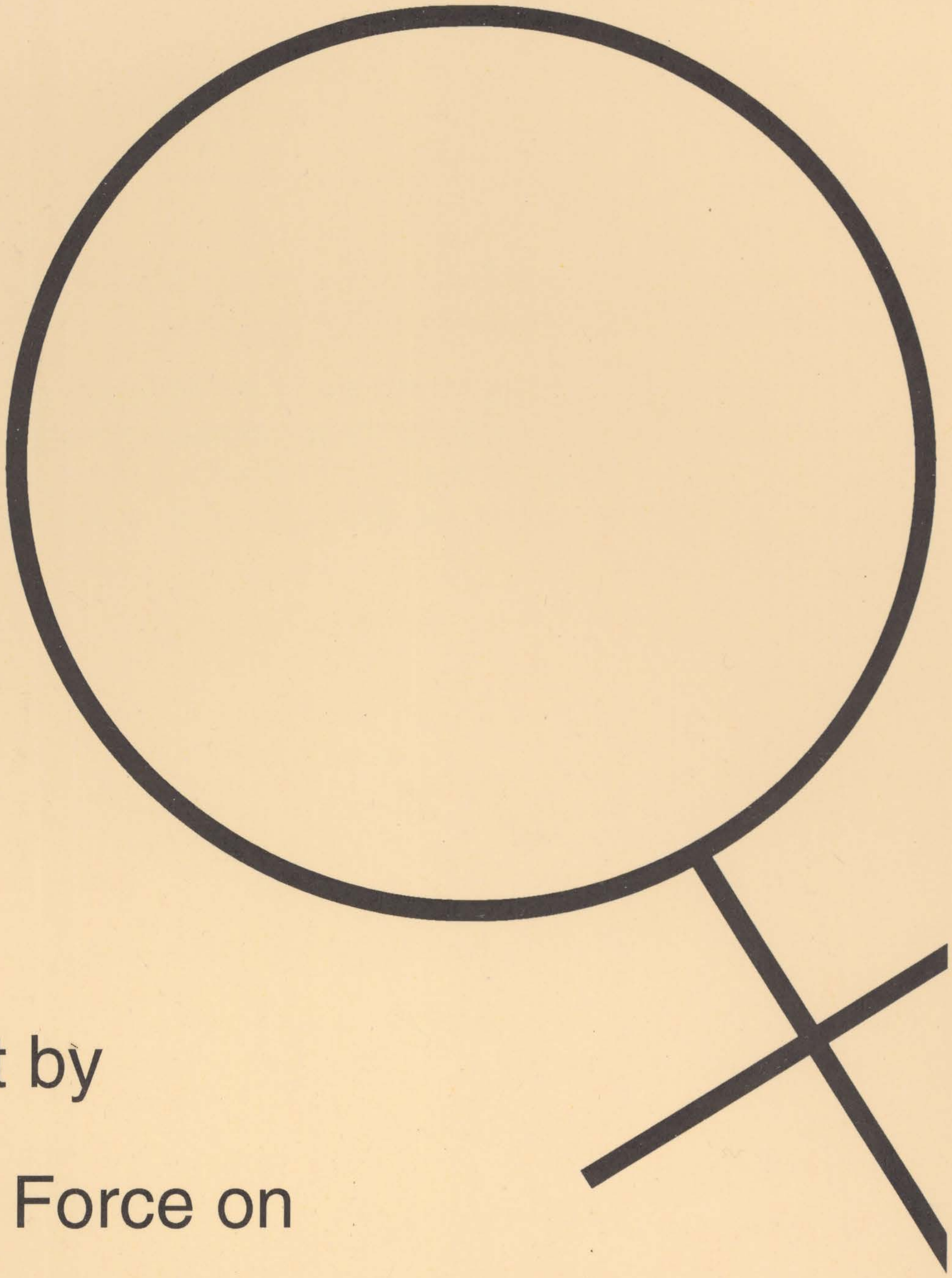

A Report by
the Task Force on
the Economic Integration of
Women With Disabilities
in Nova Scotia

Women Willing to Work

WOMEN WILLING TO WORK: AN EXPLORATORY INVESTIGATION OF THE ECONOMIC INTEGRATION OF WOMEN WITH DISABILITIES IN NOVA SCOTIA

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MESSAGE FROM THE TASK FORCE CHAIRPERSON

As a way of marking the end of the "Decade of Disabled Persons" (1982-1992), the Nova Scotia Advisory Council on the Status of Women in partnership with the Disabled Persons Commission, the Coordinating Council on Deafness of Nova Scotia and the Nova Scotia League for Equal Opportunities, last year, formed an Ad Hoc Task Force. With funding from Employment and Immigration Canada, the Task Force - The Task Force on the Economic Integration of Women with Disabilities in Nova Scotia, hired a Project Coordinator to undertake a research project which would identify the barriers to employment for women with disibilities across the province.

Seventy-nine women with disabilities were contacted and the findings are contained in **Women Willing to Work: An Exploratory Report on the Economic Integration of Women with Disabilities in Nova Scotia,** which we submit to you.

Marcie Shwery-Stanley
Chairperson
Task Force on the Economic Integration of
Women with Disabilities in Nova Scotia

MESSAGE FROM THE PROJECT COORDINATOR

This report would not have been possible without the cooperation of the 79 women who participated in the study, and the persons and agencies who helped the Task Force to locate them. A very special thank you to all the women with disabilities who shared their frustrations, their successes and their insights through individual interviews and focus groups, thus allowing this report to be compiled.

My heart-felt appreciation and thanks to:

- The Task Force Research Sub-Committee members Charlie Macdonald, Kathi Whiston, Burke MacCallum, Donna Merriam, and Brenda Beagan, for providing invaluable guidance, encouragement, criticism, and resources throughout the preparation of this report;
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Elizabeth Doull

Project Coordinator

March 1993

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Member Organizations

Atlantic Centre - Employment Connection. Located on the campus of St. Mary's University, the Atlantic Centre of Research, Access and Support for Disabled Students has provided services in post-secondary academic and training programs across Nova Scotia for students with disabilities. Utilizing interpreter services in the classroom, technical aids instruction and loan program, volunteer notetakers, academic counselling, a learning disabilities lab, and a wide range of needed supports. The Centre steadily improves access to post-secondary educational institutions for students with disabilities.

Since 1988, the Employment Connection Program of the Atlantic Centre has been based upon a partnership model with business, community resource groups, educational institutions, and government agencies. The Program's self-help philosophy coupled with one-on-one counselling and job search skills training assists the job candidate with a disability to secure real work with an employer wanting to hire a highly motivated and skilled employee.

Canadian Paraplegic Association (Nova Scotia). The Canadian Paraplegic Association (Nova Scotia) assists individuals with spinal cord injuries by actively supporting efforts in prevention, education, rehabilitation and research, while promoting the optimum quality of life for mobility disabled persons.

A wide range of services includes personal and family counselling and covers areas such as specialized equipment, housing, transportation and employment. CPA trained personnel become closely involved before clients leave hospital and continue the provision of resources and information when they return home and throughout the life time of the client. As well, they facilitate community awareness and opportunities for integration.

Co-ordinating Council on Deafness of Nova Scotia. The Co-ordinating Council on Deafness of Nova Scotia is an advocacy group representing Deaf and Hard of Hearing individuals. The Council was established in 1976 to secure the rights of an estimated 55,000 deaf and hard of hearing Nova Scotians. We advocate for better qualitative and quantitative education and for better access to programs and information. The Council addresses all human right issues affecting the deaf and hard of hearing communities.

Society of Deaf and Hard of Hearing Nova Scotians. The Society of Deaf and Hard of Hearing Nova Scotians is a non-profit organization that was incorporated in 1980 with the goal of developing and managing coordinated services to assist deaf and hard of hearing people in gaining full access to existing public, private and community services. Services provided by SDHHNS are (1) interpreter services, (2) Silent Outreach (employment counselling) and (3) Project Access (information and referral). The Society has regional offices in Halifax and Sydney.

Nova Scotia League for Equal Opportunities. LEO is a cross-disability consumer and public education organization whose members include individuals with all types of disabilities: mobility, sensory and invisible. It provides a consumer perspective on provincial issues which affect the daily lives of Nova Scotians with disabilities. LEO offers municipal consumer groups an umbrella organization through which to represent their concerns at the provincial level. The uniqueness of the League rests in the fact that it is an entity made up of local organizations from across Nova Scotia whose control rests with persons with disabilities. The facets of community which are of chief concern to LEO are human rights, employment, education, housing, public accessibility and technical aids.

LEO's national organization, the Coalition of Provincial Organizations of the Handicapped (COPOH), represents issues of national importance, and LEO liases with COPOH to represent Nova Scotian citizens with disabilities in those issues. Through COPOH, LEO has representation on Disabled Persons International (DPI).

Disabled Persons Commission. The Disabled Persons Commission, an agency of the provincial government, is comprised of 12 members, the majority of whom must be disabled. The Commission provides for the participation of persons with disabilities in the development of government policies and programs which directly relate to or affect them. It ensures that their concerns will be promoted and considered by the government, especially in matters of policy and where concerns affect several departments of the government. It provides a mechanism to facilitate communication of information on programs and services available to Nova Scotians with disabilities.

In addition, the Commission provides a mechanism to review existing government policies and programs which relate to or affect persons with disabilities and ensures that they are appropriate, effective and reflect the needs and concerns of the community. The Commission is primarily responsible to the Government of Nova Scotia, through the Coordinating Committee of Ministers, which is chaired by the Minister Responsible for Reporting on Disabled Persons (the Minister of Community Services).

Nova Scotia Advisory Council on the Status of Women. The Nova Scotia Advisory Council on the Status of Women is mandated to monitor women's issues in Nova Scotia and to act as an advisory body to the provincial government. It is legislated to advise the Minister Responsible for the Status of Women on matters relating to women as they are referred to Council for consideration. In carrying out its duties, the Council receives and hears petitions and suggestions concerning women; undertakes and recommends research on matters relevant to women; recommends and participates in programs concerning women; proposes legislation, policies and practices to promote equality of opportunity and status; and publishes reports, studies and recommendations.

The Council is comprised of 11 women from across Nova Scotia appointed through Order in Council. Its office is located in Halifax where it maintains a resource centre of current information on women's issues. To reach women in areas outside of metro Halifax-Dartmouth, the Council has field work programs operating in Cape Breton, Cumberland, Colchester-East Hants, and Digby-Annapolis counties.

Terms of Reference

The terms of reference established by the Task Force on the Economic Integration on Women with Disabilities in Nova Scotia are:

a. To identify the barriers to full participation and integration of women in the economic mainstream of Nova Scotian society;

b. To provide an opportunity for women with disabilities to design solutions to the unique barriers that impact upon their economic integration;

c. To make recommendations to program developers and service providers (both public agencies and private industry), concerning how best to facilitate the full integration and participation of women with disabilities;

d. To develop and recommend a strategic approach to ensure that members of the private industry and the general public are aware of what they can do to facilitate the economic integration of women with disabilities;

e. To provide feedback to women with disabilities in Nova Scotia on self-developed strategies leading to full economic equality.

INTRODUCTION

The ten years marking the Decade of Disabled Persons (1982-1992) saw rapid improvements in the situation of persons with disabilities. Human rights protections were extended. Employment equity programs were developed. Accessibility of public buildings and transportation improved. It was a period of heightened awareness of the needs and abilities of persons with disabilities. Yet, at the close of that decade, there is still much more that needs to be done to achieve full equality.

