

Appendix A

ACT - AUTISM COMMUNITY TRAINING SOCIETY
Financial Statements
Year Ended December 31, 2024

ACT - AUTISM COMMUNITY TRAINING SOCIETY
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Year Ended December 31, 2024

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INDEPENDENT PRACTITIONER'S REVIEW ENGAGEMENT REPORT

To the Members of ACT - Autism Community Training Society

We have reviewed the accompanying financial statements of ACT - Autism Community Training Society (the society) that comprise the statement of financial position as at December 31, 2024, and the statements of revenues and expenditures, changes in net assets and cash flows for the year then ended, and a summary of significant accounting policies and other explanatory information.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian accounting standards for not-for-profit organizations (ASNPO), and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Practitioner's Responsibility

Our responsibility is to express a conclusion on the accompanying financial statements based on our review. We conducted our review in accordance with Canadian generally accepted standards for review engagements, which require us to comply with relevant ethical requirements.

A review of financial statements in accordance with Canadian generally accepted standards for review engagements is a limited assurance engagement. The practitioner performs procedures, primarily consisting of making inquiries of management and others within the entity, as appropriate, and applying analytical procedures, and evaluates the evidence obtained.

The procedures performed in a review are substantially less in extent than, and vary in nature from, those performed in an audit conducted in accordance with Canadian generally accepted auditing standards. Accordingly, we do not express an audit opinion on these financial statements.

Basis for Qualified Conclusion

In common with many not-for-profit organizations, the society derives revenue from donations, fundraising and special events, the completeness of which is not susceptible to us obtaining evidence we considered necessary for the purpose of the review. Accordingly, the evidence obtained of these revenues was limited to the amounts recorded in the records of the society. Therefore, we were not able to determine whether any adjustments might be necessary to donations, fundraising and special events revenue, excess of revenues over expenses, and cash flows from operations for the year ended December 31, 2024, current assets and net assets as at December 31, 2024. Our conclusion on the financial statements for the year ended December 31, 2023 was modified accordingly because of the possible effects of this limitation of scope.

(continues)

Vancouver

1500 - 1140 West Pender St.
Vancouver, BC V6E 4G1
604.687.4747

Surrey

200 - 1688 152 St.
Surrey, BC V4A 4N2
604.531.1154

Tri-Cities

700 - 2755 Lougheed Hwy
Port Coquitlam, BC V3B 5Y9
604.941.8266

Victoria

320 - 730 View St.
Victoria, BC V8W 3Y7
250.800.4694

Independent Practitioner's Review Engagement Report to the Members of ACT - Autism Community Training Society (*continued*)

Qualified Conclusion

Based on our review, except for the possible effects of the matter described in the Basis for Qualified Conclusion paragraph, nothing has come to our attention that causes us to believe that the financial statements do not present fairly, in all material respects, the financial position of ACT - Autism Community Training Society as at December 31, 2024, and the results of its operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations (ASNPO).

Emphasis of Matter - Material Uncertainty Relating to Going Concern

Without modifying our conclusion, we draw your attention to Note 2 in the financial statements, which indicates that the society incurred a net loss of \$317,537 during the year ended December 31, 2024. As stated in Note 2, these events or conditions indicate that a material uncertainty exists that may cast significant doubt on the society's ability to continue as a going concern.

A handwritten signature in black ink, consisting of the letters 'DMCL.' with a period at the end. The 'D' is large and stylized, with a vertical line through it.

Port Coquitlam, BC
May 6, 2025

DALE MATHESON CARR-HILTON LABONTE LLP
CHARTERED PROFESSIONAL ACCOUNTANTS

ACT - AUTISM COMMUNITY TRAINING SOCIETY

Statement of Financial Position

December 31, 2024

	2024	2023
ASSETS		
CURRENT		
Cash	\$ 139,047	\$ 228,586
Term deposits (Note 4)	100,000	253,150
Accounts receivable	30,180	76,913
Prepaid expenses	11,546	17,601
	280,773	576,250
PROPERTY AND EQUIPMENT (Note 5)	15,727	18,013
	\$ 296,500	\$ 594,263
LIABILITIES AND NET ASSETS		
CURRENT		
Accounts payable and accrued liabilities	\$ 60,142	\$ 55,754
Deferred revenue (Note 6)	27,813	12,425
Deferred gaming revenue (Note 7)	52	52
	88,007	68,231
NET ASSETS	208,494	526,031
	\$ 296,500	\$ 594,263
LEASE COMMITMENT (Note 9)		

ON BEHALF OF THE BOARD

Director

Director

See notes to financial statements

ACT - AUTISM COMMUNITY TRAINING SOCIETY**Statement of Revenues and Expenditures****Year Ended December 31, 2024**

	2024	2023
REVENUES		
Revenue from workshops including ACT bursaries	\$ 142,973	\$ 349,691
Gaming revenue	161,000	154,000
Event sponsorship income	45,000	126,000
Donations	137,601	52,672
Interest income	11,661	15,816
Grant	24,505	45,246
	<u>522,740</u>	<u>743,425</u>
EXPENSES		
Accessibility services	21,360	54,800
Advertising and promotion	9,007	8,559
Amortization	5,744	5,134
Bursary	18,910	55,600
Consulting fees	2,329	30,739
Insurance	6,944	6,631
Bank charges and credit card fees	6,382	7,513
Office	35,755	34,810
Professional fees	15,455	14,449
Rental	24,600	24,600
Repairs and maintenance	2,397	2,337
Salaries and wages	571,461	517,282
Supplies	3,852	10,612
Telephone	5,173	4,734
Training	15,928	12,878
Travel	6,572	9,503
Workshop expenses	88,194	270,872
	<u>840,063</u>	<u>1,071,053</u>
EXCESS OF EXPENDITURES OVER REVENUES FROM OPERATIONS	<u>(317,323)</u>	<u>(327,628)</u>
OTHER INCOME		
Foreign exchange gain (loss)	270	(444)
Loss on disposal of property and equipment	(484)	(514)
	<u>(214)</u>	<u>(958)</u>
EXCESS OF EXPENDITURES OVER REVENUES FOR THE YEAR	<u>\$ (317,537)</u>	<u>\$ (328,586)</u>

See notes to financial statements

ACT - AUTISM COMMUNITY TRAINING SOCIETY
Statement of Changes in Net Assets
Year Ended December 31, 2024

	2023 Balance	Excess of expenditures over revenues for the year	Internally restricted fund allocation	Purchase of property and equipment	2024 Balance
Property and equipment	\$ 18,013	\$ (6,229)	\$ -	\$ 3,942	\$ 15,726
Unrestricted fund	68,881	(311,308)	317,537	(3,942)	71,168
Contingency fund - internally restricted	100,000	-	-	-	100,000
ED transition fund - internally restricted	39,918	-	(39,301)	-	617
Training transition fund - internally restricted	299,219	-	(278,236)	-	20,983
	\$ 526,031	\$ (317,537)	\$ -	\$ -	\$ 208,494

See notes to financial statements

ACT - AUTISM COMMUNITY TRAINING SOCIETY**Statement of Cash Flows****Year Ended December 31, 2024**

	2024	2023
OPERATING ACTIVITIES		
Excess of expenditures over revenues	\$ (317,537)	\$ (328,586)
Items not affecting cash:		
Amortization of property and equipment	5,744	5,134
Loss on disposal of property and equipment	484	514
	<u>(311,309)</u>	<u>(322,938)</u>
Changes in non-cash working capital:		
Accounts receivable	46,733	(61,553)
Term deposits	153,150	(48,739)
Deferred revenue	15,388	(82,190)
Accounts payable and accrued liabilities	4,386	19,217
Prepaid expenses	6,055	(5,233)
	<u>225,712</u>	<u>(178,498)</u>
Cash flow used by operating activities	<u>(85,597)</u>	<u>(501,436)</u>
INVESTING ACTIVITY		
Purchase of property and equipment	<u>(3,942)</u>	<u>(15,623)</u>
DECREASE IN CASH FLOW	(89,539)	(517,059)
Cash - beginning of year	<u>228,586</u>	<u>745,645</u>
CASH - END OF YEAR	\$ 139,047	\$ 228,586
CASH CONSISTS OF:		
Cash	\$ 139,047	\$ 96,380
Cashable term deposit - bearing interest at 3.50%	<u>-</u>	<u>132,206</u>
	\$ 139,047	\$ 228,586

See notes to financial statements

ACT - AUTISM COMMUNITY TRAINING SOCIETY

Notes to Financial Statements

Year Ended December 31, 2024

1. NATURE OF OPERATIONS

ACT - Autism Community Training Society was incorporated under the B.C. Society Act on November 18, 2004. The purpose of ACT - Autism Community Training Society is to provide families and professionals with a wide range of positive and practical information on autism related topics.

The goal of the Society is to enable parents, professionals and para-professionals to help children and adults with Autism Spectrum Disorder to live productive, satisfying lives within their families and communities. ACT - Autism Community Training Society is a registered charity for income tax and GST purposes.

2. GOING CONCERN ASSUMPTION

The accompanying financial statements have been prepared on the going concern assumption that the Society will be able to realize its assets and discharge its liabilities in the normal course of business. The ability of the Society to continue as a going concern is dependant upon its ability to generate positive cash flow from operations and continued financial support from grants, sponsors and donors. The directors and management have carefully reviewed the financial position of the Society, including cash flow forecasts and budgets, and believe that the Society can sustain operations at a reduced level until December 31, 2025. The directors and management have taken decisive measures by reducing staff and implementing a strategic plan to diversify the Society's revenue streams.

The directors and management acknowledge that external factors, such as changes in donor behaviour and economic downturns, could pose challenges to the Society's financial stability. The directors and management remain committed to closely monitoring these factors and adapting the Society's financial and operational strategies as needed to ensure the Society is sustainable. Notwithstanding, the commitment and effort of the directors and management, significant doubt about the Society's ability to continue as a going concern exists.

These financial statements do not reflect adjustments to the carrying values of assets, liabilities, or reported results should the Society be unable to continue as a going concern.

3. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of presentation

These financial statements were prepared in accordance of Canadian accounting standards for not-for-profit (ASNPO).

Revenue recognition

The Society follows the deferral method of accounting for unrestricted contributions and donations which are recorded upon receipt.

Revenue from contracts with government bodies, workshops and bursaries is recognized when the related service is performed.

Interest income is recognized on the accrual basis provided the amount can be reasonably estimated and collection is reasonably assured.

Donations in kind are recorded as revenue at the time the donations are received and are recorded at fair value, provided independent evidence is available to support the fair value

Volunteers contribute their time and services to the Society. Because of the difficulty in determining the fair market value of their time and services, these contributions are not recognized in the financial statements.

(continues)

ACT - AUTISM COMMUNITY TRAINING SOCIETY

Notes to Financial Statements Year Ended December 31, 2024

3. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES *(continued)*

Restricted contributions for the purchase of property and equipment that will be amortized are deferred and recognized as revenue on the same basis as the amortization expense related to the property and equipment.

Restricted contributions are recognized as revenue in the year in which the related expenses are incurred.

Financial instruments

The Society initially measures its financial assets and liabilities at fair value. The Society subsequently measures its financial assets and financial liabilities at amortized cost.

Financial assets measured at amortized cost include cash, term deposits, and accounts receivable. Financial liabilities measured at amortized cost include accounts payable.

Financial assets measured at amortized cost are tested for impairment when there are indicators of impairment. The amount of the write-down is recognized in expenditures over revenues. A previously recognized impairment loss may be reversed to the extent of the improvement, directly or by adjusting the allowance account, provided it is no greater than the amount that would have been reported at the date of the reversal had the impairment not been recognized previously. The amount of the reversal is recognized in expenditures over revenues.

Cash and cash equivalents

Cash and cash equivalents include cash on hand and cashable term deposits maturing within three months.

Property and equipment

Property and equipment are recorded at cost and are being amortized over their estimated useful lives on a straight-line basis at the following rates:

Office equipment	5 years
Computer equipment	3-5 years

Management estimates

The preparation of financial statements in conformity with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

4. TERM DEPOSITS

Non-redeemable term deposits are as follows:

	<u>2024</u>	<u>2023</u>
Non-redeemable bearing annual interest rate of 4.50%, maturing March 9, 2024	\$ -	\$ 150,000
Non-redeemable bearing annual interest rate of 4.15%, maturing June 29, 2024	-	103,150
Redeemable bearing annual interest rate of 3.10%, maturing November 27, 2025.	<u>100,000</u>	<u>-</u>
	<u>\$ 100,000</u>	<u>\$ 253,150</u>

ACT - AUTISM COMMUNITY TRAINING SOCIETY

Notes to Financial Statements

Year Ended December 31, 2024

5. PROPERTY AND EQUIPMENT

	Cost	Accumulated amortization	2024 Net book value	2023 Net book value
Office Equipment	\$ 8,606	\$ 4,877	\$ 3,729	\$ 5,431
Computer equipment	26,713	14,715	11,998	12,582
Furniture and fixtures	11,811	11,811	-	-
	\$ 47,130	\$ 31,403	\$ 15,727	\$ 18,013

6. DEFERRED REVENUE

	2024	2023
Unearned registration revenue	\$ 27,813	\$ 10,925
Unearned sponsorship revenue	-	1,500
	\$ 27,813	\$ 12,425

7. DEFERRED GAMING REVENUE

	2024	2023
Opening Balance	\$ 52	\$ 52
Receipts	161,000	154,000
Wage disbursement	(124,823)	(116,982)
Disbursements	(36,177)	(37,018)
Closing Balance	\$ 52	\$ 52

ACT - AUTISM COMMUNITY TRAINING SOCIETY

Notes to Financial Statements

Year Ended December 31, 2024

8. RESTRICTED FUNDS

	<u>2024</u>	<u>2023</u>
Contingency Fund - internally restricted	\$ 100,000	\$ 100,000
ED Transition Fund - internally restricted	617	39,918
Training Transition Fund - internally restricted	<u>20,983</u>	<u>299,219</u>
	<u>\$ 121,600</u>	<u>\$ 439,137</u>

Externally restricted funds are restricted in accordance with the terms of the contribution.

