



**TOWN OF COCHRANE**  
Equity and Inclusion Committee

A REPORT ON  
COMMUNITY  
INCLUSION FOR  
PEOPLE WITH  
DIVERSE ABILITIES

# Cochrane's Path Towards Inclusion

This project was partially funded by the Alberta Human Rights Commission



This study was approved by the University of Calgary Conjoint Health and Research Ethics Board

Ethics ID: REB16-1961

Thank you to J Bird Designs for the graphic design work in the creation of this report.



# TABLE OF CONTENTS

## 1) BACKGROUND

Town of Cochrane at a Glance _____	4
Social Policy Adoption _____	5

## 2) COMMUNITY IMPACT

Why is Community Inclusion So Important? _____	6
--	---

## 3) PURPOSE

Inclusion Research _____	7
--------------------------	---

## 4) GOVERNMENT PROGRAMS & SERVICES

Family Support for Children with Disabilities _____	8
Persons for Developmental Disabilities _____	8
Assured Income for the Severely Handicapped _____	9
Rocky View Regional Handibus _____	9

## 5) COMMUNITY DATA

Statistics: Cochrane and Area ( <i>TABLE 1</i> ) _____	10
What is Family Managed Supports and Why is it Important to Understand? _____	11

## 6) STUDY INFORMATION

Research Question ( <i>TABLE 2 - RESEARCH PARTICIPANTS</i> ) _____	12
--	----

## 7) STUDY FINDINGS

Study Question #1 _____	15
Study Question #2 _____	16
Study Question #3 _____	18
Study Question #4 _____	19
Study Question #5 _____	20
Study Question #6 ( <i>TABLE 3 - JOB SEARCH</i> ) _____	21
Study Question #7 ( <i>TABLE 4 - EXPERIENCE REQUIREMENTS</i> ) _____	22
Study Question #8 ( <i>TABLE 5 - EDUCATIONAL REQUIEREMENTS</i> ) _____	24
Study Question #9 _____	26

## 8) RECOMMENDATIONS

Community Recommendations _____	28
---------------------------------	----

## 9) CONCLUSION

_____	32
-------	----

## 9) REFERENCES

_____	33
-------	----

# Background

## Town of Cochrane at a Glance

The Town of Cochrane Alberta is approximately 35 km northwest of downtown Calgary and is located on Treaty 7 Land. Cochrane lies in the Bow Valley Corridor offering close proximity to countless year round activities. The Town prides itself on its Western Heritage and being a popular tourist destination.

The current population is 26,320 (Town of Cochrane, 2017). This figure represents a 49.7% increase in population since 2011 (Statistics Canada, 2016). The median age of residents is 37 years (Statistics Canada, 2016). Cochrane is experiencing residential growth in all geographical directions. The average cost of a single family dwelling is \$406,950 (Canadian Real Estate Wealth, 2016).

Cochrane's local employment base includes: construction, forestry, education, professional services, retail and home based businesses. Future growth sectors include, knowledge/technology, professional services, manufacturing, hospitality and health and wellness. Major employers include Rocky View School Division, Spray Lakes Sawmills, Town of Cochrane, PNR Railworks, All Span Truss Systems, Walmart, ClearStream Energy and Safeway/Sobey's.

Cochrane's citizens are supported by various town departments. The Western Rocky View Family and Community Resource Centre, is partnered with Cochrane Family and Community Support Services (FCSS) to provide local and regional resource information, referrals and in-home support services to families and individuals within the Rocky View County, including Bragg Creek, Springbank and Bearspaw. These programs have direct contact with community members, assisting them in meeting their basic needs, managing finances, coping with significant changes in their lives, or stresses in their personal or family relationships.

**Through direct contact with community members, the Western Rocky View Family and Community Resource Centre has identified the need to gain a better understanding of the day to day challenges experienced by individuals who have developmental disabilities. Therefore the focus of this study is to gather information to better understand what it is like for individuals who have a developmental disability and their support networks to live in Cochrane.**

# Background

## Social Policy Adoption

In October of 2015, Cochrane Town Council became a signatory to The United Nations Educational, Scientific and Cultural Organization's (UNESCO) coalition formation of Canadian Municipalities Against Racism and Discrimination (CCMARD).

In 2016, the Town of Cochrane demonstrated its dedication to its citizens' wellbeing through the adoption of a Social Policy. The Social Policy and Procedure was connected to the Cochrane Municipal Sustainability Plan and the 2015–2018 Town Strategic Plan, to ground the policy in the foundational and guiding documents of the municipality. This policy was a formal commitment by the Town to its residents and has rooted itself in the belief that if the organization delivers services, programs and events that are more welcoming and inclusive, it will meet its vision of creating a "Complete Community."

### Social Policy Statement (May 2016)

The Town of Cochrane is a complete community that is inclusive and welcoming, striving to ensure that all residents have opportunities to fulfill their potential and healthy development through our thriving social, economic, and cultural life.

*"If Cochrane is to become a more inclusive community it should create a hub of information that proactively engages with all stakeholders including service providers and users to expand and improve access."*

*David Legg, Ph.D. Professor, Department of Health and Physical Education Mount Royal University, Calgary, AB, Canada.*

# Community Impact

## Why is Community Inclusion so Important?

Being included in a community is the first step to building a meaningful life. When you are involved in a community, you begin to build relationships with others that are based on common interests. When you fulfill valued roles you become more confident in your skills and abilities. When you participate in activities of your choosing you discover new interests and talents. These are freedoms that many of us take for granted because they happen with ease and without extenuating effort.

Many people in our community face barriers to being fully included each and every day. For some people these challenges are visible but for others they are not. Many barriers can be removed simply by increasing our awareness and understanding. We as community members need to train ourselves to notice the people who are not being fully included. We need to challenge ourselves and the systems that are currently in place to make Cochrane, a more inclusive community. **The essence of this project is to take a “snapshot” of where we are at, to talk to people with lived experiences and capture their knowledge.**

## Guiding Definition....

Social inclusion means that people:

- Experience a sense of belonging
- Are accepted (for who they are) within their communities
- Have valued roles in the community
- Are actively participating in the community
- Are involved in activities based on their personal preferences
- Have social relationships with others whom they chose and share common interests
- Have friends

{“Why social inclusion,” n.d.}

# Purpose

## Inclusion Research

A recent study was conducted in the Republic of Ireland to examine the social networks of individuals with developmental disabilities (Amando, Stancliffe, McCarron & McCallion, 2013). The researchers interviewed 753 adults who were over the age of forty living in various types of residential settings. The findings were as follows:

- Only 25% of people had contact with their family once a year.
- Over 75% of respondents reported that they did not contact friends or family via writing, texting or any form of social media.
- The majority of respondents had a person to confide in but 75% reported that they were paid staff.
- Most respondents reported engagement in community outings but seldom with others outside of their home (Special Olympics was the most frequently sighted organizational event).
- The majority of respondents did not use public transit and were dependent on others for transportation.
- Friendships were mostly paid staff, family members and other people with disabilities.