Despite the genuine efforts of many individuals, employers, agencies, and levels of government, the full economic integration of persons with disabilities has not yet been realized. There is a compelling need to identify concrete strategies for the development of appropriate programs and services to facilitate the full participation of persons with disabilities into the mainstream economy.

To meet the needs of women with disabilities, these strategies will have to take into account the double disadvantage they face both due to their gender, and due to their having disabilities. The Health and Activity Limitation Survey (1986) indicates that in Nova Scotia 71 percent of women with disabilities do not participate in the workforce. In comparison, 51 percent of men with disabilities do not participate. A similar trend is apparent in education, where the average level of formal education achieved by women with disabilities lags behind both that of other women, and that of men with disabilities.

Clearly, there is an immediate need for strategies which are appropriate to the specific requirements of women with disabilities. And the most valuable source of information in devising those strategies is women with disabilities. As the Seminar on Women and Disability in Vienna (August 1990) recommended:

> Any development programme for disabled women should investigate the actual living conditions of disabled women both in urban and rural areas.... Descriptions provided by disabled women themselves regarding their situation should be the most important source of information. Women's own interpretation and documentation of their experiences, which is now underway, can be the start of a world-wide research project on women with disabilities (United Nations Centre for Social Development and Humanitarian Affairs, 1991: 18).

In keeping with this international direction in program development, the members of the Task Force on the Economic Integration of Women with Disabilities in Nova Scotia believe that the identification of the specific requirements of women with disabilities, and the development of suitable solutions, must come from women with disabilities themselves.

This research project was developed with that imperative in mind. Its primary purpose was to consult in some depth with Nova Scotian women who have disabilities, about the barriers they face and the solutions they might recommend to enable their full participation in the economic mainstream. This is the final report of the research project. It details the experiences of women with disabilities in relation to education, employment and economic conditions.

The study results are presented in four sections. The first addresses the types of disabilities represented among the women and their impact on the women's self-esteem, and need for support and encouragement. The second section examines the women's experiences with education of all types, their satisfaction or lack of satisfaction, and the degree of accessibility. Women also discussed their views of programs which sponsor the education or training of persons with disabilities, and the barriers they had encountered in attempting to access education at all levels.

The third section focuses on employment. It examines the women's employment history, past and present, and their experiences with job-related discrimination. Women who are presently employed discussed accessibility, satisfaction, and relationships with co-workers and supervisors. Women who are not employed and are seeking employment, described their experiences with job searches, interviews and employment agencies. Women who are not employed and are not looking for employment discussed why they were not looking for work, whether they would like to be employed and what would make that possible for them, and their experiences with income support programs.

The final section addresses the incomes of the women. It examines the sources of income the women have, the adequacy or inadequacy of their incomes, and the experiences many of these women have living in poverty.

The report concludes with a series of recommendations which arise primarily from the research itself, in conjunction with the literature on women with disabilities and the direct experiences of Task Force members. It is important to bear in mind that any research study has limitations. In this case, the information gained is limited to the experiences of the women in the sample, and to the questions asked of them. The Task Force recommendations put these particular experiences and this in-depth information in the context of other research, and existing awareness of and understandings about women with disabilities.[1]

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[1] The phrase "women with disabilities" is used throughout this report for the sake of simplicity. We recognize that some women, including some deaf women and mental health consumers, do not accept the term for themselves. Nonetheless, the phrase "women with disabilities" is used here purely for ease of comprehension. No offence is intended.

LITERATURE REVIEW

In 1991, Nova Scotia had the highest incidence of persons with disabilities in Canada (21.3 percent compared to a national average of 15.5 percent). The rate of disabilities has increased substantially since the 1986 Census (a 4.4 percent increase in Nova Scotia). The proportion of women who have disabilities (21.1 percent) was higher than the proportion of men (20.1 percent). In absolute numbers, there were 7,825 more women with disabilities than men with disabilities in Nova Scotia in 1991 (Statistics Canada, 1992).

Education

Both men and women with disabilities are heavily concentrated in the lowest educational categories and are under-represented in the highest educational categories (Harvey, 1990; Cohen, 1990).

At the same time, women in general face significant disadvantages relative to men in trying to gain access to education and training. Barriers women face include sexist assumptions that women will be homemakers, or will in some way be taken care of; lack of financial support for training; little or no credit for work experience; illiteracy; few appropriate, quality upgrading and/or skills programs; large, intimidating classes; non-standardized testing; lack of child care; difficulties in returning to school, especially for older women; and lack of family support and encouragement. When women become disabled they face further disability-related barriers. (Canadian Congress for Learning Opportunities for Women, undated).

Women with disabilities have significantly less formal education than non-disabled women. For example, among women aged 25 to 29, 12.2 percent of those with disabilities have eight years or less formal education, compared to only 2.5 percent of non-disabled women (Nova Scotia Department of Advanced Education and Job Training, 1991). In all age groups, only 25 percent of women with disabilities completed post-secondary studies compared with 34.7 percent of non-disabled women.

Employment

Persons with disabilities tend not to participate in the workforce. In Canada, in 1986, 71 percent of women with disabilities and 51 percent of men with disabilities were not in the workforce (Statistics Canada, March 1989).[2] American statistics are very similar: 72 percent of women with disabilities and 64 percent of men with disabilities are not in the workforce (Bolles, 1991).

The type of disability seems to affect employability. Mobility, agility and visual impairments appear less frequently among employed women with disabilities than they do among the general population of women with disabilities (Harvey and Tepperman; 1990). Persons with mental disabilities are also particularly disadvantaged in the workforce (Statistics Canada, June 1990, Profile of Three Disabled Populations). Deaf and hard of hearing women are represented among employed women with disabilities as frequently as they are in the general population of women with disabilities (Harvey and Tepperman, 1990).

The types of jobs in which women with disabilities are employed are remarkably similar to those held by non-disabled women. For example, 29.4 percent of employed women with disabilities are in clerical positions, compared with 31.8 percent of employed non-disabled women (Harvey and Tepperman, 1990). Occupational distribution seems to be more affected by gender than by disability (Coalition of Provincial Organizations of the Handicapped, 1990; D'Aubin, 1990; Harvey and Tepperman, 1990; Roberts and Steele, 1992; Stace, 1988; Torjman, 1989; Vash, 1982). Except for a few "tokens" in higher status and higher paid occupational categories, most women with disabilities work in low-paying jobs in "pink collar ghettos" or in the blue collar service industry (Doucette, 1987).

Barriers to Employment

Ross (1990) determined several factors affecting the employability and employment earnings of persons with disabilities. Level of formal education was the most important factor in obtaining work. Gender, type of disability and severity of disability

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[2] Similar figures have been found by the Coalition of Provincial Organizations of the Handicapped (1987).

significantly affected level of earnings. Women, persons with mental disabilities and persons with multiple disabilities had lower earnings. The last factor was transportation. Those requiring a special bus or van service earned substantially less. Those who needed this service, but had no access to it, had significantly lower earnings–frequently no earnings at all.

Some of the barriers that have been identified as hindering the workforce participation of persons with disabilities include: loss of medical benefits upon starting work, and the time required to reinstate benefits after losing a job; transportation difficulties and expenses; lack of support services (interpreters, readers, technical aids); employment and training materials not being available in alternative forms; workplace inaccessibility; negative attitudes; disincentives from income security (Bolles, 1991; Doe, 1991).

For women with disabilities, workforce participation is affected by type and severity of disability, as well as by gender issues (Harvey and Tepperman, 1990). Sexism in the workplace affects all women, disabled or not. In addition, however, women with disabilities must struggle against the stereotype of helplessness and of being considered incompetent (Vash, 1082). Attitudes toward disabilities combine with sexism in such a way as to effectively keep most disabled women out of the workforce, and out of training and education programs (Doucette, 1987; Ridington, 1989).

Cohen (1990) found that the interactive effect of gender and disability is most obvious in workforce participation rates. He concluded that disabled women's lack of participation in the workforce stems from a number of interrelated issues, including:

1. Low earning potential, as women and as persons with disabilities;
2. Lack of benefits (medical plan, pension plan);
3. Lack of support: Disabled women are more likely than disabled men to be single, having to cope with childcare and household maintenance alone;
4. Low self esteem, dependency, feelings of inadequacy: Disabled women are often encouraged to be dependent by family and others;
5. Age: Persons with disabilities are more likely to be older; older persons are less likely to be employed. Ageism also affects women more negatively than men;
6. Discrimination based on gender affects disabled women by:
   a) denying equal employment opportunities;

b) denying equal promotional opportunities;

c) leaving women with little time for paid overtime, or work-related functions, since most women have family responsibilities;

d) denying entrepreneurship: women still find themselves denied access to financing, or are told to acquire their husband's signature for loans;

e) confirming social attitudes about a "woman's place" and limiting choices by influencing educational aspirations, career paths, and life goals;

f) stereotyping women and women with disabilities and constricting choices and opportunities (for example, the stereotype of Super Mom which portrays women as being capable of doing everything while still looking perfect and the stereotype of helpless dependency which portrays women, especially disabled women, as being incapable of accomplishing anything of note.

Financial Impact on Women with Disabilities

Incomes tend to drop when someone becomes disabled (Bolles, 1991). Overall, women with disabilities have a higher poverty rate (29.5 percent) than men with disabilities (20.9 percent) (Statistics Canada, June 1990, Profile of Three Disabled Populations). Doucette (1987) found that working women with disabilities earned 64 percent of what non-disabled women earned, while working men with disabilities earned 85 percent of what non-disabled men earned. Men with disabilities earn more than women with disabilities performing the same job (Bolles, 1991). Consequently, among persons with disabilities, the average income of men far exceeds that of women. Approximately 50 percent of women with disabilities and 25 percent of men with disabilities earn less than $5,000 a year (Ross, 1990).

Often, women with disabilities depend on men's incomes. Doucette (1987) found that women with disabilities are unlikely to marry, and if already married, their marriages were more likely to break up following a disability than were the marriages of men who became disabled. This often leaves women to choose between trying to find work and applying for social assistance benefits.

Many people with disabilities have to choose between disability benefits and the benefits of working. Since the majority of women in the labour force tend to work fewer hours, and be clustered in low paying positions, they have less incentive to be in the workplace. Most part-time employment does not carry a benefit package which would include full medical or pension plan.

Social assistance, while limited, does cover medical and pharmaceutical costs, which can be essential for women with disabilities. Working, particularly for minimum wage, is not worth the loss of medical and drug benefits. Also, if a woman with a disability chooses to work, she becomes listed as able to work; then if she loses her job, she will have to manage without medical coverage.

Torjman (1989) concludes that disabled persons are systematically locked out of the job market and forced to rely on a patchwork of inadequate social assistance programs. That generally means living well below the poverty line (Blouin, 1989; National Council of Welfare, 1991).

The effects on self-esteem can be horrendous. Poverty is a major factor affecting the self-esteem and self-image of women with disabilities (Ridington 1989, Doucette 1987). Living in poverty due to the inadequacy of employment income or social assistance income makes it hard to eat well, dress well, live comfortably, and have a social life. In turn, the employability of women with disabilities can suffer when their appearance does not meet social standards (inappropriate clothing, missing teeth, poor self-esteem, self-image). A vicious cycle is established, with poverty creating conditions that diminish employability, which increases the likelihood of poverty.