Internally restricted funds are restricted by resolution of the Board of Directors (the "Board").

In 2013, the Board internally restricted \$100,000 for a Contingency Fund to be used for emergency or unforeseen events as determined by the Board. No expenditures were incurred from this fund during the year.

In 2021, the Board internally restricted \$150,000 for an ED Transition Fund to be used for the replacement and integration of the executive director. Expenditures totaling \$39,302 were incurred during the year. The remaining balance of funds as at December 31, 2024 will be transferred to the unrestricted fund of the Society.

In 2021, the Board internally restricted \$600,000 for a Training Transition Fund to be used for the development of new training delivery methods in response to the pandemic and weather disruptions. This fund will be used to expand and streamline online training resources to reach a broader audience. Expenditures totaling \$278,236 were incurred during the year. The remaining balance of funds as at December 31, 2024 will be transferred to the unrestricted fund of the Society.

9. LEASE COMMITMENT

The Society's office lease expires on April 30, 2025. The remaining minimum lease payments is \$8,000.

10. REMUNERATION DISCLOSURE

Pursuant to the British Columbia Societies Act, the Society is required to disclose the amount of wages and benefits paid to employees and contractors that amount to \$75,000 or more during the year. The Society paid three employees \$262,397 in salary and benefits.

ACT - AUTISM COMMUNITY TRAINING SOCIETY

Notes to Financial Statements

Year Ended December 31, 2024

11. FINANCIAL INSTRUMENTS

The Society's financial instruments consist of cash and cash equivalents, term deposits, accounts receivable, and accounts payable. The fair value of these instruments approximate their carrying values.

Credit risk

Credit risk is the risk that one party to a financial instrument will cause financial loss for the other party by failing to discharge an obligation. The Society's primary credit risks relate to the carrying value of its cash, term deposits and accounts receivable. The Society assesses collectibility on a continuous basis and provides for estimated losses. Cash and term deposits are held at a single large credit union.

Liquidity risk

Liquidity risk is the risk that the Society will not be able to meet its financial obligations as they become due. The Society's policy is to ensure that it always has sufficient cash and cash equivalents to allow it to meet its liabilities as they become due, under both normal and stressed conditions, without incurring unacceptable losses or risking damage to the Society's reputation. The Society ensures that it has sufficient cash and cash equivalents to meet expected operating expenses and fund obligations. The Society manages its liquidity risk by constantly monitoring forecasted and actual cash flows and by monitoring the maturity dates of existing trade payables and other obligations.

Currency risk

Currency risk is the risk to the Society's earnings that arises from fluctuations of foreign exchange rates and the degree of volatility of these rates. US bank account balance was USD \$1,078 (2023 - USD \$564) and translated at \$1.4389. The Society does not use derivative instruments to hedge its exposure to fluctuations in foreign currency exchange rates.

Interest rate risk

Interest rate risk is the risk that the value of a financial instrument might be adversely affected by a change in the interest rates. The Society's exposure to interest rate risk primarily arises from interest income earned on cash and term deposits.

Appendix B

ACT - Autism Community Training Society

Subject to Board Approval: Total Amount allocated to the Internally Restricted ED Transition Funds in 2024

January - December 2024

Date	Memo/Description	Account	Amount
Year 2024	ED professional development expenses (conference registrations & travel): INSAR 2024, CALS 2024, Geneva Autism Conference, & memberships.	Staff Training & Development	13,706.15
Year 2024	22 ED professional development & community engagement days (INSAR 2024, CALS 2024, Geneva Autism Conference, BC Community Engagment Tours)	Staff Expenses (wages, payroll taxes & health benefits)	10,111.86
31/12/2024	ED accrued vacation as of December 31, 2024	Staff Expenses & payroll taxes	15,483.96
ED professional development & community engagement expenses <i>subject to board approval</i> for funding from the ED Transition Fund for 2024			\$39,301.97
Fund Balance on January 1, 2024			\$39,918.06
Fund Balance on December 31, 2024 (<i>to be transferred to General Funds on January 1, 2025 per board resolution</i>)			<u>\$ 616.09</u>

Appendix C

ACT - Autism Community Training Society

Subject to Board Approval: Total Amount allocated to the Internally Restricted Training Transition Funds in 2024

January - December 2024

Date	Memo/Description	Account	Amount
Year 2024	Indigenous & Regular Training Bursaries provided for 2024 events	Training Bursaries	18,910.00
Year 2024	Free Live Online, ACT Chats information sessions	Event Expenses – ACT Chats	4,266.94
Year 2024	Live ASL and CART captioning during training events	Accessibility Services	14,779.64
Year 2024	Community Engagement and sponsorships	Accessibility Services	4,108.18
Year 2024	Event Training overheads	Office expenses	2,350.84
Year 2024	Event Training Staff Expenses deficit - net of Event Net Income	Staff Expense	25,475.28
Year 2024	Staff Expenses <i>allocated to BC Gaming Programs (AVA, BCCR, & Self-carer for Carer) not funded by BC Gaming Grants or other revenues.</i>	37.21% of total staff expenses not funded by BC Gaming	208,345.52
Deficit in Training Balance <i>subject to board approval</i> for funding from the Training Transition Fund for 2024			\$278,236.40
Fund Balance on January 1, 2024			\$299,219.45
Fund Balance on December 31, 2024 (<i>to be transferred to General Funds on January 1, 2025 per board resolution</i>)			<u>\$20,983.05</u>

Appendix D



CERTIFICATE OF COMPLIANCE (Unaudited) for June 5, 2025, board meeting

This is to certify compliance with statutory and association governance requirements for the period December 4, 2024, to June 5, 2025.

Remittances and filings due by the Society are current:


- All staff salaries and wages have been paid to date except for any outstanding accrued vacations.
- Payroll withholdings for Canada Pension Plan, Employment Insurance and Income Tax have been made as required and remitted on the dates due.
- Assessments for Workers Compensation have been remitted for 2024 in accordance with the Workers Compensation Act.
- All Goods and Services tax (GST Rebate) and BC Provincial Sales Tax (PST) has been remitted for 2024 in accordance with the governing legislation.
- BC Society Annual Report has been filed for the June 12, 2024, AGM. Next filing due after the June 5 AGM in 2025.
- 2023 Annual Charity was filed on time. Next filing is for the year 2024, due June 30, 2025.
- Management is not aware of any other statutory or contractual remittances that have not been met in all material respects.

The following insurance policies are current and in effect:

- Commercial office and building insurance renewed to September 29, 2025.
- Directors and Officers Liability insurance renewed to September 29, 2025.
- Volunteer's Accident Insurance renewed to September 29, 2025.

Dated this 5th day of June 2025.

Executive Director,
Michelle Schmidt



Financial Controller,
Linda Leung

Accessibility Standards Development

Session Report Template



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Primary Contact Person: Michelle Schmidt	3
Email: mschmidt@actcommunity.ca.....	3
Telephone: 604.226.0502	3
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Contact Information

Lead Organization: Autism Community Training

Primary Contact Person: Michelle Schmidt

Email: mschmidt@actcommunity.ca

Telephone: 604.226.0502

Session Information

Date(s) of Engagement

July 22, 23, 24, 25, 30, & 31

Number of Engagement sessions

8

Target Community

In-person: Prince George, Smithers, Terrace, and Prince Rupert

Virtual: Lower Mainland, Vancouver Island, Interior, and anywhere in BC

Format of Engagement

(e.g., in-person, virtual, townhall)

In-person: Prince George, Smithers, Terrace, and Prince Rupert

Virtual: Lower Mainland, Vancouver Island, Interior, and anywhere in BC

Accommodations or Language(s) Offered

During registration, participants were asked to identify any accommodations they may need in your invitation or registration. You can use something like:

Total Number of Participants

76

Participant Communications

(Details on how the session was promoted or participants were invited)

Autism Community Training sent information out to our members, “friends of ACT”, subscribers via newsletter, Facebook, and Instagram

AutismBC sent information out to

Engagement Overview

(High- level description of the engagement initiative, including participant demographics, accessibility considerations, and any other relevant information)

The engagement initiative involved reaching out to various communities to obtain feedback regard the draft accessibility standards.

The initiative prioritized cultural sensitivity, accountability, and empowerment by elevating the voices of individuals with lived/living experience and creating solutions rooted in local knowledge. In response, community members expressed concern regarding existing colonial frameworks, and provided suggestions to remove barriers to accessibility, and promote equity by advocating for personalized support systems, workplace inclusion, and better funding models. Through collaboration and community involvement, the initiative aspired to create lasting change that honors the rights, strengths, and unique needs of marginalized populations.

Demographic information is as follows:

	Female	Male
Gender	68	8

	Yes	No
BIPOC	20	56

	Yes	No
LGBTQ	1	75

- All funding received through the grant was spent delivering the engagement session.
- All funding received through the grant was spent delivering the engagement session.

Please submit this report to accessiblebc@urbansystems.ca by September 30, 2024.

If this form is not accessible to you, please provide the information requested in an alternate format.

Feedback and Evaluation

Summarize feedback regarding the Accessible Service Delivery standards (maximum 1,000 words):

The following summarizes feedback regarding the Accessible Service Delivery standards:

Compliance & Accountability: There are doubts about the feasibility of enforcing accessibility standards, with questions about who will monitor compliance and how realistic the timelines are.

1. Compliance & Accountability

Challenge: Questions about who will monitor accessibility standards and whether enforcement timelines are realistic highlight concerns about accountability.

Theme: There is a need for clearly defined oversight mechanisms with designated roles for ensuring compliance. Realistic timelines for accessibility must be established, and stakeholders should understand who is responsible for enforcement to avoid confusion and gaps in accountability.

2. Equitable Access and Small Businesses

Challenge: Small businesses face potential penalties if unable to comply with accessibility mandates due to a lack of financial or educational resources.

Theme: Small businesses require clear guidance, resources, and financial support to meet accessibility standards without facing undue hardship. Equitable access initiatives must consider the limitations of smaller enterprises to avoid disproportionately harming them.

3. Inadequate Budgets vs. Good Intentions

Challenge: Budgets often fail to match the aspirations of accessibility initiatives, leading to unsustainable efforts despite good intentions.

Theme: For accessibility to move beyond aspiration, sustainable funding and resource allocation are essential. Without dedicated budgets, even well-meaning initiatives risk failure, leaving critical gaps in accessibility.

4. People, Funding, and Empowerment

Theme: Growth in accessibility requires focusing on empowering individuals by providing funding and recognizing diverse strengths. Investing in local training programs tailored to community needs, rather than relying solely on formal qualifications, can foster more inclusive accessibility efforts.

5. Needs Assessment and Colonialism

Challenge: Colonial frameworks in needs assessments ignore Indigenous rights and create systemic inequities.

Theme: Assessment processes must shift to more inclusive, culturally relevant frameworks that respect Indigenous rights and avoid reinforcing colonial practices. Acknowledging Indigenous knowledge systems can lead to more equitable outcomes.

6. Systemic Accountability

Challenge: In rural and northern communities, unpaid family caregivers like aunts are disproportionately burdened due to a lack of systemic accountability.

Theme: Stronger accountability measures are needed, particularly in family-centered care systems, to address inequities that arise from unpaid caregiving roles. Programs like the Family Connection Centre must ensure fair distribution of care responsibilities.

7. Parental Advocacy and Service Gaps

Challenge: In remote regions, parents are forced into advocacy roles due to the lack of specialized service providers.

Theme: Addressing service gaps in healthcare and education is crucial to reduce the burden on parents, especially in areas lacking access to specialists like pediatricians. Structural solutions are necessary to fill these gaps.

8. Cultural Sensitivity and Accessibility

Challenge: Service provision, especially in autism diagnoses and education, risks replicating colonial constructs that segregate marginalized groups.

Theme: Accessibility efforts must incorporate cultural sensitivity and be designed to meet the specific needs of Indigenous and marginalized communities, ensuring that services do not perpetuate colonial structures.