Three additional studies examined the social networks of people with developmental disabilities. All three studies concluded that the average respondent had two or less people in their social networks that were not a paid staff, a family member or another person with a disability (Verdoschot et al. 2009b; Robertson et al 2001; Horner, Stoner, & Ferguson, 1988). When you compare these findings to the 125 people in the social networks of those who do not have a developmental disability, it highlights the work that needs to be done to truly connect people with developmental disabilities to their communities (Hill & Dunbar, 2003).

Research that examines the impacts of living in rural and urban settings as it relates to individuals with developmental disabilities is relatively sparse. One study demonstrated that (rurally located) “people with disability experience disadvantage of many socio economic and social connectedness indicators, and, in some instances, that disability and location have accumulative negative influences” (McPhedran, 2010). In another rural based study, transportation was identified as a significant barrier to community participation by both individuals with developmental disabilities and their parents (Buttimer & Tierney 2005).

# Government Programs & Services

**Family Support for Children with Disabilities (FSCD-birth to 18)** is a Government of Alberta program that funds “a wide range of family centered supports and services. Services are meant to help strengthen families’ ability to promote their child’s healthy development and encourage their child’s participation in activities at home and in the community. The program is voluntary; parents remain the guardians for their child and are responsible for all decision-making and the usual expenses of raising a child until their child turns 18 years old. The FSCD program works in partnership with eligible families to provide supports and services based on each child and family’s individual assessed needs” (Government of Alberta, 2016).

**Persons for Developmental Disabilities (PDD)** is a Government of Alberta program that “funds programs and services to help Albertans (18+) with developmental disabilities to be a part of their communities and live as independently as they can. The program funds four different kinds of staffing supports based on and individualized service plan” (Government of Alberta, 2016).

- Community Living Supports in home support.
- Employments Supports train, educate and support individuals with employment.
- Community Access Supports help individuals participate in their community.
- Specialized Community Supports are generally short-term supports to help with special circumstances.

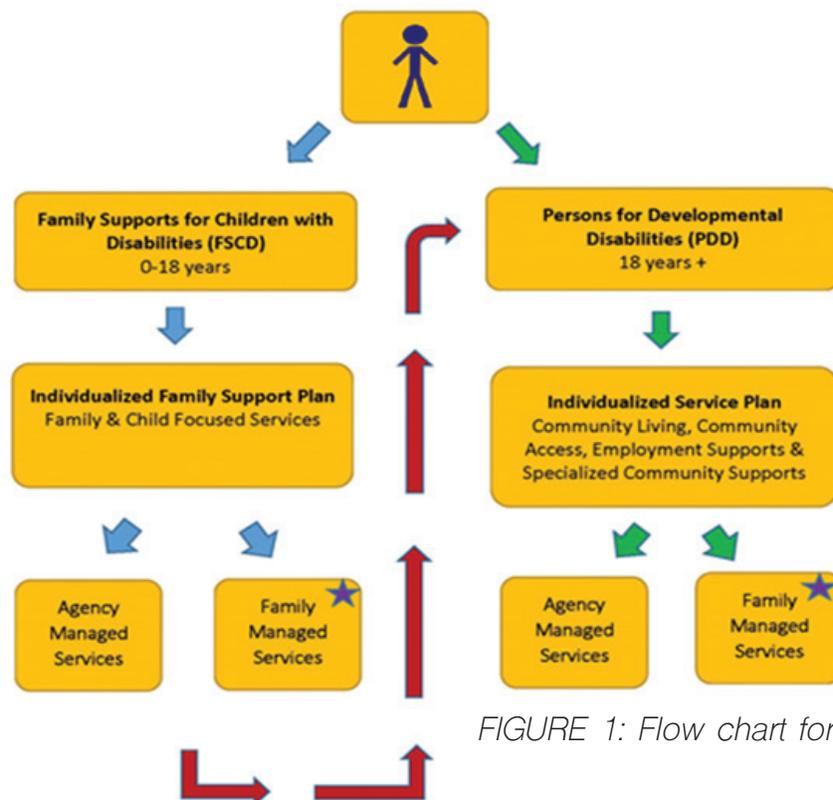


FIGURE 1: Flow chart for government funding

# Government Programs & Services

**Assured Income for the Severely Handicapped (AISH)** is a Government of Alberta program that “provides assistance to adult (18+) Albertans with a permanent disability that substantially limits their ability to earn a living. AISH provides a monthly living allowance, a child benefit, health benefits, and personal benefits. Benefits are provided to assist clients with their living needs and with living as independently as possible. In addition to the monthly living allowance, personal benefits help AISH clients with extra monthly or one-time expenses. In determining an individual’s eligibility to receive AISH benefits, consideration is given to the applicant, client and their cohabiting partner’s income and assets” (Government of Alberta, 2016).

**Rocky View Regional Handibus** is a rural charity that operates wheelchair-accessible vehicles for the area. The program is a shared ride service available to residents for medical appointments, and basic needs such as grocery shopping and banking. The fares are dependent upon distance travelled and people must book the service one full day prior to travel.



Photo courtesy Challengers Club of Cochrane

# Community Data

## Statistics: Cochrane and Area

Number of estimated children receiving FSCD support in Cochrane	96
Number of Estimated Adults receiving PDD support	46 <i>(does not include Rocky View County)</i>
Number of Estimated Adults receiving AISH support	170
Number of active registrants (youth & adults) for Rocky View Regional Handi bus	619 <i>(2016)</i>
EDI (2014) Results: Number of children experiencing difficulties (in 2 or more developing areas)	70
EDI (2014) Results: Number of children experiencing difficulty in (1 or more areas of development)	103

**TABLE 1: Estimation of residents requiring support**

In Alberta there are local and government programs that support individuals with developmental disabilities. The numbers above in Table 1 were gathered to gain a more detailed picture of those people who receive extra support and currently reside in Cochrane and surrounding area. These numbers may or may not be unique but they are the best estimation of Cochrane residents who have accessed or may need to access additional supports to have their full participation in the community recognized. These numbers are based on service providers, user groups, community research projects and formal government funding. The data supplied from Rocky View Regional Handibus was compiled and shared on request to The Resource Centre (Paul Siller, personal communications, March 17th, 2017).

In addition to these statistics, adding the EMap (Alberta Government, 2014) data for Cochrane broadens the number to include children who have been identified as experiencing difficulty in 1 or 2 areas of development (physical health & well-being, social competence, emotional

# Community Data

maturity, language & thinking skills, and communication skills and general knowledge) but not formally diagnosed with a disability or delay. The results were gathered from a total of 359 usable results after removing 209 children who had a diagnosis.

It should be noted that the EcMap numbers are from 2014 and can only be used to provide a generalized estimate that 30% of Cochrane kindergarten children in any year may be experiencing developmental difficulties which is greater than the Canadian norm (25.5%).

It also is important to note that these numbers do not include individuals who have been unsuccessful in qualifying for additional support or have chosen not to apply for these supports. The Family Support for Children with Disabilities (FSCD), Persons for Developmental Disabilities (PDD) and Assured Income for the Severely Handicapped (AISH) data was supplied by the Alberta Government on request from the Resource Centre (Government of Alberta, personal communication, March 7th, 2017). Please see the previous section “Government Programs & Services” for definitions of the above mentioned support services.