There is little published research dealing specifically with the economic integration of women with disabilities. Most inquiries focus on generic "persons with disabilities" seeking work or employment. The research that is available does tend to recognize that women with disabilities are economically disadvantaged, both by being women and by being disabled. However, there often seems to be an assumption that the two factors operate independently (Harvey and Tepperman, 1990).

This tendency on the part of researchers to separate the effects of disability and gender into different spheres is related to the dichotomy which distinguishes "women's work" (housework and childcare) from "paid work." This disposition to see the world as two separate spheres, one domestic and one public, divides women's reality of living. Women operate in both spheres; they not only affect each other, but there is a considerable and constant overlapping for women.

The same is true with the effects of disability and gender on economic situations. While it may simplify the analytical work of researchers and theorists to maintain a dichotomy between the two, that is not the reality lived by women with disabilities. They inhabit both spheres at once. They experience their day-to-day lives as women with disabilities; the two cannot be separated. This study is an attempt to explore the ways those two factors are experienced by women in ways that are simultaneous, interrelated, and interactive.

METHODOLOGY

This study was intended to be exploratory, descriptive research. The two primary information-gathering tools used were face-to-face structured interviews and focus groups. While the intensity of these approaches limited the number of women who could be included in the study, they were seen as the best methods possible, given the time limits of the study, and the depth of information desired. Questionnaire mailouts were not considered viable, due to the restricted time available for responses, and the typically low response rates using that approach. Telephone interviews were deemed inappropriate as interviewees would be unlikely to disclose personal information without establishing trust in the authenticity of the interviewer.

In total, 79 women with disabilities were selected from across Nova Scotia, using a non-random convenience sampling methodology. Of the 79, 15 also participated in three focus groups. In compiling the research sample, attention was given to relevant demographic variables such as age, marital status, educational attainment, employment experiences, rural/urban mix and geographical representation. Efforts were made to ensure that the sample represented a wide range in each of these factors.

Women were located for interviews through three channels: networking (asking women to suggest other women), non-profit and government agencies, and organizations who contacted clients or members on our behalf. Due to the concern for confidentiality, we could not obtain names directly from agencies and organizations, so women were asked to contact the Task Force. The disabilities of some women were unknown when we received their names.

Interviews

When initial contact was made with the woman by phone or in person, the project was explained in detail (see Appendix A). The date, time, and location of the interview were then agreed upon. All of the interviews were conducted during July, August, and September 1992. Ten women were interviewed in the office of an agency or organization, while others were interviewed in their homes. The women were made to understand that confidentiality would be strictly observed and that no identifying data such as unique occupations, names of employers, or unusual disabilities would be mentioned in any part of the report. The women were instructed that they were free to decline any question they did not wish to answer. Three declined to answer the question concerning their monthly income. The remaining questions were responded to by all women.

Interviews with deaf women who were fluent in American Sign Language were conducted by the project coordinator in American Sign Language. A sign language interpreter was used to interview hard-of-hearing and deaf non-signing women, as well as many of the hearing women. The research assistant interviewed hearing women when necessary.

Most interviews took between one and two hours to complete; a few required more than two hours. All but three women were interviewed in person. Two filled out questionnaires, as they could not be interviewed in person. Their responses were returned by mail, and one woman was later contacted by telephone for follow-up. One woman was interviewed via the Maritime Tel and Tel telephone relay system for three hours. A non-verbal woman with severe disabilities completed the questionnaire with the assistance of her relatives, and another woman was assisted by the interviewer in filling out the questionnaire.

Both open-ended and close-ended questions were included in an attempt to provide some structure and comparability of the findings, while also allowing for the richness of verbatim responses (see Appendix A for questionnaire). The interviews addressed eight main topic areas:

1. basic demographic characteristics (age, marital status, type of disability,living arrangements)
2. educational background
3. current employment status
4. past employment history
5. experiences of employed women
6. experiences of looking for work
7. experiences of not being in the workforce
8. income and needs

Each woman was asked questions from only one of three employment-related sections, whichever section applied to the interviewee's current employment status.

Focus Groups

The purpose of the focus groups was to enhance the exploratory data gleaned from the 79 structured interviews. It was hoped that the group discussion would add depth to the information, as women explored and compared their experiences. It was further hoped that the group setting would encourage brainstorming for changes to better meet the needs of women with disabilities.

The 18 focus group participants were selected to ensure a diversity of age, marital status, nature of disability, onset of disability, educational background, employment experience and ability to articulate. Invitations to participate in the focus group meetings were made during pre-interviews by telephone or during the interviews. It was necessary to invite most of the women well in advance due to time and travel restraints. One single mother with a small child was brought in unexpected, by another focus group participant. Four scheduled participants failed to attend.

Focus groups (two in Halifax and one in Truro) were organized in August and September 1992. In Truro, five interviewees participated in the focus group, while a total of 11 participants attended two focus groups in the Halifax-Dartmouth area. One focus group was exclusively for deaf women; they communicated with the facilitator directly in sign language.

The original intention was for the coordinator to facilitate all three groups, with a sign language interpreter. The research assistant would take notes of the discussions. However, due to unforeseen circumstances, the procedure differed with each of the three groups. The first group followed the process as planned. In the second group, while the coordinator facilitated the focus group in sign language, the proceedings were voiced by an interpreter. These discussions were tape recorded and later transcribed. The third group was facilitated by the research assistant. The discussion was tape recorded and transcribed.

Twelve open-ended questions were developed for use during the focus groups, but were used strictly as guidelines to prompt discussion (see Appendix A). They covered problems in accessing educational programs and employment, ways to participate in the workforce, issues with the employment agencies and suggestions for change. Participants often discussed issues of particular concern to them, as well as questions focusing on various issues the coordinator suggested. The coordinator's task was to focus on concerns or issues within a two-hour period. Questions were posed only when there was a pause or silence in the group discussion or to help keep the discussion focused. Not all questions were asked nor answered.

Characteristics of the Women

Since the sample was fairly small and not randomly selected, the results cannot be generalized to other women with disabilities in Nova Scotia or elsewhere. Drawing generalizations was not the intent of this exploratory study. Thus no efforts have been made to compare the characteristics of the study sample with the general Nova Scotia population. However, the following overview of demographic characteristics of the women may convey a sense of who these women are.

Fifty-four women resided in towns or cities; the other 25 lived in rural areas. The women ranged in age from 20 to 65 years, with ages quite evenly distributed throughout the range. The average age was 39 years (see Table 1). More than half of the women were single (N=42), while an additional 14 were separated, divorced or widowed. Twenty-three had a husband, partner or boyfriend (see Table 2). Of the 79 women, almost half (N=38) had children; most of those had three or fewer children. Thirty-one women (39.2 percent) lived in rented accommodation while 25 (31.6 percent) owned their homes. The remainder lived in group homes or institutions, university residences, or with their parents or relatives.

Table 1: Age of Respondents

Age Range	Number of Respondents	Percentage of Respondents
20 - 29	17	21.5
30 - 39	27	34.2
40 - 49	22	27.8
50+	13	16.5
TOTAL	79	100.0

Table 2: Marital Status of Respondents

Marital Status	Number of Respondents	Percentage of Respondents
Married/partner	23	29.1
Single	42	53.2
Separated/divorced	11	13.9
Widowed	3	3.8
TOTAL	79	100.0

Note: Thirty-eight women (48.1 percent) were mothers; 50.0 percent were single, separated, or divorced.

A variety of disabilities was represented in this study. The three main types reported by the 79 women were related to mobility, vision and hearing. Thirty-seven of of the women (46.8 percent) were disabled from birth; an additional 17 women became disabled before the age of 19. Thus, 57 of the 79 women (68.3 percent) were disabled before they reached adulthood. Several women (N=43, 54 percent) had more than one disability.

While 37 women had completed Grade 12 by attendance at a secondary school or through a General Equivalency Diploma (GED) program, another 30 women had less than Grade 11. Eleven of these had Grade 6 or less, and six indicated that they had had no education at all. However, the majority of the women (N=51, 64.6 percent) indicated that they had taken some post-secondary training through correspondence courses, business schools, community colleges, or universities. Their post-secondary training varied in length from one year (N=15) to more than six years (N=6). Twelve of the 51 women who had taken post-secondary courses had done so before the onset of their disabilities.

The majority of women (N=72) were employed in the past. However, only 20 were employed full- or part-time at the time of their interviews. The incomes of 61 women (77.2 percent) were less than $12,000 a year. Of the entire sample, only five women reported incomes of $18,000 a year or more.

RESULTS: SELF-ESTEEM, SUPPORT, STRUGGLES

The women in the study had a variety of disabilities. The three categories most commonly cited as primary disabilities were mobility impairment, blind/visual impairment, and deafness/hard of hearing.

Table 3: Primary Disabilities of Respondents

Disability Type	Number of Respondents	Percentage of Respondents
Mobility Impaired	22	27.8
Blind/Visually Impaired	10	12.7
Deaf/Hard of Hearing	23	29.1
Other Disabilities*	24	30.4
TOTAL	79	100.0

* Includes mental health consumers, mental (developmental) disabilities, learning disabilities, epilepsy, and others.

Forty-three women indicated that they had other disabilities, in addition to the one they identified as their "primary" disability. These included respiratory problems, neurological problems, visual impairments, hearing problems, allergies and arthritis. Several women with multiple disabilities identified at least some of them as effects of childhood abuse and/or sexual abuse. These included learning disabilities, physical disabilities, visual or hearing problems, and mental health problems.

Younger women were more likely than older women to indicate that their disabilities had no bearing on their education or employment. This may reflect greater awareness and understanding of disability issues in recent years on the part of educators and employers. It may also reflect the positive effects of policy changes that have improved conditions for persons with disabilities.

Women with invisible or hidden disabilities found it difficult and very frustrating to deal with the lack of understanding they faced from friends, family, teachers, counsellors, employers and co-workers. These women felt people more readily accept disabilities that are visible and familiar to them. A hidden disability is, by its nature, less obvious. It is also frequently less well understood and sometimes more complex than a visible disability.

A focus group participant who was hard of hearing and had a hidden disability which affected her cognitive processes described her own struggles to understand her hidden disability, and her difficulty getting others to understand: "Okay, the hearing is pretty obvious, I mean people can plug their ears, and guess what it's like to be hard of hearing...." But she had to learn about her hidden disability by trial and error, slowly figuring out what she could no longer do. She spent a long time rationalizing the difficulties she was having, thinking "It's because was too tired, or whatever." She believes she denied her hidden disability, focusing on being hard of hearing because it was more familiar and easier to deal with. When she did begin to overcome her "own lack of insight" into her hidden disability, she found others were not always able or willing to do the same:

> Then, when I recognized the [effects of the hidden disability], when I tried to express them to people who were supposed to be my support network, they were not really very interested. Maybe they were busy and they didn't want to be bothered with these things. They just wanted to have me as a simple case of having a hearing deficit. They did not want to get into the more complex difficulties.

Those who had only recently become disabled were still learning to adjust to their disabilities. Their reported experiences differed from those of women who were disabled at birth or as children. One woman, who was part of a focus group, was still in the process of being diagnosed. She found the waiting and the uncertainty especially frustrating. It was clear through her interactions with the other women in the group that she was extremely depressed.

Most of these women did not identify self-esteem as being a particularly significant issue for them. However, despite the fact that they did not recognize its importance themselves, the extremely low self-esteem of many came through clearly in their interviews and in the focus group sessions.