9. Indigenous and Western Value Systems

Challenge: Indigenous value systems often conflict with Western disability frameworks, particularly in areas like grant writing and formal processes.

Theme: A more inclusive approach to accessibility is needed, one that respects Indigenous

value systems and supports services without imposing colonial standards. Accessibility frameworks should adapt to different cultural paradigms.

10. Government and Emergency Response

Challenge: Healthcare shortages, particularly in rural areas, highlight the urgent need for government action in accessibility planning.

Theme: Government leadership is essential to address healthcare crises, especially in remote regions. Decisive action and emergency responses are needed to fill gaps in accessibility infrastructure.

11. Inclusive Design and Accessibility Beyond Physical Disabilities

Challenge: Accessibility efforts often prioritize physical disabilities while neglecting intellectual and invisible disabilities.

Theme: Accessibility measures must account for all forms of disability, ensuring that invisible and intellectual disabilities are included in planning and implementation, so no group is left behind.

12. Geographic & Technological Barriers

Challenge: Remote areas face accessibility challenges due to inadequate infrastructure, such as internet and specialized staffing.

Theme: Investments in infrastructure are vital for equitable accessibility in remote areas. Internet access, staffing, and technology integration must be prioritized to enable compliance in these regions.

13. Trauma-Informed Practices

Challenge: Environments that fail to consider trauma can trigger PTSD and sensory overload in individuals with disabilities.

Theme: Trauma-informed practices must be embedded in accessibility planning, with service providers receiving training on trauma's effects. Understanding how different stimuli impact individuals is crucial to creating accessible environments.

14. Disability and Intersectionality

Challenge: Accessibility frameworks often ignore the intersection of disability with other identities, such as race, gender, and socioeconomic status.

Theme: Accessibility efforts must embrace intersectionality to address the diverse needs of marginalized communities. This includes providing accommodations for those requiring service dogs, respite, or specialized care in rural areas.

15. Equity and Voice

Challenge: Caregivers, especially in marginalized communities, are often overlooked, leading to burnout.

Theme: Accessibility planning must prioritize caregivers, ensuring equitable support systems, on-site childcare, and personalized care plans to prevent burnout and address individual needs.

16. Voices and Systemic Barriers

Challenge: Organizations and businesses are closing due to a lack of systemic support, reducing opportunities for youth and communities.

Theme: Cross-sector collaboration is essential to creating holistic accessibility solutions. Avoiding siloed approaches will foster broader systemic support and ensure the success of accessibility initiatives.

17. Employment & Unions

Challenge: Low-wage workers, particularly those with disabilities, face challenges in aligning union standards with accessibility needs.

Theme: Employment standards must align with accessibility frameworks to ensure that all workers, particularly low-wage employees, are supported without creating additional burdens.

18. Infrastructure Issues

Challenge: Remote areas like the Nass Valley face compliance challenges due to poor infrastructure, such as limited cell service or internet.

Theme: Addressing infrastructure deficits is essential for ensuring accessibility compliance in rural and remote areas. Without basic infrastructure, accessibility efforts will remain stunted.

19. Government Leadership and Modelling

Challenge: Government agencies must lead by example in implementing accessibility standards, ensuring infrastructure is in place before a full rollout.

Theme: Government leadership is critical in setting an example for accessibility. Investing in the necessary infrastructure is a prerequisite for broader accessibility initiatives.

20. Local Standards and Governance

Challenge: Local lived experiences must inform government policy to ensure accountability and fair representation from marginalized groups.

Theme: Local governance and lived experiences should shape accessibility standards, ensuring that they are equitable and effective for diverse communities.

21. Leasing & Accessibility Issues

Challenge: Non-compliance by landlords creates barriers to implementing accessibility measures.

Theme: Policies must address leasing issues to ensure that landlords comply with accessibility standards, facilitating widespread implementation.

22. Internal and External Politics

Challenge: Implementing accessibility standards requires navigating complex political landscapes both within and outside organizations.

Theme: Internal collaboration and external partnerships are necessary to overcome political barriers and ensure the successful implementation of accessibility initiative

Top five themes from the conversation related to the Accessible Service Delivery standards:

Need for Localized, Accessible Training and Representation: There is a desire for standardized, local training, particularly for those who do not have access to advanced degrees. There is a call to uplift communities to provide their own training and support, especially in northern areas where master or doctorate degrees are less accessible. Training on autism and disability-related issues is often incomplete, leaving staff underprepared. There's concern about creating a hierarchy of disabilities in prioritizing service delivery.

Pressure & Capacity: Increased pressure on staff without increased resources or proper support is leading to frustration, burn-out, and a lack of equitable compensation.

Lack of Transparency and Representation in Decision-Making: There is frustration over the erasure of voices, particularly of parents and individuals with lived experiences, when conversations or suggestions move to higher levels of bureaucracy. The issue of transparency and follow-through is highlighted, with an emphasis on accountability for ensuring feedback is not lost.

Impact of Barriers (Race, Language, Disability): Barriers such as race, language, and invisible disabilities (e.g., learning disabilities or those without formal diagnoses) prevent equitable access to education, employment, and services. There was also a call for recognition of invisible disabilities, which often go unaddressed, leading to exclusion from important conversations and decisions.

Challenges in Accessing Healthcare and Services in Rural/Remote Areas: Significant attention is given to the lack of healthcare infrastructure, such as doctors and clinics, particularly in rural or remote regions like Prince Rupert. The repetitive process of document submission,

without follow-through due to a lack of professionals, further exacerbates these issues, creating barriers to care.

Economic Inequity and Lack of Understanding of Rights: Respondents identified economic challenges, including the inability to access grant money, pay for necessary services, or even understand legal rights. This highlights the need for awareness around human rights, particularly in relation to employment and accommodation for individuals with disabilities. Employers lack knowledge about duty to accommodate, and there is no established framework to support people in the workforce.

The themes highlight the challenges faced by Indigenous, rural, and remote communities in accessing services, addressing accountability, and promoting equity. Key points include:

Challenges and Lessons Learned

Describe any challenges encountered during the engagement process:

Time constraints:

ASL was not requested, however, we would not have been able to provide it due to time constraints (i.e., I book ASL interpreters months in advance); and

Lack of Advanced Notice: we repeatedly heard from folks who were unable to attend, indicating that they would have done so if they had been provided more notice.

Format:

In-person respondents were far more expressive than those we met virtually. I recommend that future engagement sessions be in-person only.

Additional Questions

Please include additional questions.

Appendices

Please provide an itemized account of how funding was utilized, with supporting receipts and invoices where applicable, as well as a report of any unspent funds. Please also include any supplementary materials such as meeting minutes or additional data.

Appendix A: How funding was used

Expense Reimbursement Form

For the Month: July				Employee:			
Date <small>ym/d</small>	Account # <small>leave blank</small>	Event ID <small>if workshop related</small>	ACT	DESCRIPTION	Amount	GST <small>leave blank</small>	GST Rebate <small>leave blank</small>
2024-07-22		Community Engagement		Breakfast	\$ 21.08		
2024-07-22		Community Engagement		Breakfast	6.56		
21 to July 25		Community Engagement		KM: 3076 (see attached)	\$ 2,153.20		
22-Jul		Community Engagement		Accommodation	171.63		
2024-07-23		Community Engagement		Accommodation	\$ 134.68		
2024-07-24		Community Engagement		Accommodation	\$ 216.20		
2024-07-25		Community Engagement		Accommodation	\$ 381.48		
				TOTAL	\$3,084.83	\$0.00	\$0.00
				<i>***Staple receipts to the back of this form.</i>			
Allowances:							
	Mileage: \$0.7/kilometer			Employee Signature: _____			
	Meals: \$5 for incidentals per day						
	\$15 for breakfast			Approved by: _____			
	\$15 for lunch						
	\$25 for supper						



Hyatt Place Prince George
 585 Dominion Street
 Prince George, BC V2L 1T7
 Canada
 Tel: 236-423-3324

INVOICE

Michelle Schmidt

Room No. 0212
 Arrival 07-22-24
 Departure 07-23-24
 Folio Window 1
 Folio No. 58148

Confirmation No. 5964918601
 Group Name
 Booking No. 4451343441

Date	Description		Charges	Credits
07-22-24	Guest Market Beverage	GAT	5.00	
07-22-24	Accommodation		143.65	
07-22-24	PST		11.49	
07-22-24	GST		7.18	
07-22-24	MRDT		4.31	
07-23-24	Visa	XXXXXXXXXXXX3819 XX/XX		171.63

Total 171.63 171.63

Guest Signature

Balance 0.00

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges.

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 Hyatt Place Prince George
 585 Dominion Street
 Prince George, BC V2L 1T7
 Canada

This is your receipt

Your details	
Name	Michelle Schmidt
Address	,,
Email	mschmidt@actcommunity.ca
Date	Jul 20, 2024

Booking details	
Booking number	4721440550
Property name	Capri Motor Inn
Property address	3984 Highway 16 West Smithers (British Columbia), Canada V0J 2N0
Check-in	Tuesday, July 23, 2024
Check-out	Wednesday, July 24, 2024
Amount paid on Jul 20, 2024	CAD 134.68

Your receipt is automatically generated
This is proof of your transaction – you can't use it to claim VAT.
Note: This isn't an invoice
A valid invoice for tax purposes can only be issued by the property

FW: Your hotel receipt from Priceline (Trip# 598-440-435-18)

Michelle Schmidt <m Schmidt@actcommunity.ca>

Tue 8/20/2024 5:56 PM

To: Linda Leung <LLeung@actcommunity.ca>

Hello Linda,

Hotel for AccessibleBC Community Engagement July 24, 2024, Terrace, BC. Thanks.

Michelle

From: Priceline <info@travel.priceline.com>

Date: Saturday, July 20, 2024 at 3:53 PM

To: Michelle Schmidt <m Schmidt@actcommunity.ca>

Subject: Your hotel receipt from Priceline (Trip# 598-440-435-18)

priceline[®]

Your receipt from Priceline

Your hotel on Wednesday, Jul 24th, 2024 is confirmed

Total Cost: CA\$216.20

Priceline Trip Number: 598-440-435-18



Quality Inn Sunshine Suites

Jul 24 – Jul 25 • Check-in: after 3:00 PM

Confirmation #: 4721412675

Payment Summary

Priceline Trip Number

598-440-435-18

Purchase Date

Jul 20, 2024

Payment Method

VI (3819)

Billing Name

MICHELLE SCHMIDT

Hotel Subtotal

CA\$188.00

Price per night

CA\$188.00

Number of rooms

1

Number of nights

1

Taxes and fees

CA\$28.20

You pay today

CA\$0.00

Total Cost

CA\$216.20

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For inside the US call 1-877-477-5807

If you're calling from outside the US click [here](#).

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Hyatt Place Prince George
 585 Dominion Street, Prince George, British Columbia, Canada, V2L1T7
 833-301-1119

CONFIRMATION

Itinerary Number: 60210689516

Your booking is guaranteed and has been paid in full.



Room - 2 Queen, Sofa Bed

+ Room details + Non-refundable

Check-In: July 25, 2024 Check-Out: July 26, 2024
 Nights: 1
 Guests: Michelle Schmidt, 2 Adults, 0 Children
 Rooms: 1

Customer Name: Michelle Schmidt
 Customer Email: mschmidt@actcommunity.ca
 Customer Phone: +16042260502

Subtotal: CA\$279.00
 Taxes & Fees: CA\$86.49
 Service Fee: CA\$15.99
 Total : CA\$381.48

[Share itinerary](#)

25 Jul 2024 <small>Thursday</small>	26 Jul 2024 <small>Friday</small>
1 Room	2 Guests
Room 1:	July 25, 2024 CA\$279.00
Taxes & Fees:	CA\$86.49
Service Fee:	CA\$15.99
Total due now:	CA\$381.48

[Print receipt](#)

[Book this hotel again](#)

[Resend confirmation email](#)

[Cancel booking](#)

Appendix B: Engagement Notes In-Person

Prince George: Monday, July 22, 2024

- Indigenous Partners—who are they?
- Cultural relevance, accessibility to service providers,
- Accessible Service Delivery Standards:
- Recognizing people with disabilities as experts in their own experience
- Removing barriers experienced by people with disabilities
- Equitable and dignified access—will recommendations provide access and if not, why?
- AutismBC, small businesses, for example. If the ministry said you must provide accessible services, how? If proof of burden relies on the small business, what happens to the business? Ignore, be penalized, go out of business—small businesses losing opportunity to exist, harm caused
- Voices are siloed, businesses close, businesses that could provide opportunities for youth are closing and harm is a byproduct.
- Accessible washrooms?
- Change tables for adults?
- Spirt is there but the budgets are not there.
- Us versus them
- Accessible organizations—we need to see the mirroring of Ministries, as models



- Government leadership: Building codes dictate—example, highly anxious, isolation room without parent knowledge—in high school, they shut down the disabled washroom so the kiddo had to walk across campus to find another washroom, was late, would have a meltdown—go to Township of Langley—old buildings don't have that.
- Physical disability, intellectual disability, mental health need
- Standards are void of invisible intellectual disability.
- What additional measures need to be included—ensure all disabilities are highlighted and noted or supported—

