (57.3% vs. 30.5%). According to the Activity Limitations Survey, people who are employed report the least discrimination, followed by those who are not in the labour force and then the unemployed. The reported of perceived discrimination increased with the severity of the activity limitation (Statistics Canada, 2007 and 2008b).

The Canadian Council for Social Development-CCSD (2002) documented that few organizations and businesses comply with equity policies, requiring them to make their workplaces accessible by providing adapted equipment and workstations. Furthermore, there is a lack of inclusion of different types of disabilities. A main focus on mobility needs has deprived persons with other disability of access to the workplace (e.g. sensory disabilities). Moreover, the slow response to improved technological disability aids has

²¹ Please see the 2005 Low Income Cut-Offs for Ottawa on the Glossary of Terms.

²² Persons not in the labour force includes people without jobs who are not actively seeking work (e.g. students, parents, people who have chose an early retirement and those who have giving up searching for a job).

reinstated accessible barriers for some people. This is the case of those who have motorized wheel chairs that need more space than the manual ones.

Working at home could be a choice, but in some cases is the outcome of the lack of accommodation in the workplace. The CCSD states that home-based work should not be a substitute for accommodation and those who work at home need support to negotiate a home-based work arrangement, including work equipment and on-going technical support. In most cases the working-at-home employee has to bear all accommodation expenses, an impossible task for those with low income. In 2006, 15.8% (4,970)²³ of Ottawa residents 15 years and over working at home were persons with disabilities.

The alternative of self-employment for persons with disabilities deserves special attention. Mental health organizations (CAMH & CMHA, 2010) indicate that a significant number of persons with mental health problems and psychiatric disabilities are interested in becoming self-employed or have been successful as self-employed. Nonetheless, benefit rules, funding and lack of service providers with the appropriate expertise act as barriers. The Social Planning Council (SPCO, 2010b) research identified that small entrepreneurs who belong to ethnic minorities and visible minority groups lack access to appropriate culturally and language sensitive services. In 2006, there were 7,275 self-employed persons with disabilities, 15.1% of self-employed in the general population.

c) Access to transportation

Access to transportation is a key policy issue for the general population, but particularly for people with disabilities. Access is crucial for their independent living, health care and economic and social integration. In 2006, there were 50,005 employed persons with disabilities aged 15 years and over using different modes of transportation, an increase of 12,995 individuals or 35.1% from 2001. The majority of them (68.1%) used a private vehicle (as drivers, 58.1% or passengers 7.6%) and 21.2% used public transit. It is expected that the demand for accessible transportation will have a significant increase as a result of the aging population trend. As well, there is a high likelihood that secondary migration of people with disabilities (particularly from Ontario and other Canadian cities), will continue to play an important role in this growth.²⁴

The increase of drivers with disabilities between 2001-2006 was staggering (32.7%), nearly 5 times the rate exhibited in the general population (6.8%). This may be related to greater access to job opportunities associated with a car (e.g, job requirements) or influenced by transportation barriers. The 2006 census data disaggregated by sex shows important gender differences of private vehicles users. The majority of drivers are men (55.7%), while women comprise the majority of passengers (68.9%). This is an important factor in their transition to public transit.

²³ Data for Ottawa-Gatineau CMA (Ontario Part)

²⁴ Please see prevalence of disability on section one.

For a growing number of persons with disabilities driving is not an option either because their disability prevents them from driving or they cannot afford to own a vehicle. During the period 2001-2006, there was a faster increase of employed people with disabilities aged over 15 years, who used public transit, compared to the general population (37.1% vs. 11.6%). More women (55%) than men were public transit users. The following table presents the number of employed persons with disabilities by mode of transportation during the period 2001-2006 and the increase rates.

| Mode of Transportation to Work Population with Disabilities 15 years and Over, Ottawa, 2001-2006 | | | | | | |
|---|---------------------------|----------------|------------------------------|---------------------------------|---------------|------------------------------|
| Mode of Transportation | General Population | | | People with Disabilities | | |
| | 2001* | 2006** | 2001-2006 Change Rate | 2001 | 2006 | 2001-2006 Change Rate |
| Total | 378,595 | 414,880 | 9.6% | 37,010 | 50,005 | 35.1% |
| Car, truck, van, as driver | 234,575 | 250,430 | 6.8% | 21,970 | 29,165 | 32.7% |
| Car, truck, van, as passenger | 25,375 | 31,845 | 25.5% | 2,580 | 3,800 | 47.3% |
| Public transit | 78,900 | 88,055 | 11.6% | 8,755 | 12,005 | 37.1% |
| Walked or bicycled | 36,750 | 40,760 | 10.9% | 3,200 | 4,460 | 39.4% |
| Other Method | 2,995 | 3,785 | 26.4% | 505 | 570 | 12.9% |
| * Data for Ottawa City | | | | | | |
| * Data for Ottawa-Gatineau CMA (Ontario Part) | | | | | | |
| Source: Disability Profiles and Community Profiles, Statistics Canada, 2001 and 2006 Censuses | | | | | | |

In addition to public transit, nonprofit organizations also offer exemplary approaches of mobility services for persons with disabilities at the neighbourhood level. These are door to door services provided by volunteers in their own cars. They bring seniors and persons with disabilities to medical appointments and community events, as well as on trips to buy groceries and go shopping. The programs make an important contribution by filling a gap of accessible transportation in the community, but lack adequate funding.

Public transit could be a single determinant of those moving elsewhere where public transit is readily available, as is the case of Ottawa. The city is one of the leading municipalities in Ontario providing accessible buses in fixed-routes and door to door services through Paratranspo.²⁵ In 2009, 82% of Ottawa’s fixed-routes fleet was “low-floor”, 772,000 travelers were Paratranspo customers and the community monthly pass²⁶ for persons with disabilities and/or Paratranspo users was \$32 vs. \$91.50 for a regular adult pass (OC Transpo, 2010, pp. 23 and 9). Moreover, municipal regulations require taxi companies to allocate a number of units for customers with disabilities. Nevertheless, despite the city’s leadership in accessible transportation, seniors and residents with disabilities continue to face transportation barriers.

Transportation barriers encompass a significant range of issues. Among these are: maintenance of buses’ accessibility equipment as well as of elevators and stairs in transitway stations, availability of bus shelters, safety of the pedestrian right-of-way, and a culture of respect and support for seniors and persons with disabilities. Examples of barriers faced by travelers in the pedestrian way include snow piled on bus stops and

²⁵ This transportation initiative was conceived by the Social Planning Council of Ottawa.

²⁶ The Social Planning Council was instrumental in gaining approval for the monthly pass for people with disabilities.

sidewalks preventing them from walking the distance to the transitway station or the bus stop. As well, inadequate street crossing and pedestrian signs for visually impaired people compromise their safety. Furthermore, travelers who find bus ramps or transitway elevators out of service are left stranded, feeling embarrassed and frustrated. In 2009, 9% of transitway elevators were out of service (OC Transpo, 2010, p.23).²⁷ In addition, priority seating in buses is not universally respected by the general public and some incidents of drivers unwilling to lower the bus ramp have been reported. These facts evidence a lack of sensitivity and the need of appropriate awareness and training programs in the transit system for both staff and passengers.

A significant concern is the ability of Paratranspo to accommodate the increasing demand of services due to the aging population trend. The service already suffers from budget constraints and tight eligibility screening. Without additional funding and resources, it could face a major gap in its ability to provide these services. In addition, Paratranspo customers currently face barriers to access services, among them are trip denials. In 2000, Paratranspo refused 46,000 trips (Harb, M. 2007). In 2009, trip denials were at the technically accepted 5% (OC Transpo, 2010, p. 17), but there still is a violation of a users' right to obtain the next-day rides guaranteed to them by the system. Paratranspo time-lines are also a problem. Sometimes buses do not arrive at all or they arrive too late, leaving passengers stranded or unable to reach their workplaces, medical appointments and other important engagements on time (Council of Aging, 2006 and City of Ottawa, 2007). Moreover, incidents of a lack of sensitivity from both Paratranspo drivers and drivers from contracted taxis incorporated into the system, evidence the lack of adequate training.

It is encouraging that OC Transpo is planning to develop a comprehensive road map in order to remove 100% of the barriers in the areas of transportation, the physical environment of transportation infrastructure and customer service, based on an external audit carried out in 2009. However, special attention should be given to developing an integrated response of Paratranspo services to improve the services and accommodate the increasing demand from the aging population trend and secondary migration.

d) Accessible, safe and affordable housing

Lack of attention to disability during the life cycle severely restricts the possibility of seniors aging at home, even if they have access to home support services. Moreover, the restricted focus on the house or apartment unit disregards the need of making the surroundings also accessible. This limits the social interaction of persons with disabilities and increases their risk of isolation. There is a growing realization that using a 'universal design' and the concept of flex-housing are much better options for supporting the inclusion of people with disabilities during the life cycle

²⁷ During the time elevators were not undergoing major rehabilitation.

Accessibility based on affordability is the exception in the housing market. If a disability occurs or a senior acquires a disability as part of the life cycle, it is up to each individual or family to make the house accessible and safe. Those who cannot afford the modifications risk becoming isolated in part of the house, or having their safety compromised and forced to move out.

The lack of available housing options for persons with disabilities and rising housing costs has contributed to many people living in low quality housing. In 2006, 5,705 families and 3,530 unattached individuals with disabilities lived in houses requiring major repairs. Their prevalence of poverty was significant. 23.8% and 54.4%, respectively, lived in poverty. The deterioration and deficit of social housing has exacerbated this situation. In 2008, there were 9,692 households on the waiting list for social housing. Estimated waiting times are between 5-8 years. In the same year, 2,600 persons were on the waiting list for supportive housing (Community Foundation of Ottawa, 2009, p.7). These accommodations include assistance for people with disabilities to ensure their safety and independence. A step forward is the new affordable housing initiatives in the City. They are part of the Economic Stimulus Plan in Ontario for seniors and persons with disabilities. This initiative also includes supportive housing for homeless people. It is also very encouraging that the City is undertaking reviews of both Essential Health and Social Supports and Home Support Services. The aim of the reviews is to determine the feasibility to move from a means tested eligibility to an income measure (City of Ottawa, 2010, p.28).

Poverty levels and income benefits below the poverty line have exacerbated the housing crises. In 2006, 6,855 family renter households and 6,490 owned households who had disabilities spent 30% or more of their income on housing major payments (rent/mortgage, electricity, heat, municipal services). This is the accepted measure of unaffordable housing. As well, 8,840 unattached tenant households and 2,145 owner households were in unaffordable housing. Households who spend 50% or more of their income and live below the poverty line are considered at risk of homelessness. In 2006, 2,420 tenant families and 5,325 unattached individuals with disabilities faced this risk. Of particular concern is the significant number of people with psychiatric disabilities who experience homelessness. In 2008, 7,045 persons were homeless in Ottawa (Alliance to End Homelessness, 2008). Homeless people have also other kind of disabilities. In addition, some people experiencing homelessness are aging rapidly, and are developing age-related disabilities.

Maps 6, 6A and 6B show the number and percent of homeowners with disabilities who were paying 30% or more of their income on their major housing payment in 2006 across the census tracts in the Ottawa-Gatineau Census Metropolitan Area. Maps 7 and 7A show the number and percent of tenants with disabilities paying 30% or more of their income on rent in 2006.

The gap between rental costs and social assistance benefits worsens the lack of affordable housing. In 2009, the average rent allocation under Ontario Disability Support Program (ODSP) and Ontario Works (OW) was substantially below the average rent in Ottawa. In

2009, the average rent for a two-bedroom apartment was \$995. A parent with two children under 12 in ODSP must meet her family's needs for rent, food and other necessities on \$1,484. Similarly, the average rent for a bachelor and one-bedroom apartments in Ottawa ranges from 65% to 90% of ODSP benefits for a single person (City of Ottawa, 2010, p.36). "My rent is way too expensive, and I've had workers say to me, 'Well, you should move.' But that's not easy with respect to accessibility. You just can't re-locate anywhere" (SPCO, 2006b, p.31)

Lack of access to affordable housing is one of the primary factors leading to the persistent poverty in Ottawa. The Poverty Profile of the City of Ottawa (SPCO, 2010a) and Ottawa's Poverty Reduction Strategy 2010 state the need and recommend reinvesting the savings from the upload of social assistance benefits into affordable housing. Focusing the reinvestment of savings in this area would result in significantly more impact with respect to reducing poverty than dispersing it across different initiatives. Based on the findings of this report, special consideration should be given to the housing needs of persons with disabilities, in terms of accessibility and safety.

d) Incidence of poverty

Poverty is a determinant of health. As such, increasing poverty levels can intensify disabilities and create additional health problems. "The poorest fifth of Canada's population face a staggering 358% higher rate of disability compared to the richest fifth. The poor experience major health inequality in many other areas, including 128% more mental and behavioural disorders; 95% more ulcers, 63% more chronic conditions; and 33% more circulatory conditions" (Lightman, E., 2008). Poverty also prevents people from accessing the supports they need to integrate into the society, particularly those with severe or very severe disabilities. This impacts the society as a whole, particularly families. Caregiver families have to provide extra-care, have less time to earn an income and face higher out-of-pocket expenses. The cost of aids and devices, home modifications and caregiving is a major barrier that individuals and families living in poverty cannot afford (HRSDC, 2010). In 2005, 21.0% of people with disabilities lived on low income before taxes in Ottawa, compared to 15.2% in the general population. The incidence of poverty decreased to 17.0% after taxes. 25% of children with disabilities under 6 years lived in poverty before tax and 23.0% after tax. These were children living in low income families, particularly single mothers. As the cost of living has increased, so has the cost of raising a family. It is increasingly difficult for a family to survive on one income, particularly families with disabilities that have additional expenses related to their disability. In addition, the increasing demand for payment of school fees in the public education system creates additional hardship for low and moderate income families.²⁸ Maps 3, 3A and 3B show the number and percent of people with disabilities

²⁸ For more information please see, *Is Everybody Here? Inclusion and Exclusion of Families with Young Children in the Ottawa Area*, Social Planning Council of Ottawa, 2007.
www.spcottawa.on.ca/publications_eng

living below the low income cut-off before tax in the Ottawa-Gatineau Census Metropolitan Area in 2006 (by census tract).

People with disabilities, those with fixed incomes (e.g. ODSP and OW), and the working poor are at a risk of malnutrition. The Ottawa Public Health *Nutritious Food Basket Survey* (2010) raises a concern that food has become a “discretionary” expense for people living in poverty, because they must account for paying rent and other fixed expenses (e.g. utilities, transportation). The consequences are severe. As the survey indicates, people who are hungry and/or malnourished perform at lower academic levels, finding it harder to concentrate in school, and thus have poorer psychosocial outcomes. Furthermore, they are more likely to suffer from chronic diseases. Therefore, access to a nutritious diet requires a strong safety net and policy actions. We are calling for the immediate introduction of a \$100 monthly supplement to the basic needs allowance for all adults receiving social assistance. The existence of widespread food insecurity and chronic illness related to poor nutrition is the result of our society’s collective negligence and a failure of public policy. These concerns should also be addressed in Ottawa’s Poverty Reduction Strategy 2nd year Plan.