> I know it sounds stupid, but ... you'd be surprised at how [a] little bit of encouragement makes a person feel ... [you get so used to being told] you're stupid. You're this, you're that, and honestly, you get to believe that. People say it to you so much, "Oh yes, you're stupid. Oh yes,

> you're dumb; you can't do this; you can't do that." You get to really believe it, you get to say, "Oh, they must be right."

A discussion took place in one focus group about the difficulty the women had believing they were worthy of anything good. There seemed to be a common tendency to make sure the needs of others are met first, to try to please everyone else. While this is not unique to women with disabilities, one participant was particularly clear that for her this tendency arose both from being female and from experiences connected to her disability:

> I had surgery ... when I was [very young] and there was no medical insurance of any sort. There wasn't even M.S.I. at that time. So, whatever relative could chip in a nickel, or whatever ... it was a very collective effort and nobody really had any great amount of money. But I grew up feeling that I had to be perfect for everybody. They did this for me.
>
> And not only that, I've got [only] brothers, I've no sisters, and ... you know, if they wanted [anything] the money was spent on them, and there again I rationalized, well there's this fortune in medical expenses....
>
> So, that's the way I grew up, until I reached my mid-twenties. I finally came to the realization, Okay, I'm me, I'm a good person. You like me, you don't and that's fine, that's okay. But, I'm going to be me.

Self-improvement courses such as assertiveness training were helpful to some women, who grew to realize their own self-worth. Others gained self-esteem through life experiences. One woman stated clearly that the only way to get respect was to take a stand and not back down.

A great number of the women were recipients of social assistance, a situation most of them experienced as degrading and humiliating. Some also believed their confidence was undermined by their families:

> Part of it is, whenever I go back home, my mom's good, but the parents are typical. I can't do anything on my own, go anywhere on my own, I can't do nothing....
>
> All my life, even my family, all they did was discourage me.... I mean, my whole family said, "Oh, you'll never survive in Halifax." And my whole family, even though they know I've been on my own for three years, they won't let me go. My dad worries. Well, he was always overprotective....

The importance of support and encouragement was obvious throughout the study. Some women stated that the only thing that made it possible for them to complete their education was the support of friends and family members. One woman described how her sister taught her to read and write, since no one else would. One woman who has entered university said:

> There were two very supportive people, people who looked out for me over the years, ... I'm so grateful [to] my family doctor and my neurologist. If it hadn't been for them, I don't think I would have come as far as I've come.

For some women, supportive attitudes among their co-workers was all it took for them to feel their workplaces were accessible. Many women, whose incomes were totally inadequate, only survived month-to-month with the support of family and friends. The difference that support and encouragement can make was illustrated in one focus group, where a participant exclaimed:

> All my life, said, "I'm not going to university," because I had such a hard time in high school. But after hearing what all you ladies have been through, I think I'm going to go to university next fall.

Simply meeting with other women in the focus group, women who also had disabilities and who were supportive, had inspired her to further her education.

Given the significance of supportive environments, it would seem likely that groups who advocate for persons with disabilities would be important to these women, potentially providing a source of valuable support. Unfortunately, very few of the women seemed to be aware of relevant agencies or advocacy groups. Some of those who were aware of them had negative experiences:

> I phoned [an information outlet] and said, well what kind of organizations are there? And they mentioned [an advocacy group]. So phoned [them], and they said, yeah, we will send you out some information. And I phoned them like a dozen times, and never received any information. And, I said, well what else is there? I phoned [another advocacy group]. Down home they have monthly meetings. I could not get to them, I had no transportation. But I was told, well, here we just have an annual meeting, that's it.

Most women had not heard of any groups specifically addressing the concerns of <u>women</u> with disabilities.

Finally, it appears from the interviews that the women were more aware of themselves as persons with disabilities than they were of themselves as women. Most did not tend to have a gendered consciousness. Some women, for example, would respond that being a woman had not had any effect on their education or employment. They would then go on to describe how marriage, or experiences of child sexual abuse, or sexual harassment, or responsibility for child care had affected their lives. Yet they did not tend to interpret these experiences as being related to their being women. In general, the women's understanding of disability issues and their impact seemed much more sophisticated than their understanding of issues related to gender, even though they may themselves have experienced significant limitations due to their gender.

RESULTS: EXPERIENCES WITH EDUCATION

Primary and Secondary Education

Thirty-seven women (46.8 percent) had completed high school, including five who had received the General Equivalency Diploma (GED). Twelve (15.2 percent) were unaware of the grade level attained, having gone through a non-graded system.

Table 4: Highest Grade Completed in Primary/Secondary Education

Grade Level	Number of Respondents	Percentage of Respondents
No formal education	6	7.6
Up to Grade 6	5	6.3
Grades 7 - 9	8	10.1
Grades 10 - 11	11	13.9
Grade 12 and GED	37	46.8
Non-graded system	12	15.2
TOTAL	79	100.0

For some women, their disabilities prevented them from completing their formal education; for others, physical and attitudinal barriers prevented them from even beginning. Six women were prevented from accessing formal education at all, due to institutionalization or travelling costs. One focus group participant had her disability surgically corrected, and had recently started school. She said, "It's going to be hard for me because I never had any schooling in my whole life, never, never, never. And as I said to Mum, it could be a long road. All these years wasted...."

Post-Secondary Education/Training

Fifty-one women (64.6 percent) had taken one or more post-secondary programs through universities, community colleges, computer or business schools, correspondence courses and/or other programs including correspondence courses and career-specific programs.[3] Twenty-nine of those 51 women had two years or less post-secondary training; nine women had more than four years.

In general, the 51 women indicated that 38 (61.3 percent) of the 62 programs they had taken were accessible, using whatever definition of accessible they deemed appropriate. The women's answers may have been influenced by when they took post-secondary training: the younger or more recent graduates experienced greater accessibility than those who took training earlier. This may reflect the more stringent requirements for accessibility of public institutions in recent years.

Table 5: Accessibility of Post-Secondary Programs

Type of Program	Percentage Accessible
Computer/business programs	87.5
Career-specific/correspondence courses	66.7
University/college	62.5
Community college/vocational school	47.6

However, even recent graduates were not entirely satisfied with accessibility. One focus group participant, who uses a wheelchair, has just completed her studies. She commented on her experiences at university: "Even doing research, I mean, the book's up there, on a high shelf, I can't get it down. I mean I can get out of my chair, but I shouldn't".

Thirty-seven (59.7 percent) of the 51 women were somewhat satisfied or strongly satisfied with the post-secondary educational programs they took. However, 19 women (30.6 percent) were somewhat or strongly dissatisfied. It is noteworthy that all nine deaf women were dissatisfied with post-secondary educational programs.

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[3] Twelve of those respondents had become disabled after taking courses; six of them subsequently took further training.

Table 6: Satisfaction with 62 Post-Secondary Programs Attended by 51 Respondents

Satisfaction Ranking	All Programs		University/ College		Community College		Business/ Computer		Other Programs	
	No.	%	No.	%	No.	%	No.	%	No.	%
Strongly satisfied	42	38.7	6	28.6	9	42.9	4	50.0	5	55.6
Somewhat satisfied	31	21.0	7	23.7	2	9.5	2	25.0	2	22.2
No opinion	4	6.5	3	9.5	0	0.0	1	12.5	0	0.0
Somewhat dissatisfied	1	16.1	6	28.6	4	19.0	0	0.0	0	0.0
Strongly dissatisfied	9	14.5	1	4.7	6	28.6	1	12.5	1	11.1
No response	2	3.2	1	4.7	0	0.0	0	0.0	1	11.1
TOTAL	26	100.0	24	100.0	21	100.0	8	100.0	9	100.0

Other Education/Training Programs

Fifty-two of the 79 women (65.8 percent) had taken one or more courses in upgrading/GED, self-improvement, career-specific and/or job training. The women indicated that, overall, 74.4 percent of their courses had been accessible, using whatever definition of accessible they thought appropriate.

Table 7: Accessibility of 79 "Other Education/Training Programs" Taken by 52 Respondents

Type of Program	Percentage Accessible
Upgrading/GED programs	80.0
Self-improvement courses	80.0
Job training	68.8
Career-specific courses	66.7

The vast majority (N=60, 75.9 percent) of these 79 courses were rated as satisfactory by the 52 women who took them. Only 13 courses were rated as unsatisfactory. This ratio of satisfactory to unsatisfactory was fairly consistent through all the different types of programs. The major exception was job training programs, which were substantially more likely to be rated as satisfactory.

Table 8: Satisfaction With 79 "Other Education/Training Programs" Taken by 52 Respondents

Satisfaction Ranking	All Programs		Upgrading/ GED		Self Improvement		Career Courses		Job Training	
	No.	%	No.	%	No.	%	No.	%	No.	%
Strongly satisfied	14	51.9	7	35.0	16	64.0	8	44.4	10	62.5
Somewhat satisfied	91	24.0	7	35.0	4	16.0	3	16.7	5	31.3
No opinion	3	3.8	0	0.0	3	12.0	0	0.0	0	0.0
Somewhat dissatisfied	5	6.31	3	15.0	1	4.0	1	5.6	0	0.0
Strongly dissatisfied	8	10.1	2	10.0	1	4.06	4	22.2	1	6.2
No response	3	3.8	1	5.0	0	0.0	2	11.1	0	0.0
TOTAL	97	100.0	20	100.0	25	100.0	18	100.0	16	100.0

Sponsorship Programs for Education or Training

Forty-three of 79 women (54.4 percent) were aware of existing sponsorship programs which assist persons with disabilities to get training or education, such as Vocational Rehabilitation for Disabled Persons (VRDP).[4] That means that almost half of the women interviewed (N=36, 45.6 percent) were not aware of any existing programs. There appears to be a serious lack of information available. As one woman said, "If I knew about VRDP I would have applied for it years ago.... Wonder why CNIB didn't

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[4] See Appendix B for a list of programs of which respondents were aware.

mention it...." An exchange in one focus group, on funding for occupational training programs, illustrates this:

Woman A:	They should tell you things that you are eligible for.
Woman B:	Oh, they're afraid you'll ask for them.
Woman C:	You have to find out on your own. They didn't tell me at the Rehab Hospital.
Facilitator:	They didn't talk to you about occupational training?
Woman C:	No, they just ran all kinds of tests to see what's wrong.

Even among the women who did know about available programs, many said they had only found out about them by accident, and most agreed that more information was needed. In addition, some of the information which is being made available is inaccurate. Several women believed, through misinformation, that they were ineligible for VRDP and other programs: "I have heard of Vocational Rehab, but when I think of it, it's for physically disabled persons. [My disability] is a hidden problem. I didn't know I could qualify for it." Another woman said, "I was told VRDP was only for wheelchair users, the blind and the deaf!"

Twenty-two of the 79 women had participated in one or more education/training sponsorship programs. Their experiences were mixed; most of them were grateful to receive funding, often the only available source, to be able to acquire a post-secondary education. However, the graduates of degree programs could not get further funding for more education in order to improve their employability or to make a career change. Some participants in the focus groups compared their experiences with VRDP and found there were discrepancies in the quality of funding. They also felt a need for more funding for technical aids and support services such as tapes, note taking, photocopying, typing services or even living allowances.