- Language of disability—using the word disability isn't inclusive—Deaf—linguistic and cultural minority.
- Mom and Pop shops need someone to raise awareness—additional measure = education on ableism and disability.
- Confidential slide--Education on trauma informed practices embedded in the process of teaching and learning—if kiddos are bombarded with stimuli, our PTSD.
- Recognizing people with disabilities as experts in their own experiences—will recommendations address barriers people with disabilities experience in making informed decisions.
- Recruitment and hiring—space and place to process questions—opportunity to return to the questions—speak to experiences rather than employment—why we hold indigenous stories sacred—hope, opportunity, transformation.
- Accessibility committee—people to make informed decisions—let applicants know accommodations and cannot require proof of disability—don't believe it's realistic for employers to recognize the types of accommodations people may need, unless they are informed. Human rights issue if you disclose, and they don't hire you—but how do you prove this? This opens a conversation, but how does it address this? Employers cannot request—says it's not safe—statement is congruent.
- Not confident that recommendations will address, due to the fact there isn't enough training, financial support/grants. Monitoring with support.
- UDL?
- Without education, supports, training, tax relief, incentives, funding. Ableism, disability and supports/resources come into play.
- There are many people who are compassionate and kind—if an employer is mandated and has no idea of why the requirement is in place, they'll be resentful—want to work towards an Individual Employment Plan to normalize experience—what can we do, recognizing there will be limitations. This will be biased toward small organizations and big organizations will fight it.
- AutismBC is switching from Teams to Zoom—notes captured without exposing staff—auto captioning—how to do this without singling out someone?
- Can Organizations—FASD, Autism, ADHD Society, Down Syndrome, etc. have ongoing consultation?
- Removing barriers experienced by people with disabilities—if I have a support person, guide dog, service dog, allow me to decide how to receive services—there is no framework for this.
- Equitable compensation and benefits—ensure that collective agreements do not create barriers—no—



- Will recommendations help organizations achieve vision—no—what additional measures need to be included
- Paradigm shift of the heart through tools is what they're talking about—we need to create safe spaces for people to be heard—20 year old son—trying to access work BC for support—they're trying and they think they're doing the right thing but it's not actually helpful—his learning disabilities interfere—repeat of filling in check boxes to satisfy a goal, vision, and outcome of the ministry to get supports.
- Barriers: technology is a barrier; anxiety is a barrier; trauma is a barrier—financial; even utilizing technology
- Accessibility—we cannot do this without practice—no clue how to work with neurodivergent people.
- MCFD—child advocate—disability advocate to monitor and give oversight—
- This person needs to know the help they need—support for the parent and caregiver and the youth. Transitioning out of secondary—trashed—kid thrown in and they must fight.
- outdated Q & As, advocates—peer mentorship/partnership. CYSN—autism diagnosis, couldn't get into treatment--
- proper exposure to the expectations of the job—check ins—post hiring—frequent check-ins while building capacity.
- Burden of proof should not be on the person with a disability to signal the need for frequent check-ins with frameworks—how would he know he didn't hear.
- Advocacy—who will fight the fight? Parents?
- Making the organization inclusive—No—why—there needs to be understanding, awareness, care,
- Will this language “out” a person—potential loss of self-agency is lost—invisible disability—hearing aids are visible. Potential to cause harm with the intent of self-agency.
- There are not enough details for us to be able to understand whether the information will make the organization a more inclusive space—need more details
- “This is kind of a waste of time. Come back to us when there is something worth talking about”.
- “this is a lovely thing to think about but when we have kids getting diagnoses, but there are no supports here for them. Get an OT—and we are in one of the bigger communities here”
- “This conversation feels moot”.
- Needs to be robust, include all persons with disabilities, it needs tax supports, grant support, and ministry modelling.
- This is not just a policy; this needs to be a fundamental shift—we need to change the course of how we do this. Not just, we wrote this, we implemented, we did it”
- That's where an advocate would be helpful.
- How quickly—how quickly can you overcome your bureaucratic ways? Consult with people with invisible disabilities. I need a better world for my daughter by the time she gets to adulthood.

- Our WorkBC person—I really like her—one thing she’s done to overcome—she’s done in-person—the white goose—he had an interview it the owner and they’ve arranged for him to shadow the chef—instead of having you write things down; shadowing will show what works for him. He’ll live the kitchen life.
- Opportunities to gain experience before being pad—at the same time ensuring that we don’t cause harm—recycling, etc.
- Who should apply to? If forced to comply—microaggressions will occur—what considerations to be made?
- Consistency—is key—relationship piece.
- Which organizations should be required?
- Ministries—organizations that have the heart and want to—why are we forcing people—we shouldn’t have to do that.
- What size organizations? Go back to the heart—if we must force—government organizations that are creating this policy in the first place.
- Timeline: Government organizations should be doing this in less than a year; Advocate should be in place immediately; Non-profits and small businesses should be given the option—although most are already there. The larger orgs should be doing this immediately.
- Factors to be determined in roll-out
- Heart condition and mind-heart readiness, consistency in leadership
- Stakeholders—have employers been consulted—Ministry of Labour> Have private practice service providers been consulted?
- PAC committee—organization with lived experience to some degree—were the people on the committee going to be directly impacted.
- Transparency—privilege—causes people to feel their voice is not accessed.
- Pat yourself on the back—say this is done.
- Most people on the PAC come from a place of privilege.
- “This does not say this is a priority for you. This says to me, election is coming.”
- Was this helpful? “Anytime we can speak it is helpful—it doesn’t happen much up here”.
- Asked for email with additional information—that is an accessibility barrier.

Smithers: July 23, 2024

- “Nothing about us without us” is the principle.
- Lisa: On the Accessibility standards committee for Smithers and hasn’t heard of these standards.
- Who would be the direct contact? For Lisa.
- Without financial support, we wouldn’t be able to do



this—so this would cause harm

- Who is providing training? What training? What is the ethical grounding behind it—as there are many different approaches to autism for example—if you need to do this, and here is the money for this, how are you going to provide that service?
- We need people who are educated and can come to the north and stay—there are people with a big heart—sometimes there isn't training—paradigm of mind and heart.



- Training that is stabilized, with resources, married to people who can execute training.
- Even trying to keep our own current standards—we rely on people coming from Terrace, which is costly and seasonal too.
- Special training in different areas—individualized training
- Trauma-informed practices
- Training is great—attachment to expected outcomes is damaging. Training for service providers—focus on agency not fixing—stop pathologizing.
- Meet individuals where they are—step away from individual milestones.
- Lisa: Recommendations—there is a bunch of crap about documentation
- If we don't have safety ourselves, are not accessing our breath, where are we? Our base foundation needs to come from a more neutral space.
- Documentation:

- this looks like a “cover your ass” piece. Could be empowering, as theoretically if needs cannot be met, steps will be taken.
- Who is going to do the documentation?
- Documentation is not listening, it's trauma inducing, continue to colonize by removing culture, language, story—we continue an aggression toward communities by virtue of this
- The emphasis on document is greater than it is on responding.
- Another issue is that everyone wants documentation, and no one shares it—school has the information, then the ministry needs all the same information.
- Child at child development centre—data collection creates a barrier.
- We need a wrap-around system where the Ministries are communicating with each other, so we are not re-traumatizing families, and
- Documentation—is going to help government, help organizations determining where training is needed, but if the needs cannot be met, that won't help the organization—it'll help government.

- Would like to see more description and accountability—if training was delivered by autism speaks, yikes—that’s not what we want.
- Baseline training—standard training—First Aid, Food Safe, WHMIS—differentiate between the standard of training and the training standard—some workers need individualized training
- Standard of training must address things like character and ensure that the standard of training is provided—
- If you think that you can take X training in autism and think you can use that training for everyone, you are mistaken.
- Recognizing people with disabilities as experts in their own experience
- Bulleted list of standards: Trauma informed, etc.
- Recognizing people with disabilities as agents in their own experience?
 - Physical environment
 - Emergency response
- It forces the service organizations to provide information proactively—because a great deal of literature speaks to “as requested”
- Anytime you post an image on social media, you add a description
- Some of these supports are low barrier—so described language—I’m a cis-gendered, white-haired, middle-aged woman...
- Can every organization comply? Consider this building. Home builders? Access points
- Change is slow—we know we are serious when what we want is happening.
- Some of the standards are addressing low hanging fruit—environment, facility, etc. Person with support needs can decide if they can get into the building. Going deeper, that’s a whole other set of standards—this is pitted gravel—you choose if you can access this.
- You can get into the building, but not into the bathroom.
- Ground level accessibility—fellow in a wheelchair—the guy at the entrance of the building couldn’t give him clear instructions on how to get into the building. Dehumanizing situation—this is a societal piece.
- Will this help? It’s a baby step. It’s a millimeter step forward.
- In this town, there are buildings that are grandfathered in—forget it, you’re never getting in.
- We are not seeing alternatives.





- Sidewalk to nowhere in Smithers.
- We need to move away from independent businesses having to do this—economically—now you need to pay for this sidewalk—funding through grants, tax support/relief—it cannot rest on them—they’ll close their doors—especially post covid
- Polarized extension of needs—we need to look at that more closely.
- Sensory swim—for some kids it’s cathartic and they are loud and for

other kids it’s overwhelmingly loud

- Having a silent swim is also an important thing.
- Example: Service dogs—I’m highly allergic to dogs—could trigger autoimmune responses.
- Recommendations are not unique to each person—the person who is requesting the standard and all others---not nuanced enough.
- Recommendation: Implicit attitudinal barriers hinge on the quality of the training. Writing in the job description that this is an inclusive space is...word salad—we need a societal shift—the burden of proof relies on the advocates being able to advocate forward.
- Choices: How would you like to interview for this? A, B, or C
- Will this help eliminate barriers? No—because it misses the “how”—this is a case-by-case situation.
- Potential to create a whole new department—a human resources department.
- The idea that the workplace needs to be inclusive, while also being aware of what the person needs to be able to do/that is what they can do—people with needs who do it quite well—there are some jobs that might be difficult for people to do.
- When we are hiring individuals to do a job, we need to be clear on what the job is, before they are clear that they can do the job—if the supports are feasible and I’m using that term loosely. Stocking shelves—working as a baker.
- Marry gifts, abilities and passions—and do so in a way that is supportive.
- Missed opportunity—discuss cost for employers but we haven’t heard benefits to employers—and benefits to the individual (less likely to be depressed, anxious, etc.), so less likely to access medical benefits/PWD, etc.
- The title is flawed—make them inclusive.
- Human Resources, Unions—bargaining—resources—connect them all—they all need to be on the same page. Landing a position is a competitive process—is the onus on the organization to work with the person, or?
- How to put people and humanity first. “There needs to be a culture infused—bottom to top—top to bottom”
- “What are these pieces that t we can learn—I can accept you in this environment and how can we learn to support each other.

- We talk about neurodivergence—where someone is in their life—sleep deprivation, hunger, etc. our brain is somewhere on a spectrum that may not be working 100% and if our culture has a standard of that, then all good.
- Opportunity for grounding—when activated and we will all need that space. If done right, it benefits everyone and that is the ultimate equalizer—you have a diagnosis—your family supports you having that diagnosis—you have accessibility vs the person who has experienced loss in their life—need time, space, care—the mom forced back to work but has a child up all night—how to create an environment for all.
- The term “standard”—words matter—diverse, dynamic, changing—this is the exact opposite—what is needed are principles for responsiveness—what is needed now isn’t necessarily what will be needed years from now—the title itself is ableist—use “principles” or another word that gets at the essence of what you are trying to do. A checklist—utility—people will have done the checklist and...
- What is needed now? This then becomes a dialogue—respond with a video, send me the questions, etc. Assume competence—and work from that.
- Colonial construct
- What considerations should apply in making people: Supports, grants, tax relief
- I heard nuance in the disabilities that are not being met.
- Also, these documents do not explicitly speak to intellectual disabilities
- Mostly physical stuff—service support, access to workplace, technology—not talking about sensory—sound, etc.
- Ombudsperson: Point person separate from the ministry? What would that look like? Calls ministry into account, evaluates what’s happening provincially, etc. maybe an organization grieved an individual—or vice versa.
- Eyes and ears.
- What considerations? “Comply”: compliance is not the goal—I struggle with that—enforcement whether that is shame or penalty, that doesn’t work as a motivator.
- What is my daughter teaching me and the lessons that apply to society—Thow shalt not
- What inspires us? They’re asking us how to we force people to be good—to not be assholes—you cannot do that.
- My daughter—if I have an agenda of any sort—she immediately sees it—always in the flow—what is needed now.
- If you tell one kid, be nice to the little weirdo—one will and the other will now—will this achieve the shift that we want—it has a strong ability to create aggression against disabled people—leading to mental health issues, etc.
- “Words matter”
- We have an act and its legislation, potentially developing into regulation but having it hammered in,
- What considerations could be made to execute the act—removes the human dignity component.
- You’re doing it because you must, which is counter to what we are trying to achieve...