**EcMap Project (2014)** began in 2009 when the Government of Alberta launched the Early Childhood Development Mapping Initiative as part of a five year plan to gather information on the development of kindergarten age children in Alberta. This project was designed to ensure that young children have the supports and opportunities they need to thrive and do well. It helps to know how they are doing and how the environments in which they are being raised are affecting their development, both positively and negatively. In Cochrane, after removing 209 children that were identified as having a special need (mild moderate delays or severe delays involving language or severe disabilities), there were an additional 173 children experiencing difficulty in 1 or 2 areas of development which is above the Canadian norm.

## ***What are Family Managed Supports and Why is it Important to Understand?***

Once a child has qualified for FSCD funding or an adult has qualified for PDD funding they have the option to direct those funds to an agency or to hire staff privately (Family Managed Supports, FMS). If the individual/family selects to direct funds to an agency, then the agency finds support services to match the individual’s staffing needs. If the individual/family selects FMS they are in charge of all staffing needs (finding, hiring, training, monitoring, paying and invoicing the Government).

At this time in Cochrane the research team mapped one agency that offers supports to children who receive FSCD funding (Westbrook Counselling Services: 68 families) and one that offers supports to adults who receive PDD funding (Community Living and Alternative Services: # unknown). This community information supports the data that many families in Cochrane are managing support services independently.

# Study Information

## Research Question

*“What it is like to live in Cochrane, Alberta for persons with developmental disabilities, their caregivers and their support staff?”*

## Participants

The Research Team felt that it was important to gather information directly from individuals with developmental disabilities, their caregivers and support staff as they have direct experiences in accessing resources and programming within Cochrane, AB.

Posters were placed at Family and Community Support Services (FCSS) as well as the Parent Link Centre (PLC). FCSS staff were asked to contact their clients that they felt may want to participate in the study. The research team contacted the following specific community groups: The Cochrane and Area Challengers Club, Westbrook Counselling Services, the L'il Explorer's playgroup and a private Facebook support group. Several participants learned about the study through word of mouth.

Study participants identified themselves as representing one of the following categories:

- **Self-Advocate (SA)** – A person who identifies as having a developmental disability and is 16 years of age or older.
- **Caregiver (C)** – A caregiver of a person who identifies as having a developmental disability.
- **Support Staff (SS)** – A support staff of a person who identifies as having a developmental disability. For the purpose of this study a support staff may be connected with an agency, hired privately by a family or fulfilling a voluntary role.

## Format

Participants were asked to share their knowledge and experiences in one of the following three ways: attending a focus group, completing a survey or participating in an interview. Thirty nine people participated in the study and reported living in the either the Town of Cochrane or Western Rocky View County.

## Study Information con't

	Self-Advocates (SA)	Caregivers (C)	Support Staff (SS)
Focus Group	3	7	6
Interviews	2	4	3
Online Surveys	0	6	8
<b>Total</b>	<b>5 (12%)</b>	<b>17 (44%)</b>	<b>17 (44%)</b>

*TABLE 2: Research Participants*

All participants were asked to answer the same questions. The questions were specifically worded for each participant group and covered the following topics:

- Demographics (optional)
- Community resources specific to individuals with disabilities
- Community programs and activities that are currently being accessed
- Community resources that are needed in Cochrane
- Challenges/barriers to participation in community programs and activities
- Feedback about support staff

The information collected was used to:

- Create an asset map that can be used to reference the resources available in Cochrane specific to individuals who have disabilities. This is to be considered a working document and will be maintained by FCSS.
- Inform the Town of Cochrane “2017 Needs Assessment: Cochrane Cares.”
- Inform the Town of Cochrane “Equity and Inclusion Committee.”

# Study Information con't

## Benefits of Participation

- Share personal knowledge/experience,
- Learn about resources that currently exist in Cochrane AB.,
- Connect with other's who may share similar experiences (focus group),
- Help to identify problems within the community, and
- Think of ways to make Cochrane, AB. a better place to live.

## Study Limitations

Although many responses to questions reached the point of saturation, the research team believes that the results would have been more robust with increased self-advocate representation.



Photo courtesy Town of Cochrane

# Study Findings

## Study Question #1

*What community programs or activities are you or the person you support currently involved in?*

- Bethany Care Society – volunteering
- Big Hill Leisure Pool – leisure and lessons
- Boys and Girls Club of Cochrane and Area
- Cochrane and Area Challengers Recreation Club
- Cochrane BMX
- Cochrane First Scouting
- Cochrane Glee Club
- Cochrane Lanes Bowling Alley
- Cochrane Minor Ball
- Cochrane Minor Soccer- “Grass Roots”
- Cochrane Public Library
- Cochrane Rangers Soccer Club
- Cochrane Skating Club
- Family Managed Community Access
- Farmers Market
- Final Touch Art Studio
- 4 Cats Art Studio
- Horticulture Program that comes to home
- Miss Mozart
- Private Therapist Intervention (Home and Community)
- Rocky Mountain Adaptive Sports Centre (located in Canmore but links to Cochrane)
- Skating at Outdoor Rink
- Special Olympics (Calgary + Canmore)
- Sports 4 Me 2
- Spray Lakes Exercise Groups
- Spray Lakes Sawmill Summer Camps
- The Cochrane Humane Society – Petting Program
- The Soul Studio
- Town of Cochrane Summer Camps
- University of Calgary Gymnastics Cochrane
- Western Rocky View Parent Link Centre – “Lil Explorer’s”



*“Challengers is a great place because your skill doesn’t matter. Sports in general are focused on scores, therefore coaches and other players don’t want someone who can’t keep up. They don’t mind them on the team as long as they are on the bench.”*

*(Caregiver)*

# Study Findings con't

## Study Question #2

*What challenges have you or the person you support experienced when trying to participate in community programs and activities?*

### Self-advocates reported...

- A lack of awareness of community programs and activities
- That it's too expensive to access community programs and activities including special events
- That support staff are not always available
- That they just needed someone to support them to feel comfortable the first few times when accessing a new activity or location
- Concerns over facilities' location's and how to access them
- Barriers to inclusion due to lack of transportation
- Feeling like they are being judged by others



*"I don't like being labeled, when I'm in a group of people not with disabilities." (Self-Advocate)*

### Caregivers reported...

- A lack of awareness of community programs and activities
- A lack of transportation
- That current programming was not suitable for individual's needs
- A lack of programming for children over the age of 6
- That businesses are not truly accessible for people who use wheelchairs
- A need for more service options (agencies)
- That parents feel awkward or judged about their child's behavior at the program or activity
- That they need an aide for support but they don't have community access dollars or could not find an aide at all
- That it is hard to find age specific social and recreational opportunities in town
- That instructors and/or organizations unable/unwilling to modify activities to increase participation for others
- That many programs or activities are too expensive