One focus group participant, who is now in university, has severe arthritis. She found the supplies covered by VRDP were insufficient to meet her needs:

> I mean VR covers tuition and books. When I started, they didn't cover school supplies, nothing. By the end of things, I had over 200 tapes, because I also taped all of my lectures, because it's hard when you're not writing down yourself to retain anything of it.... They did buy me all of ten tapes, and three sets of rechargeable AA batteries, that was it.
>
> That's one of the problems with VR. Like I, myself, to type a paper, it's a nightmare, and so I'd put in 22-hour days, and VR wouldn't allow any money to have my papers typed!

> Plus I had to photocopy everything 'cause I can't take notes, so I spent a bloody fortune on photocopying. Spent a hundred dollars a month on photocopying, and you don't get that back.... They didn't allow me anything for photocopies....

Many of the 22 women who had been involved with sponsorship programs for education/training had encountered difficulties with inflexible policies. One woman was frustrated that VRDP would only finance the first two years of her education; another complained of age limits on programs; one woman could not get employment counselling from her insurance company, yet if she went elsewhere for counselling her pension would be cut off; some women wanted more choices in courses; one wanted to study part-time but could only get funding to study full-time. One woman was particularly frustrated because VRDP could only help her if she was planning to find paid employment—which she was unprepared to do since it would mean losing her coverage for medical expenses, which amounted to about $300 per month.

Those women with learning disabilities felt programs should make allowances for the fact that it might take them longer to complete courses, and for the possibility that they might fail courses. They felt learning disabilities were poorly understood.

Some women had difficulties with program workers, rather than with program policies. Five women felt that their VRDP counsellors were paternalistic, unresponsive, or not reliable (for example, not returning their calls, providing inaccurate information, not encouraging them to get an education). One woman had been told her funding was at risk, when in fact it was not. A few women thought program counsellors did not have sufficient contact with participants; they felt their needs and interests were ignored. On the other hand, one woman had wonderful counsellors, and wished for more contact with them because they were so good!

Barriers to Accessing Education at All Levels

Forty-three of the 79 women (54.4 percent) felt that being a woman with a disability had affected the level of education they had been able to attain. Of the 34 women who said they did not feel their education had been affected, 12 said they had refused to let discrimination or obstacles prevent them from obtaining an education. Their words spoke of total determination: "Disabled people have to FIGHT for the things we want!"

On the other hand, of the 34 women who indicated that their educations had not been affected, four stated clearly that this was because their education was complete before the onset of their disability: "I am lucky. I had finished most of my education at an early age; had I had the hearing loss at an early age, I certainly would have had serious problems." The remainding ten had also become disabled in adulthood.

Furthermore, four of the 34 women did not believe their education had been affected and then went on to identify ways it had, in fact, been curtailed. For example, one woman went on to say:

> I learned nothing. I didn't read Grade 12. The education in Amherst was limited. If I got a good education, I would have gone to university....

Another woman said:

> I feel I didn't get as much education as I wanted. The teacher seemed to rush so much to get lessons done with. I feel I didn't get a good education.... The teacher made lessons easy for me because I was hard of hearing, while my classmates were given hard lessons.

Yet another woman commented that "if [the] university was accessible, I would be interested in going back there. I'd go part-time."

These themes echo the explanations given by the women who did feel being a woman with a disability had negatively affected their education. Those 43 women indicated many physical, structural and attitudinal barriers that diminished access to or quality of education for them. These barriers included:

- a lack of funding for support services–readers, interpreters, note takers, tutors, typists
- a lack of technical aids–computers, magnifying machines and braille materials, FM systems for hearing aid users, tapes, tape recorders
- inaccessible buildings and/or classrooms
- negative attitudes of instructors
- generalizations about individuals with disabilities based on negative experiences
- low expectations of the capabilities of disabled students
- hesitation and resistance to enrol a student with a disability
- negative attitudes of other students
- a lack of counselling services.

All of these women felt their education had been restricted, and that they would have received more or better quality education had they not been women with disabilities. One woman poignantly described the limitations she had experienced:

> I grew up deaf.... People thought I was bad. Teachers said they didn't have time for things like me. When it was time to enter Grade 8, I was not allowed to enter the different system. They didn't have time for me, and did not want to bother with me. I did not have a choice. [She did not continue past Grade 7.] Sometimes I feel stupid. I never think about it but live day-to-day. I wish I could be a nurse. I always wanted to be and I will always wish to be a nurse....

Teachers and schools not having time for them was a common experience for these women. (One woman was "expelled" at age eight, because of her seizures.) Repeatedly, the women commented that they left school, or were left behind academically, because no one had time to teach them.

Not only did educational institutions not have time for these women, but they were also unable or unwilling to make the adaptations needed to make learning possible for the women. One woman said, "There was nothing for me in school, no special needs help at all." One needed large print or special glasses. Several needed teachers who could use sign language. One needed an interpreter in class (she was laughed at); one needed more time to type papers; one needed more time to study. A woman who had a mobility disablity needed transportation or taxi discounts to get to her training course. All of these women felt sure they would have furthered their education had any of these adaptations to their learning needs been made.

The most frequent barrier to education described by the women in the study was the assumption that they could not learn, an assumption made by family, teachers, principals, and doctors. One woman, when asked if being a woman with a disability had affected her education, responded: "Definitely. I just wasn't allowed to go, so that's it. The doctors said I couldn't go, so that was that." Another woman had been institutionalized until she was 21. She was incorrectly diagnosed as mentally disabled, and no efforts were made to teach her.[5]

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[5] In total, five women were unable to access an education while institutionalized due to the severity of their disability or for other reasons.

One woman relied on her sister to teach her to read and write, since she was not learning those skills in school. A woman who had been in the mainstream educational system said:

> I felt I was penalized. I couldn't study as quickly as the others.... I couldn't enter university because they [her high school teachers] had passed me when I [had] really failed.... I had to take Grade 11 and 12 over again.

And finally, one woman, who is now barely literate, was told not to attend school:

> I liked school. After missing some time, my father wrote a letter to the school asking if I could go back, but I was told I [could not] go back. The school was foolish not to let me go back.... My mother can't write. I was so proud to write my name....

Some women remained in school, but felt strongly that the education they got was inferior. The standards for them were lower, and the learning was minimal. This was true both of "mainstream" educational programs and "special schools." The schools for the deaf, both in Nova Scotia and in other provinces, were particularly subject to criticism. Twelve women had gone through ungraded education systems, and several of them felt the programs should be graded, to ensure they obtained credit for their work:

> Amherst should have a graded system. If I completed Grade 12, I would have a better chance. All I got was a piece of paper which was nothing. What we should have is a diploma to prove we completed our studies. It should be a nice, genuine diploma, not a piece of paper.

Not only would they have preferred that their education be graded, but some deaf women also felt the quality of the education they received was unsatisfactory. Participants in the focus group for deaf women were adamant:

> I was not happy! I took Grade 7 math for four years and I didn't learn anything (at the School for the Deaf). I just had to add, subtract, divide, etc. I didn't even know algebra, etc. It was the same old thing with English classes. They taught essays, etc, but the same thing for four years in a row!
>
> I had the same class and the same teacher. No one taught me much. I had to learn to ask, "What does this or that mean?"
>
> I went to the School for the Deaf in [another province]. It was the same thing! We were taught very simple stuff, like "Today is Thursday"!

Several women felt ill-prepared for employment as a result of the poor quality of courses they took in vocational schools. Their courses were repetitive and restrictive. The students had trouble understanding their teachers. Five deaf women complained that they had difficulty understanding their hearing vocational school teachers because the teachers were not fluent in sign language. For this reason, the same women believed their two-year vocational courses had been a waste of time.

Barriers to education resulting from their being women were identified less frequently by these women. However, a few women did name sexist assumptions that had restricted their educations. One woman believed there should be greater availability of training for women to enter non-traditional trades. One senior woman said her education was affected "not so much by my disability, but by being a woman. Back then, men and women with disabilities were equally discriminated against."

A woman in her late thirties, who has had a mobility impairment from age nine, described an age-old sexist assumption that limited her education. She had been discouraged from taking academic courses after Grade 9:

> They felt I would not be in the work force, that someone would support me–either [my] parents or a husband. They had the mentality that the majority of girls would marry and be supported by a spouse.

A focus group participant detailed an almost identical experience:

> [I] was not really treated differently till I hit ... the high grades in elementary and junior high. [That was] when I ... started noticing differences. I did not get to academic high school, I didn't graduate from high school. They told me ... I couldn't do it after Grade 9; they told me I could not ... you know, I didn't need math, I didn't really .... you know, go ahead and take a general high school completion. "You're going to get married, you're going to have kids. You're not going to work. Someone's going to, either [your] parents or a partner, someone's going to support [you]." Which I thought totally ludicrous.

Summary

In general, the formal educational attainment of the women in the study was fairly low. Since the sample was not intended to be representative, it is not of much use to compare their levels of education with those of the general public, or of other specific groups. What is of most use is the identification by women with disabilities of the things that helped or hindered their efforts to obtain the education they wanted.

Most of the training or education programs the women entered after leaving school were considered to be accessible, and they were fairly satisfied with them. However, they did identify a number of barriers which may have limited their education, or may simply have made them more determined in their pursuit of education. Obstacles the women named included negative attitudes, physical inaccessibility, lack of funding for support services, lack of technical aids, and poor quality of education. Existing sponsorship programs such as VRDP were considered helpful, inasmuch as without them the women would not have been able to afford the training or education they wanted at all. However, the women did have a number of problems with the existing programs. Perhaps more significant, though, is the fact that almost half of the women were entirely unaware of these sponsorship programs. Still others had an inaccurate understanding of eligibility requirements or program policies. Clearly there is a need for accurate information to be made more widely available.

RESULTS: EXPERIENCES WITH EMPLOYMENT AND UNEMPLOYMENT

Women were asked to talk about their experiences with employment, beginning with their past employment histories–both before and after the onset of their disabilities, if appropriate. In particular, they were asked to reflect upon those experiences from their perspective as women with disabilities. They were also asked about their current employment situations, and then about details of those experiences. Women who were currently employed were invited to reflect upon their present work conditions. Women who are unemployed and seeking work were asked about their experiences with job searches and employment agencies. Women who were not employed and not seeking work were asked why they were not looking for work, whether they would like to be employed, and what things would make that possible for them.

Employment History

Seventy-two women (91.1 percent) had held a total of 172 jobs in one or more employment situations in the past. The most frequently cited employers were businesses, community agencies and organizations, restaurants, and federal and provincial government departments (see Table 9).

Discrimination in Past Employment

Seven women reported that gender discrimination had resulted in the loss of their jobs. Two incidents were marriage related: one woman was laid off when she married, another was told she had to quit if she married. Two job losses were child care related: one woman quit to look after her children, and another mother could not work the overtime required of her and had to quit. Another three job losses were due to outright discrimination. One woman quit when she was sexually harassed, another was accused of being a lesbian because she was not dating a man and was fired, and one woman believed she was fired due to her obesity.

Having a disability was reported as the reason for job loss by 27 (37.5 percent) of the women. Most of them left their jobs voluntarily. Thirteen women (37.2 percent) found their disability or health problems were severe enough, due to stress at work, to cause them to leave their jobs. Three women experienced vision deterioration to a point where they could no longer do their work. Three deaf women felt that their employers continually harassed them verbally.