- How do we inspire implementation.
- This act, Accessibility for all of us to be safe and seen regardless of what we might be facing
- Persons with intellectual disabilities need to be seen/heard
- If ramps and such, consistency okay—other realms mean we need to be looking at the impact that our words have and how to use those words
- Injecting supportive compassionate language for supporting all persons. Potential ways to be supported—enormous time and energy will be needed to make that pivot, and we are already looking at people who are super taxed.
- Accommodations is so much—it reminds me of big organizations I've worked in—you need to take care of her mental health—you need to exercise your mindfulness practices—no reflection of the organization's role/how that culture is not psychologically safe/causing harm?
- Emphasis on accommodations—how to cater to needs—recognizing the learning and the changing that the organizations are going to need to be less disabling.
- Environments are disabling
- Tools are disabling—Otter+ one person wants to use this and then another gives an opinion on something that is then broadcast out to all staff—and now this could be filed against you.
- Go back to individual—technology has a place—and it's not every place. Trusting in the safety.
- Need to be cognizant of the tools to make sure we support the whole.
- Acknowledge that not all supportive devices fit in every environment—
- Large, medium, small, micro, single, whatever. You can't have—because an organization has 50 people, they'll need to follow rules but the people below that are not. I'm a service provider in a city, I have 800 people who use my services, but I'm in Atlin.
- How do you ask a private organization to change accessibility when you have a town where the sidewalks cannot be traversed—so a top-down frame—Sheila—everyone should have the same standards but there should be for some organizations—mom and pop—financial burden, but I think apply for grants—so all people if there're are tax cuts/funding for supports.
- Consider economies of scale and context. Big city versus small town. But this also depends on which organization you are referring to—orgs likely go above and beyond in some areas—but documenting everything, process, recording, insurance for it, etc. that's going to be very problematic. Government is likely not going to pick and choose.
- We also need to have a base understanding of what you want to put in. and with training, how to train our staff—are there enough people trained to do the training?
- Type of organization, rather than the size—public service bodies—start in schools—educational institutions—elementary, university, college and then university—and then businesses.
- Forced stewardship—we are eco-friendly, buy our paper.

- “You are not asking the right questions. The foundation needs to be established before this can be considered but should start in public sector.” Pilot through public institutions to create a capacity.”
- “It should be a template for everyone, but funding is an issue and needs to be addressed; this need to be simplistic. Reduce the amount of documentation and the barriers it creates. This should be simple and generically placed. We should not be making a complicated issue more complicated. Keep it low barrier
- Election year—is this part of the government strategy—something to be fast track re: election?
- “relationships move at the speed of trust”—when you say, must, may, make, subject to
- There's a military saying they must drill into people early on: slow is smooth; smooth is fast. If you rush, you often fumble. If you go slow and steady, everything lines up a little better and you make more ground.
- Comment: “The efforts of AutismBC and ACT—it’s through your sheer will that you made this accessible—the timeline (short notice, middle of summer) is the antithesis of an engagement process. Three years for completion—within mandate of a government’
- Space, place, land, culture—lack of funding, lack of service providers, etc.
- If you could ask for anything?
 - More expansive inclusion.
 - I think this is very limiting, Space for everyone.
 - Include people with intellectual disabilities
 - Simplicity in records accounting and sharing of information is necessary.
 - May this be just one little bit in a broader initiative to shift eh culture.
 - The teen’s guide to PDA--Kerbey

Prince Rupert: July 24, 2024

- This will cause us to be more rigid and deplete service providers even more. We need more training—it’s not that we don’t—if there was something standardized that people like us could act on—we have this round table stuff but then it goes to a higher level and our voices get erased—it’d be nice to get training locally—and have them listen to parents like us who know what to do—instead of requiring a master degree. We talk about this stuff, it goes away, and we never see it again—part of transparency is coming back—asking, what happened to what we just said. Tricia is the person to speak with here, but they discount me—they’re not taking me up on this.



- Localized training: Lift up individual communities to support their communities with the gifts and abilities that are present—if you are looking for a master or doctorate degree, you won't get that in the north—bring them here and we'll train them.



- Heart and mind Standard of training
- Heart conditions, character versus accreditation—bring in community members to train locally--Recognizing people with disabilities as experts in their own experience
- Training local people, standard of service for local people, being able to duplicate that out, without the high standard of accreditation that formal universities require. Look at my sister, she's highly intelligent, has some training that is very valuable, has a brain injury, raising kids with autism—what's the likelihood of her going to school to be able to provide this training—



employment barrier—to be a service provider, you need a master degree—think of how much money that costs—if you have children with disabilities--

- Removing barriers experienced by people with disabilities—if my kid is sent home from school, I get the call. What about the single parent, or where two are working? Find ways to access those of us who have been marginalized and train to a standard that is reasonable.



- Also need community connectors—recreation example—vision direction can be lost.
- Do a workshop, trained facilitator, and trained to support—can start supporting.
- On this land, we know the protocol.
- AutismBC story—they hired me not because of my PhD, but because of my lived experience.
- Lived experience must be an asset as entry into the workplace.
- We need funding for anything to do with facilities—municipal level means increase in taxes, for example.
- Proof of burden impacts the organization's budget line.
- Must be accessibility to grants.



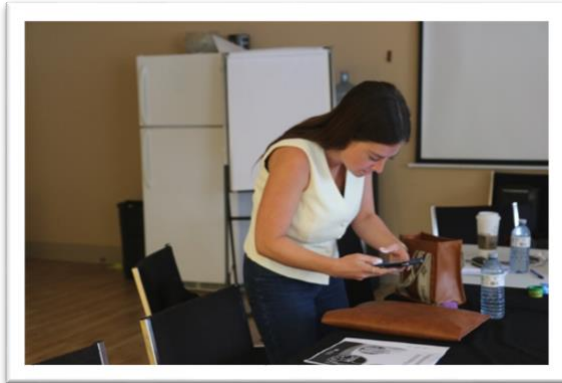
- How to incorporate staff to assess? How and who will train in dog support, for example.



- Won't achieve outcomes unless there is more representation—people need to see a face—also, attach a story to the cause—put a face with what you are asking for—humanize it.
- Recognize people with disabilities as experts in their own lives.
- Invisible disabilities are not recognized—says nothing about us without us, but this has been done without us. Leads to our testimony that we are not okay.

- Discrimination and barriers according to race and language and how it is impacting people—you cannot do the degree because you learned English as a second language, and ageism.
- More training—don't just give medication—without asking her, sent referral to mental health—harm done and pain that came through that.
- Impact of lack of training on invisible disabilities
- Institutions and flowing to organizations need to include those facets
- What employment standards look like—shorter workday, more rests throughout the day, qualification for more sick-time, kid who has a meltdown—you cannot be here because of it—you may or may not have a formal dx—self declaring what supports need to be in place versus what a doctor recommends.
- How many folks have no formal doctor—none. N = 7
- There are 5 first nations communities that spin into this area—maybe a nursing station there but flown in here—we don't have services and then folks in the five other areas are coming in here for services.
- “What happens to us? We're piss poor.”
- There is no doctor here—there isn't even a clinic.
- Repetitive documents for declaration, that cannot be used for any person as there is no one there to follow-through.
- What do you need? Money—Rupert is the end of the line—people come here to die. There is no support. I became a counsellor because of the suicides—I've watched one after another after another. I am one of 3 in the Health system—so people must pay—and they cannot afford it.

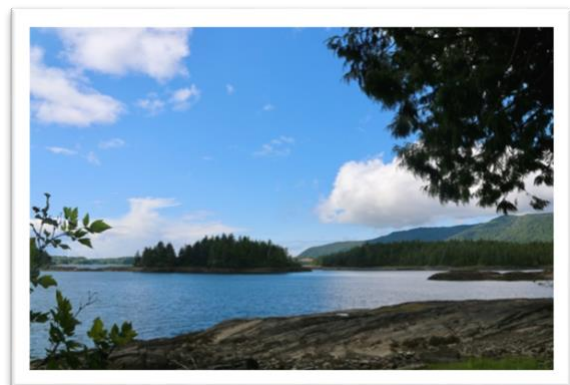




- Grant money? Tax relief, awareness around what our rights are and capacity for lawyers to understand what those rights are.
- Hey, my kid is autistic, you cannot ask them to do those things. They don't have the capacity and if you want them to do that—framework at organizational levels so that they understand what these needs are—my children find employment, they're

amazing at getting it—but when something comes up,

- No knowledge, no money, my kids don't understand what their rights are; employers don't understand duty to accommodate—and a duty not to discriminate against them when they're hiring.
- Employer to have a supportive, equitable baseline—at present, it's my responsibility, we need framework, standardized system, funding until it's part of a natural budget cycle—and awareness of human rights—worked for InclusionBC—the public doesn't understand what their human rights are. People are not aware of how to advocate for themselves.
- People who haven't gone to university, have knowledge, it's just different.
- Language learning LD, and second language, and low barrier.
- Daughter unable to attend Aboriginal head start nursery—had a worker for her to train other staff but they said she couldn't attend even though she provided a trainer—they said that wasn't okay, because they hadn't had the training.
- Exclusion from school—Recruitment and hiring issues
- Focus on early intervention—lack of services across the board—SLP, OT Assistant/PT Assistant, and physical bodies to be in that room with your kid
- For us to get here, we need people, funding, and lifting people up in their gifts, abilities and passions—as a starting place.
- Needs assessment—we've done the work, focus group, and that's a first step—colonial approach is problematic
- Also, assessment measure that are not normed on indigenous people
- Nothing to honour rights
- Northern, rural, remote-on reserve—kid's aunt is providing care at school and not being paid.
- Nothing currently keeping the system accountable.
- Family Connection Centre criticism—that there would be something keeping the system accountable—so that there would be accountability.
- Our value system is to just step in.



- Parents have a handle of kids—3, with 5, 6 and 3 kids—we’ve been our own advocates for years
- Kids don’t access autism funding because there is no service provider
- Cohort, Jordan’s Principle funding. Barriers—no doctor, no pediatrician, and kiddo is also not going to school. Fundamentals need to be in place before we even talk about employment standards. What is the goal of it all?
- Pierre Poilievre—says First Nations people are lazy and not deserving—he even says this of residential school survivors even—mindset going forward is going backward
- Importance of supporting family as our support network versus utilizing that as you have your family, so you don’t need our help.
- Indigenous value systems don’t always match western values—disability, for example
- Who we rely on as support people—sometimes people don’t have safe family members—structured support versus family support—latter shouldn’t be baring the burden of supporting us—nothing is keeping the system accountable—and don’t pair this with the Ministry of Children and Family Development—privilege
- Accessibility in the workplace—need to remove stigma and standards
- Grant writing standards—colonial—how we access that information, deliver it, and roll it out.
- Recruiting and hiring: Things that are on applications (e.g., driver license) are not necessarily necessary. I have a class 4, but it needs to be updated, but to get that I need a medical—and there is no doctor here. Emergency can’t do it. I now must go elsewhere and pay and figure out how to do it—to keep this aspect of my job.
- Hiring, recruitment, accessibility—standard void of taking into consideration geography and impact of that. Needs to be individualized. Flight cost, travel via car cost, weather.
- Unemployment—high in certain rural, remote communities—how to have standards for people who are living in Hartley Bay, the Nass valley—building standards for people who don’t have jobs—stats Canada—study Inclusion BC conference—roll out of employment thing for youth transitioning out of high school—bring it to a reserve—what are you going to do there?
- So many fundamental things that are not even looked at—if we don’t have fundamental core programming—early childhood—for example—and there is zero voice for you.
- Friends, family, everyone—and who do you tell? And what will they do about it?
- Having to find a job and not knowing what to ask. Coming from a place where you didn’t have a voice—we’re already at a disadvantage coming from rural, remote communities and this doesn’t take into consideration what their capacity is at.
- Cultural sensitivity to my needs—I didn’t have to have all the qualifications when I applied for my job, but they wouldn’t have known those things if it wasn’t for another worker who knew me

- New parents coming into the system—barrier of trying to enter the space without the tools to understand what does this mean? It's holding people accountable, but for what?
- Precursor entry point to support the consumer and employer.
- I don't think our government as thought. It should be an emergency—as if this is something that should have happened—we have one million baby boomers coming into hospitals and we have no doctors, no care aids, no nurses, and 2000 beds in BC—and nobody is talking about it
- [Mr. Rogers](#)—"Look for the helpers".
- The word disability—speaks of physical disability—we need to think about intersectionality—when I went to the conference we were at (BC Disability Collaborative)—the true cost of services or interventions or accommodations—totally different than a central place—you have a service dog, you need braille, you need respite—people don't look at the true cost of disability for a person to be at a place of employment.
- What about the parents caring for the person with the disability—look at the talented professionals we have—many of them are sidelined—imagine if we were to have workers with access to childcare on site. Putting care plans in place—write your kid a care plan. What can I do to make sure that your kid doesn't have a meltdown?
- Equity—tangible but also self-agency, opportunity access ability to vocalize—hidden equity piece that we are not talking about.
- Making the organization inclusive
- Implementation
- Strong language—standard of education, supplemental onboarding support for public and employers, funding, PADC to stand with you in times of need so you don't need to stand alone—body to oversee and ensure people have voice?
- Need this ironed out at a local level—with money put into a group of people that were looking at the standards—have that ironed out at our level, then we could take that to government—access local level communities to validate knowledge from experience—not school knowledge.
- When should they roll it out? Start now, by re-evaluating. Go back to the drawing board.