# Study Findings con't

## Support Staff reported...

- A lack of awareness of community programs and activities
- A lack of transportation to activities in Cochrane
- A lack of transportation for people wanting to attend programming in Calgary
- A need to increase community education/awareness (sometimes support staff feel “uncomfortable” when others do not understand behavior and/or the specific responses that the support staff are using with the person they are supporting when in public)
- Community buildings and/or spaces were not accessible
- A lack of support staff in general (many families have the funding but are unable to find suitable staff)
- High burnout of support staff that are working in the field
- That families need more support, especially when they receive a diagnosis because they don't know how or where to go for the “next step”
- Some families don't understand the funding systems (requirements/eligibility) or the roles of the support staff
- That families need coaching and guidance
- That programs are too expensive especially because repeated exposure to the activity/program is often needed to achieve skill mastery thereby increasing the cost
- Program facilitators are unable to adapt programming to suit varied needs
- A lack of challenging job opportunities for individuals they support, who want to work in the community
- Feeling uncomfortable at the program or activity

*“The Town of Cochrane lacks accessibility. Many places that believe they are accessible are not.”  
(Caregiver)*



# Study Findings con't

## Study Question #3

*What would make it easier for you or the person you support to participate in community programs and activities?*

- A public transportation system
- A transportation system to access Calgary and surrounding areas
- More service agencies in Cochrane
- A central place to go to for information
- Ensuring that all programs and activities are accessible for people who use wheelchairs/mobility devices
- A resource list of qualified aides/volunteers to access when wanting to access a program or activity
- Inclusion training for program directors and staff
- Adding a question during registration process (written or verbal) 'is there any specific accommodations that the participant requires?'
- Reduced registration rates for children with disabilities who want to register for multiple sessions
- Ensuring that support staff can enter program or activity for free
- Program advertisements that promote inclusion
- A "FAIR (Access)" entry program that is recognized community wide
- Increased understanding of available community programs and activities  
Individuals without support may need direct information (place to call, interest inventory)
- More community awareness about social anxieties



*"Cochrane is a very caring community but we need to increase awareness for people with disabilities. We need to focus on what is possible, not always on time and efficiency but the innate value of participation for the individual." (Caregiver)*



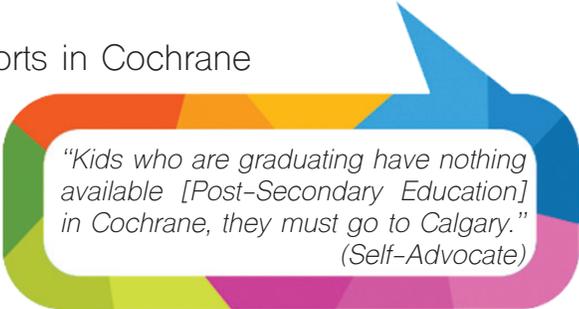
*"We need a one stop shop, families have to share their stories repeatedly to access help. At some point families may just give up and get frustrated." (Support Staff)*

# Study Findings con't

## Study Question #4

### *What kinds of resources/supports are missing in Cochrane?*

- A Resource Hub “One stop shop”
- More service agencies
- A “FAIR” entry access card
- A Cochrane branch of “Special Olympics”
- A local leader to continue to improve supports in Cochrane (Not a parent)
- A community needs registry
- More clubs need to look for ways to engage with “The Challenger’s Club”
- A local advocacy group
- A pool of qualified support staff/volunteers
- Accessibility awareness/education
- A community awareness campaign
- Community inclusion training for support staff and volunteers
- Counselling for people with developmental disabilities
- Doctors who have knowledge about funding requirements, forms and informed “next steps”
- A transit system that supports rural and urban residents
- Various models of supported housing
- In-services for families about government funding and resources for family managed services
- Life skills training (budgeting, cooking, self-care, community safety.....)
- More recreation opportunities (Inclusive and Specialized)
- A parent support group
- A peer support group
- Post-secondary education (Inclusive & Specialized)
- Employment skills and support
- Education for employers in Cochrane on how to support/cultivate inclusive employment opportunities and Human Rights duties to accommodate



*“Kids who are graduating have nothing available [Post-Secondary Education] in Cochrane, they must go to Calgary.”  
(Self-Advocate)*



*Employment – “Community businesses need to be more aware of the resources that individuals with disabilities have.”  
(Support Staff)*

# Study Findings con't

## Study Question #5

*What kinds of supports do you provide or the person in your care currently receive?*

- Behavioral assistant
- Communication support
- Community access
- Educational aide
- Emotional support
- Family oriented programming- related to (PUF)
- Fine and gross motor skills
- In home support
- Life skills- budgeting
- Parental support
- Personal care
- Respite
- Supportive roommate
- Training partner/coach
- Transportation



Photo courtesy Town of Cochrane

# Study Findings con't

## Study Question #6

### *How did you find your support staff or how did you find your job?*

The majority of respondents reported that they located their support staff through word of mouth.

This graph also includes results when support staff were asked how they found their current jobs. This graph highlights the relationship between finding support staff and having well established connections in the community. Overwhelmingly respondents reported a shortage of support staff in Cochrane.

