CDAC)) Communication Disabilities Access Canada

COMMUNICATION ACCESS

ACCESSIBLE CANADA ACT

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Communication in ACA

On Nov 21, 2018, Hon. Carla Qualtrough (Minister of Public Services and Procurement and Accessibility, Lib.) amended Bill 81 to include communication. In her address to the House of Commons, she said :

"The current purpose clause was amended to add communication as a priority area. We heard compelling testimony in committee that spoke to the impact of barriers to communication, particularly for persons with communication and language disabilities. This amendment prioritizes the barriers experienced by people with communication and language disabilities that can be caused by conditions such as cerebral palsy, autism spectrum disorder and learning disabilities. By making communication a priority in and of itself, we can guarantee a consistent, harmonized approach to addressing the barriers to accessibility faced by people with communication disabilities in every federally regulated sector."

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Disabilities that affect Communication

No reliable data collected in Canada.

Disabilities that may affect communication include cerebral palsy, autism spectrum disorder, Down Syndrome, learning disability, fetal alcohol spectrum syndrome, cognitive or intellectual disability, attention deficit disorder, acquired or traumatic brain injury, aphasia after a stroke, dementia, head and neck cancer, voice disorders, stuttering, Amyotrophic Lateral Sclerosis, Parkinson's disease, or Multiple Sclerosis and other conditions.

Disabilities may be:

• Life Long - Acquired
• Mild - Complex
• Obvious - Hidden
• Co-existing disabilities (e.g. hearing, vision, physical, cognitive)

Refer to Resource Handout for more information.

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Communication Disabilities

Depending on the individual and the context, disabilities may impact one or more areas of:

• Comprehension / processing of spoken language

• Memory (retention of information)

• Decision-making (reasoning, judgement, weighing-up risks and consequences)

• Expressive communication (preferences, choices, opinions and decisions)

• Reading and understanding written information

• Writing (note taking, completing forms, signing documents)

Everyone is unique

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Communication Contexts

Communication occurs in ALL situations where there is:

- Face-to-face interaction
- Telephone interaction
- Teleconferencing/ online learning
- Group interactions (e.g. meetings, public consultations, conferences)
- Reading or information transfer (e.g. print, websites, digital information)
- Writing (e.g. forms, signatures and note taking)

Communication is more than plain language.

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Proposed Recommendations for the ASC

Based on:

- CDAC's extensive work in communication access over 20 years.
- National study on communication barriers to federal services (2018)
- Input from 12 communication disability and professional organizations.
- Call to Action (May 2021)

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Recommendation: 1

Adopt clear, inclusive and consistent definitions of communication and communication access, and ensure these are understood and used by all federal entities.

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Communication (not Communications)

Communication is an interactive, two-way process that involves both understanding and being understood.

Communication includes speech, gestures, body language, writing, drawing, pictures, symbol and letter boards, communication devices, as well as human services such as informal and formal communication assistance, sign language interpreting, captioning in real time etc.

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Communication Access

Communication access refers to policies and practices within service entities to ensure that people understand what is said or written and can communicate what they want to convey in face-to-face and telephone interactions, teleconferencing, online learning, meetings, conferences, public consultations, reading (print, websites and digital), and writing (forms, signatures, surveys and notetaking).

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Recommendation: 2

Address communication access as a domain that applies to all:

- People with disabilities that affect communication
- Occurs within all service entities and employment situations

- Establish a technical committee that includes ALL communication disability groups (e.g. person with lived experience AND communication disability professional)

- Develop generic communication standards that can, if required be customized for an individual.

- Focus on obligations of service provider/ employer (not technology)

- Refer to the Resource Handout for links to generic guidelines and trainings.

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Recommendation: 3

- Augment generic service standards / regulations for critical communication services (e.g. justice, public safety, public health, emergency, pandemics)

- Refer to Resource Handout for links to guidelines and trainings for critical communication services.

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Sample Standard

1. **Provide spoken information in a manner that the person understands.**

Depending on individual needs and context, examples might include using everyday language; pausing between sentences; using short sentences; writing key words or showing pictures and/or providing required human support such as a sign language interpreter, or a trusted person to assist with communication.

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Sample Standard

2. Use evidence-based practices for effective expressive communication with people in face-to-face interactions; at meetings and public consultations.

Depending on individual needs and context, examples might include allowing extra time and opportunity for communication; ensuring the person can use their preferred communication method(s) and/or providing required human support such as a sign language interpreter or a trusted person to assist with communication.

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Sample Standard

3. Implement specific policies, practices and safeguards to ensure authentic communication in critical contexts such as police, legal, justice, healthcare services, consent and capacity adjudications and medical assistance in dying where qualified, impartial communication support may be required.

Depending on the context and the individual needs, this includes access to authentic, authorized communication support and when required, engagement of impartial, qualified support services such as a Speech-Language Pathologist, Augmentative Communication Clinician or a Communication Intermediary.

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Sample Standard

4. Ensure accessible communication in telephone and video internet services.

Depending on individual needs, examples might include service operators knowing how to communicate with an individual over the telephone; providing alternate options such as email, text or social media; having procedures to accommodate an authorized support person to assist; and providing access to message relay services that supports speech-to-speech interpretation, and augmentative communication methods.

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Sample Standard

5. Provide written information in a manner that the person can read, understand and can use.

Depending on individual needs and context, examples might include plain language; alternate formats; accessible forms and surveys; alternate signature arrangements, and human support as required with reading, understanding and writing.

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Sample Standard

6. Train service providers in communication access relevant to their position responsibilities.

- Depending on the service provider's position and responsibilities, this may include training on how to interact with people who use different ways to communicate in face-to-face and telephone services; how to host meetings and public consultations; how to provide accessible websites, plain language information, accessible surveys, and forms.

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