Terrace July 25, 2024

- Lots of politics—internal and external, and training is needed
- No. Businesses are not supported—daughter works next door—downstairs door locked at certain times--doors locked out of principle or safety? Both—standard says comply, but we are putting staff at risk.
- Lease agreements with landlords—if hours are 8 to 8, the door shouldn't be locked from 8 to 8i as it's in the lease agreement
- Don't have sufficient staff—do you have budget for that—in a quick timeline could you do it? No—need a budget cycle.
- There is already so much going on in an organization and to add this to someone's plate, the leader of the org is going to have to figure out what training, how much, what is required, money to do that—while busy with day to day tasks—so adding more work to what they are doing—and how to prioritize—autism—creating a hierarchy of disability—how to prioritize
- Downward pressure
- Budget issue
- Increase work capacity for staff—equity in wage perspective
- Level ground, wider doors—what other things will we need—reception—there was nobody down there—we stood for a few minutes—increase of staff, period—many organizations will need to relocate—this organization is located here on purpose—located based on demographics which the organization is serving...if two buildings are co-located, both would need to move.
- Key is knowing about organizations—and what they do—this is what you need to do for me before I give you this information.
- Potentially dividing community—don't go to AutismBC, go to our site—no—we need to work together.
- It is all well and good to say you must do these things, but if management isn't interested in doing the work in the first place, hiring someone to do the work is pointless—heart condition isn't for going outward—it's all about me. Speaks to the character of our environment—downward pressures are creating in a mindset and culture of organizations. Remove self from community, make ourselves number 1 and hope that we survive.
- Very different where I work now than previous social services—you make sure you use this flex time, holidays, etc.
- Accessing hours of work—in-person, hybrid, on-site---pushing work into evenings.
- “No—because decisions have already been made before asking”—the impact of this is that there is already this overarching umbrella from decision makers”
- "I know what the problem is, and this is how we fix it"
- Colonial construct



- Impact? Unhappy people—how manifested? “Homelessness, lack of enrollment in services—when funding changed for Autism funding, families freaked out because they didn’t know what was going on.
- Not trauma informed, left to feel vulnerable, afraid, insecure.
- A lot of the time they tell you want to do not how to do it. How is the training updated
- What if the leader—all neurodivergent—I’m okay with this but stick a spreadsheet in front of me.
- Impact of capacity—if it cannot be lifted, are we able to meet you where you are at? No. Why not? Because you don’t know where you are at.
- Byproduct—upset, angry because I was never going to get support I went for—recommendations won’t allow me to make free and independent choices because it’s void at the X side—wages—front line working jobs—people just going to school or just in low paying jobs—so turnover is high—will I get services? Absolutely not—what will you need to do again and again and again—I’m going to be telling my story over and over—activating—traumatizing
- Constantly having to repeat the story—education and medical—remain activated and highly protective of self and kid—fight, flight, freeze, faun—you don’t understand how that impacts me. Activation is very dangerous.
- Can be trauma informed but I’m only paying you 20\$/hour—they find another job for 25\$/hour—training
- Can have all the training in the world, but autism is so big—how can you fully train a staff member in Autism—partners—not knowing you’re neurodivergent—together—being able to understand the whole spectrum in training—it’s unattainable.
- Family Connection Centres—parsing services—an external person cannot sign off on services for funding, because she’s attached to the FCC—now having to say, “no, I cannot do that for you”.
- My kiddo comes into school—has OT needs—if connected to FCC, cannot get connected to supports in school—if direct funding through AFU, could access outside OT and in-school OT—support staff cannot sign off on it for outside OT, because you’re part of FCC—
- Ministry of education covers expenses for school, so they are calling it double dipping.
- Marry school PENS to cross check—double dip situation—service providers—if FCC cannot connect with another organization—barrier in organizations in the north not being able to get half of the support they need access to, because of the situation—Accessibility Standards are going to further impede that.
- Standards alone are not enough—this person needs more help than me because they are different. Are they getting the help? No. Now they’re disrupting my life.
- Highschool, shift you to a segregated setting
- Supportive training—can’t get extra bodies in without funding—screening process for training—vetting system to ensure we have people that won’t bring undo harm to the person with the disability--

- “You can have a DX, but as soon as an autism diagnosis attached to you, you’re tracked”
- “We are reenacting the residential school approach to segregation in a sophisticated way using language and barriers that hide the tactics”.
- “As crappy as it is to say, if you don’t have the diagnosis, don’t get it—risk of increasing implicit harm that’s being done”.
- We are not taking into consideration, space, place, culture.
- We are not taking into consideration, history, and the patterns of history and how it’s showing up in duplication of the process
- Funding for training, continued training, for staff, to hire, to increase staff wages for retention and consideration for location—both demographics as well as older building and co-located organizations.
- Additionally, that we have non-compliance property owners renting to organizations that create barriers for accessibility standards to proceed, with lease agreements and lack of maintenance.
- It starts with kiddos in the schools—the standard that we’re supposed to be having for people in genera—is not happening at their most precious time in their life—right track, wrong track, or not on the track—a lot of this is to do with how the union protects their staff.
- New one: We want to know all systems are unified in this before rollout
- Son struggling at school, easier to sit with principal—easier to let them go for now showing up on time than how they treat their students
- “I don’t know how they can get away with treating kids the way they do”
- Colonial structure—white privilege—power, money—protect each other—on the school part of it—some of that needs to be in schools—and post-secondary
- This is a curriculum outcome—have staff trained, unions aligned, post-secondary and curriculum so that youth are being trained and supported in what is needed.
- Son—other kids, “you don’t have ADHD”—teachers—same thing—we can think about this, here is some information—need to teach him about his rights.
- Ministry of Education and Child Care--How do we create and work together to support these things? Accessibility plan. Accessibility committee.
- No, this isn’t going to give independence because it’s been predetermined—and location—where a person lives, we don’t have access to a lot of therapies—SLP, OT/PT, and other services—some of these we can get online. Need to increase services in the therapeutic realm—and they also need to be affordable. Oldest, who must pay out of pocket for diagnoses, to get to place B—and then must pay for the service—fee for services continue to create barriers for persons with disabilities.
- No, because it’s pre-determined, there are financial barriers, we are looking to make things accessible for disability vs changing things as a whole and making sure that the organization is a safe place for everyone involved. All well and good to say you want to combat this, but add Indigenous, Métis, and every nationality there is, and then put you in the north—not possible.
- Initially, talking about jobs posted online—a lot of individuals don’t know how to access that online, or don’t have the software/hardware/skills—and then there is

the matter of band width—technological access barriers, skill set barriers, and the ability to access

- These standards are premature
- The proposed recommendations will not help organizations remove accessibility barriers around recruitment and hiring policies, practices and technologies because of finances, staff, ability to access technology, budget, and above.
- More remote is the people that work there is an issue—and if I have a negative experience with another organization, am I going to promote them—news travels fast—loss of privacy, autonomy, and experience—transitions between jobs. If I don't like the leader in X organization, I'll go with Y organization and not promote X organization.
- In June, went to cultivating safe spaces—Elaine Alec—she was amazing—strategi planning for the organization—phenomenal for work places...in every aspect—she's now going to Pakistan and doing UN work--
<https://www.cultivatingsafespaces.com/>
- Employment standards need to be a precursor—also talking about WorkSafe.
- The proposed recommendations will not help organizations identify and remove barriers to creating accessible workplaces I see it as another barrier—we are already overworked and the people who will do this are underpaid—a burden and the creation of a potential heart condition that is not enough against people with disabilities—micro-aggression— “Oh gawd, now we have to do this?”
- Don't think this can be done in time—transitioning time. One or two years is not going to work.
- There's so much to put into this: what additional measures—you're not always going to do that and then you other staff are going to be upset—unknown measurement.
- Making the organization inclusive
- No—downward pressure, compliance—unintended harm through micro-aggression—tips as bonuses for staff—7-day all-inclusive trip—what happens to those that are not able to meet the threshold for the bonus—and even if they did, they wouldn't be able to go to Mexico—incentive programs, would mean other counties
- There's so much to put into this: what additional measures—you're not always going to do that and then you other staff are going to be upset—unknown measurement.
- This will not support mobile workers accessing standards—people who work in homes, travel outside the country or across the country to do professional learning, etc., such as social workers, OTs/PTs/SLPs
- Group home, residential facilities,
- 4 bed group home—high risk—all street involved...emergency services trained to support group homes in accessibility standards—so how do you do this? How to create a requirement—RCMP to have MH training—training in invisible disabilities—so that they can interact with anyone

- When working with vulnerable communities, the accessibility standards are not tapping into attachment, trauma assumed—when their work is social service related. Oftentimes, people who are sent to work in remote or other communities—so you have someone working here who doesn't want to work here—consequence-based.
- What did you do wrong that you have to work here? Redeployment that creates stigma and suggests lack of ability
- Nass Valley—handful of officers that went there because they wanted to be there.
- James' situation—loan forgiveness, Northern Living allowance—you're only hear for those reasons—person could leave as soon as they can, won't be really invested in working there—turnover for training plus attachment needs.
- Temporary, transient role—
- No creating experience of safety, attachment, not trauma-informed practices, not wholesome understanding of disability or what employees can ask for—AI tech
- Safe app—no Telus service—Highway of Tears—where is she?
- Infrastructure implemented and followed through on—3 years since it was announced that there'd be cell service.
- Cannot comply when there is no staff, no funding, no resources, training, and who will monitor this? Requires us to hire someone and we'll have to do the documentation and submit it—there will be a reporting system.
- Asking us to have committees, hire staff, hire extra staff—cannot do it. Trying to get grants for one thing when you aren't eligible to apply because you were awarded another grant.
- What does compliance mean? All well and good to say you're giving me the money to hire this person—I must do training—who? How much? What standard?
- Should apply to government agencies first and public servants before any organizations. Why would I comply if you aren't doing it? Find the hick-ups and bugs first.
- The precursor should be set first—get the infrastructure in place. Internet, cell access, funding
- TIMELINE
 - Need to have infrastructure in place
 - Need to have their own system bugged out
 - Need training on inclusive practices—we will never hit the target on inclusion as it's a moving target—in the last 6 years, the language has changed—special education to disability to diverse ability, to pride to neurodiversity—no it isn't—let's talk about neurodivergence.
 - Need two years to restructure and add a new person. Two years if you have a financial person in front of you—and you are not trying to change minds. Joe will say, I've never had a person in a wheelchair come here. Family doctors here? People don't have them—no stabilized supports

Appendix C: Engagement Notes Virtual

July 30, 2024: Virtual Engagement #1 - Interior

Theme1

Part 1

There is a curiosity as to whether the standards presented are requirements or recommendations.

- In theory, the standards sound good, but how do small organizations ensure everyone receives adequate training, especially when training comes with costs that often require grant funding? Denials of grant submissions for training force organizations to rely on free services, which makes documentation challenging without secure funding.
- For small organizations with part-time staff, these standards could place a burden on limited human resources, requiring infrastructure overhauls.
- Additional information is needed on:
 - o What types of training are required?
 - o What kind of documentation is necessary?
 - o How do we communicate these standards to the public?
- Grants for physical disabilities (e.g., ramps, guardrails) are easier to secure, but funding for training on invisible disabilities, which is invaluable, is more difficult to obtain.
- There is a lack of confidence that the Province can enforce the standards and provide adequate support mechanisms.
- How will these standards impact not-for-profit organizations when they already face funding challenges? There is no clear path to resources.
- What recourse do disabled individuals have when frameworks fluctuate and fail to provide consistent support?
- There is an overemphasis on physical disabilities and infrastructure, which excludes neurodivergent individuals and their unique needs, including co-occurring conditions.
- Concern exists about how inclusive communities are being created. Neurodivergent training and navigator training are crucial.
- Provincial legislation and service delivery are not inherently accessible. Human rights are difficult to uphold under the current Tribunal Act. For example, the BC Residential Act prevents the Human Rights Tribunal from addressing evictions related to disabilities, leaving embedded disabilities unsupported.
- There are issues with support for psychiatric service and support dogs, particularly in tenancy, where landlords are not required to accommodate. The Human Rights

Tribunal and Tenancy Act are not aligned, leading to inconsistencies that negatively affect people with disabilities.