Significant factors in poverty levels of persons with disabilities include barriers in the labour market, income security benefits critically below the amounts needed to cover basic costs of living in Ottawa and overrepresentation of persons with disabilities among unattached individuals and people living alone, which is a risk factor of poverty. The Poverty Profile of the City of Ottawa (SPCO, 2010a), has recommended developing strategies to address poverty among unattached individuals. They are a very significant portion of Ontario’s poor. Maps 4 and 4A show the number and percent of people with disabilities living alone in Ottawa-Gatineau Census Metropolitan Area in 2006 (by census tract).

The table below contains the poverty indicators of persons with disabilities in Ottawa before taxes.

| Poverty Indicators Before Taxes for People with Disabilities Compared to the General Population, City of Ottawa, 2005 | | |
|--|---------------------------------|--|
| Indicator | People with Disabilities | Individuals in the General Population |
| Poverty Rates Before Tax | | |
| All Individuals (Unattached individuals or in families) | 21.0% | 15.2% |
| Men | 19.7% | 14.5% |
| Women | 22.2% | 15.9% |
| Children Under 15 Years | 27.4% | 19.2% |
| Youth 15-24 Years | 33.5% | 23.7% |
| Seniors 65+ Years | 13.9% | 11.9% |
| Families | | |
| Couple Economic Families | 8.6% | 7.6% |
| Lone-Parent Economic Families | 52.1% | 40.2% |
| Unattached Individuals | 42.6% | 34.1% |
| Depth of Poverty: Living 50% or more Below Low Income Cut-Off Before Tax | | |
| Couple Economic Families | 23.2% | 28.9% |
| Lone-Parent Families | 30.9% | 34.5% |
| Unattached Individuals | 37.5% | 45.0% |
| Incomes Under \$20,000 | | |
| Lone-Parent Economic Families | 28.9% | 23.1% |
| Unattached Individuals | 42.1% | 32.9% |
| Unaffordable Housing: Percent Who Were Low Income From All Economic Family Households Spending 30% or More of Income on Rent/Mortgage | | |
| Renter families | 69.7% | 68.6% |
| Owner families | 30.2% | 27.3% |
| Renter unattached individuals | 72.8% | 72.0% |
| Owner unattached individuals | 52.7% | 43.1% |
| Source: CSDS Urban Poverty Data, Tables 1, 9EF-A, 9UI-A, 10EF-A & 10UI-A, 2006 Census | | |

A significant factor in the income levels for people with disabilities is the source of income. A lower percentage gets their income from working, and therefore a higher percentage gets their income from government transfers. A major factor is the greater difficulties they experience in accessing the labour market. In 2005, 47.7% persons with disabilities over 15 years had employment income (especially wages and salaries). In the same year, 73.6% relied on government transfers for all or part of their income.

Incomes of people with disabilities from all sources, which include government transfers, reveal the decline of benefits and living conditions. A significant percentage of individuals with disabilities have no income. A large percentage has incomes under \$20,000 and there is a major income gap with the general population total income. In 2005, 3.4% of people with disabilities over 15 years no income, compared to 0.9% in 2000. 39.7% had incomes under \$20,000, compared to 33.2% in the general population. Their median income from all sources in 2005 was \$28,359. This was only 82.5% of the median income from all sources in the Ottawa's general population (\$34,373).

Some policy and program initiatives addressing persons with disabilities fail to include those who are most in need. Most low-income individuals cannot claim the non-refundable disability tax credit, because they do not owe taxes and as a result do not

qualify. Low income families are unable to benefit from the new Registered Disability Saving Plan, because their capacity of saving is limited. Disability advocates call to make the disability tax credit refundable in order to benefit those who are poor.

e) Response of the ‘safety net’ to economic reality

There is a concern that the social security system fails many Canadians with disabilities, particularly those with severe or very severe disabilities. Eligibility to disability related public or private insurance programs is limited to those who are employed. In addition, persons with disabilities are likely to have non-standard jobs which lack disability insurance. Furthermore, their attachment to the paid labour force is likely to be tenuous and affected by low earnings and thus, they cannot afford to buy their own insurance. As a result, many persons with disabilities have no choice but, to apply for social assistance.

A major problem of government transfers is their inadequate response to the current economic reality. Benefit rates do not reflect the significant increase of the cost of living, particularly housing. People are struggling to survive with the same or less than people receiving social assistance 14 years ago. Thus, ODSP benefits are painfully low and while higher than OW, together they are below the poverty line. For example, in 2009 ODSP benefits for a parent with two children under 12 years are \$1,484 and \$943 under OW. “[I] experience poverty everyday because [I] don’t get enough to live on [on ODSP]. It’s tiring and humiliating to have to fight to survive” (City of Ottawa, 2010, p.36). Moreover, the recent cut of the Special Diet Allowance²⁹ has exacerbated this situation.

Access to ODSP is also hindered by restricted eligibility criteria that force many people to apply to OW. Benefits under this program are based on short term assistance to “employment ready” individuals, criteria that persons with disabilities do not meet. There are also extreme delays in the ODSP application process and a low approval rate of first applicants. In 2008, the approval rate in Ontario was 50-55% (City of Ottawa, 2010, p.25). Ottawa’s Poverty Reduction Strategy has proposed an ODSP Community Application Model to address this problem. The City has already piloted the Application Support Worker (ASW) Program with ODSP applicants with mental health issues, cognitive impairments and other complex issues with very successful results.

A main concern is that ODSP and OW policies act as a barrier to secure employment. 50% of wages earned are deducted from the benefits. Moreover, individuals who find work not only lose their income support but also may lose their disability supports (e.g. drug card, disability aids, non-market rent in social housing). Research studies indicate that one of the best ways to promote the return to work is increasing the amount an individual may earn before income supports are reduced. In the case of persons with disabilities, flexibility of income support programs is crucial to respond to job lost and

²⁹ It provided funds for people whose medical needs, as determined by a physician, require special nutritional treatment.

employment interruptions. This together with their overrepresentation in non-standard jobs decreases their eligibility to Employment Insurance benefits (EI). In 2005, less than one third of persons out of work in Ontario, qualified for employment benefits, compared to about 90% in 1990.

The access to most social programs and supports is often affected by the asset levels. Many people experiencing hardship, particularly during economic downturns, are unable to get the supports they need. In addition, the likelihood of persons with disabilities of losing their jobs or not being hired during an economic crisis is high, particularly if they require expense accommodation (CBC, 2009). There is a pressing need for all programs using an asset limit to examine their policies to ensure individuals with low incomes are not facing access barriers. “We need a system in place to bridge the gap in employment. Right now is either sink or swim. You have no net to catch you if you are in a bad situation” (SPCO, 2006a, p. 25).

Workers with disabilities have also seen their private disability pension benefits disappear during the recent economic crises. In many cases disability insurance plans have unprotected disability benefits when a company files for bankruptcy protection. This was the case of Nortel’s workers. Persons with disabilities in this situation had no option than to apply to ODSP or OW. In 2008, similar ‘uninsured’ plans provided 1.1 million people with disabilities income protection (CBC, 2010).

The Poverty Profile of the City of Ottawa (SPCO, 2010a), has recommended an increase in benefits levels for Ontario Works and the Ontario Disability Support payments, which are critically below the amounts needed to cover basic costs of living in Ottawa, as this report demonstrates. The report also highlights that cuts to the Special Diet Allowance needs urgent action. Furthermore, the Ontario Social Assistance Review Committee has recommended a comprehensive assessment of income security, employment supports and related services for working age adults (Ontario Social Assistance Review Advisory Committee (2010, p. i).

f) Access to adequate supports and services

Individuals with disabilities have specific needs based on the type of disability, frequency and severity of the disability, and the presence of more than one disability. Moreover, the circumstances of individuals with the same disability, is also quite varied depending on a range of personal characteristics, such as age and income. In 2006, most people with disabilities (or their immediate family) paid for their assistive devices themselves which are expensive. Those living in poverty cannot afford the cost and their access should be provided. According to the 2009 Government Report on Persons with Disabilities (HRSDC, 2010), there is a significant percentage of unmet needs of persons with disabilities. Three out of ten Canadian adults over 15 years who have disabilities have partially met needs, and one in ten has no needs met at all. Individuals with a learning limitation, such as dyslexia had more unmet needs for assistive devices than individuals with any other disability. People with multiple or cross disabilities and severe disabilities face greater barriers accessing appropriate services. Research studies indicate that

cultural and language diversity is also a factor. Aboriginals, Francophones and immigrants with a disability face particular challenges finding cultural and language appropriate services. Furthermore, not knowing where to obtain the supports needed is a major barrier to access supports and services (Statistics Canada, 2008b). Improved access to information and allocation of funding is crucial for the inclusion of persons with disabilities.

Many seniors, particularly those with disabilities, are excluded by the lack of culturally and language sensitive services in Ottawa, increasing their risk of isolation. Research findings indicate that opportunities to socialize (e.g. speak to others, participate in community activities) have important health benefits for seniors. Ethnocultural groups in Ottawa are trying to fill this gap. They have the skills and knowledge, but lack funding. They are an asset in policy and program development to assist this population group.

Disability-related employment services are crucial for those in the labour force. However, most employment supports are only available to entry positions. As a result, programs are not equipped to assist persons with disabilities to transition to better jobs. “My incentive is NOT to work. Once I’m employed and able to contribute my skills and abilities, my supports will end. I’m not left with a fair choice” (NCOR, 2001, p.10). John Dale (2010a) states that the emphasis on placement, regardless of the quality of jobs, jeopardizes the ability of persons with disabilities to retain a job or create a meaningful career path. Workers who are re-entering the workforce after a lengthy absence from disability also face significant challenges to get accommodation. Persons with disabilities who do not have their needs met are at risk of withdrawing from the labour force, becoming unemployed or underemployed. In 2006, 44.2% of working age adults (15-64 years) in Canada who require aids and devices did not have their needs fully met. The percentage was still high, despite there was a significant improvement from 2001 (HRSDC, 2009, p.11). The labour market is changing rapidly, in terms of new technologies and specialization. Employment programs and services also need to respond to these changes.

The continuing shortage of affordable, quality licensed and flexible daycare (non-standard hours) is a critical gap for families with disabilities. Caregiving families are also exhausted by the lack of appropriate care for seniors with disabilities, particularly those who have language and cultural specific needs. “You get worn out. You always have to threaten just to receive services” (SPCO, 2006b). A significant number of persons with disabilities provide unpaid childcare and senior care to a family member with or without a disability. Longer life expectancy of people with disabilities means that more families are providing care and support for more years. In 2006, 38,270 persons with disabilities 15 years and over provided unpaid childcare and 27,685 unpaid senior care. There are very few supports tailored to the needs of people with disabilities in their caregiving role. There is a spectrum of services to support people in their role in the paid workforce, but virtually no services to support them in their roles as unpaid workers in the home caring for seniors or children. In 2009, there were 7,373 children on waiting lists for licensed childcare in Ottawa, a 6.0% increase from 2008. 2,010 were subsidized childcare spaces (Community Foundation of Ottawa, 2010, p.20).

Appropriate supports are commonly difficult to access at different transitional stages of the life cycle. Service and agency silos are a major barrier. There are significant disruptions in access to services as young children move into the school system and again out of high school in the transition to young adulthood. People face many barriers as they are more in and out of employment that affect people with non-standard jobs. People with disabilities are overrepresented in these types of jobs. As well, there are significant challenges to successfully aging for people with disabilities. There is a great need for better collaboration and planning between senior services and services for people with diverse disabilities, to ensure appropriate supports for people with diverse disabilities as they age.

4. Disability Across the Stages of Life³⁰

This section analyzes the population with disabilities as they progress through the life cycle from childhood, through the working years to old age. The census data reveals important dimensions in the lives of people with disabilities in each stage of life. The analysis follows the age requirements of disability programs and services as follows: children and youth 0-19 years, working age individuals 20-64 years and seniors 65 years and over.

Children and Youth 0-19 years

In 2006, 6.7% of children and youth in Ottawa aged 0-19 had disabilities. Boys were overrepresented in this age group. Youth 15-19 comprised the higher percentage (32.8%), as the table below shows. The data for children 0-4 years may be under-representative, because many disabilities are difficult to diagnose on pre-school children (e.g. learning disabilities).

| Children and Youth with Disabilities 0-19 Years, Ottawa-Gatineau (Ontario part), 2006 | | | |
|--|---------------|-------------------|------------------------|
| Age Groups | Number | Proportion | Disability Rate |
| 0-4 | 2,020 | 14.5% | 4.4% |
| 5-9 | 3,275 | 23.5% | 6.7% |
| 10-14 | 4,065 | 29.2% | 7.4% |
| 15-19 | 4,575 | 32.8% | 8.0% |
| 0-19 | 13,945 | 100.0% | 6.7% |
| Source: Profile Persons with Disabilities 0-19 Years, Statistics Canada, 2006 Census | | | |

Most school-age children with disabilities have multiple disabilities in Canada. In 2006, 60.1% of children under the age of five and nearly three quarters of children aged 5-14 reported multiple disabilities. The presence of multiple disabilities influences the severity of a child's disability. 41.7% of all children 0-14 years with disabilities in Canada had severe or very severe disabilities. Children in this group who were in special education

³⁰ Data in this section is from Ottawa-Gatineau CMA (Ontario Part).

schools were more likely to have an unmet need than children with mild to moderate disabilities (Statistics Canada 2007, p. 27-28). The table below includes the most prevalent disabilities on children.

| Most Prevalent Disabilities on Children, Canada, 2006 |
|---|
| 0-4 YEARS |
| Leading disabilities |
| Chronic health conditions |
| Developmental delays |
| Most Common conditions |
| Asthma or severe allergies |
| Attention deficit disorder with or without hyperactivity (ADD/ADHD) |
| Autism |
| 5-14 YEARS |
| Leading disabilities |
| Learning disabilities* |
| Chronic health conditions |
| Speech disabilities |
| Psychological |
| Developmental |
| |
| * It increased significantly between 2001-2006 |
| Source: 2006 Participation and Activity Limitation Survey (p.22). |

Supports are essential to improve the educational attainment of children with disabilities. This includes not only physical accessibility, but accessible curricula and evaluation methodology. The Ontario Human Rights Commission (2003, p.5-7) states that accommodation in the school system is not provided in a timely manner, is frequently insufficient and sometimes is not provided at all. This results in long waiting lists for professional assessments, shortage of special education resource teachers and delays in the provision of special education programs and aids. The 2006 Participation and Activity Limitation Survey found that less than one-half (45.3%) of all Canadian children's needs for assistive technology were met completely³¹ (Statistics Canada, 2008b). This has a direct impact on the proportion of children with disabilities not attending school. In 2006, 19.8% of youth aged 15-19 did not attend school. 36.8% lived in poverty and thus unable to cover the cost of aids, without assistance. Percentages of non-attendance were higher for youth with disabilities 20-24 years (44.1%).