Table 9: Types of Employment Situations

Employment Setting	Number of Respondent	Percentage of Respondent
Business/corporations/factories	50	29.1
Agency/organization	20	11.6
Self-employed	18	10.5
Restaurant	10	5.8
Federal government	9	5.2
Provincial government	9	5.2
Motel/hotel	7	4.1
Hospital	7	4.1
Nursing home	7	4.1
Individual/family	6	3.5
School board	5	2.9
Day care centre	5	2.9
University	4	2.3
Newspaper	3	1.7
Sheltered workshop	3	1.7
Municipal government	3	1.7
Library	2	1.2
Professional office	2	1.2
Post office	1	0.6
Laboratory	1	0.6
TOTAL	172	100.0

A number of women maintained that they could have stayed in their jobs if some adaptations or concessions had been made for their disabilities. One said she could have kept her job if she had acquired accessibility devices. Another felt forced to quit after her employer refused to get a sign language interpreter to explain new work procedures to her. One woman had always traded duties with her co-workers, if she was unable to perform them; a new administrator refused to allow that. One woman who used a wheelchair said, "I could have had a dispatcher's job. I was hired, then they changed their minds because they didn't want to renovate."

Women with less visible disabilities may try to "pass" at work, concealing their disabilities in order to keep their jobs. The difficulties this imposes may still result in job losses: "[At] the jobs I could get, I was unable to be honest about my deafness for fear of discrimination in hiring. Subsequently, I couldn't maintain jobs, due to hearing difficulties." Other women were able to keep their jobs, but were under tremendous pressure at work. One woman never told anyone she was deaf; she believed they would not let her continue working if they knew. She found strategies to enable her to do her work: "I picked one patient in each room to let me know if the other patients were talking...." Another woman "passes" at work, but it takes a lot of effort:

> [The store] doesn't know that I have a learning disability. I'm afraid they might let me go, or give me less hours. Some people noticed it, but didn't report it. I learned their routine, dealing with numbers. Sometimes I say a different total than the actual amount. I didn't know how to make change until I was 16. It takes a lot of effort not to make mistakes. I am afraid.... Sometimes I feel foolish when I make errors....

One of the focus group participants, who has a hidden disability which affects her cognitive processes, reported similar anxiety and stress from "passing" at work:

> Sometimes the wheel's not turning properly up above, so it's a hidden deficit that's more subtle because it doesn't show by a wheelchair or a white cane or whatever.... The job that I was in before ... they didn't realize that every day I went to work, it was like a new job. So it was a goal to go to a new job every day. You know, like when you're going to a new job and you go to work on the first day, and you have to [learn new things] and you're exhausted that night and you really are happy to get it right. But each day it was like a new job. It was hard! Tiring!

The focus group participants identified barriers to employment such as jobs offered outside the area where needed medical services were available; low-paying, dead-end, short-term or make-work jobs; and tokenism in the employment situation. In the words of one focus group participant:

> I kept getting these dead-end jobs. You'd get the PEP grants, you know, you'd get the make-work, 12 weeks or whatever, and aren't we great, we've hired a disabled person and, well, 12 weeks is over, good-bye. And so, you're collecting U.I. at minimum rate, you know, $99 a week. You're living at home, you're a burden to your parents....

One woman in a focus group argued that employers simply lack the desire to hire persons with disabilities: "They just don't want to take on a disabled person because they say, well, we have to do extra work, we have to do this, we have to do that, and they don't want to do it. They don't want to take the trouble." As with educational institutions, no one has the time for women with disabilities, no one wants to bother.

The women in the focus groups identified several other employment-related problems including: lack of sensitivity/awareness training, lack of support services, lack of adaptations in the work place, jobs not appropriate for certain disabilities, no medical insurance for those preferring to work part-time, and no medical coverage for pre-existing health problems.

Current Employment Situations

Fifty-nine of the 79 women (74.7 percent) were not in the work force at the time of their interviews. Twenty (25.3 percent) were working full-time or part-time, while 27 (34.2 percent) were seeking employment. Thirty-two women (40.5 percent) were not employed and not seeking employment, including those taking courses or doing volunteer work.

At the time of the interviews, the greatest percentage of employed women were working as clerks of all kinds in various settings. Other occupations included teachers, coordinators, crafts people, service workers and health care providers. Of the 20 women who were employed, eight worked part-time, and 12 worked full-time. Two other women worked at two or three part-time jobs and considered themselves to be employed full-time.

Seventeen of the 20 employed women were satisfied with their work. However, some of the reasons they gave for being less than totally satisfied included lack of advancement opportunities, routine tasks, too much work, insufficient hours, and low pay.

Other reasons were more directly related to having disabilities, such as often being physically tired and not having frequent enough breaks, having difficulty with particular equipment, or meetings being called at the last minute with no interpreter for deaf employees.

The vast majority of the employed women indicated that most of their co-workers were supportive of them as women with disabilities. The same was generally true for supervisors, although a few women identified some problems. The major difficulties were supervisors' paternalistic attitudes, treating employees with disabilities like children, and refusing to allow the flexible hours needed to attend medical appointments. On the whole, however, women found their supervisors to be very supportive. It was clear that the women were not looking for special treatment. One woman, who considered her supervisor to be strongly supportive, was adamant: "She treats me as an <u>employee</u>!"

Despite the high employment satisfaction levels, eight of the 20 employed women indicated that they had tried to find other employment. Three had found no one would hire them:

> It's so hard. People phone me to come for interviews, and then after the interviews they never call back to say yes or no. [Dishwasher/cook's helper]
>
> I have no Grade 12, told to forget it. There are limits on the types of jobs ... even filling out applications is very difficult. [Child care worker, very dissatisfied]
>
> I have no success. People have refused to hire me. I applied for jobs. I was "over qualified," "don't call us we'll call you...." [Graduate of teachers' college]

Women who would have liked a job change did not seek other employment because of current economic trends, lack of formal education, and transportation difficulties.

Fifteen (75 percent) of the 20 employed women indicated that they were satisfied with their incomes. However, three women wanted an increase in salary to compensate for hard work. Three wanted more hours of employment to support themselves financially. Two other women's incomes fluctuated with their work.

Workplace Accessibility

When the employed women were asked if they considered their workplaces accessible, 16 (69.6 percent[6]) indicated that they were, while only three stated they were not. The remainder were somewhere in between. Three women worked in their own homes or operated their own businesses. They simply arranged things so that they were accessible. Factors that women identified as making their workplaces accessible for them included TDD/TTYs[7] at work, aisles wide enough for wheelchairs or braces, and flexible schedules which allowed time off for medical or personal needs.

The most important factors seemed to be the attitudes of employers and co-workers. One deaf woman said her boss was aware of her limited education and was careful not to use "big words," always speaking to her in terms she could understand. This made it possible for her to do her job. Several women described ways their co-workers assisted them, alerting deaf and hard-of-hearing women of fire alarms, reaching hard-to-reach objects for mobility impaired women, making telephone calls for deaf women where a TDD/TTY was unavailable, and so on.

Features which made workplaces less than fully accessible for the women were also primarily attitudinal: co-workers forgetting to speak slowly to women who lip read, last-minute meetings being held without interpreters, and a lack of understanding of the physical exhaustion that accompanies many women's disabilities. Some of the focus group participants felt that employers lacked understanding about disabilities or accessibility, and were unwilling to give them the chance to prove themselves.

Some women needed adaptive devices or structural changes to make their workplaces fully accessible for them. One woman needed an amplifier for her switchboard. Another would have liked a TDD on her own desk, instead of only at the front desk. Stairs were not an impassable barrier for one woman, but they did exhaust her.

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[6] Twenty-three workplaces were assessed. One woman held part-time jobs in three locations, and another in two. Each of the remaining 18 women were employed in just one location.

[7] TDD: telecommunications device for the deaf; TTY: teletypewriter.

Nine of the 20 respondents who were employed had asked their employer to improve basic accessibility, for example, providing ramps, TTYs, elevators, sign language classes for co-workers, and sign language interpreters. One woman did get several co-workers to learn basic sign language. A letter from one woman and two of her co-workers convinced the hospital where they worked to purchase a TTY.

However, financial restraints prevented some employers from improving the accessibility of the workplace. A university where one woman works did make renovations, but to cut costs they took shortcuts and did not consult with experts. As a result her workplace is only partially accessible, even after renovations. A musician who uses a wheelchair has told numerous clubs where she performs that they need to make renovations to be accessible; there have been no changes: "I get some men to help me get in. I don't like it. I think no human being would...."

Experiences Looking for Employment

Fifty-nine women were unemployed at the time of their interviews; of these, 27 (34.2 percent of the 79 women) were looking for work. Three women were recent university graduates, but planned to return to school if there was no work available. Sixteen of the 27 (59.2 percent) had been looking for work for a year or less, eight had been looking for one to five years, and three women had been looking for work for more than five years. As one woman who had been looking for work for over a year said, "It's a waste of time doing nothing. I want to work and keep busy. I need work for life and to support myself. Where is my enjoyment?"

Some women felt restricted in seeking or obtaining employment because of transportation difficulties, lack of formal education, and lack of paid work experience. Two women who have been seeking employment for one to three years are trying to enter the work force after years as homemakers. They both feel their lack of experience with paid employment is a hindrance. Other obstacles women identified which restrict their participation in job interviews included: inability to get to the interview location, buildings not being accessible, interviews and applications being conducted in ways that do not accommodate disabilities, and interpreters not being available.

One woman said she needs job applications, interviews, and tests to be administered orally, because of her dyslexia and visual impairment. A focus group participant, who is blind, would just like to be able to get to her job interviews.

> If I call a place, and I have to go to a job interview, I find the biggest problem is they know I'm blind, but they won't give me the correct directions to get there.... So my boyfriend has to get those days off work, so he can help me, because, they don't give the proper directions, so I find have to have someone with me.... I've had to cancel interviews because I couldn't get there, because of lack of ... finding someone to take me there.

Three women said their job applications or résumés were routinely rejected because of their disabilities:

> I talked with employers, sent applications. Employers found out I was deaf and wouldn't hire me. [Looking for two years]

> I felt that some employers noticed the relay service number on my résumé and guessed quickly that I was deaf. Few job opportunities.... [Looking for two years]

> Went to many job interviews ... when they saw I was blind they said, "We'll call you." They never called me. Interviews were over when I called to find out about them. I was very qualified and they won't even set up interviews. I blame them for their attitude towards my blindness. [Looking for six years]

One woman said she has been turned down for jobs because of her disability. And while there are jobs she knows she could get, and do well, there is shift work that would not coincide with the hours day care is available: "Essentially, I can't take such jobs because of my child care responsibilities."

A participant in one of the focus groups talked about the demoralizing experience of being rejected before even getting an interview:

> I mean, I've talked to people and said, "Well, I've done this and done this, and done...." "Oh, well great, you know, we'll set you up for an interview," and then, they'll call you up and say, "Oh, we don't need you now. The job has been filled." You know, they raise your spirits and then they try and knock them!

The focus group participants agreed that it was not easy to get past the interview stage in a job search. Women who felt fully qualified were rejected based on their disability, either at the application stage or after interviews. One participant sent many job applications to the Civil Service Commission, but never reached the interview stage; she felt she was qualified in her field. She wondered if applicants with disabilities made the interview list for statistical purposes only.

Employment Agencies

Fifteen (55.6 percent) of the 27 unemployed women who were seeking employment had received help from non-profit, private, and government employment agencies. Ten women believed that the agencies were doing their best to find work for them, as opposed to three who felt the agencies were not helpful. Three women thought their counsellors were unrealistic about the type of job which might be appropriate. Four women felt that their employment counsellors were not supportive or simply not right for them.