- While legislation sets policies, these policies often fail to work together to support accessibility standards. There are no exceptions or accommodations in place to make policies truly accessible, as highlighted in the recent RCY report.
- When engaging on these issues, we need to allow for executive delayed functioning to ensure afterthoughts are considered.
- In community sports (e.g., Sports BC), there are many barriers for people with disabilities to join teams, creating an experience of “elitism.”
- How will these standards ensure that schools provide quality air in classrooms? Poor air quality becomes an accessibility challenge, and districts are not addressing it.
- Parents and caregivers are overwhelmed by school districts' lack of holistic support for accessibility, which restricts students' ability to access classrooms and curriculum.
- Legislation affecting accessibility should be carefully considered.
- Navigating government websites and policies is overwhelming and disconnected, lacking clear, layman-friendly explanations. This must be addressed at the ministry level.
- Families are often shuffled between siloed services (e.g., Mental Health, CLBC) instead of receiving an integrated approach, which hinders accessibility. Breaking down these silos is essential to support families.
- School districts should be the primary focus for accessibility improvements, as that is where most families begin their journeys.
- There should be a paid parent/caregiver advocate in each school district who reports to an outside body (like an Ombudsman) rather than the school board.
- Peer Navigators are crucial to building capacity and ensuring accessibility.
- To make the system more accessible, we must decolonize it, as the current standards create barriers.

Part 2

As intersectional, Indigenous persons, we are the experts of our own experiences. I do not agree with the medical model's focus on deficits.

- Current assessment tools for neurodivergent individuals are not strength-based. They are rooted in the medical model, which is humiliating for my loved one and creates barriers to accessibility.

- It is possible to assess needs using a strength-based model.
- This is a difficult and emotionally activating conversation to have.
- Regarding these requirements: Is there a guarantee that people with certain diagnoses will gain access to supports? Many cannot get diagnosed due to financial and geographic barriers. What happens to those individuals? Will financial means and supports be provided as a result?
- The idea of “recognizing people with disabilities as experts in their own experience” is not supported unless one has been diagnosed. This creates more barriers and is extremely taxing on employees, with significant microaggressions, especially against those assigned female at birth (AFAB).
- Self-identification is often dismissed, even in self-advocacy efforts to gain support or move toward diagnosis. The demand for “complete” proof of need for assessment leads to microaggressions, especially when facing financial barriers.
- Intersectionality must be considered, including newcomers, individuals with addictions (substance use/misuse), and BIPOC communities.
- Deficit-based approaches harm families and individuals with disabilities, taking away their agency in gaining support. We need to decolonize this process.
- “Children are our gift, and we need to co-create environments with solutions that work and are inclusive.” We must shift to a strength-based approach to decolonize the pathways for support.
- “I don’t perceive my disability as a negative, as an autistic person.”
- We need to ensure that language is not watered down in a way that diminishes our rights under the Disabilities Act. This is essential for achieving meaningful accessibility and preventing the further silencing of disabled voices.

Part 3

While it's nice to say that individuals with disabilities are the experts of their own experiences, we must also consider the ability of children to voice their needs. We should focus on ensuring that the people in the room are equipped to provide immediate support.

- School districts need to be better equipped to meet children where they are, regardless of diagnosis, and offer support that aligns with each child's needs.
- I hope this standard will serve as an additional supportive tool for parents and advocates in helping children navigate the school system.
- Not everyone can be their own “expert,” so it’s crucial to value the role of those designated to support and amplify a child’s voice.

- Advisory councils with people who have lived experience should have the power to make decisions, not just offer input. They should be empowered to drive transformation and change within ministries such as CLBC and the Ministry of Health.
- Ministries must undergo significant transformation to align with these standards.
- We could look to the New Zealand model, which has a Disability Ministry composed primarily of people with lived experience rather than bureaucrats, as a guide for how we might move forward.
- Some community councils are strong, but many are outdated, having been created in the 1970s and 80s. With the world having changed post-COVID, many systems need to be revamped.
- As parents, we need to be empowered to “speak for” our children when they cannot speak for themselves.
- Self-advocates often lack influence and are not truly heard. Though they may be given platforms, it is politicians—not individuals with disabilities—who are making the decisions. Meetings and forums are not balanced, with only a few parents and perhaps one self-advocate. We need more structured access to ensure input from families is valued and included.
- Autism Spectrum Disorder (ASD) assessments are outdated and biased toward white males.
- Families are overwhelmed by the lack of transparency from CLBC regarding funding, and the government should provide a clear portal that outlines available supports and access to funding.
- CLBC is overly bureaucratic and top-heavy; we need to free up more funding for families as the system is hemorrhaging resources.
- Accountability must be established within ministries before the standards are fully implemented.
- Families with service dogs need more support. This includes recognizing the emotional and logistical layers involved in caring for a dog (e.g., vet care, loss of life, grief support, and transitioning to a new service dog).
- Many landlords are unaware of their duty to accommodate disabilities, and this issue is not sufficiently addressed in the standards. It is a foundational need for families.

Theme 2 – Employment Accessibility Standards

Part 1

- Organizations are not required to disclose why not the hire; therefor this is not a practical way to create a Standard

- Should there be a call for a follow-up conversation with non-hires to close the conversation loop
- The person w/disability is not obligated to disclose yet doing it can put them in a vulnerable situation
- In union situations, we see within government, they are to set the standards, yet are not
- Standards of Practice to pre-load interviews can be practiced (pre-load questions; workplace walk through; video interviews, Zoom/TEAMS or face to face)
- Generally, interview formats are not ND affirmative and don't reflect ways an autistic for example can do the work.
-

Part 2 – Accessibility at work

□ Is this initiative connected to WorkSafe BC and unions, and where does accountability for accessibility training lie?

- Microaggression training
- Accessibility training
- Inclusive training
- BIPOC training
- Harassment training
- Workplace support training

Unions, WorkSafe, school districts, ministries, and WorkBC must be included as part of a comprehensive approach, along with Indigenous communities, BIPOC groups, and considerations of various intersectional identities (e.g., sexual orientation and gender identity), as well as parents and caregivers.

How can we provide training without putting individuals with disabilities in a position where they feel compelled to “out” themselves?

It is essential to establish a Standard of Practice for hiring that protects the privacy of potential employees. For example, applicants should not be required to disclose their disability status to engage with ministries. Possible methods include:

- Video interviews
- Teams/Zoom (with the option to turn the camera on or off)
- Video submissions
- PowerPoint submissions
- Face-to-face interviews

- Pre-loaded questions

Theme 3

Part 1

- Start with the ministries if we are going to implement these changes.
- WorkSafe must be involved in this process to ensure that the same rights apply to everyone and that all parties have a protected voice.
- To ensure legitimacy, we need compliance with WorkSafe and employment standards.
- For single-person organizations, there must be financial and informational support available.

Part 2

- To maintain traction, we should aim for implementation within no more than two years; initiatives can lose momentum as people change or priorities shift.
- While it's important to take the time necessary for thoughtful implementation, we must avoid delays that could undermine the integrity and credibility of the process.
- With ongoing discrimination in the workplace, it is crucial that we move forward to support people with disabilities.
- All organizations should be subject to these regulations to ensure inclusivity and accommodation, though different-sized organizations may require tailored approaches for effective implementation.

Part 3

- If you could wave a wand, what would you ask for?
 - It would be ideal if there were no cost barriers for organizations. While the idea of a standard is commendable, many organizations face significant financial challenges.
 - Collaboration should be rooted in kindness among all partner groups, right holders, and stakeholders.

July 30, 2024: Virtual Engagement #2 – Vancouver Island

Theme1

Part 1

Supporting Potential Employees

- Excited to move forward with initiatives to support potential employees.
- However, the lack of funding from our provincial government makes it extremely difficult to implement the necessary changes.
- There are insufficient supports to create training opportunities that fully accommodate all individuals, especially non-speaking autistic individuals.
- Increased access to Kaya (a communication tool) is essential.
- Further encouragement and support for inclusive practices are crucial, as exclusion remains the norm despite provincial and federal initiatives. Greater visibility of the message and the importance of inclusion is needed.
- Funding is required to support established guidelines.
- A deeper understanding of sensory needs is essential, as these areas are often overlooked (based on personal experiences). Education for staff and services on sensory accommodations should be prioritized. For instance, it would be beneficial if public facilities routinely designated “sensory hours.”
- Waitlists should be adjusted to create better accessibility to services and establish standards.
- A potential barrier is that the primary method of disseminating information may be online, which poses challenges for families with limited internet access or low technological skills. Moreover, information should be visually supported for those with receptive communication or literacy challenges.
- Opening employers to a greater understanding of these issues is a strength, but we need more structured approaches.
- Is there a dedicated contact number for employers seeking guidance?
- A portal for training access, mentorship programs, and mandatory accommodations in public facilities (like sensory hours) should be established.
- We need to consider how to fund these initiatives, as significant resources will be necessary.
- Questions arise about how organizations will determine their funding allocations and who will provide the training.
- Prioritization of training needs to be clear, especially for organizations that may lack sufficient personnel.

- Leadership development should include individuals with lived experience of neurodiversity to train organizations.
- Classrooms must also be part of this process to ensure they provide safe spaces for both staff and students.
- It's important to engage with higher-level officials (directors, CEOs) to ensure they receive this information. While I received the email about this brainstorming session due to my subscriptions, as a clinician, I have limited capacity to influence broader changes within my organization. If directors were directly invited to these discussions, the impact of the information would likely be amplified.
- Currently, in school districts, there is often no proactive approach until an incident occurs involving a child, and parental or advocate voices are frequently marginalized.
- Increased support staff is crucial to ensure the well-being of students with neurodivergent needs. Indigenous communities face additional vulnerabilities due to racism and biases, particularly when intersecting with neurodiversity, which compromises safe and supportive training environments.
- We need to prioritize how to maintain emotional regulation, offer closed captions, and establish more sensory-safe spaces in public services (e.g., pools, shopping centers).
- Changes to the BC education curriculum should include education about disabilities and the accessibility act, like the incorporation of Indigenous education components made a few years ago.
- The standard must address the school system and ensure ongoing support for students based on their diagnoses. Without adequate support, school exclusion is exacerbated, leading to unintended harm for students and families. Students' self-agency may be compromised, resulting in increased anxiety. Parents and caregivers who advocate are often perceived as "adversarial."
- Staff should undergo comprehensive training on disabilities and support strategies, making it a core component of professional development rather than optional.
- We also need to engage young adults in learning about self-awareness and practicing accommodations that would benefit them, enabling them to advocate for themselves in the workplace.
- Individuals should not have to disclose their disabilities to receive accommodations, as this creates a risk of creating inequality rather than equity. Ensuring that individuals with diagnoses have key support outside of the Standards of Practice is essential.

- Training for teachers and leaders on disabilities and support needs must be embedded within the Standards of Practice.
- Cultural considerations are vital, especially when viewed through an Indigenous lens.

Part 2

- Funding remains a significant issue. In the school system, funding often goes into a general pool, and districts can choose how to allocate it, which does not guarantee that funds follow the child based on their diagnoses.
- More supports are needed in classrooms:
 - Teachers and educational assistants (EAs) should receive the same training on disabilities.
 - Increased funding and training are necessary to impact all ministries and CLBC.
- Accessibility groups currently lack authority and are primarily advisory.

Theme 2

Part 1

- Requiring medical evidence for disability declarations is invasive; individuals should be allowed to self-declare their disabilities.
- A more effective approach would be to establish a Management Board responsible for overseeing provincially funded resources.
- There is currently no accountability within the existing standards.

Part 2

- Who will hold organizations and businesses accountable to the standards?

Part 3

- Not only organizations and businesses, but also our communities, towns, and cities need to be evaluated on how they can both provide and receive support.
- How do we uphold these standards in community spaces, including homes?
- Who is responsible for training organizations, and who is vetting the validity of the training content?
- Our justice system urgently needs these standards, particularly for disabled individuals who are incarcerated.
- We must consider the accessibility of online portals and the ability to complete forms freely, along with access to necessary infrastructure.

- Menstruating individuals are insufficiently considered in this discussion, which impacts various stages of life, including menstruation, childbirth, and menopause.
- Individuals assigned female at birth (AFAB) are often the primary advocates present; we need more support due to the complex social and emotional roles we navigate.

Theme 3

Part 1 & 2

- All organizations should adhere to reasonable timelines for compliance.
- Ministries and public service agencies should be the first to evaluate their practices before other organizations begin their assessments.
- Standards should apply to government entities first, as my experience has shown that the worst treatment and support for disabilities often comes from government services, while the best has typically been provided by private companies.

July 30, 2024: Virtual Engagement #3 – Lower Mainland

Theme1

Part 1

- There needs to be a stronger emphasis on invisible disabilities; the current document is lacking in this area.
- The reliance on a medical model is biased and fails to amplify the voices of self-advocates.
- The Act does not align with Employment Standards and primarily addresses physical disabilities.
- Many businesses and facilities lack tailored support packages for staff training on various disabilities. For instance, when a person on the spectrum undergoes bloodwork, understanding sensory sensitivities is crucial. Factors such as blinking fluorescent lights, noise, and textures, as well as recognizing when direct eye contact might be disruptive, need to be considered. Staff should know how to pause and check in with individuals, possibly using hand signals to communicate comfort levels. There's substantial work to be done in this area.
- We need clarity on how to request accommodations and what steps to take if they are not implemented.
- Accessing and completing forms can be complicated and are often not user-friendly.
- Ableism in healthcare needs to be addressed.