School interruptions related to the specific disability or the lack of accommodation impact education attainment. Mental health organizations state children and youth with mental illness are at particular risk of not completing their education or securing their first job. This is particularly the case of schizophrenia or bipolar disorder, which often first occurs at adolescence or young adulthood. Barriers to their reintegration to the school can prevent them to complete their education (CAMH & CMHA Ontario, 2010).

³¹ In most cases the child's parents and/or family members paid the cost of the aids. Only 21.4% of assistive devices were paid through public funds such as the health care system or other government programs.

The stigma associated to mental health disorders can also prevent them from receiving timely and effective treatment. In addition, most mental health programs are aimed at addressing adults (Hospital News, October 2010). In 2006, three quarters of youth with disabilities aged 15-19 had not completed a diploma or certificate. This highlights the importance of reinforcing supports for school delays due to disabilities. The remaining 24.7% in this age group had primarily a high school or equivalent education, which is associated with the age group of analysis.

Children and youth with disabilities are culturally and linguistically diverse. Programs and supports at school need to include this diversity. In 2006, in the population 0-19 years, 515 (3.7%) were of Aboriginal identity, 1,100 (7.9%) had Aboriginal Ancestry, 1,470 immigrants (10.5%), 680 recent immigrants (4.9%), 3,940 visible minorities – Canadian-born and immigrants (28.3%) and 2,550 were Francophones (18.3%).

In the case of Francophone children, difficulties in accessing French-language services and long waiting lists for French-speaking specialists may delay diagnosis of disabilities. This also may be the case of children who do not speak an official language. In 2006, in the age group 0-19, 260 persons did not have knowledge of either English or French and 540 were unilingual Francophones. The 5 top non-official languages spoken most often at home were Somali, Arabic, Chinese, Vietnamese and Persian (Farsi).

In 2006, 1,815 youth with disabilities 15-19 years were in the labour market. Their participation rate was 40.0% and their unemployment rate 21.0%. It was higher than the unemployment rate of those aged 15-24 (16.1%). Support to young adults with children is also crucial. 50 youth who were in the labour force, had children at home, most of them were women. Most youth in this age group worked part-time or temporary jobs (86.5%). 80 youth were self-employed indicating the importance of community economic development projects addressing vulnerable youth. There is a need to revise internship placements and summer jobs for youth with disabilities, in order to ensure that they contribute to building their career path and assist their transition from school to work. Attitudinal changes related to disabilities are also important. Young people with disabilities are more likely to report instances of perceived discrimination than older age groups (Statistics Canada, 2008c).

Youth aged 15-19 have deprived income levels and thus high incidence of poverty. In 2005, 42.7% had no income and 55.0% had incomes under \$20,000. Unattached youth who lived not in families, especially those living alone, were at a higher risk of poverty. The incidence of poverty in the age group 0-19 is disturbing. 3,758 lived in poverty before taxes. Their poverty rate was 27.0%. It only decreased 4% through tax measures. The table below shows the overrepresentation of children and youth with disabilities on poverty levels.

| Children and Youth with Disabilities in Private Households by Incidence of Low Income Before Taxes, City of Ottawa, 2005 | | | | | | |
|---|----------------------------------|-------------------|--------------------------------|---------------------------|-------------------|--------------------------------|
| Age Group | Persons with Disabilities | | | General Population | | |
| | Total | Low Income | Incidence of Low Income | Total | Low Income | Incidence of Low Income |
| 0 - 5 | 2,510 | 630 | 25.1% | 52,750 | 10,435 | 19.8% |
| 5-14 | 6,950 | 1,975 | 28.4% | 98,480 | 18,810 | 19.1% |
| Under 15 | 8,895 | 2,440 | 27.4% | 142,655 | 27,320 | 19.2% |
| 15-18 | 3,545 | 905 | 25.5% | 43,450 | 7,345 | 16.9% |

Source: Urban Poverty Project (UPP), Table 1, 2006 Census

Working age population 20-64 years

In 2006, 85,700 Ottawa's residents aged 20-64 had disabilities (16.0%). In most cases, their distribution by age group increases steadily with age, reflecting disabilities associated with aging. The prevalence increases drastically in the older workers age group 50-64 reaffirming the fact that Ottawa's labour force is aging. According to the Participation and Activity Limitation Survey working age individuals are most affected (74.4%) by pain and discomfort (constant or recurring pain). Moreover, disabilities related to emotional, psychological, or psychiatric problems peak to 3.3% for adults 45-64 years and then decrease to 2.1% for adults aged 75 and over. Learning disabilities also affected this age group (Statistics Canada, 2007, p. 33 & 37). The table below includes the number of persons with disabilities in Ottawa, by age group and their disability rates.

| Percentage of Persons with Disabilities in the Working Age 20-64 Years and their Disability Rate, Ottawa-Gatineau (Ontario Part), 2006 | | | | |
|---|---------------------------|----------------------------------|-------------------|------------------------|
| Age Group | General Population | Persons with Disabilities | | Disability Rate |
| | | Number | Percentage | |
| 20-24 | 60,295 | 4,970 | 5.8% | 8.2% |
| 25-29 | 55,125 | 5,455 | 6.4% | 9.9% |
| 30-34 | 57,800 | 5,625 | 6.6% | 9.7% |
| 35-39 | 62,525 | 6,970 | 8.1% | 11.1% |
| 40-44 | 73,435 | 10,835 | 12.6% | 14.8% |
| 45-49 | 70,700 | 12,485 | 14.6% | 17.7% |
| 50-54 | 61,885 | 13,350 | 15.6% | 21.6% |
| 55-59 | 54,700 | 13,930 | 16.3% | 25.5% |
| 60-64 | 39,055 | 12,080 | 14.1% | 30.9% |
| 20-64 | 535,520 | 85,700 | 100.0% | 16.0% |

Source: Data Request EQ1550 Table 04A, Statistics Canada, 2006 Census.

The education attainment of persons with disabilities aged 25-64 shows significant improvements. On high school and trades education their percentages are higher than those in the general population. On college education their percentage is slightly below. A higher difference with the general population remains on university education.

However, there is a significant percentage of persons with disabilities in science-based fields of education. A major concern is those who have not completed a certificate, diploma or degree. Their percentage is twice of that on the general population (see section 3 - access to education).

Despite their educational achievements, persons with disabilities continue to be severely affected by underemployment and unemployment. They are overrepresented in part-time and temporary jobs, and comprise a significant portion of the full-time/full year working poor. In 2005, there were 1,845 (6.1%) workers aged 25-64³² in this category. An improvement in the working age 20-64 is the higher participation rate. It was 63.4% compared to 43.0% for the population 15 years and over. This is the result of excluding the senior population in the labour force from the data. There were also 5,845 self-employed in this age group highlighting the importance of providing adequate support for their success. The following table presents the labour market indicators of the working population with disabilities 20-64 years.

| Labour Market Outcomes for People with Disabilities of Working Age 20-64 Years, Ottawa-Gatineau CMA (Ontario Part), 2006 | |
|---|----------|
| Participation Rate | 63.4% |
| Unemployment Rate | 7.0% |
| Worked Full-Year, Full-Time | 54.5% |
| Worked Part-Year or Part-Time | 37.7% |
| Worked at home | 3,875 |
| Self-employed | 5,845 |
| Median Employment Income 2005 | |
| All Work Activity | \$33,456 |
| Full Year, Full-Time | \$49,579 |
| Part-Year or Part-Time | \$15,248 |
| Source: Disability Profile, Statistics Canada, 2006 Census | |

Barriers to access employment and inadequate employment supports translate into a high incidence of poverty. In 2005, 20,352 working age persons with disabilities aged 20-64 lived in poverty in Ottawa. This was an incidence of poverty of 23.7% before taxes and 20.5% after taxes (a decrease of 3.2%). The analysis by age group shows that in all cases persons with disabilities have twice or near twice the incidence of poverty than is the case for the general population. Moreover, 2,014 (2.4%) working age persons with disabilities did not have income and 19.4% had incomes under \$20,000. Unattached individuals who are at a higher risk of poverty accounted for 23,200 or 27.1% of the population in this age group. 69.3% of unattached individuals lived alone. The table below presents the incidence of poverty of working age persons with disabilities 25-64 years.

³² Data for Ottawa Census Subdivision

| Working Age Persons with Disabilities 25-64 Years in Private Households by Incidence of Low Income Before Taxes, City of Ottawa, 2005 | | | | | | |
|--|----------------------------------|-------------------|--------------------------------|---------------------------|-------------------|--------------------------------|
| Age Group | Persons with Disabilities | | | General Population | | |
| | Total | Low Income | Incidence of Low Income | Total | Low Income | Incidence of Low Income |
| 25 - 34 | 10,765 | 3,185 | 29.6% | 108,125 | 17,350 | 16.0% |
| 35 - 44 | 17,015 | 4,655 | 27.4% | 128,465 | 17,020 | 13.2% |
| 45 - 54 | 24,610 | 5,370 | 21.8% | 125,665 | 13,260 | 10.6% |
| 55 - 64 | 24,905 | 4,715 | 18.9% | 88,950 | 8,980 | 10.1% |

Source: CSDS Urban Poverty Project, Table 1, 2006 Census

Seniors 65 years and over³³

In 2006, there were 49,770 seniors 65 years and over with disabilities living in Ottawa (53.4%). Maps 5 and 5A show the number and percent of seniors with disabilities across the Ottawa-Gatineau Census Metropolitan Area in 2006, by CT. The prevalence of disability shows a fast increase for older seniors, associated with more fragile health. The disability rate increased from 38.0% for younger seniors 65 to 69 years to more than 70% for older seniors 80 years and over. The largest cohort of seniors was in the age groups below 80 years (65.8%). The majority of seniors with disabilities were women (58.7%), particularly in the case of seniors 80 years or over (65.1%). Women live longer and thus are at higher risk of widowhood and living alone. Nearly one third of all seniors were widowed. The table below presents the senior population with disabilities by age group and the disability rates.

| Seniors 65 Years and Over with Disabilities, Ottawa-Gatineau CMA (Ontario part), 2006 | | | | |
|--|---------------------------|----------------------------------|--|------------------------|
| Age Group | General Population | Persons with Disabilities | Proportion of Seniors with Disabilities | Disability Rate |
| 65 Years and Over | 93,155 | 49,770 | 100.0% | 53.4% |
| 65 - 69 | 27,820 | 10,585 | 21.3% | 38.0% |
| 70 - 74 | 23,325 | 11,270 | 22.6% | 48.3% |
| 75 - 79 | 18,980 | 10,915 | 21.9% | 57.5% |
| 80 - 84 | 13,410 | 9,430 | 18.9% | 70.3% |
| 85+ | 9,620 | 7,580 | 15.2% | 78.8% |

Source: Disability Profile and Seniors Profile (CSDS), Statistics Canada, 2006

Disabilities affecting seniors are primarily the result of age-related illnesses and longer exposure to the risk of accidents. Mobility and agility are the two leading disabilities for seniors in Canada. They are followed by pain, hearing, seeing, memory and speech disorders. The most common non-visible disability is memory difficulty, particularly on older senior age groups. In 2006, 76.4% of seniors 65 years and over reported a mobility limitation in Canada (Statistics Canada, 2007, p. 32 & 37).

³³ Includes seniors in private households and not seniors in long-term care facilities.

In 2006, there were there were 23,705 families 65 years and over with disabilities in Ottawa. 655 couple families and 90 lone-parent families had children at home under 18 years. They were affected by the lack of access to affordable and flexible day care. In the same year, 14,570 seniors did not leave in families (unattached). These are one income households at a higher risk of poverty. Their proportion in the total senior population was higher compared to that of the general population (37.3% vs. 34.2%). Most unattached seniors lived alone and at risk of isolation.

| Families and Unattached Individuals 65 Years and Over with Disabilities, Ottawa, 2006 | | | |
|--|-------------------------------|-------------------------------------|------------------------|
| | General Population | People with Disabilities | Disability Rate |
| Total Families | 38,755 | 23,705 | 61.2% |
| Couples | 32,590 | 19,255 | 59.1% |
| Couples without children under 18 years | 31,415 | 18,600 | 59.2% |
| Couples with children under 18 years | 1,175 | 655 | 55.7% |
| Lone-parents with children under 18 years | 140 | 90 | 64.3% |
| Other economic Families | 6,025 | 4,355 | 72.3% |
| Unattached Individuals | 26,445 | 14,570 | 55.1% |
| Individuals living alone* | 25,020 | 14,185 | 56.7% |
| *Data from Ottawa-Gatineau CMA (Ontario Part) | | | |
| Source: CSDS Urban Poverty Project, Tables 9UI-A and 9EF, 2006 Census | | | |

As in the general population, the senior population with disabilities is culturally and linguistically diverse. Research findings indicate that seniors with disabilities from ethnic minority groups are at a higher disadvantage of accessing appropriate services. In 2006, their composition included, 330 (0.7%) of Aboriginal identity, 645 (1.3%) of Aboriginal Ancestry, 16,195 (32.5%) immigrants, 510 recent immigrants (1.0%) and 5,250 (10.5%) visible minorities (Canadian-born and immigrants). Francophones with disabilities were 10,800 (27.9%). Inclusion of this diversity in policies and programming is crucial to ensure access of all seniors with disabilities to supports. In 2006, 1,690 seniors were unilingual Francophones and 2,590 did not have knowledge neither of English or French. The five top non-official languages most frequently spoken at home were Italian, Chinese, Arabic, Cantonese and Vietnamese.

A significant percent of seniors with disabilities are in the labour force and a significant number act as unpaid or informal caregivers. In 2006, 3,305 (5.2%) were employed, 1,350 were self-employed. Unpaid work included 6,765 providing childcare and 8,455 senior care. The role of seniors taking care of other seniors will increase significantly in the next twenty years (reaching 25% in the general population). This in-kind contribution fills the gap of services in the system, particularly the lack of culturally and language sensitive services. Seniors' unpaid childcare may include their own children or the support to younger families to enter the labour force, particularly in the case of immigrant families.

Seniors with disabilities experience a significant gap on income levels. Among the key factors are, labour market exclusion that impacts their retirement pension. In addition, income security programs do not respond to the present economic reality. As well,

immigrant seniors under the family sponsorship agreement cannot access some benefits. In 2006, 1.7% (855) seniors 65 years and over with disabilities had no income compared to 1.3% in the general population and 36.4% (18,130) had incomes under \$20,000 (vs. 32.5%). As a result, seniors with disabilities are overrepresented among seniors without income and with incomes under \$20,000 in Ottawa (59.9% and 71.5%, respectively).