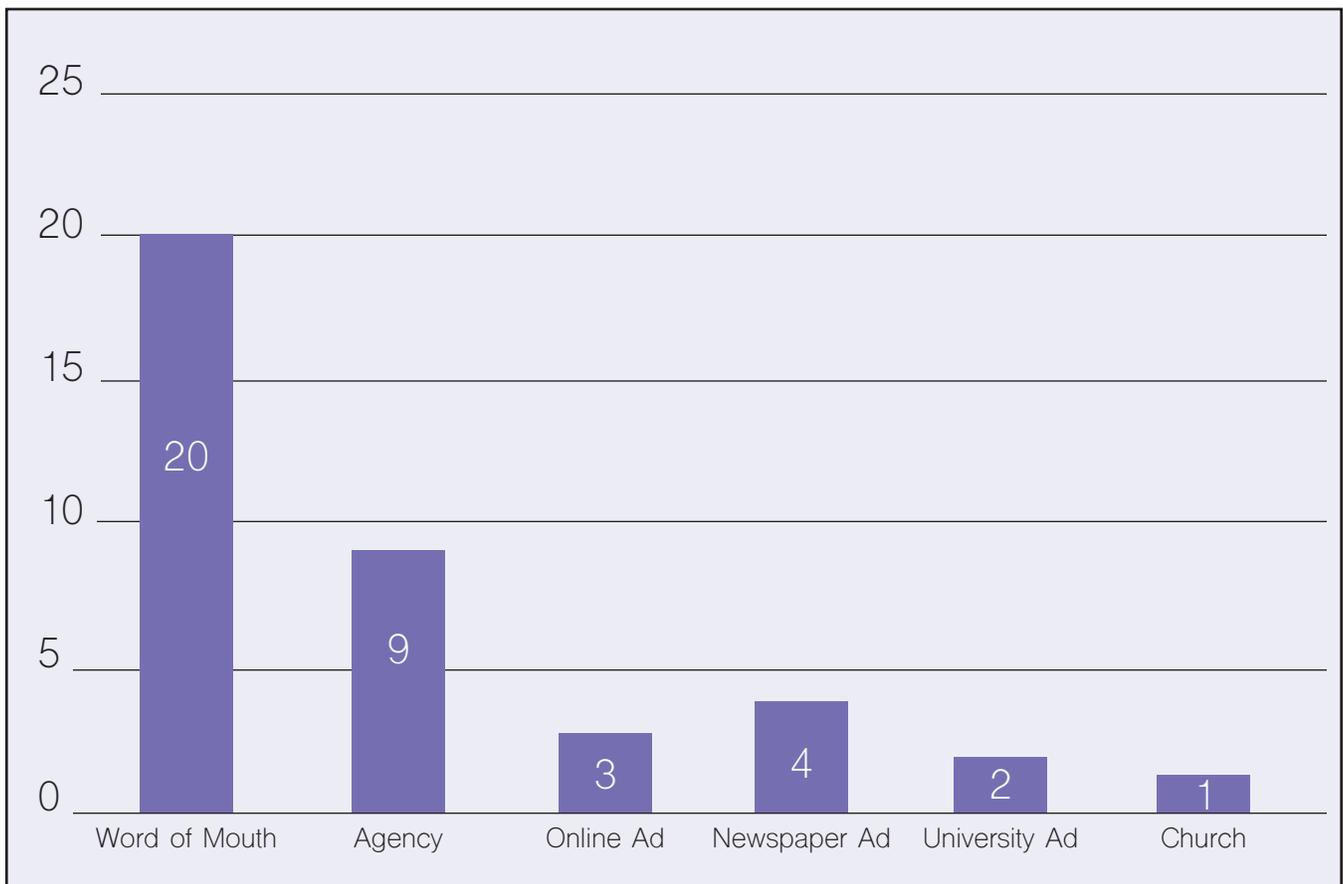
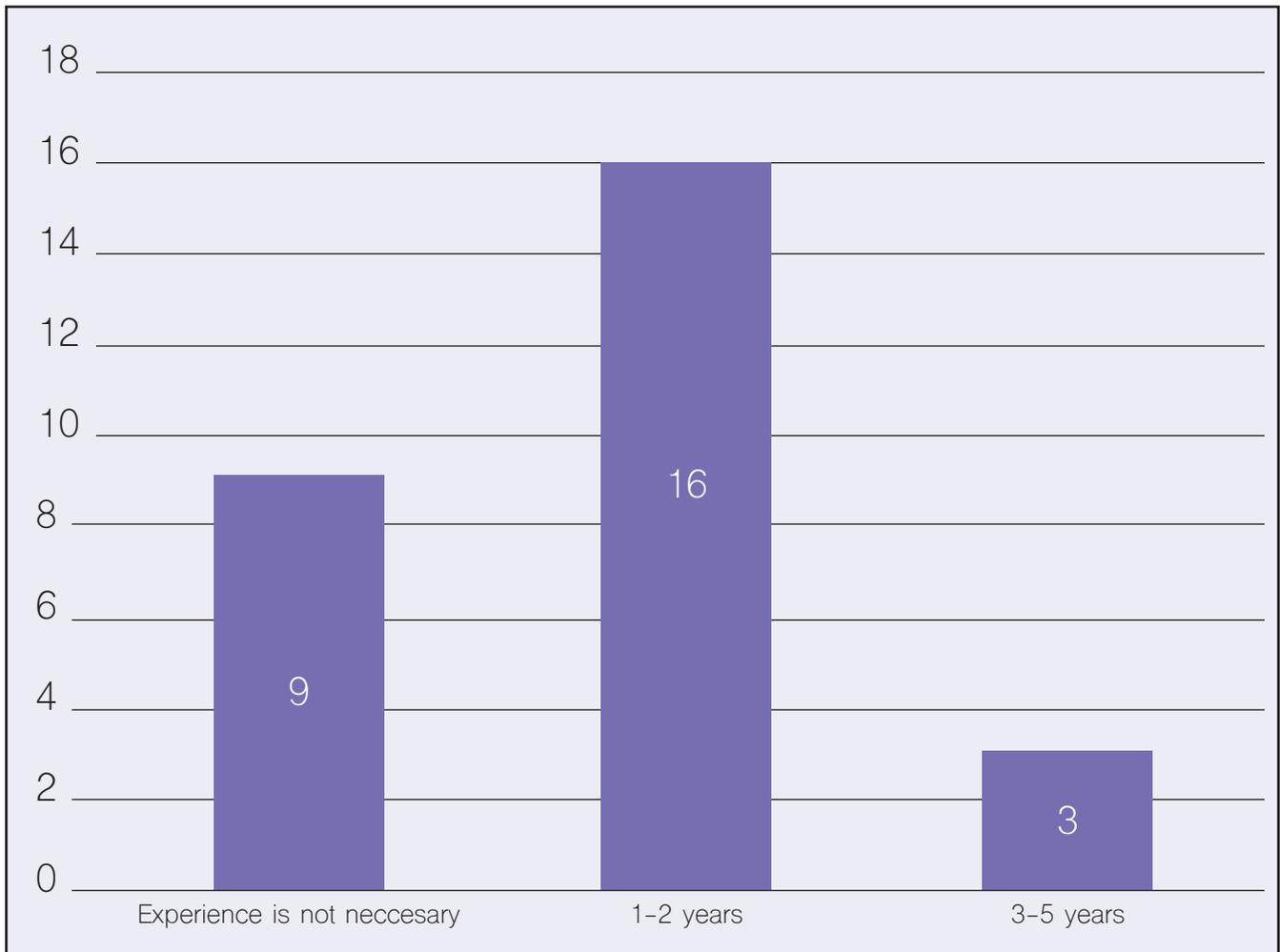


TABLE 3: Support Staff Job Search

# Study Findings con't

## Study Question #7

*How much experience if any, do you think a support staff should have?*



*TABLE 4: Experience Levels of Support Staff*

The graph indicates that the majority of respondents believe that support staff should have between one and two years of experience. That being said, several respondents also indicated that hiring for the right type of person is more important.

# Study Findings con't

## Study Question #7 con't

Below are some respondent quotes:

*"Yes they would have to have experience that is like mega important" (SA)*

*"I agree with not so much education but experience with other people" (SA)*

*"The right match of person is more important" (C)*

*"It is better to have someone that I can train and who is willing to work with us" (C)*

*"Experience is good but everyone has to start somewhere" (SA)*

*"Experience doesn't mean anything" (SA)*

*"Hire for the right attitude but train for the skill" (C)*

*"Hands on experience is so valuable" (C)*

*"Some people just have inherent characteristics within themselves that they can be effective in what they do" (SS)*

*"Education can compensate for a lack of experience" (SS)*

*"Require someone for physical and cognitive needs, I can teach the medical side easier" (C)*