- The power dynamics of the healthcare system (e.g., doctors' ability to accept, validate, or void forms) influence the effectiveness of the voice of the individual.
- There is a significant lack of understanding and information about agoraphobia, creating gaps in Worksafe and general HR practices; this disability is not openly discussed.
- Clear policies and procedures are needed, including well-defined, easy-to-navigate forms that allow for various disabilities and their impacts.
- Forms should be low-barrier and without cost for completion.
- Two considerations for future developments include executive function support (e.g., assistance for individuals with AuDHD in completing online forms) and sensory support.
- Support workers for persons with disabilities often face limitations in their roles, particularly when it comes to paperwork and resource management. Current guidelines typically focus on those deemed “extremely low functioning,” leaving many who still require assistance unsupported. This burden often falls on parents and caregivers, who frequently lack proper training. More government support is needed for low-functioning individuals, including periods of training for caregivers in best practices.
- Many examples in the standards do not address co-occurring diagnoses and how to support them effectively.
- Parents and caregivers advocating for their children often have disabilities themselves; the complexities of family structures need to be considered.
- “Kinship” agreements should be established when supporting family members living together.
- Reconciliation calls for living and supporting within family circles, yet current practices often defer support, funding, and training.
- Providing support within the home structure is essential to ensure families can stay together and heal, allowing children to be supported by their family, land, and culture (supporting multi-generational families and relationships).
- Indigenous and BIPOC communities require more support regarding disability services; it’s crucial to amplify their voices and provide them with adequate resources.
- Newcomer families, particularly those from war-torn countries, also need special attention and support.
- Organizations should be encouraged to consult with community disability partners, stakeholders, and rights holders for valuable insights.
- There should be greater clarity on accountability when support is not provided to users.
- Consider compiling a list of “exemplary” mentor organizations to assist in building organizational accessibility standards.

- Could we establish professional accommodation assessors to better understand individual needs?
- Currently, finding information on accommodations is often ineffective.
- A list of organizations that employers can access for support should be compiled.
- Disclosure of disabilities can lead to bias and challenges in securing employment.

Theme 2

Part 1

- Disclosing one's disability can feel like "outing" oneself, and many individuals do not feel comfortable doing so due to safety concerns.
- The Safety Act is weak, and Worksafe lacks the capacity to fulfill the expectations outlined in the document, creating significant gaps and allowing for harmful practices by organizations. Will we see similar issues arise with these new Standards?
- A recurring barrier for individuals with disabilities is the intersection of race and privilege. Unconscious bias, racism, and privilege are real issues. It's vital to share experiences and assist those who lack access to necessary support. One poignant example is Emmanuel, an Autistic Black boy from Sweden who was arrested during a meltdown; authorities claimed they wanted to "cure" his autism. His family has been unable to see him for years due to restrictions. Emmanuel's story highlights the discrimination faced by him and his family and underscores the urgent need for advocacy. You can find more about his journey on his Instagram page, My Autism Journey in Sweden - Emmanuel Fru: [Instagram Link](#).
- Currently, individuals with disabilities are shouldering the burden of educating organizations and workplaces about their needs. The intent of these standards should be to shift that responsibility onto the organizations themselves.
- Part 2
- There should be a minimum set of standards that uplift neuroaffirmative practices.
- While work can be performed from home, many employers are unwilling to allow for hybrid work environments and are insisting on full in-office attendance.
- Part 3
- Workplaces capable of supporting remote work are instead standardizing in-office requirements, leaving employees with no recourse to advocate for change. The BC government needs to prioritize remote work as an accessibility standard, as this exclusion results in a loss of thousands of skilled disabled employees who cannot access traditional office jobs.
- Grants should be made available to support the implementation of these changes.

- Incentives for organizations to implement accessibility standards are essential.
- Consider subsidizing a portion of Accessibility Advisors' salaries.
- Offer incentives for not-for-profit organizations.
- Explore tax relief options for corporations that meet accessibility standards.
- Job postings should clearly outline accessibility needs; currently, such information is minimal. For example, stating "must be able to lift 50 lbs" is insufficient.
- When I see phrases like "exceptional communication skills—written and spoken," I feel excluded, especially for minimum wage positions.
- A trauma-informed lens should be embedded into the Standards to protect the social, emotional, and behavioral aspects impacted by executive functioning, which leaves individuals vulnerable to microaggressions and both intentional and unintentional harm.
- The phrase "other duties as assigned" in job postings can be harmful and fails to foster an inclusive understanding of the required skills and abilities.
- Theme 3
- Parts 1-3
- The government must take the lead, as their existing systems are already inaccessible. They need to address their own shortcomings before expecting others to follow suit.
- Following the government, their partner organizations should be next in line for these changes.
- Larger organizations should implement these standards first so they can work out potential issues before smaller entities are affected.
- While we have made significant strides in defining environmental accessibility, we also need to develop frameworks that address the needs of neurodivergent individuals and those with chronic illnesses.
- Form a working group within the neurodivergent community to identify standard supports that are necessary.
- Considerations for the needs of baby boomers should not be overlooked in this process.

July 31, 2024: Virtual Engagement #4 – Anywhere in BC

Theme1

Part 1 - 3

- As an adult entering school with a diagnosis, support was largely unavailable; staff lacked understanding of his disability. The Assistant Program for students with disabilities provided funding but required him to seek out his own support.

He found the Learning Disability Society, which was his only option for assistance.

- This approach is not feasible for individuals lacking the necessary executive functioning skills to navigate these challenges independently.
- We need to embed deeper supports to ensure that individuals with executive functioning challenges can access the help they need.
- There are numerous barriers for those reaching out and expressing vulnerability when seeking assistance to function at the same level as their neurotypical peers.
- It is crucial to ensure that both funding and coaching are readily available.
- What tools will be accessible for disabled individuals to support their journey toward self-employment under these Standards?
- On page 13 of the Accessibility Service Delivery Standard Document: When considering “camps” for kids, we must evaluate how to ensure accessibility. For example, in Surrey District, where 12.5% of the population has disabilities, there are insufficient adapted programs to support families. The cost of \$5,140 (excluding food) for just one week of camp is not feasible for many families.
- Parents struggle to access support for children with disabilities, facing significant barriers and consequences when attempting to secure services. Although some funding exists to assist families in finding jobs, this is a provincial challenge that exacerbates barriers to service delivery within the disability community, affecting family functioning and wellness.
- Daycares often refuse to accept children with disabilities due to a lack of training and facilities, which harms their transition into the public education system.
- Families are expected to bear the costs of support; will this document address that challenge?
- This document alone will not meet the needs of families. We urgently require a Canadian Disability Act to drive meaningful change.
- The conversation surrounding school districts also highlights issues with unions impacting accessibility and inclusion for children and youth. During school board meetings, I often hear concerns focused on staff safety, reflecting ableist mindsets that can harm our children.
- The barriers are so substantial that it is difficult to ascertain whether these Standards can genuinely support individuals.
- We are already witnessing school districts sidestepping their responsibilities, despite the Education Act setting clear standards (Section 75 (1): Subject to the other provisions of this Act and the regulations, and to any orders of the minister

under this Act, a board must make available an educational program to all persons of school age who enroll in a school in the district). What measures will be taken to enforce compliance with this requirement?

- While the document is commendable in spirit, it lacks accountability.
- I appreciate that there is an acknowledgment of the need for organizational accountability.

Theme 2

Part 1

- We need a guide to help potential employers understand what questions they can and cannot ask during the interview process.
- As someone with multiple co-occurring conditions, past workplaces have forced me into medical leave due to the need for many days off to manage my health. I was not offered any accommodations that would allow me to remain in the workforce. For example, the ability to work from home during flare-ups would have enabled me to continue working while meeting my needs.

Part 2

- Every company should have access to a job coach.
- We should be free to disclose our disabilities but often feel unable to do so.
- WorkBC's policy states that if someone is enrolled in post-secondary education (e.g., a person with a disability taking a few courses), they will not receive disability employment services. This creates challenges, as my loved one lacks support for summer jobs and faces significant delays in completing their program. Do the Standards address the challenges stemming from this kind of exclusion? Typical students can balance both work and school; why should individuals with disabilities, who often require more support, be restricted?
- While example statements are helpful for job postings, can we establish a standard approach for the interview process that allows for a preliminary discussion before disclosure?
- We should consider embedding a mandatory workforce inclusion statement within job descriptions.
- Why are we not providing neurodivergent supports within the workplace?

Theme 3

Parts 1-2

Part 1

- We need to assess the capacity of employers, particularly smaller organizations, which often face significant financial and staffing barriers to oversight and funding.
- Funding will need to be injected into these organizations through grants and other means.
- The request for compliance creates disparities due to the financial and staffing limitations within organizations, which must be evaluated prior to implementation.
- In rural and remote areas, small organizations are doing significant work but face substantial barriers in moving forward.
- Have we considered Microboards, where families impacted by disabilities lead the efforts themselves?

Part 2

- Incorporating this into membership orientation for Chambers of Commerce and Boards of Trade could support training for implementation.
- There is concern that this initiative could be overlooked due to upcoming elections and potential changes in government.



REBRANDING

VISION STATEMENT

New: To contribute to a world where neurodivergent individuals thrive in an equitable and inclusive society.

Previous: To be one of the world's leading producers and providers of evidence-based information to enable autistic people to live productive, satisfying lives.

MISSION STATEMENT

New: ACT is committed to empowering communities through factual information and education, fostering inclusivity, and advocating for a society that embraces neurodiversity. Guided by insights from the Autistic community, we provide tailored services, education, and advocacy initiatives to promote true equity and understanding. Our measurable efforts ensure continuous engagement and progress toward a more inclusive and supportive society.

Previous: The mission of ACT – Autism Community Training Society is to provide evidence-based information, resources, and training that benefits autistic people as well as their families, professionals, and other community partners, to enable autistic people, to live productive, satisfying lives.

CORE VALUES (PREVIOUSLY, THERE WERE NONE STATED):

Evidence-Based Approach: Our commitment to excellence is reflected in our rigorous adherence to evidence-based practices, ensuring the accuracy and reliability of the information we provide.

Inclusion: We believe in creating an inclusive environment where every individual, regardless of their neurodivergence, is valued and respected.

Advocacy: We stand as a voice within the autistic community, advocating for positive shifts in policies and societal perspectives.

Empowerment: We are committed to empowering neurodivergent individuals to live rich and happy lives free from discrimination.

Integrity: Our commitment to providing unbiased information is unwavering, ensuring the trust of the community we serve.

TARGET AUDIENCE

- Neurodivergent people with varying support needs

- Families and Caregivers
- Educators and Professionals

WHAT WE DO CURRENTLY:

- We offer online information and resources
- We host webinars and workshops on topics such as effective communication strategies, dealing with anxiety, distressed behavior supports, navigating the education system, and accessing community support.
- We offer live, streamed, and video presentations to provide education regarding neurodivergence and inclusive practices.
- We collaborate with universities and professional organizations to promote the latest research findings and evidence-based practices in inclusive education and support.
- Whenever possible, we include presenters with lived experience to ensure the Autistic voice is heard.
- We collaborate with the Autistic Community to guide content and education.

FUTURE PROJECTS:

- Create Interactive forums following events, where registrants can share experiences, insights, and advice in relation.
- Develop interactive and accessible resources, such as visual guides or Learning Management Systems and apps to cater to different learning styles.
- Create a family-focused section on the website that includes resources such as printable guides, toolkits, and links to relevant services.

TYPOGRAPHY:

Roboto: Sample text: ACT – Autism Community Training provides information and training relevant to the autism community internationally. Based in British Columbia, Canada, ACT develops a wide range of positive and practical information on everything from sleep problems and diet to core issues such as diagnosis and aspects of intervention, including information on setting up intervention programs. These resources are free and are available online without a password requirement. Michelle's preference.

BRAND MESSAGING Tagline:

- Knowledge that Makes a Difference
- Tone of Voice: In all our verbal and written communications, we will maintain a tone that is warm, empathetic, and informative, reflecting ACT's commitment to supporting and empowering the Autistic community Online Presence

A) Website:

- We will create dedicated sections for resources, community forums, event updates, and a blog featuring relevant articles and impactful stories from those with lived experience and community members.
- We can also have interactive features on the website, such as discussion forums, live chat support, and a searchable resource database.

A) Social Media:

- We will use Facebook, LinkedIn, and Instagram to share informative graphics, community stories, and promote upcoming events.
- We will develop a content calendar for social media to maintain a consistent posting schedule. We will use a mix of content types, including educational posts, community spotlights, and event promotions.
- We will ensure that the website and social media content adhere to accessibility standards. We will provide alternative text for images, captions for videos, and accessible design features to cater to individuals with diverse needs.

Logo: Thanks to Ryan for designing our new logo!



The “fan” logo, which has many variations at the link above, also takes color inspiration from the rainbow infinity symbol, and abstractly conveys community through the multi-colored drop shapes facing each other in a circle.