In 2006, 1,230 senior families and 815 unattached seniors with disabilities lived in low quality housing (houses requiring major repairs). A significant number of tenant seniors were also in unaffordable housing. 1,375 tenant families and 4,675 unattached tenant seniors spent 30% or more of their income on housing major payments. This was also the case of 1,565 owner families and 1,690 unattached seniors. Furthermore, some seniors were at risk of homelessness. This was the case of 250 senior families and 1,130 unattached tenants who lived below the poverty line and spent 50% or more of their income on major housing payments.

A large percentage of seniors with disabilities live in poverty, despite the substantial improvement brought by the Guarantee Annual Income. Seniors living in poverty cannot pay for services or supports they need or access market housing that will assist aging at home. Their incidence of poverty is higher than that of seniors in the general population according to most poverty indicators. A key contributing factor is the high percentage of unattached seniors. In 2006, 6,822 (14.0%) seniors lived in poverty before tax. There was some improvement through tax measures (8.0%). However, their disability rates before and after taxes were higher than their counterparts in the general population (11.9% and 6.9%, respectively). The following table includes the poverty indicators for seniors 65 years and over.

| Poverty Indicators Seniors Population with Disabilities 65 Years and Over, City of Ottawa, 2006 | | |
|--|--------------------------------------|--|
| Poverty Rates Before Tax | Seniors with Disabilities | Seniors in the General Population |
| Individuals by Age Group | | |
| 65+ | 14.0% | 11.9% |
| 65-74 | 13.9% | 10.8% |
| 75+ | 13.9% | 13.2% |
| Families and Unattached Persons | | |
| Total Families | 6.4% | 5.7% |
| Unattached Seniors 65+ | 32.2% | 28.4% |
| Depth of Poverty: Living 50% or More Below Low Income Cut-Off Before Taxes | | |
| Families 65+ | 10.5% | 11.7% |
| Unattached seniors 65+ | 5.3% | 5.7% |
| Incomes Under \$20,000 | | |
| Families 65+ | 2.0% | 1.8% |
| Unattached seniors | 31.9% | 28.1% |
| Housing Affordability: Spending 30+% of Income on Major Housing Payments | | |
| Renter | | |
| Families 65+ | 46.9% | 47.4% |
| Unattached seniors 65+ | 60.1% | 58.7% |
| Owner | | |
| Families 65+ | 47.9% | 23.4% |
| Unattached seniors 65+ | 50.9% | 48.9% |
| Source: Urban Poverty Project (UPP), Tables 9EF, 9UI-A, 10EF-A & 10 UI-A, 2006 Census | | |

5. Gender and Disability

The analysis by sex shows that more women (54.7%) than men have disabilities, particularly in their older years, which emphasizes the importance of gender sensitive services for persons with disabilities. Of adults 15 years and over, women are more likely to report disabilities related to pain and discomfort than men. As well, mobility limitations are more common for senior women 65 years and over than their male counterparts (CCDS, 2009b). Women also are more likely to report severe or very severe disabilities compared to men. By contrast, mild limitations are more commonly reported for men (Statistics Canada, 2007, p.35).

Women have exceeded men's education attainment. More women than men with disabilities have postsecondary education. However Women continue to be concentrated on traditional fields of education with a significant gap on science-based occupations compared to men. This is particularly the case of mathematics, computer and information sciences, and architecture, engineering and related technologies. Women face a double challenge to secure a job. They confront not only labour market barriers because of their disability, but the lack of support for their caregiver role (or unpaid

work). Women bear most of the care in the family, despite an increasing participation of men in recent years.

Labour market outcomes show that women with disabilities do even less well in terms of employment. They have lower participation rates and higher unemployment rates than men. They earn less than men. Their median employment income is 78.2% of that of men. Their lower median employment income is significantly related to a lower percentage working full-time/full-year work (46.5% vs. 53.5%). Their economic exclusion is observed on their overrepresentation on incomes under \$20,000 and higher poverty rates than those of their male counterparts (57.6% vs. 42.3%). The table below presents the gender indicators for people with disabilities.

| Gender Indicators for People with Disability, Ottawa, 2006 | | |
|---|--------------|------------|
| | Women | Men |
| Population* | | |
| Individual all ages | 54.7% | 45.3% |
| Unattached persons | 38.3% | 61.7% |
| Seniors 65+ years | 58.6% | 41.4% |
| Prevalence of Disability | | |
| Individuals all ages* | 19.1% | 16.7% |
| Unattached individuals 15 years and over | 33.1% | 24.5% |
| Education | | |
| Postsecondary education 25-64 years* | 53.4% | 46.6% |
| Labour Market Outcomes Population 15 Years and Over | | |
| Participation rate | 38.0% | 48.0% |
| Unemployment rate | 7.0% | 8.0% |
| Full-time/full-year (49-52 weeks) | 50.4% | 58.1% |
| Part time/part-year work (1-48 weeks) | 49.6% | 41.9% |
| Part-Time | 60.6% | 39.6% |
| Self-employed* | 39.1% | 60.9% |
| Median employment Income 2005* | \$25,095 | \$32,077 |
| Full-time/full-year working poor | 47.0% | 53.0% |
| Unpaid Work | | |
| Unpaid childcare 15-60+ hours | 66.1% | 33.9% |
| Unpaid senior care 10-20+ hours | 65.2% | 34.8% |
| Income 15 years and over - 2005* | | |
| Without income | 3.9% | 2.9% |
| Incomes under \$20,000 | 44.9% | 33.1% |
| Median Income from all sources | \$21,791 | \$33,480 |
| People living in Poverty (2005) | | |
| Individuals all ages living in poverty | 57.6% | 42.3% |
| Unattached individuals 15 years and over living in poverty | 58.9% | 41.1% |
| Depth of Poverty Unattached Individuals: Individuals Living 50% or more Below Low Income Cut-Off Before Taxes | 48.3% | 51.7% |
| Incidence of Poverty (2005) | | |
| Incidence of poverty individuals all ages | 22.2% | 19.7% |
| Incidence of poverty unattached individuals | 40.7% | 45.8% |
| * Data for Ottawa-Gatineau CMA (Ontario Part) | | |
| Source: Urban Poverty Project (UPP), Tables 1, 6A, 10UI and Disability Profile, 2006 Census | | |

Conclusions

All levels of government play a crucial role in the economic inclusion of persons with disabilities. Disabilities affect all of us. They are part of a life cycle and the onset of an illness or accident. The overall policy and program gaps at the Federal level with respect to income supports results in the exclusion of persons with disabilities and impacts the economy as a whole. “While some Ontario Disability Support Program families are closer to or above the poverty line, the additional costs of living with a disability must be taken into account in assessing the adequacy of living standards” (Ontario Social Assistance Review Advisory Committee, 2010, p.6).

Findings of the Poverty Report of the City of Ottawa (SPCO, 2010) indicate the need to modify Ontario’s Poverty Reduction Strategy in two key ways that impact persons with disabilities:

- Incorporate strategies to address the poverty among unattached individuals, who are a very significant portion of Ontario’s poor, and who will not benefit from the Province’s Poverty Reduction Strategy, and
- Most importantly, the need to include increases to the benefit levels for Ontario Works (OW) and Ontario Disability Support (ODSP) payments, which are critically below the amounts needed to cover basic living costs in Ottawa.

The report also highlights the concerns that arose from the Province’s recent cut to the “Special Diet Allowance” for people with documented health conditions with particular dietary requirements. This is causing extreme hardship for people with disabilities and requires urgent action.

The existence of widespread food insecurity and chronic illness related to poor nutrition of Ontario’s social assistance recipients is a major concern. Immediate action, therefore, is required to put food on the table for people with disabilities living in poverty. The urgent action for a \$100 monthly healthy food supplement to the basic needs allowance for all adults receiving social assistance, is the first step. This should be followed by actions to address food security at the local level.

At the local level, there needs to be an integrated approach to the continuum of responsive services available at different stages of the life cycle. This is also reflected in the lack of data, particularly of children and youth with disabilities 0-19 years. Supports at school and transition programs to move to higher education levels are inadequate. Children with disabilities who are excluded in the education system have less opportunity to qualify for jobs in the currently specialized labour market. This ultimately increases their risk of poverty.

New technologies have improved accesses and accommodation in the workplace. However, the slow response of employment programs, lack of compliance of equity policies and the absence of an integrated approach are barriers to enjoy these benefits. The social programs review report (2010), states the increasing recognition across different levels of government and community agencies that a more holistic approach to

workforce development services is needed. This approach would integrate employment services, financial assistance and related supports (e.g. public health, dental services, recreation, child care, and housing). Such approach would be very beneficial for persons with disabilities in Ottawa and their caregivers. Two employment alternatives that deserve special attention are self-employment and home-based workers.

The diversity of people with disabilities characterizes the richness of cultures and languages in the city and in the country as a whole. Nevertheless, their access to programs and services is hindered by the lack of culturally and language sensitive services. Ottawa has a strong social capital. Ethnocultural organizations have the skills and knowledge to fill this gap, if access to appropriate resources is provided.

Glossary of Terms

Activity Limitation:

Instead of using the term “persons with a disability”, Statistics Canada uses the term “person with an activity limitation”. Statistics Canada defines this as: Any limitation on activity, restriction on participation or reduction in the quality or type of activities because of a physical, mental or health problem. Activity limitation includes difficulties in hearing, seeing, speech, walking, climbing stairs, bending, earning or any other difficulty in carrying out similar activities, and conditions or health problems that have lasted or are expected to last six months or more.

Disability Prevalence/Incidence/Rate:

It is the percentage of individuals in the general population who have a disability.

Economic Families:

They refer to a group of two or more persons who live in the same dwelling and are related to each by blood, marriage, common-law or adoption. A couple may be of opposite or same sex. For 2006, foster children are included.

Equity Seeking Groups:

Throughout the report we use the term “equity seeking groups” as a short-hand way to refer to groups who are at higher risk of economic exclusion (i.e. higher rates of poverty and unemployment along with lower median incomes).

Francophone:

The Social Planning Council uses a custom definition of “Francophone” which was negotiated with representatives of the Francophone community and then used to purchase custom data from Statistics Canada. The definition includes:

- people whose first language or languages are French or French plus a non-official language, and who can conduct a conversation in French;
- people whose first language is not English or French but whose first official language is French;
- people who speak primarily French or French plus a non-official language at home;
- An equal distribution of individuals who have both French and English as first languages spoken.

Low Income Cut-Offs (LICOs):

They are income thresholds determined by analyzing family expenditure data. Families with incomes below these thresholds are likely to devote a larger share of income to the necessities of food, shelter and clothing than would the average family. LICOs are defined for five categories of community size and seven of family size. The after-tax LICO offers better measure of the actual disposable income for families on basic necessities than pre-tax indicators.

| 2005 Low-Income Cut-offs for Ottawa (500,000 population and over) | | | | | | | |
|---|----------|----------|----------|----------|----------|----------|----------|
| Family Size | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 2005 Low Income Cut-Offs | \$20,778 | \$25,867 | \$31,801 | \$38,610 | \$43,791 | \$49,389 | \$54,987 |
| 2005 Low Income Cut Offs | \$17,219 | \$20,956 | \$26,095 | \$32,556 | \$37,071 | \$41,113 | \$45,155 |
| Source: Statistics Canada, Catalogue No. I75F002MIE | | | | | | | |

Non-standard or Precarious jobs:

They include any employment that is not permanent, full-time and full-year, including the 24 hour service economy. Non-standard jobs are characterized as having a high risk of termination, offering limited benefits, limited access to entitlements such as Employment Insurance, minimal job security and are more likely to offer inadequate wages. Positions are mostly temporary or non-permanent. .

Unattached Individuals (persons not in families):

Persons living either alone or with others to whom he or she is unrelated, such as roommates or a lodger.

Visible minorities (racialized groups):

They are defined by the Employment Equity Act, as non-Caucasian in race or non-white in colour, other than Aboriginal. They include: Chinese, South Asian, Black, Filipino, Latin American, Southeast Asian, Arab, West Asian, Korean and Japanese. The objective of this definition was to ensure visible minority equal access and representation in the public sector.

Working Poor:

The analysis of the working poor in this report focuses on those who worked full-year/full-time, whose income falls below the Low Income Cut-Off before taxes.

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Geographic Information System Maps

Map 1 Number and Percent of People with a Disability in the Ottawa-Gatineau Census Metropolitan Area (CMA), 2006 by Census Tract

Map 1A Number and Percent of People with a Disability in the Ottawa-Gatineau Census Metropolitan Area (CMA), 2006 by Census Tract (zoom)

Map 2 Unemployment Rate and Number of People with a Disability Who Were Unemployed in the Ottawa-Gatineau Census Metropolitan Area (CMA), 2006 by Census Tract

Map 2A Unemployment Rate and Number of People with a Disability Who Were Unemployed in the Ottawa-Gatineau Census Metropolitan Area (CMA), 2006 by Census Tract (zoom)

Map 3 Number and Percent of People with a Disability Who Were Living Below the Low Income Cut Off (Before Tax) in the Ottawa-Gatineau Census Metropolitan Area (CMA), 2006 by Census Tract

Map 3A Number and Percent of People with a Disability Who Were Living Below the Low Income Cut Off (Before Tax) in the Ottawa-Gatineau Census Metropolitan Area (CMA), 2006 by Census Tract (zoom)

Map 3B Number and Percent of People with a Disability Who Were Living Below the Low Income Cut Off (Before Tax) in the Ottawa-Gatineau Census Metropolitan Area (CMA), 2006 by Census Tract (zoom)

Map 4 Number and Percent of People with a Disability Who Were Living Alone in the Ottawa-Gatineau Census Metropolitan Area (CMA), 2006 by Census Tract

Map 4A Number and Percent of People with a Disability Who Were Living Alone in the Ottawa-Gatineau Census Metropolitan Area (CMA), 2006 by Census Tract (zoom)

Map 5 Number and Percent of Seniors with a Disability in the Ottawa-Gatineau Census Metropolitan Area (CMA), 2006 by Census Tract

Map 5A Number and Percent of Seniors with a Disability in the Ottawa-Gatineau Census Metropolitan Area (CMA), 2006 by Census Tract (zoom)

Map 6 Number and Percent of Homeowners with a Disability Who Were Paying 30% or More of Income on Their Major Housing Payment in the Ottawa-Gatineau Census Metropolitan Area (CMA), 2006 by CT