(SA) - Self Advocate  
(SS) - Support Staff  
(C) - Caregiver

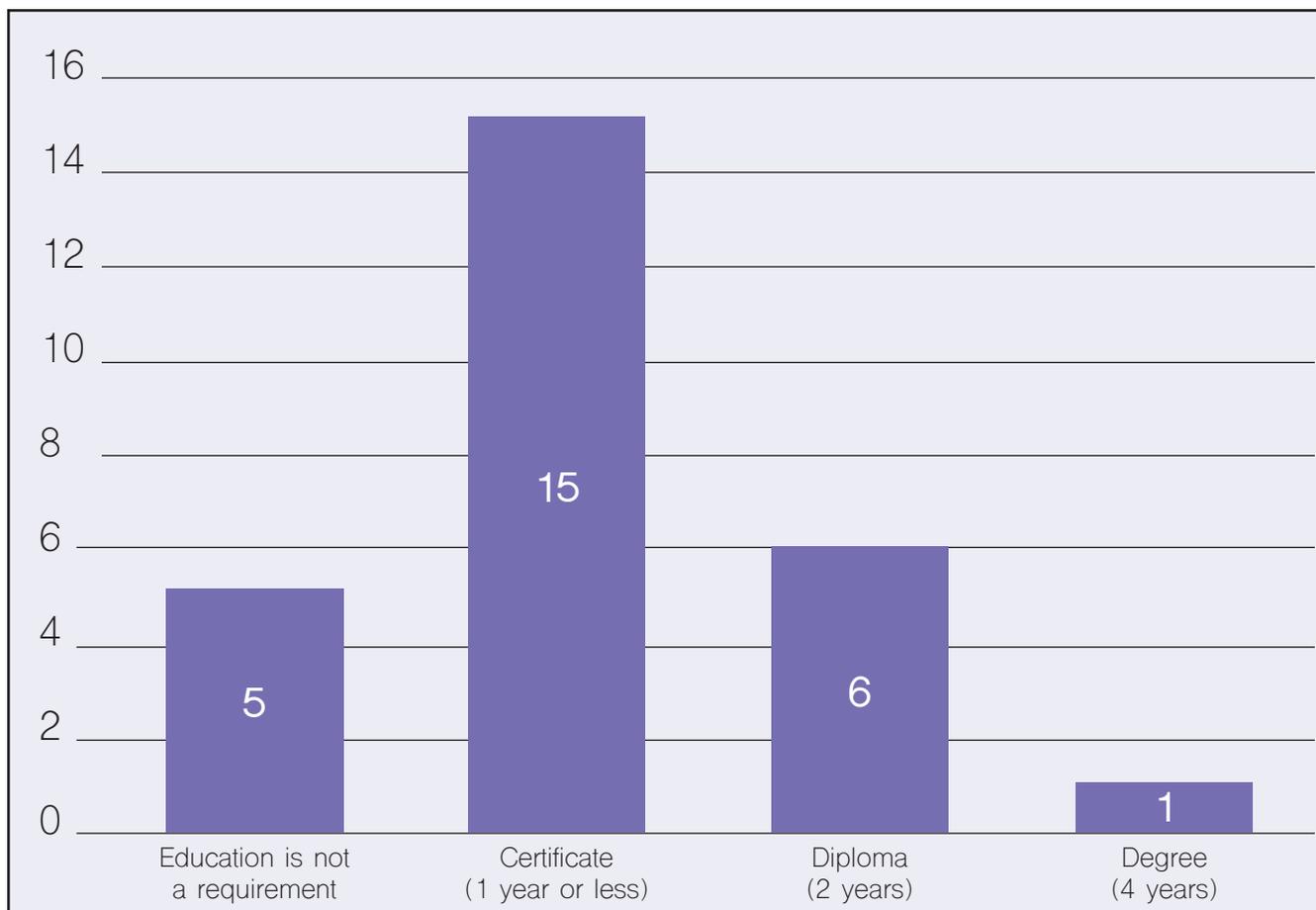


*"One support worker's experience was not comparable to other staff but he was willing to try his heart out. He had passion for the work and the person he was working with. That is something you can't make!" (Caregiver)*

# Study Findings con't

## Study Question #8

*How much education if any, do you think a support staff should have?*



*TABLE 5: Education Requirements*

When asked about education requirements, respondents from all three groups indicated that support staff should have at least a related certificate (1 year or less).

*"As a support worker you have got to remember that you are not the boss, you are not the boss. You are there to help this person, you are not there to control this person, you are not there to tell this person what to do what to be or anything else, you are there to guide and help the person, you are not the boss." (Self-Advocate)*

# Study Findings con't

## Study Question #8 con't

The following courses were specifically identified as applicable education:

- CPR and First Aid
- Medication administration
- Respect
- Confidentiality
- Basic information about the disability
- Driver's license
- Inclusion training
- Healthy boundaries

Below are some respondent quotes:

*"I don't think someone can just walk off the street and be a support worker. They need basic information, like an LPN course." (SA)*

*"The benefit of education is a deeper understanding of behavior. Why is that person acting the way they are?" (C)*

*"Orientation of some sorts so people get the building blocks, not a 3 year program" (C)*

*"Inclusion training and need to learn how to facilitate natural friendships" (C)*

*"On-going professional development" (SS)*

*"Anything is a bonus" (C)*

*"Need to understand the importance of supporting someone instead of enabling them" (SS)*

# Study Findings con't

## Study Question #9

*What other qualities/skills do you think a support staff should have?*

- Ability to work independently
- Ability to build independence
- Accountable
- Action orientated
- Calm
- Collaborative
- Compassionate
- Computer skills
- Creative
- Curious
- Empathetic
- Flexible
- Friendly
- Fun
- Gentle person
- Good communicator
- Good listener
- Good match with individual
- Good mentor
- Love for the work
- Passionate
- Patience
- People person
- Positive person
- Professional
- Respectful
- Self-motivated
- Self-reflective
- Strong advocate
- Understand their own intentions



Photo courtesy Challengers Club of Cochrane

# Study Findings con't

## Study Question #9 con't

Below are some respondent quotes:

*"Wants to do what you want to do, not what they want to do. They are working for you!" (SA)*

*"They know what's going on, they are willing to research, are responsible. Somebody who is not just doing it for the money it has to like, when you are being a support person you are actually forming a relationship with somebody else, it's not just a regular job, you are forming a relationship. You need to be willing to, be willing to put something of yourself into it." (SA)*

*"I look to see what they can bring to the table, to make the time fun" (C)*

*"As a support worker you have got to remember that you are not the boss, you are not the boss. You are there to help this person, you are not there to control this person, you are not there to tell this person what to do what to be or anything else, you are there to guide and help the person, you are not the boss." (SA)*



Mcleod, Ryan. (Photographer). (2016, May). *Liberty Swing helps people freely play*. Retrieved from <http://www.cochraneagle.com/article/Liberty-Swing-helps-people-freely-play-20160512>

# Recommendations

There is a growing body of research that indicates that people's sense of belonging, safety and identity can be strongly linked to their "attachment to a place". How people experience meaningful participation in a community can positively or negatively impact their attachment to a Town, region or community.