Interestingly, opinions on how helpful agencies had been seemed to have less to do with the agencies themselves, and more to do with which counsellors women encountered. All three of the following women are talking about experiences with Canada Employment Centres:

> Not very helpful! Not much luck with the counsellor!
>
> I can remember them saying to me, "Okay, too bad you weren't black. You're disabled, you're a woman, you would be all set if you were black."
>
> The counsellor is very good. The counsellor has a disabled daughter.

Unfortunately, some women become so discouraged after encounters with unhelpful counsellors that they never return to those employment agencies.

Only nine women had had career counselling. Of those, five were strongly dissatisfied. They found counsellors were uninformed about the employment barriers faced by persons with disabilities; they found counsellors did not believe that they were capable of work, despite past training; and they found counsellors discouraged them from even trying to find work.

Unemployed and Not Looking for Employment

Thirty-two of the 79 women were unemployed and not looking for employment. Five of these women were full-time students and thus were prevented from seeking full-time employment. Nonetheless, they and the other women gave a multitude of reasons for not seeking paid work. The three main factors are: (1) severity of their disabilities, health problems or lack of energy; (2) lack of education or training; and (3) fear of losing medical and drug coverage associated with social assistance benefits.

The first factor–severity of health conditions–was named by 21 (63.7 percent) of these women. These women simply are not able to work, or at least to find work that is suitable for their abilities. As one focus group participant describes:

> I have not been able to look for work, especially because I had to wait for my arthritis to clear up, and I'm in physiotherapy five days a week, which is most frustrating to go through, 'cause you feel very restricted. And I know there's not that many jobs out there, but at least you want to be out there looking.... [But] the arthritis in my lower spine and my hip has been so severe that I can't. I'm pushing it to be up this long. [University graduate]

Severe allergies deterred one woman from working, or even looking for work, since co-workers could not seem to remember not to wear perfume. Another woman was clear that though her health prevented her from seeking work, it need not have: "I'm no longer able, due to my [health condition]. <u>But</u> I could have worked much longer, maybe till I was 65, if job accommodations had been made."

Other reasons cited less frequently, but which nonetheless prevented some women from seeking paid work, included:

- inaccessible workplaces in rural areas
- lack of accessible transportation (especially in rural areas)
- lack of employable skills
- non-availability of suitable work
- potential employment income being lower than social assistance income
- employers' refusal to make workplaces accessible
- non-availability of alternative job arrangements (job sharing, part-time work or work at home)
- employers' refusal to hire a woman with a disability.

Sixteen of these women said they would like to enter or re-enter the work force, if they could. Only six women did not wish to do so. Some women felt they were capable of working, and others did not. Yet regardless of their perceived <u>ability</u> to do the work, these women had a very strong <u>desire</u> to work, if only it were somehow possible.

One woman said,"One day I want to [work]. I want some training, I need support, career counselling." Over and over, women said, "I'd like to work, if could find something compatible with my skills and my disabilities." One woman summed up the difficulties when she said she would love to work, if she could only get training, child care, an accessible workplace, and transportation.

One of the strongest forces holding these women back from even seeking employment, when they want so badly to work, is fear of losing the benefits they receive through social assistance or disability pensions, the primary source of income for most of the women. Woman after woman said she would love to look for work, but not at the risk of losing her benefits, particularly medical and drug coverage:

> When I was working, [my] benefits [were] cut off. [Then] due to medical reasons I couldn't work. [I am] scared to work. If get ill again, I'd have no coverage. What I do is find out what I am allowed to earn [without penalty], and then don't work more than allowable.

For several of these women, medical costs amount to hundreds of dollars each month. Most would be highly unlikely to earn enough to cover those expenses, given their education and employment backgrounds. As one woman put it, "I have thought of [getting off social assistance], but I can't earn $2,500 a month for everything. I could be a hooker or a drug dealer. What I am looking for is something legal and lucrative!"

Only five women had attempted to get off, or thought of getting off, social assistance. Policies which cut off medical benefits as soon as people with disabilities become employed constitute serious disincentives for the women in this study to seek employment. And bear in mind that a great many of these women want very badly to be employed.

The women are very clear that if there were suitable work available, and if they could take work without losing the benefits they need, they would do so. They express very strongly that they do not feel they can <u>afford</u> to work. It is abundantly clear that these women are not simply content to sit back and wait for social assistance cheques. The quality of life they experience with social assistance as their sole source of income is extremely problematic for most of them.

The women experience social assistance as not only financially inadequate, but also degrading, humiliating and discriminatory. One focus group participant described her experience as a recipient of social assistance:

> When I get my education, I am going to just get the hell off it, you know. You think it makes you feel good? No, it doesn't. I have got news for you. It does <u>not</u> make you feel good. I know it's better than nothing and being on the street, but don't tell me it makes me feel good, because it doesn't. It takes away a lot of your dignity.

One woman, a single mother, has been a recipient of Family Benefits for nine years. When asked if it was adequate, she replied, "Well, it has to be enough. You have to make ends meet. If you can't, you do without.... There are many days I do without food or whatever...."

Some women found the regulations for social assistance eligibility not only reflected poor understanding of the reality of life with a disability, but also were sexist. A participant in one focus group describes being cut off from Family Benefits when she moved in with her boyfriend:

> Once they heard I had moved in with my boyfriend, that was it, bang! So, we're on welfare, we're getting money from welfare, and I find they're nothing but trouble. Now, I'm a diabetic as well, and I've been quite sick with my diabetes, and I came close to death a few times ... and they just said, oh well, we can't do anything about it.... I called welfare and asked for assistance, and they said, oh well, you're getting the maximum.
>
> You know, they expect two people to live on $918 a month, and ... because of my diabetes, I need extra money for certain foods and so on and so on. I'm just having a rough time.... I'm not eligible for Family Benefits because my boyfriend lives with me. They expect him to support me, and he's only making $5 an hour!

Some of these women felt social assistance should be geared toward recipients' actual expenses and income, rather than using pre-determined guidelines. They experienced social assistance regulations as inherently unfair.

One unfortunate—though perhaps inevitable—result is that women may develop highly antagonistic relationships with their social workers, who they often see as the enforcers of unjust rules. One woman said:

> Family Benefits and welfare workers, they are heartless. They don't take any matter seriously. They go by the rules, and that's it."

> Another woman displayed a deep distrust of social workers: "I don't tell her anything. The less she knows, the better it is. I don't trust them, to be honest.... I'm sorry, but that's the way it goes, the less they know, the better it is. There are things, that I won't tell them ever, cause ... you've got to protect yourself....

Factors Important to the Women's Ability to Obtain Employment

The women were read a list of 18 factors which might help make it possible for a woman with a disability to obtain employment. They were asked to rate the degree of importance each factor held for them.[8] Clearly, some factors were applicable only to women with particular types of disabilities, and were not relevant to others. For example, having a sign language interpreter might be very important to a deaf woman, but would probably not be a high priority for a woman with a visual impairment. The women only rated those factors which applied to them.

In addition, the importance of these concerns to each individual was influenced not only by the nature of her disabilities, but also by her personal needs, and other circumstances such as what services were available in her community, and her life experiences. Factors such as having small children, being a student, the availability of accessible transportation, living in rural areas or small towns, having a history of abuse, and so on all influenced the women in different ways.

Some factors which were rated as very important, though only by the five to eight women for whom they were relevant, were (in descending order of importance): disability too severe to work, lack of transportation, interpreter needed for upgrading or job training, interpreter needed for job interviews, and financial support for child care in order to go to school or work. Other factors, which the majority[9] of women felt were relevant to them, were also ranked as highly important.[10] They included adequate financial

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[8] See Appendix C for a list of the factors, with scores indicating the degree of importance they held for respondents.

[9] Twenty-four to 30 (75-94 percent) of these 32 respondents indicated that these factors were of relevance to their ability to seek employment.

[10] The mean scores for these factors were 4.2 to 4.3 on a five-point scale, with a score of 5 meaning "very important."

support to go back to school, continued medical coverage while working, and technical aids.

Another cluster of factors were seen as relevant by the majority of the women, but were rated as slightly less important to their ability to obtain employment. These included: an accessible workplace, a need for career counselling, financing for a personal care worker, and a need for building confidence and self-esteem to be able to go on looking for work. Though factors such as needing literacy training or counselling for abuse were seen as relevant by a significant number of women (21 of 32), they were rated as being of less importance[11] than other factors in women's ability to look for employment.

When the 32 women who were not employed and not seeking employment were asked what they would like to learn to become more employable, nine women named upgrading/GED as their top priority. Five women wanted to learn life skills. Another nine saw computer training as most critical for them in today's computer-oriented work force. Nine women wanted training to work with people in various fields. Three women who have bachelor's degrees believe they would be more employable in their fields with graduate degrees.

Summary

The vast majority of the women (N=72, 91.1 percent) had been employed at some point in their lives. A significant number described experiences of discrimination based on their gender or their disabilities. Seven women reported losing jobs due to marriage, child care problems, or sexual harassment. Twenty-seven women had lost jobs due to their disabilities, although most left voluntarily. In general, women quit when their disabilities reached the point where they could no longer do their work. Many of them felt they would still be working if adaptations had been made for them.

Women with hidden disabilities described trying to "pass" as able-bodied for fear of losing their jobs; some lost them anyway. Other common employment experiences were tokenism, dead-end jobs, low-pay, and exploitation.

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[11] Scoring 2.8 and 2.5 respectively on the five-point scale, where 5 was most important.

Twenty of the 79 women (25.3 percent) were employed at the time of their interviews. Eight work part-time and 12 work full-time. The largest percentage of women are employed as clerks in various settings. The vast majority of these women are satisfied with their work, and with their incomes. One of the factors most strongly related to employment satisfaction seems to be supportive attitudes on the part of co-workers and supervisors. This was also one of the features that the women considered most important in the accessibility of their workplaces. The majority of the women considered their workplaces accessible. Where adaptive devices were not available, the assistance of co-workers was particularly important to allow the women to do their jobs.

Twenty-seven of the 79 women (34.2 percent) were unemployed and looking for work. They felt restricted by transportation difficulties, lack of formal education, and lack of paid work experience. Job interviews were hampered by inaccessible locations, lack of interpreters, transportation difficulties, and application formats that do not accommodate learning disabilities or low education levels. Many women felt they were rejected at the application or interview stages because of their disabilities. Fifteen of these women had made use of employment agencies. They had mixed opinions about the effectiveness of the agencies, depending primarily on the individual employment counsellors they encountered.

Thirty-two women (40.5 percent) were unemployed and not seeking work, for a multitude of reasons. The main ones are the severity of their disabilities, lack of education or training, and fear of losing the medical and pharmaceutical benefits they are entitled to on social assistance. Many of these women are simply not able to look for work, or to find work compatible with their disabilities. Other reasons included lack of accessible transportation, inaccessibility of workplaces, lack of alternative job arrangements, unavailability of childcare, and the fact that their incomes from working would be less than their social assistance incomes. However, most of these women would very much like to be employed, if it were somehow possible. They experience life on social assistance as degrading, humiliating and discriminatory. Given the opportunity, and the support services they need, they would love to be employed.

RESULTS: INCOMES OF WOMEN WITH DISABILITIES

Source of Income

The 79 women received income from 139 sources with 76 women (96.2 percent) receiving income from more than one source.