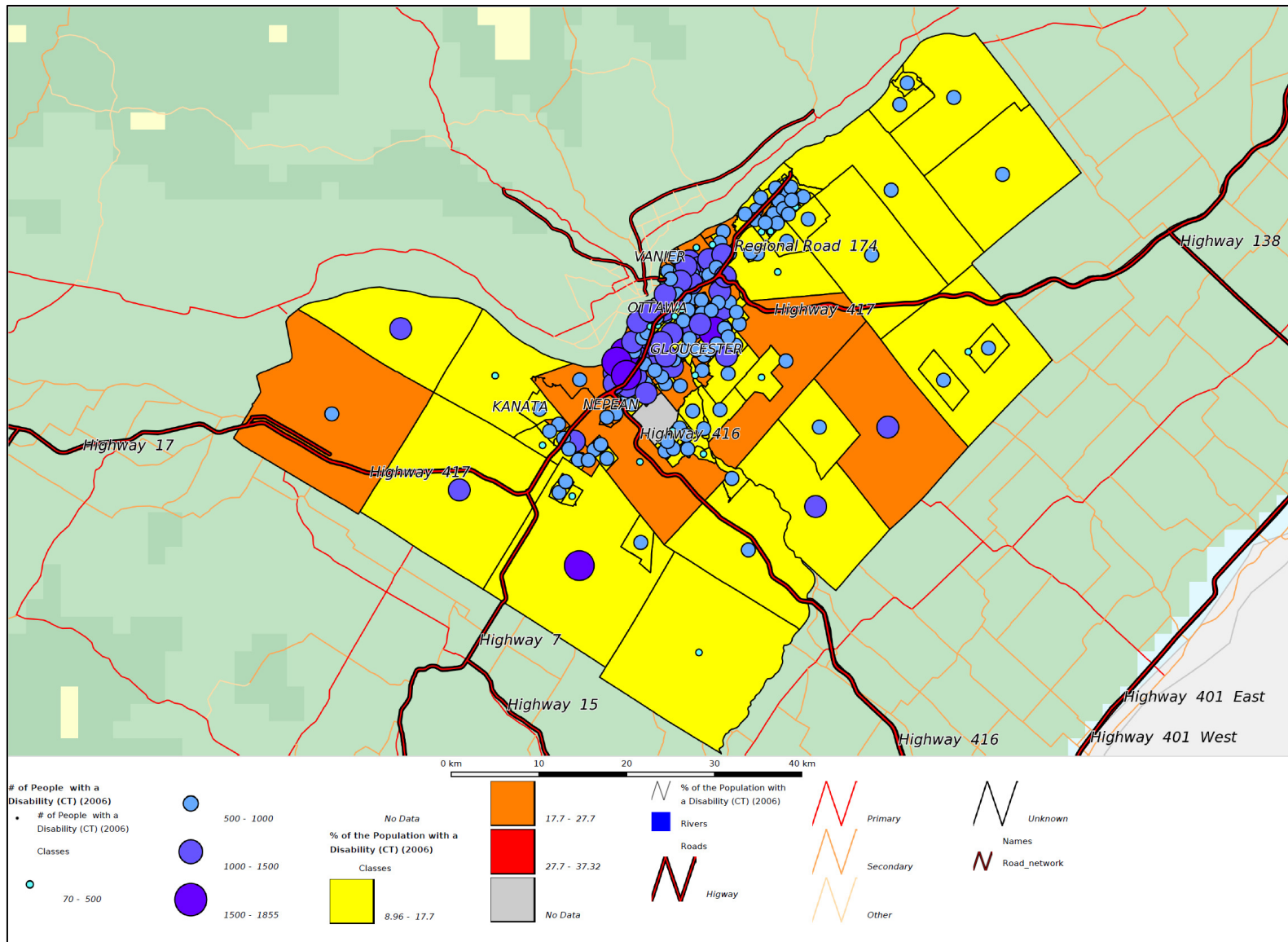
Map 6A Number and Percent of Homeowners with a Disability Who Were Paying 30% or More of Income on Their Major Housing Payment in the Ottawa-Gatineau Census Metropolitan Area (CMA), 2006 by CT (zoom)

Map 6B Number and Percent of Homeowners with a Disability Who Were Paying 30% or More of Income on Their Major Housing Payment in the Ottawa-Gatineau Census Metropolitan Area (CMA), 2006 by CT (zoom)

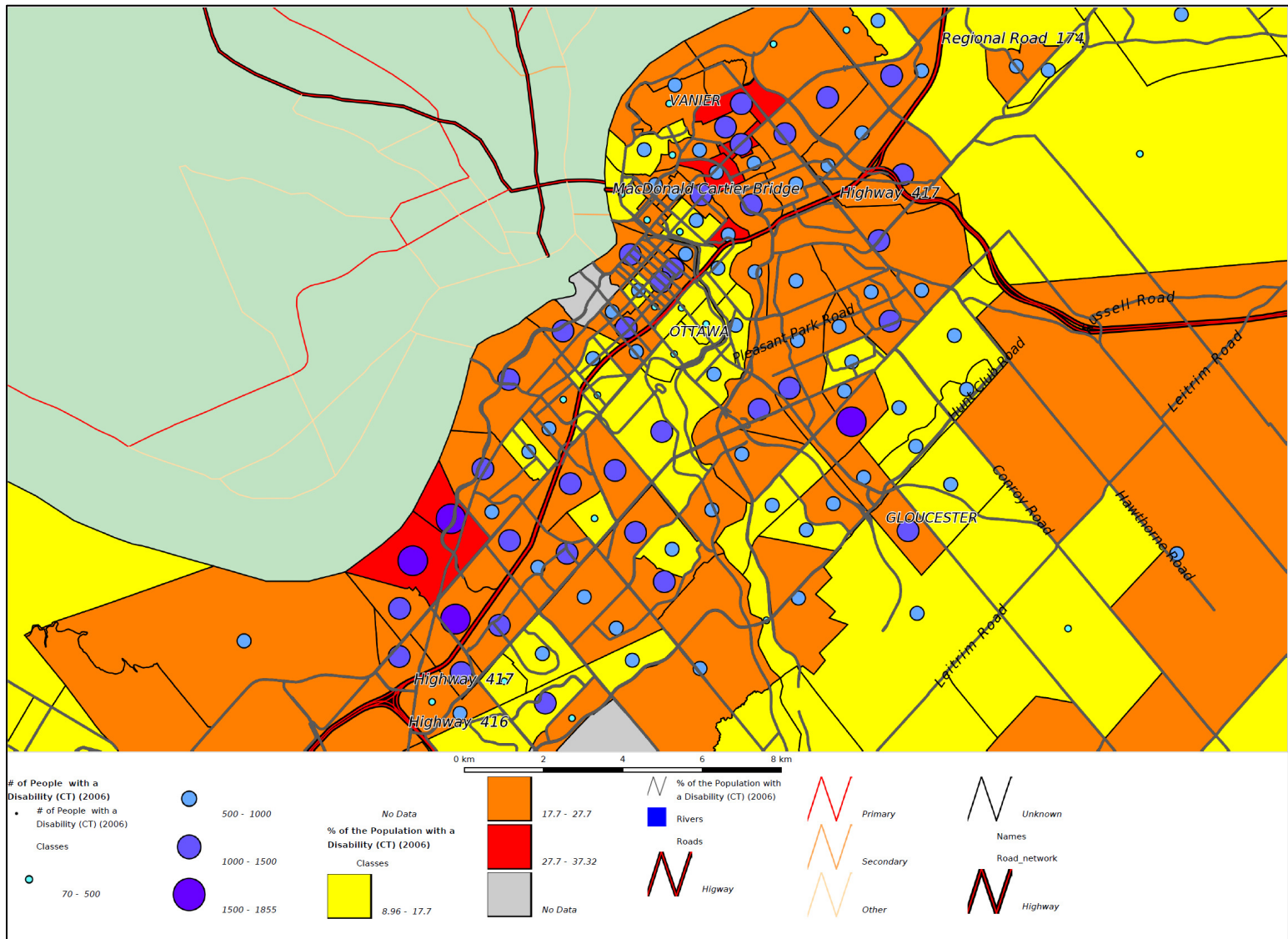
Map 7 Number and Percent of Tenants with a Disability Who Were Paying 30% or More of Income on Rent in the Ottawa-Gatineau Census Metropolitan Area (CMA), 2006 by CT

Map 7A Number and Percent of Tenants with a Disability Who Were Paying 30% or More of Income on Rent in the Ottawa-Gatineau Census Metropolitan Area (CMA), 2006 by CT (zoom)

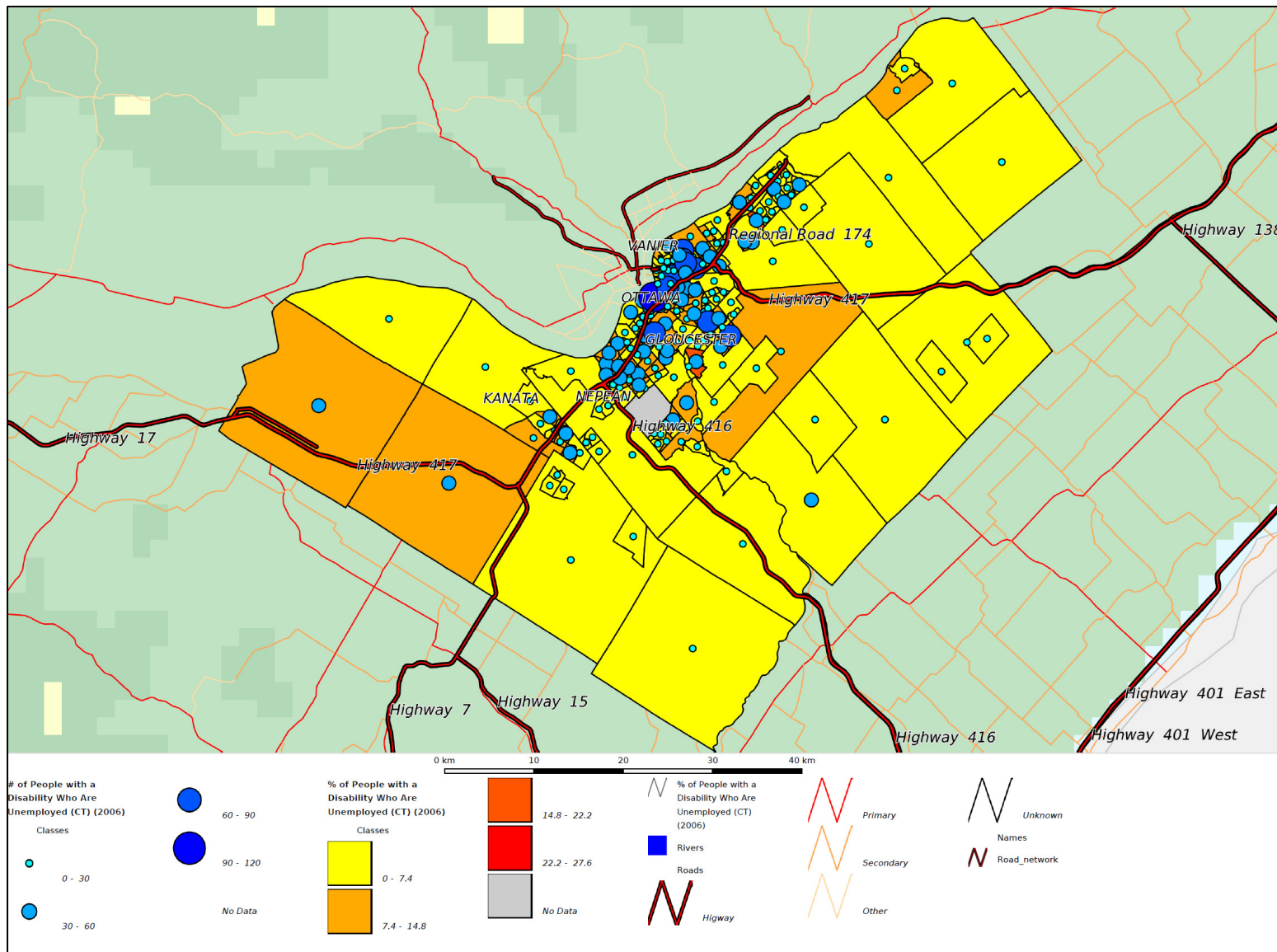
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 Percent Overall in Ottawa is 17.7%