## Community Recommendations

 **A Staffed Resource Hub** – Individuals, caregivers and support staff identified the need for a staffed central resource hub. Currently Cochrane has limited agencies that support children and adults with developmental disabilities. Many families (especially PDD recipients) have been left with little option to select an agency to manage their funding dollars. This means that families who wish to support their family member in their own community are responsible for finding, hiring, training, scheduling, supporting and managing payroll duties for all support staff. Families have expressed that these tasks are very time consuming and stressful. Social media has been noted as a current resource but some respondents' feel that opinion based forums are not always the best option and that it is important to have a "real person" to talk to.

A Staffed Resource Hub could "house" up to date reliable information about community resources for both individuals/families looking for support. It could be a place for current and prospective staff to connect with individuals/families looking for support. Community groups could advertise current programming and access inclusive programming resources. It could also be a place that coordinates training sessions/workshops for self-advocates, parents and support staff who are working in the Family Managed System.

 **An Accessible Transit System** – All three groups of study participants expressed the need for an accessible public transit system. Cochrane is growing and the community is spreading geographically. Many of the individuals do not drive and are dependent on other means of transportation (friends, family, support staff, taxi, handi bus), this can be both inconvenient and expensive for people who are already on a fixed income. Spray Lake Sawmills Family Sports Centre is already home to many of the recreational/leisure activities in the community and as of July 2017 it also houses the new accessible community pool and curling facility. If community members choose to walk/ride, they must go through the off leash dog park or down the narrow gravel shoulder along the only road to the facility.

# Recommendations con't

 **Creation of a “Community Needs Registry.”** – Caregivers identified that they would like a place where families can choose to identify the needs that exist in their own family unit. Community members wouldn't have access to the information due to privacy laws but the information would allow the Town to identify specific needs and create programs in response.

 **Increased Service Providers in Cochrane** – Several respondents expressed the need for more service providers in town. Individuals and families stated that they don't want to travel to Calgary for supports and find the Family Managed Service (FMS) option to be exhausting. People want to live, work and play in their own communities.

 **An Employment Support Program** – All three groups identified the need for a service that supports individuals with developmental disabilities to explore their vocational interests, learn job preparedness skills, make connections to community businesses and provides on the job support as needed. This program could also offer job related training to staff who work under Family Managed Support (FMS) models. Currently if individuals with disabilities choose to attend a vocational program they must access specialized programming in Calgary (Mount Royal Transitional Vocational Program) or Olds (Columbia College).

 **Post-Secondary Education** – All three groups of participants expressed the need for post-secondary education in their own community. At this time specialized programming does not exist for individuals with developmental disabilities who choose to continue their studies after grade 12. Respondents expressed the need for classes that focus on life skills, general interests as well as academics.

 **A Cochrane Wide “FAIR” Entry Access Card** – All three groups of participants identified the need for a card that qualifying individuals or families, can use to receive a discount on Town services and/or interested local business services. Business owners would then determine how they can support card holders to access the service/activity at a reduced rate. It would also alert the business to the fact that the individual may have a support person assisting them and hopefully allow that support person to access the activity free of charge.

# Recommendations con't

 **A Community Awareness Campaign** – Having a “local champion” to spearhead a movement in our community. Connect with local papers to highlight community stories (perhaps a specific section). Partner with local high school media clubs to increase awareness in schools as well as community. Target specific topics such as:

- 1) Employment– Benefits of having a diverse workforce
- 2) Inclusive programs/activities– sharing their stories of success
- 3) Local Champions– Regular citizens changing our community
- 4) Weekly article about breaking down barriers to inclusion. This info could target various audiences (business owners, landlords, neighbors, schools, churches.....)

 **A Certificate Training Program for Support Staff** – Training that would offer staff a basic foundation of skills as related to the field of disability. Continued professional development on new strategies of inclusion, advocacy, rights, restrictive procedures, etc...

An example of a training program is the Alberta Council of Disability Services (Foundations Training Program). This program can be delivered in different methods (local tutor, online training) depending on the needs of the hosting agency. It's currently available through Mount Royal University, Olds College and Bow Valley College.

 **Supported Housing Options** – Respondents identified a need for more supportive housing options. Some respondents were able to identify some specific models that are currently successfully in use in other areas of Canada. These models involved creative multi-user facilities that supported other specific housing needs collaboratively (ex. Seniors and adults with developmental disabilities).

 **Increased Supported Recreation Opportunities** – Many respondents reported that they struggle to find programming that fits the needs of their children in town. Families are travelling to Calgary to access activities such as the Special Olympics Fundamental Sports Program. There is a need for specialized programming after the age of 6 (indoor play park). Respondents suggested starting a local branch of “Special Olympics” and after school programming for kids with complex needs. There remains a need for more inclusive play spaces whereby people of diversabilities intersect and play side by side.

The Cochrane and Area Challengers Club is included with Cochrane Minor Baseball. Each week they are scheduled with a different minor team, they mix up players and the focus of the game is participation. The club would like to connect with other local organizations that are interested in creating inclusive opportunities.

# Recommendations con't

 **Inclusion Training for Community Clubs and Programs** – Many respondents expressed the desire to have more access to programs and activities that are not specialized. They wish to be included more in all community programs and activities. Consider having a “local leader” connect with community programs/activities that respondents have identified as already being inclusive. Ensure that each organization has information about local resources that they can access if needed (Between Friends Club). This would strengthen the organization’s current inclusion practices. A local leader could also assist families to identify and support families to connect with new organizations. Evidenced based education programs such as “Just Like You” aim at educating primary school students on the acceptance and inclusion of people living with a disability. The program helps them learn that people with disability are the same as everyone else – they are “Just Like You”.

 **More Programs and Activities that Include Siblings and Families** – Family centered programming removes the barriers of having to find childcare for additional children as well as the need to find an aide for the child who needs supports. This type of programming would create an inclusive environment for families to connect with each other.

 **A Home Visitation Program** – Caregivers expressed the need for a program to reduce isolation and promote social interaction for people who are unable to access the community easily. Make connections into existing volunteer organizations such as “Helping Hands” for people who need extra supports.

## Areas identified for further exploration (based on participant responses)

 **Need for Additional School Supports** – Participants reported the need for more Educational Aides (support staff) in classrooms. Respondents believe that there are high numbers of identified/coded children in classrooms as well as many other children who require significant supports that do not have extra support/funding. There is supporting research completed from the ECMap (Alberta Government, 2014) that references the number of non-coded children in our community.

 **Families of School Aged Children Report being Disconnected** – Respondents suggested that schools should be more actively connecting families who may be experiencing similar barriers to community inclusion. Due to adherence to FOIP regulations, schools are not able to connect families directly. Further exploration on how schools can connect identified families to each other was recommended by participants.

# Conclusion

The Town of Cochrane has been identified as one of the three fastest growing municipalities between 2011 and 2016, “with growth rates of more than 8 times higher than the national average (Statistics Canada, 2017). In 2016, Cochrane’s population was tallied at 25,853 (Statistics Canada, 2017) but the current population based on the municipal census is 26,320 (Town of Cochrane, 2017). The Canadian Survey of Disability (CDS) determined that approximately 14 % of the population has a disability (Statistics Canada, 2015). The CSD definition of disability includes anyone who reported being “sometimes”, “often” or “always” limited in their daily activities due to a long-term condition or health problem, as well as anyone who reported being “rarely” limited if they were also unable to do certain tasks or could only do them with a lot of difficulty. According to the CSD survey finding, in Cochrane we could then estimate that there are approximately 3,609 people who are limited in their daily activities in some way.