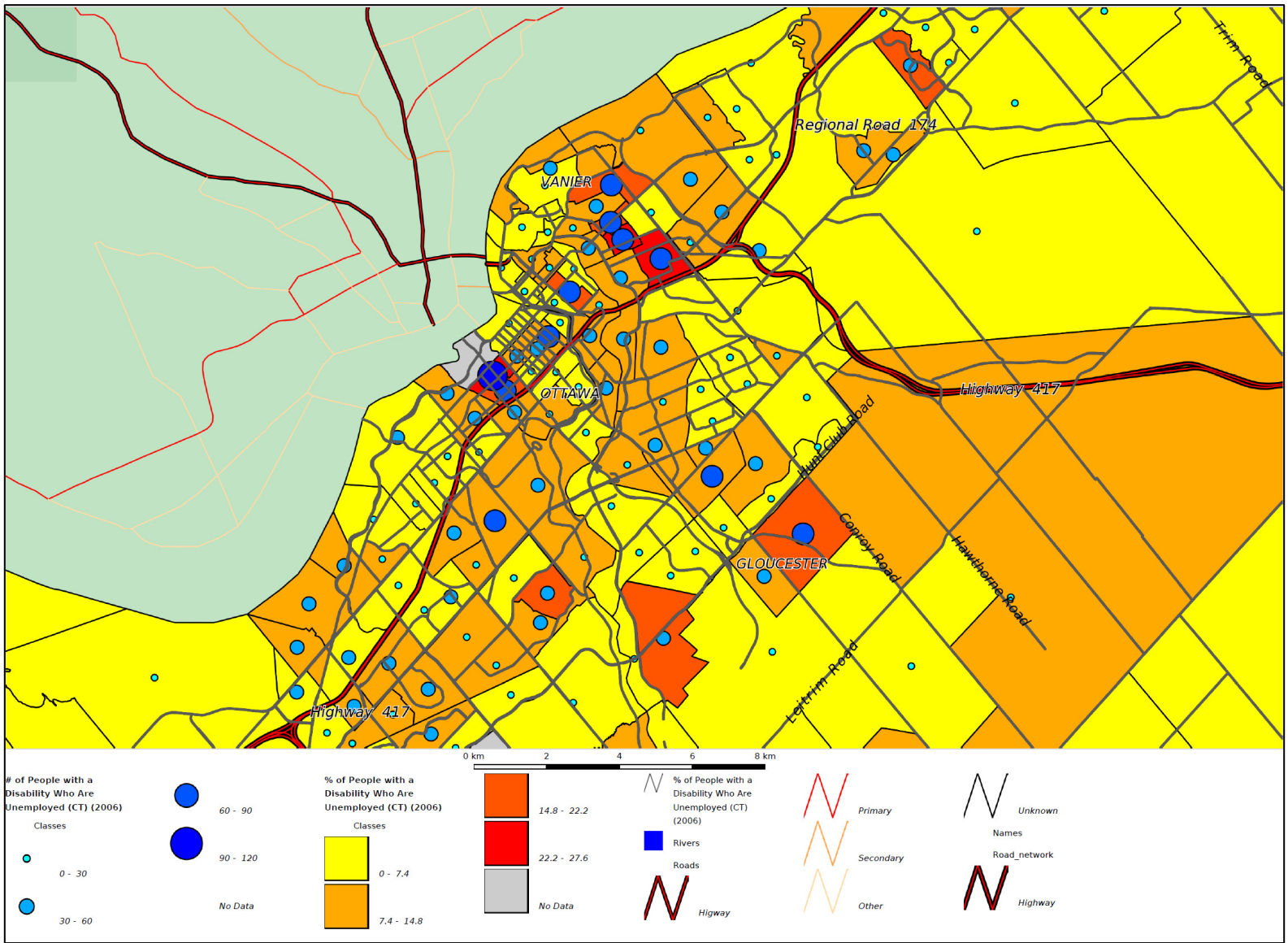
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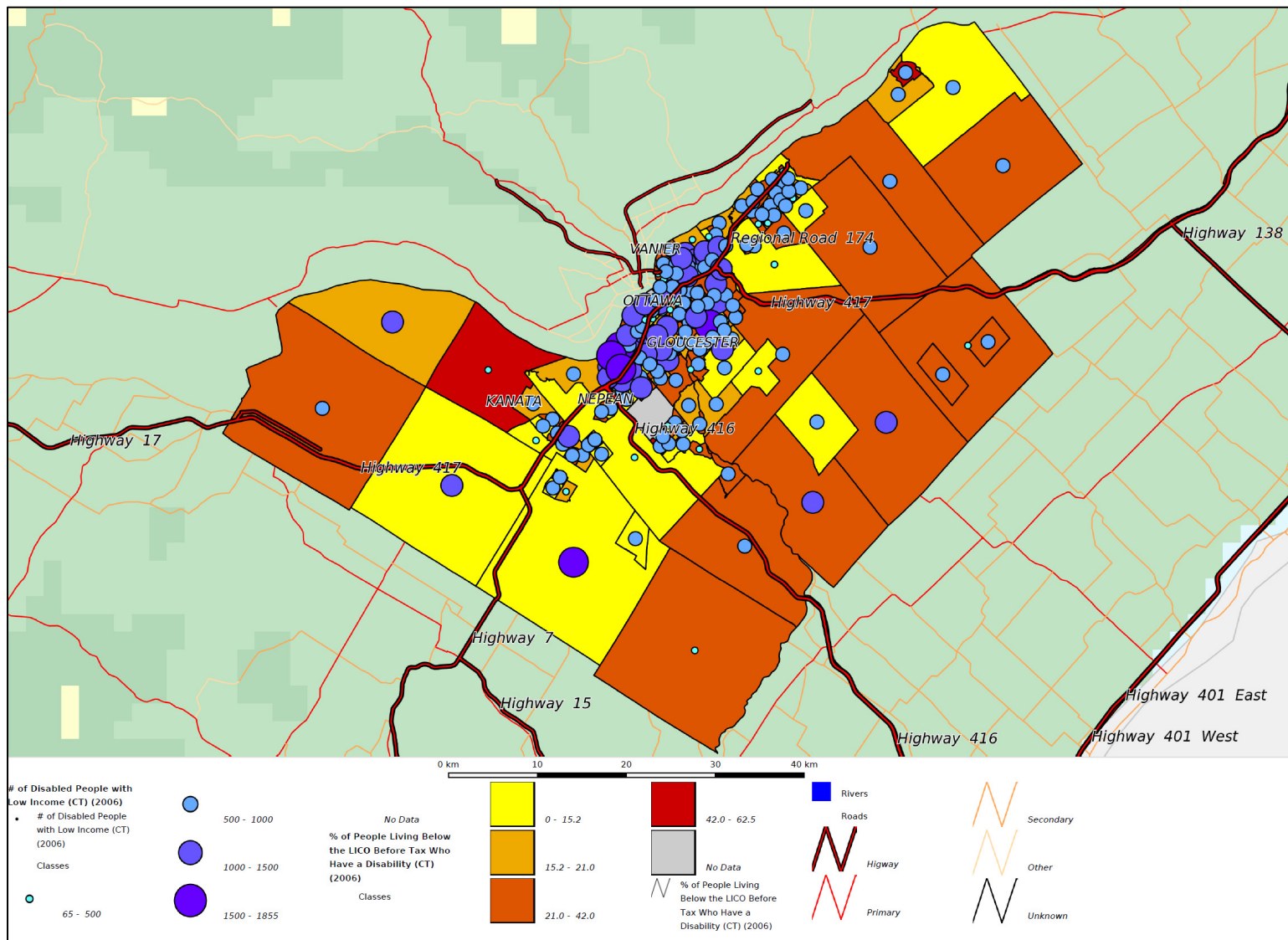
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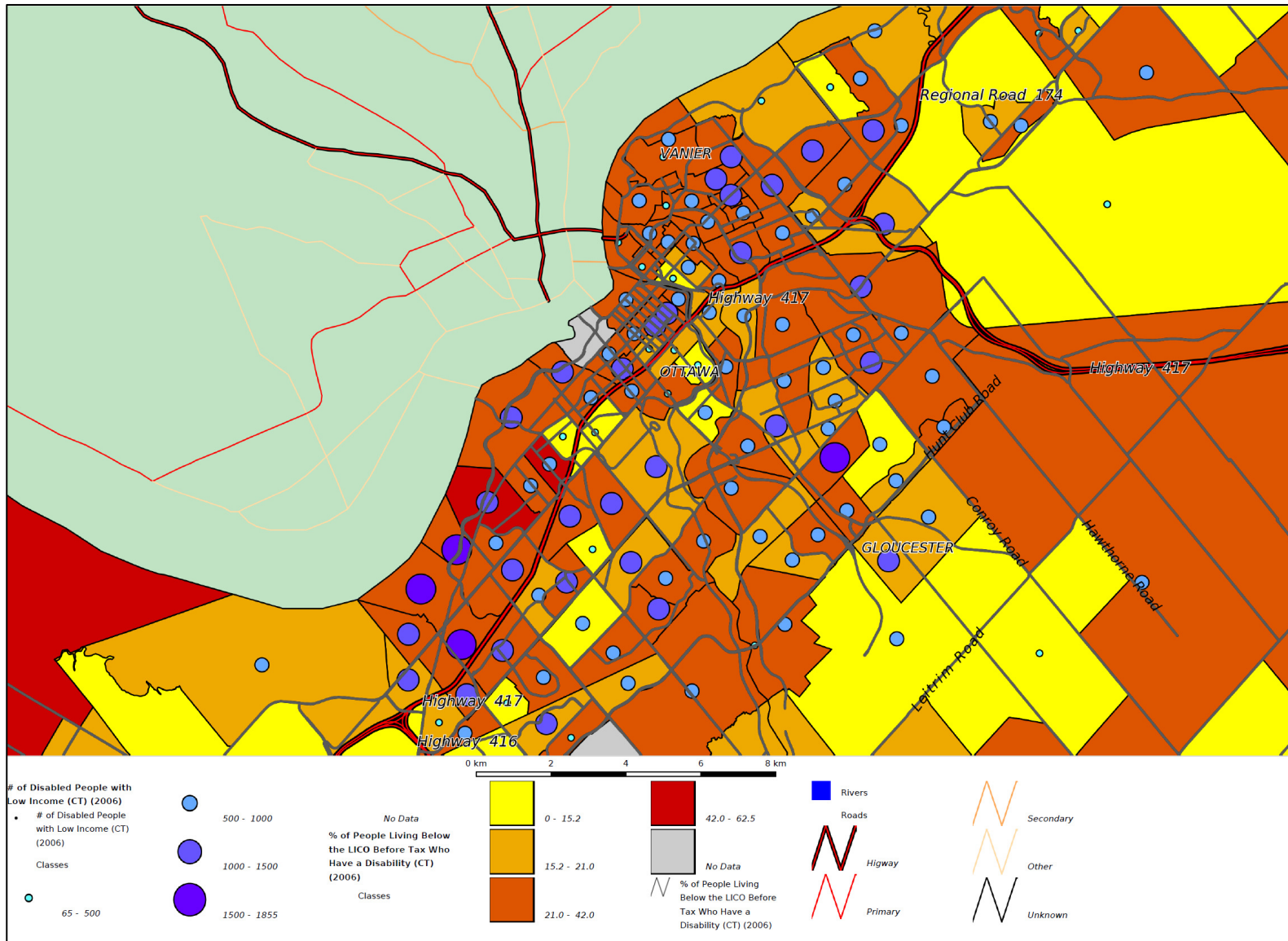
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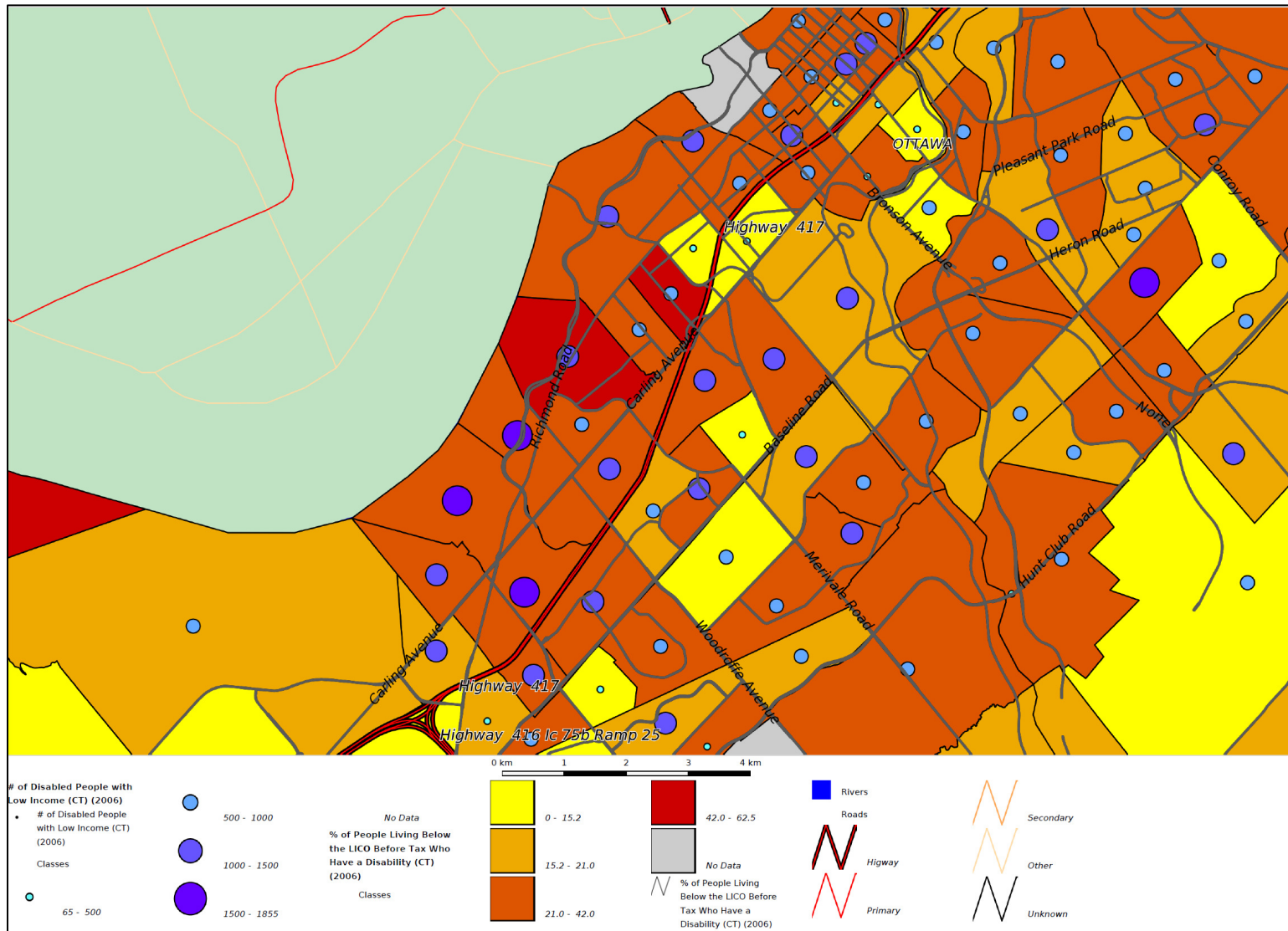
Map 3 Number and Percent of People with a Disability Who Were Living Below the Low Income Cut Off (Before Tax) in the Ottawa-Gatineau Census Metropolitan Area (CMA), 2006 by Census Tract
 Percentage of People with Disabilities Living Below LICO – BT was 21.0% on Average Compared to 15.2% for General Population



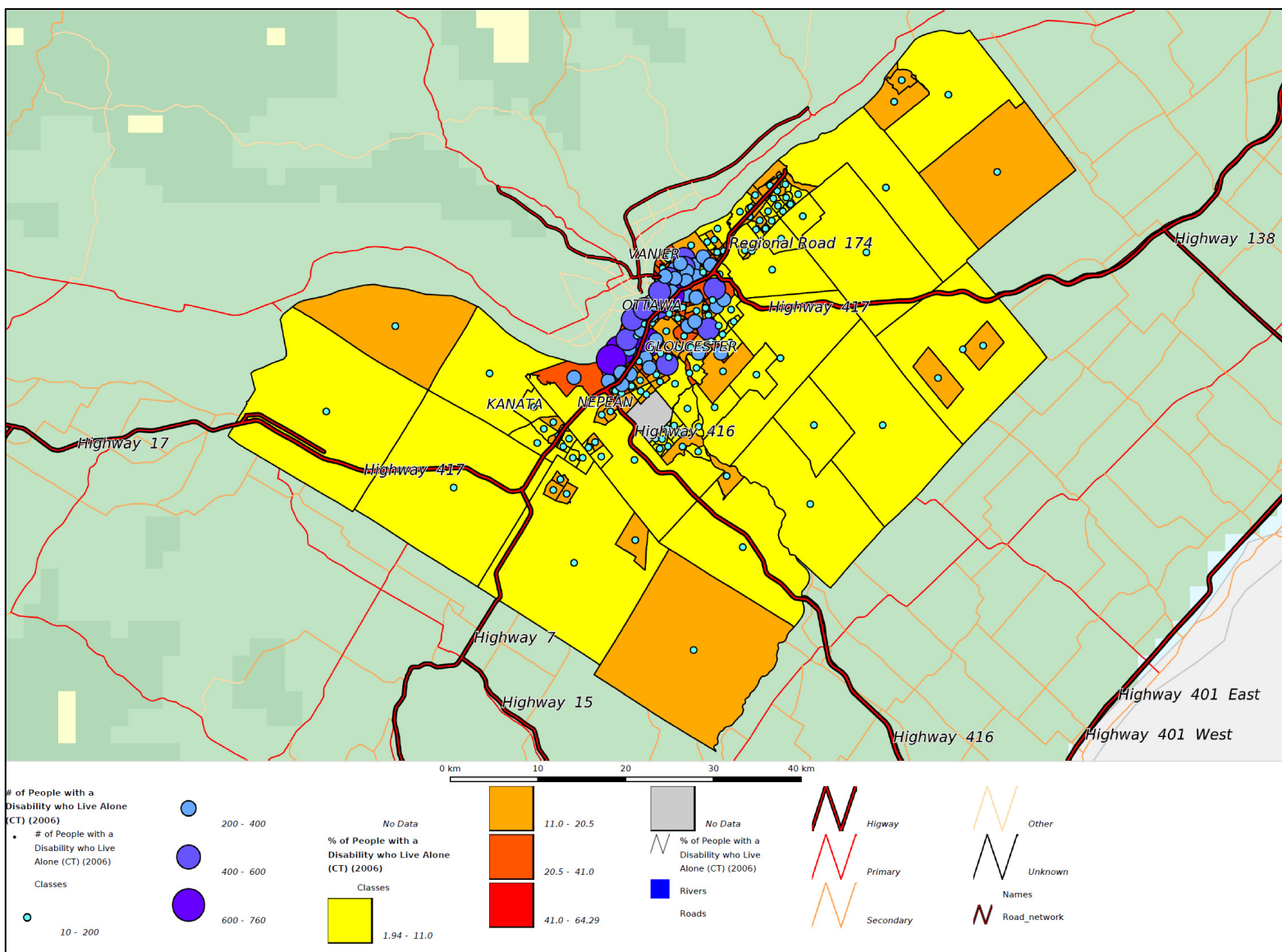
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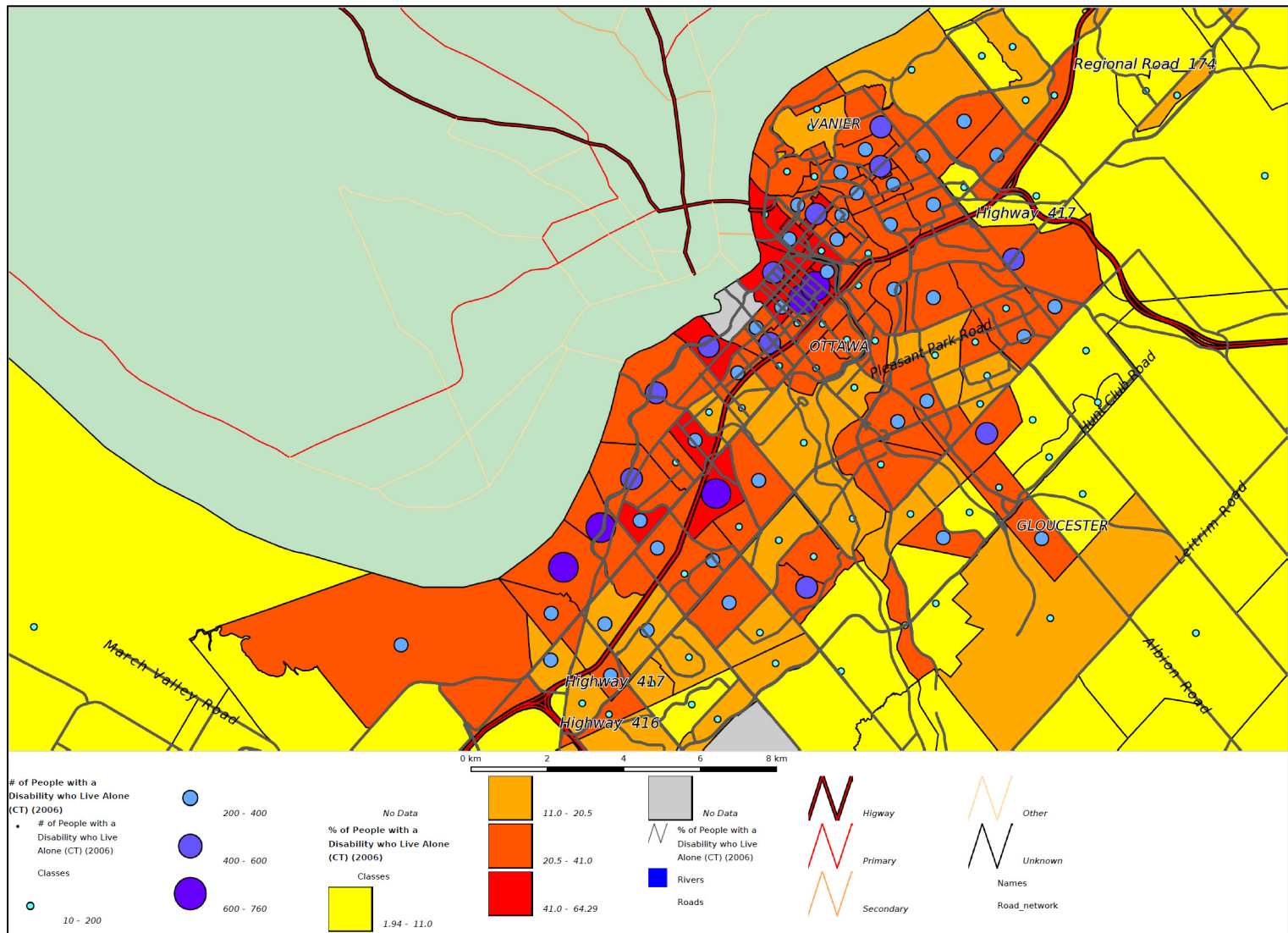
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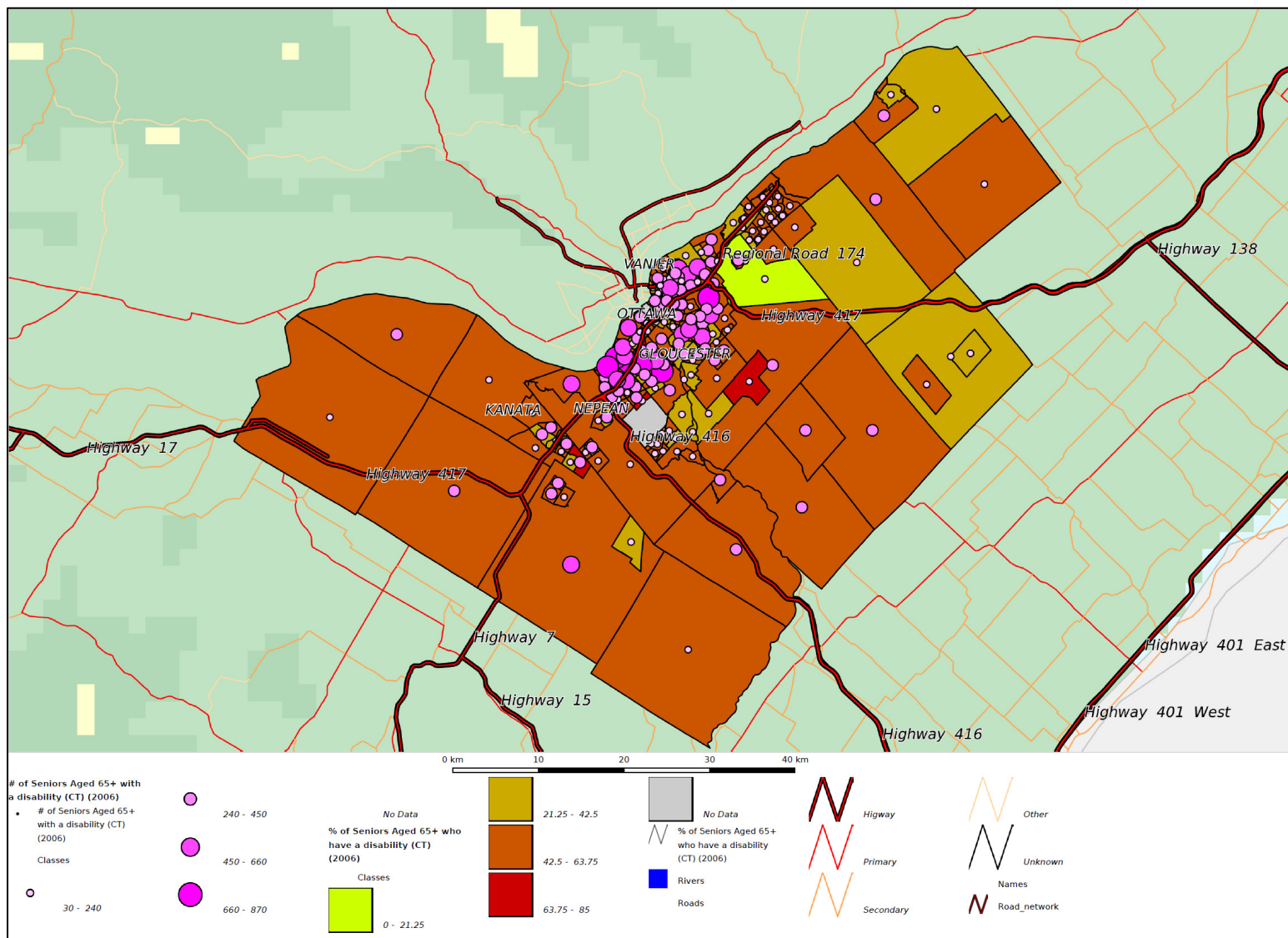
Map 4 Number and Percent of People with a Disability Who Were Living Alone in the Ottawa-Gatineau Census Metropolitan Area (CMA), 2006 by Census Tract
 Percentage of People with Disabilities Living Alone was 20.5% on Average Compared to 11.0% for General Population



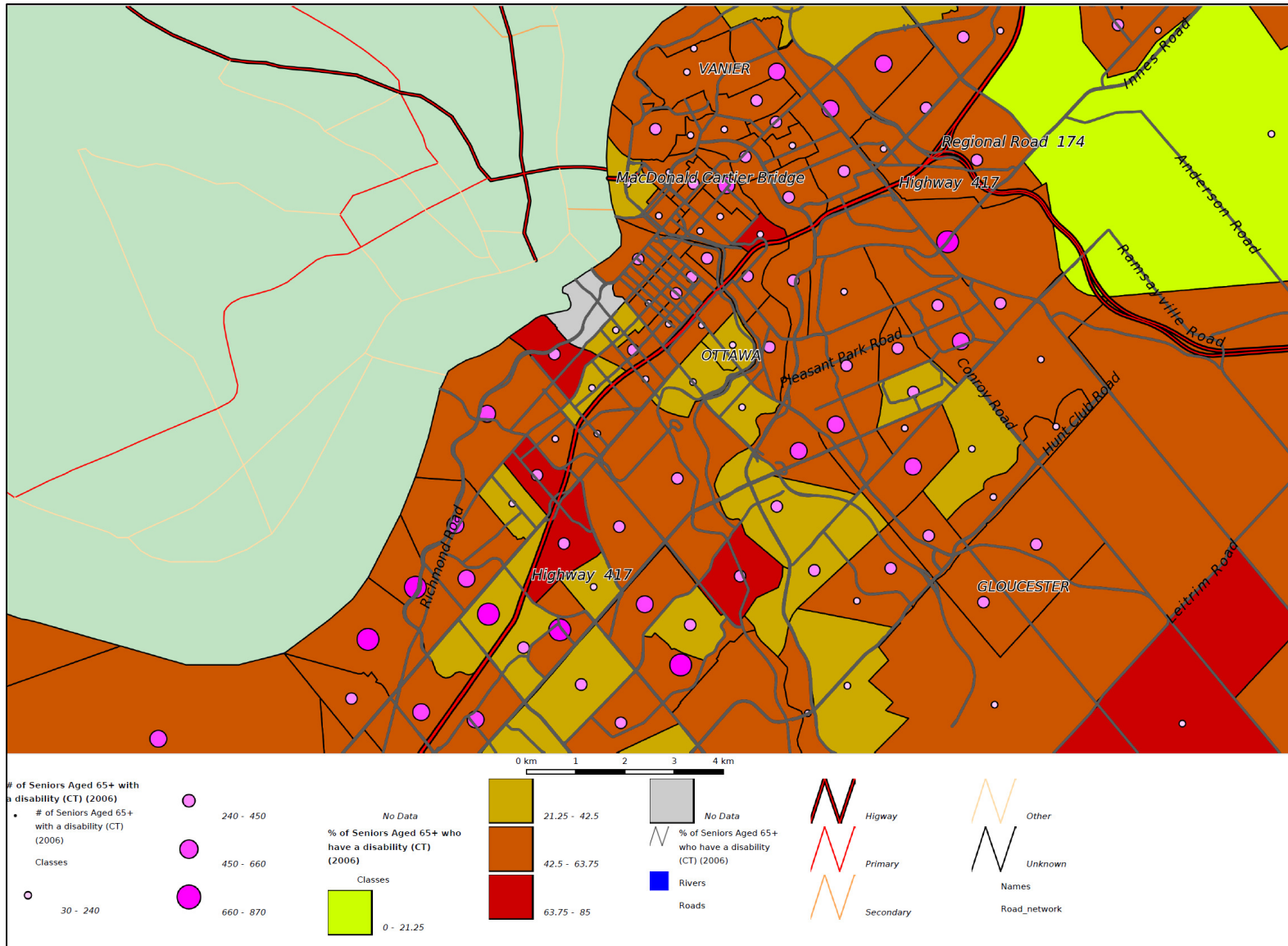
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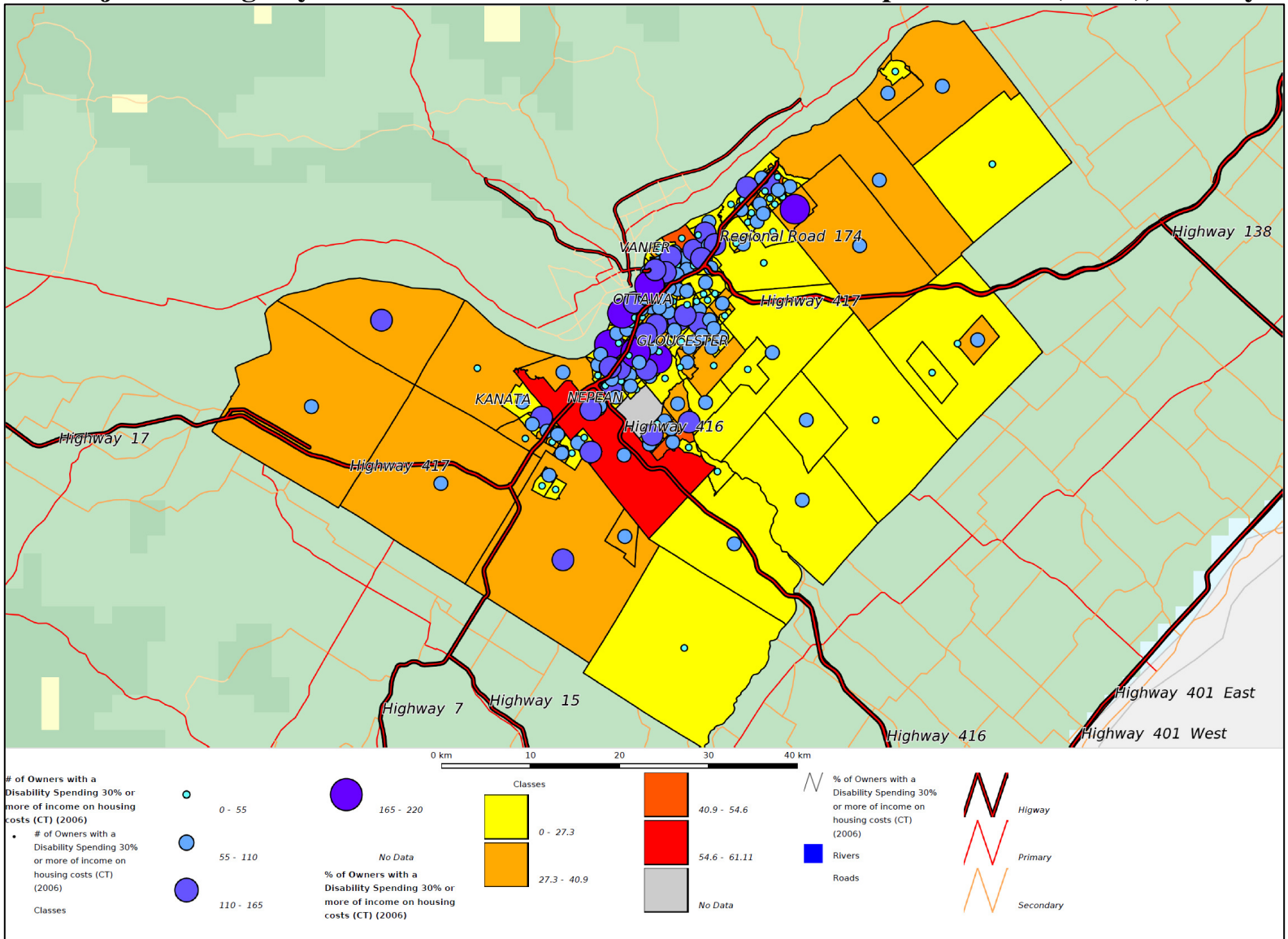
**Map 5 Number and Percent of Seniors with a Disability
in the Ottawa-Gatineau Census Metropolitan Area (CMA), 2006 by Census Tract**