The Town of Cochrane has taken a pivotal step in creating a more inclusive community through their adoption of a “Social Policy” in 2016. This research project was made possible through the support of the Town of Cochrane “Equity and Inclusion” committee and funding from Alberta Human Rights “Community Inclusion Grant.”

The research team for this project set out to gain a deeper understanding of the inclusion experiences of Cochrane’s community members who identify as having a developmental disability. This document can be used as a snapshot in time of where we are at today (April 2017) in Cochrane and can be used as a baseline to track advancements or provide support for initiatives that look to address inclusion.

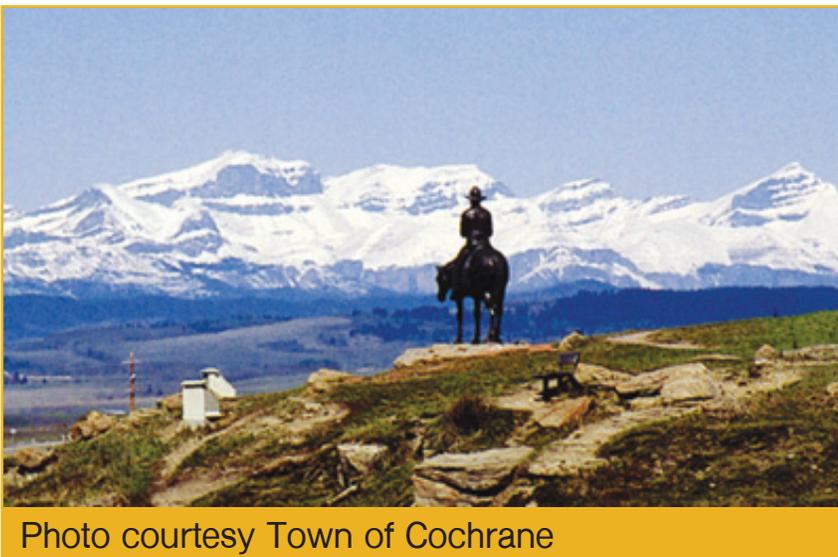


Photo courtesy Town of Cochrane

# References

- Amado, A. N., Stancliffe, R. J., McCarron, M., & McCallion, P. (2013). Social inclusion and community participation of individuals with intellectual/developmental disabilities. *Intellectual and Developmental Disabilities*, 51(5), 360–375. doi:10.1352/1934-9556-51.5.360
- Buttimer, J., & Tierney, E. (2005). Patterns of leisure participation among adolescents with a mild intellectual disability. *Journal of intellectual disabilities*, 9(1), 25–42.
- Statistics Canada, 2017. Census in Brief: Municipalities in Canada with the fastest growing populations between 2011 and 2016. Retrieved from: <http://www12.statcan.gc.ca/census-recensement/2016/as-sa/98-200-x/2016001/98-200-x2016001-eng.cfm>
- Disability inclusion action plans [definition]. Retrieved November 22, 2016, from <http://www.jennybray.com.au/services/inclusion-action-plans>
- Government of Alberta (2016). AISH Program Policy: General Program Information. Retrieved on March 19, 2017 from <http://www.humanservices.alberta.ca/AWonline/AISH/7204.html>
- Government of Alberta (2014). *EcMap Early Child Development Mapping Project Alberta*. Retrieved on Mar 19, 2017 from [http://www.ecmap.ca/images/results/ECMap\\_Final\\_Report\\_20141118.pdf](http://www.ecmap.ca/images/results/ECMap_Final_Report_20141118.pdf)
- Government of Alberta (2015). *How are children doing? Children with special needs in Alberta. EcMap Early Child Development Mapping Project Alberta*. Retrieved on Mar 19, 2017 from [http://www.ecmap.ca/distribute/reports/SpecialNeeds\\_layout\\_final\\_20150224.pdf](http://www.ecmap.ca/distribute/reports/SpecialNeeds_layout_final_20150224.pdf)
- Hill, R. A., & Dunbar, R. I. (2003). Social network size in humans. *Human nature*, 14(1), 53–72.
- Horner, R. H., Stoner, S. K., & Ferguson, D. L. (1988). *An activity-based analysis of deinstitutionalization: The effects of community re-entry on the lives of residents leaving Oregon's Fairview Training Center*. University of Oregon.
- McPhedran, S. (2010). Regional living and community participation: are people with disability at a disadvantage? *Australian Social Policy Journal*, 9, 111–135.

# References con't

- Real Estate Wealth (2016). Real Estate Market Report for Cochrane, AB. Retrieved on March 27, 2017 from:  
<http://www.canadianrealestatemagazine.ca/top-neighbourhoods/cochrane-ab-30268.aspx>
- Robertson, J., Emerson, E., Gregory, N., Hatton, C., Kessissoglou, S., Hallam, A., & Linehan, C. (2001). Social networks of people with mental retardation in residential settings. *Mental Retardation*, 39(3), 201-214.
- Statistics Canada. (2017). *Cochrane, T [Census subdivision], Alberta and Canada [Country] (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released February 8, 2017. <http://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed March 27, 2017).*
- Town of Cochrane (2017) Municipal census. Retrieved on September 19th, 2017 from: <https://www.cochrane.ca/386/Demographics>.
- Verdonschot, M. M., De Witte, L. P., Reichrath, E., Buntinx, W. H. E., & Curfs, L. M. (2009). Community participation of people with an intellectual disability: a review of empirical findings. *Journal of Intellectual Disability Research*, 53(4), 303-318.
- Why social inclusion? (n.d.) [definition]. Retrieved November 22, 2016, from <https://nbacl.nb.ca/module-pages/why-social-inclusion>

# Final Report Investigators

## **Katrina Milaney PhD**

Principal Investigator, Assistant Professor, Specialization Chair, Graduate Student Advisor Community Rehabilitation & Disability Studies, Cumming School of Medicine.  
Phone: 403-220-5669

## **Sherry Grund**

Study Coordinator, Practicum Student, Community Rehabilitation & Disability Studies program, University of Calgary.  
Email: sagrund@ucalgary.ca

## **Melissa Engdahl MSW RSW**

Study Co-Investigator, Community Resource Worker, Western Rocky View Family & Community Resource Centre. (Practicum Site Supervisor)  
Email: melissa.engdahl@cochrane.ca

## **Cochrane Family & Community Support Services (FCSS)**

### **Western Rocky View Family & Community Resource Centre**

Phone: 403-851-2250  
Email: fcss@cochrane.ca

This study was approved by the Conjoint Health and Research Ethics Board (CHREB)



**TOWN OF COCHRANE**  
Equity and Inclusion Committee



A network of the Canadian  
Commission for UNESCO



**UNIVERSITY OF  
CALGARY**

*Cochrane's Path Towards Inclusion*