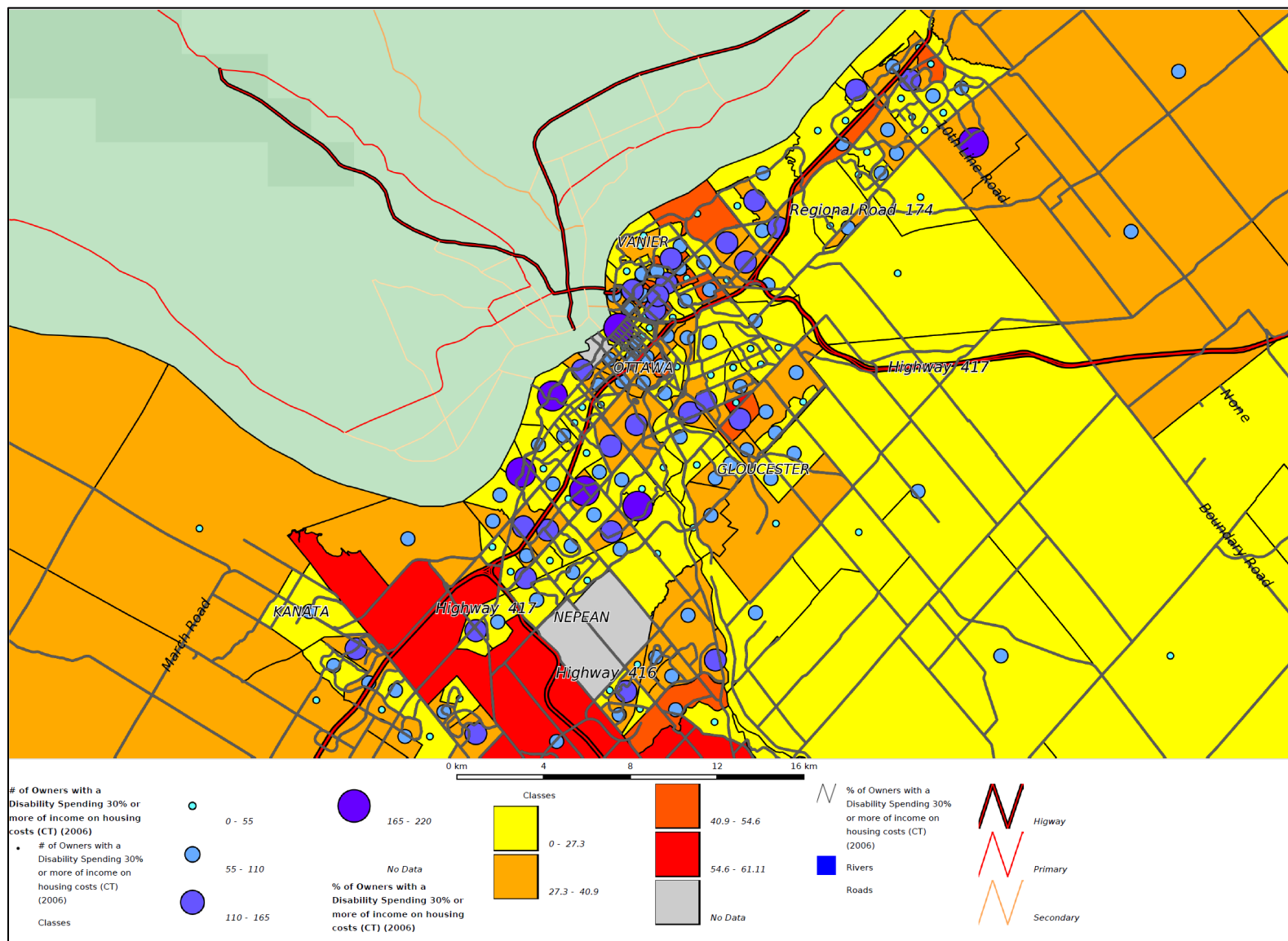
**Map 5A Number and Percent of Seniors with a Disability
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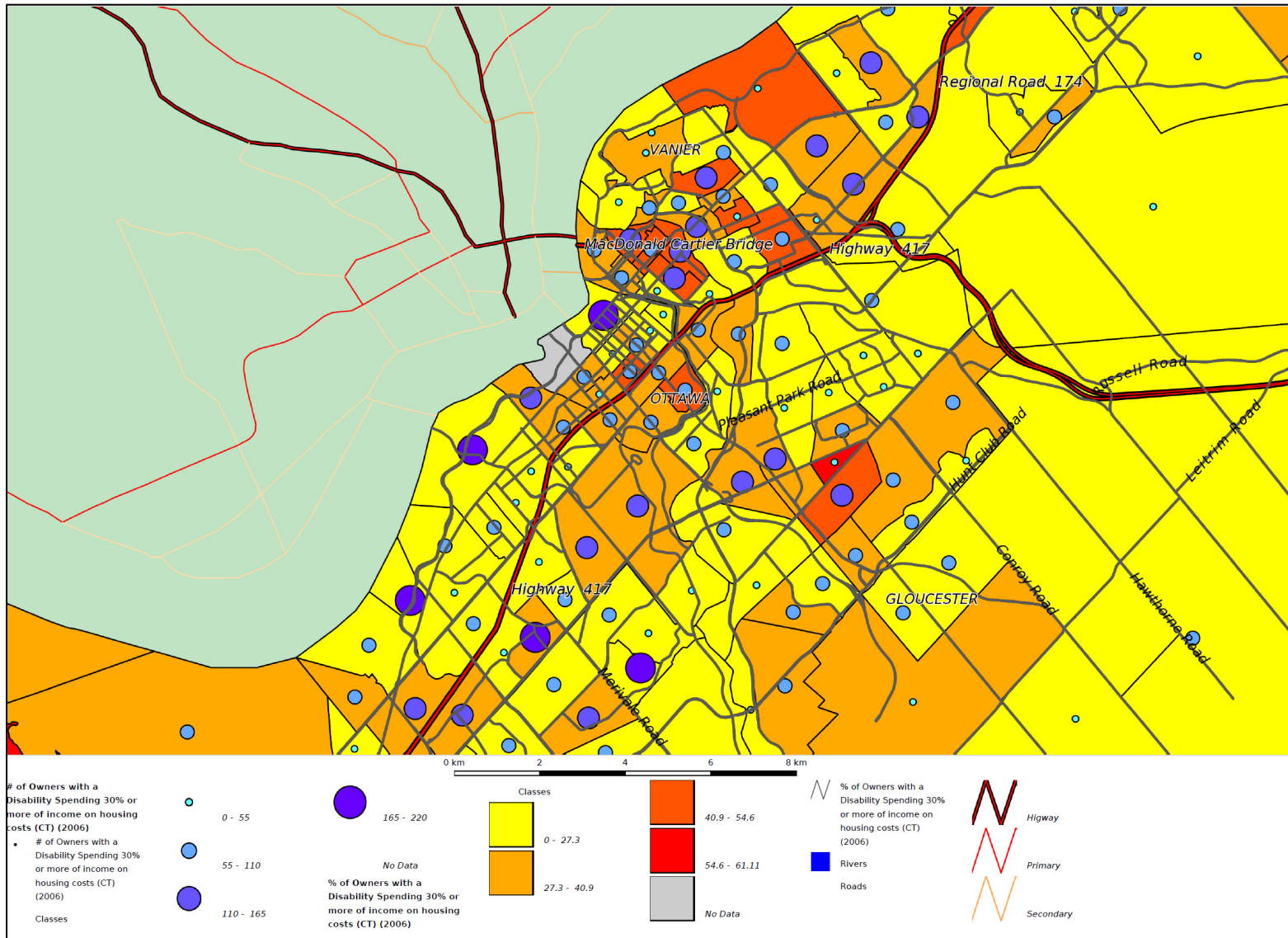
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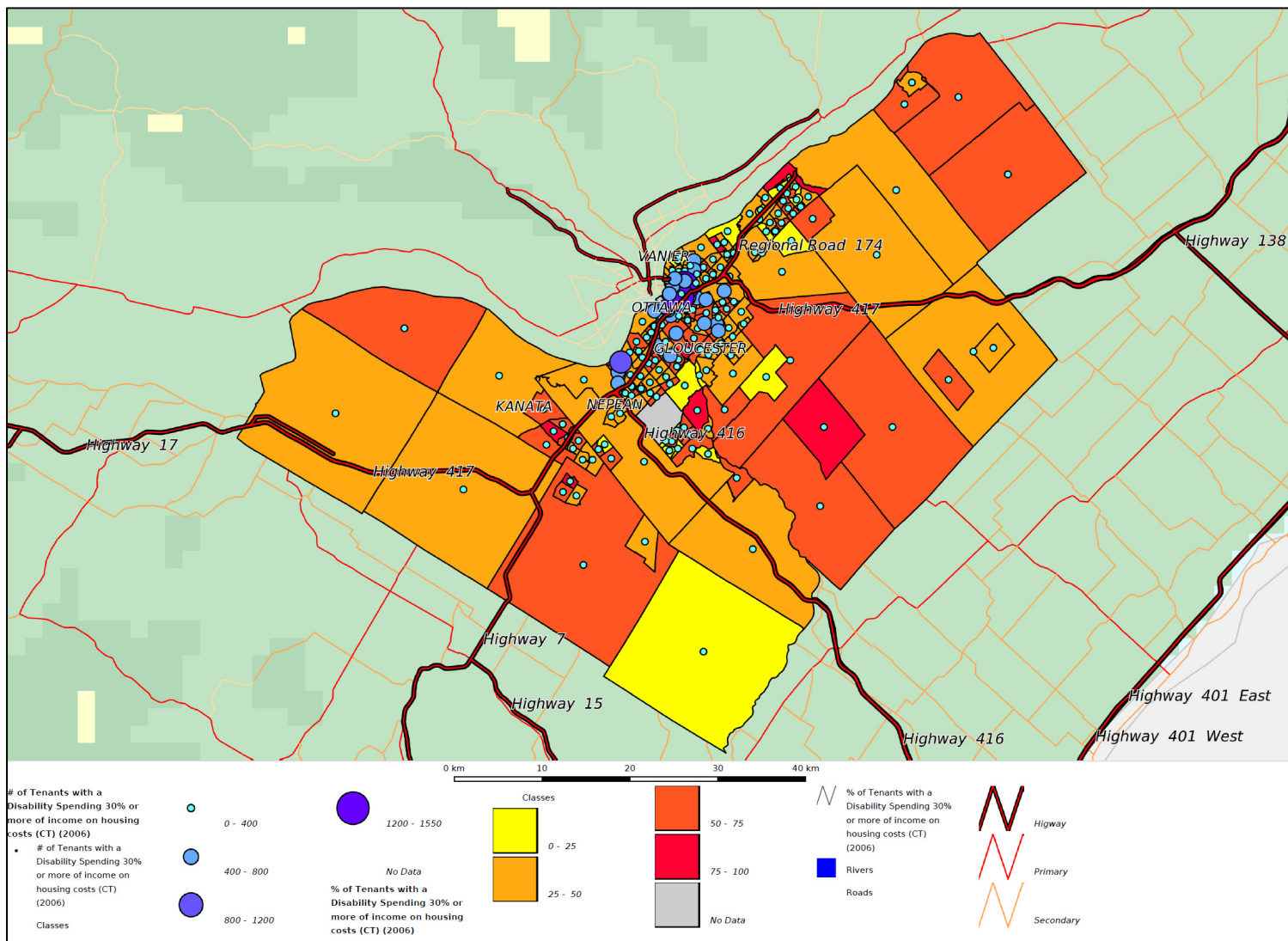
Map 6A Number and Percent of Homeowners with a Disability Who Were Paying 30%+ of Income on Their Major Housing Payment in the Ottawa-Gatineau Census Metropolitan Area (CMA), 2006 by CT (zoom)



Map 6B Number and Percent of Homeowners with a Disability Who Were Paying 30%+ of Income on Their Major Housing Payment in the Ottawa-Gatineau Census Metropolitan Area (CMA), 2006 by CT (zoom)



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