Table 10: Sources of Income

Type of Financial Source	Number of Respondents	Percentage of Respondents
Provincial social assistance	27	19.4
Husband, partner	23	16.5
Municipal social assistance	12	8.6
Canada Pension Plan	11	7.9
Parents, relatives	11	7.9
Full-time employment	11	7.9
Part-time employment	9	6.5
Unemployment insurance	8	5.8
Self-employment	7	5.0
Child support, alimony	5	3.6
Beneficiary's pension/allowance	5	3.6
Savings	4	2.9
Private disability benefits	3	2.1
Other	3	2.1
Workers' compensation	0	0.0
TOTAL	139	100.0

Annual Income

Sixty-one women (77.2 percent) received less than $12,000 per year; of these, 28 (34.4 percent of the total sample) had incomes of less than $6,000 a year. Three women had no income. Only five women had annual incomes of $18,000 or more; one of these had an income over $36,000. Three women who worked full time did not provide information about their incomes.

Table 11: Annual Income of Respondents

Income Range	Number of Respondents	Percentage of Respondents
Nil	3	3.8
$1 - 5,999	25	31.6
$6,000 - 11,999	33	41.8
$12,000 - 17,999	10	12.6
$18,000 - 23,999	1	1.3
$24,000 - 29,999	3	3.8
$30,000 - 35,999	0	0.0
$36,000 +	1	1.3
No response	3	3.8
TOTAL	79	100.0

Satisfaction with Income

While 41 (51.9 percent) women were strongly dissatisfied with their income, another 27 (34.2 percent) were somewhat or very satisfied. When asked to explain their level of satisfaction with their income, 15 women said it was not enough to live on; nine more said it was barely enough. For many, there was not enough money for food, clothes, or other expenses.

For some women, their spouse's income helped, although some expressed their frustration with having to be financially dependent upon their husbands or partners. One woman, who has no income of her own, said, "I have to ask him for support.... I should be able to receive welfare, even though he works. I'd like to have my own income..."

Among the women in the lowest income bracket, less than $6,000 per year, all but the students were dissatisfied with their income, stating repeatedly, "I can't live on this!" One woman exclaimed, "My total income of $4,150 a year is at starvation level!

It's less than half of the poverty line!" Woman after woman talked of having just enough money to pay rent and utilities, with next to nothing left over for food. One woman talked about having to use food banks occasionally. Some women relied on their family members for help. They found it exceedingly difficult to have to ask for the things they needed. One respondent, who needed a new wheelchair, said "I don't want anyone to make me a millionaire, but I'd like something half way decent. They call us welfare bums. They hook you into it, don't want you to work or get out of it."

Women in the next income bracket, with incomes between $6,000 and $12,000 a year, did not fare much better. One respondent reported an income of only $200 a month more than her rent costs.[12] From that she pays electricity, heat, phone, expenses, medications, costs for a homemaker, transportation, and groceries. She says, "It's not too bad. Though I'm not eating the way I should be, I just get by, that's it. What I should be eating, I can't afford it."

Not only does her comment display the inadequacy of this woman's income, but it also illustrates a remarkable level of acceptance of what would appear to be an extremely difficult way to live. This acceptance of the unacceptable was apparent in the comments of several women: "Well, I have not a whole lot of complaints, because Halifax County does provide a support person. Right now, my daughter is not here, so they are going to cut off some of my cheque. I may end up at a food bank to eat."

A few women who live in group homes for persons with mental disabilities have incomes in this range, though they do not actually see the money themselves; it is all administered by their caregivers. One of these women, in her fifties, said the only money that comes to her directly is her Goods and Services Tax rebate cheque. She wishes she had a bit more money occasionally for treats and things like cosmetics.

Ten women were in the $12,000 to $18,000 income bracket. They were somewhat more satisfied with their incomes. However, they have a precarious existence, where it would take very little to bring it all toppling down. One woman, a widow with a young child, said, "I can just get by, if nothing goes wrong. I realize I am better off than if I was on Family Benefits, but I'm terrified that I'll end up on it, if my car breaks down, or

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[12] This figure appeared to be fairly common. Regardless of total income or the amount of their rent, several women seemed to have $200 a month left after paying rent.

anything else goes wrong." This was echoed by other women who commented that there was nothing for extras, or for repairs if anything broke down. A few women in this income range were very frustrated and felt that their university education gave them the potential to earn much more than they were getting. They questioned whether their earnings might be more in line with their potential if they did not have disabilities.

Women who had annual incomes greater than $18,000 were, predictably, much more satisfied with their incomes. Some still had difficulty covering expenses related to their disabilities, and to their children, but for the most part there were no complaints among this group.

In general, the incomes of the women in this study were abysmal. And the inadequacy of their financial situations is clearly connected both to their being women and to their having disabilities.

Women with children seem to be particularly hard-hit. One woman said, "I haven't bought clothes for myself or my son for three years! After rent and bills, I haven't enough for clothes!" Another respondent was very troubled about her children having to miss out on many of the activities they wanted to participate in at school, because she could not afford to give them any spending money. Day care was a major financial worry for most of the women with small children.

Others found the conflicting role expectations they faced as women and as workers were too much to cope with, along with their disabilities. For example, one woman knows she could have more money if she worked, but with her disability she is unable to do that <u>and</u> keep house for her husband. She would not earn enough to hire someone else to clean, and she believes it would be unfair for her husband to have to do the housework just because she wants to work.

A great many of the women incurred extra expenses related to their disabilities. Their ability to meet these expenses depended on their incomes, and on the source of their incomes. Some women who had lower incomes but whose medication and technical aids were paid by social assistance or pensions were better able to meet these particular expenses than were the women who were "working poor." These women do not qualify for any financial assistance, yet they do not earn enough to be able to afford new hearing aid batteries, much less a desperately-needed wheelchair. Even women who were social assistance recipients had to struggle to cover expenses that are not seen as necessary under existing guidelines. Several women commented that telephones are seen as a luxury, which is not the case for women with disabilities. A woman who is diabetic was unable to get the extra money she needed to buy food that would satisfy her dietary requirements. A woman who is a survivor of childhood sexual abuse could not get her therapy-related expenses covered.

The only way many of these women survived was through the support of family and friends whom they relied on for supplementary income, food or clothes. After a while, relying on the generosity of others can become very humiliating, as this focus group exchange illustrates:

Woman A: I haven't had [money] to buy anything for three years. I've just got what people give me. You haven't got money to buy anything. So you take what people give and that's about it.

Woman B: Don't you run out of gratitude? That's what I found. That, it's a shame, but my sister, this spring lent me $200, and said, "I hope you understand, but I can't even say thank you." It's, I just have no gratitude left. I know that I should, and have in the past, but I just have no gratitude for anything.

We have seen how being women and having disabilities has restricted the educational and employment opportunities of many of these women. While each factor has independent effects on income, the combination of poor education and employment experience with the "double whammy" of being women and having disabilities has left the majority of women living way below the poverty line. Being a woman negatively affects income. Being a woman with a disability has an even greater negative impact. Being a woman with a disability who has little formal education and little work experience greatly increases the likelihood of living on next-to-nothing.

An overwhelming number of these women have less than enough or barely enough to pay their rent and buy food. Going without food is commonplace among the women in the lowest income brackets. While this is hard for anyone, for those with disabilities such as diabetes, it is particularly hazardous. Similarly, it is hard for anyone to be unable to afford new things, or repair things that break down. When those "things" are a much-needed new wheelchair, or a broken TDD/TTY, the consequences are far more serious.

CONCLUSIONS

Since this study was not based on a randomly selected sample of women with disabilities the findings cannot be generalized to the larger population of women with disabilities. Nonetheless, the study provides a wealth of information about the experiences these particular women with disabilities have in Nova Scotia. This material can inform the development of strategies to facilitate the full integration of women who have disabilities into the economic mainstream.

Though most women did not identify it as a significant concern, the overwhelming low self-esteem of many of these women was apparent. As Doucette (1987) has argued, low self-esteem is a serious obstacle that must be overcome if progress is to be made for women with disabilities. One of the major difficulties is women's internalized belief that they deserve no better than to live in poverty and degradation. Women in this study spoke matter of factly about not being too badly off on their below-poverty-level incomes, as they prepared to go to food banks to get enough to eat. This illustrates dramatically the belief that they deserve no better, and expect no better.

They are then much less likely to have the pure, unadulterated determination demonstrated by the women who simply refused to let either their gender or their disability get in the way of obtaining the education and training they wanted.

Women identified many barriers to be overcome in order to access education and training. They included the lack of adaptations, support services and accessibility devices they needed, and inadequate coverage for these items by sponsorship programs such as VRDP. Instructors, teachers and professors rarely had the time for the individual instruction some of the women needed. The women felt hey had been directed away from non-traditional trades. They were critical of the non-graded systems of education, which left them without the credentials they needed to continue their educations.

The major barrier identified is the poor quality of education many women experienced, especially at the primary and secondary leves. They struggled against (or gave in to) assumptions that they simply could not learn. They struggled against assumptions that they would not need an education, since they were female and had disabilities, and therefore would be cared for by someone else–husband, parents, someone. Schools for students with disabilities were experienced at offering inferior educations, and mainstream schools lowered their standards for students with disabilities. In both cases, women were left without the preparation they needed for continuing education or training.

Programs which sponsor the education and training of persons with disabilities, such as VRDP, are failing these women in significant ways. The most important is lack of information and misinformation. A great many of the women were unaware of or misinformed about programs for which they were eligible. Many of those who had made use of these programs found their policies restrictive and inflexible, based on standardized assessments of needs that did not always meet the real needs of these women.

In employment, notwithstanding human rights and employment equity policies, a sizable number of these women had lost jobs due to their gender or their disabilities. For the most part, women left of their own accord, when their disabilities made it impossible to do their jobs, at least without adaptations, which were not always forthcoming from employers. There would appear to be serious problems when employers would prefer to lose an experienced employee, rather than adapt the workplace to make it accessible for her.

Other women had experienced numerous rejections of their applications for jobs, either at the application or the interview stage. These women believed they were well-qualified. Again, this is blatant discrimination.

Most of the women who are currently employed assessed their workplaces as relatively accessible—which may be why they are able to work there. Lack of accessibility was identified as a major reason why many other women were not able to find work, or had given up looking. They could not get accessible transportation to interviews or to work; they could not get in the building to attend interviews or to work; they could not read well enough to complete applications; they needed interpreters for interviews or at work; they needed technical aids that were not forthcoming.

Other women were unable to find work that allowed the flexible hours, part-time hours or job sharing they needed for medical or health care reasons, or to accommodate child care responsibilities. Child care was a primary concern for many of the mothers in the study.

There is also very little incentive for women with disabilities to work, despite the fact that the majority would like to be working. Many women had experienced being stuck in dead-end, low-paying jobs. The majority of the employed women were working as clerks of some sort. This type of occupational segregation is hardly an overwhelming inspiration for women who feel they have inferior education, who cannot get access to education and training, and who often cannot even get to the interviews to begin looking for employment!

One of the most significant findings of this study is the way social assistance and pension programs dissuade women with disabilities from looking for the employment they want. These women cannot afford to work. The incomes they are likely to earn will probably be only slightly higher, if at all higher, than their incomes on social assistance programs. Yet by becoming employed they will lose their medical and pharmaceutical coverage. This is a tremendous loss for women whose health-related expenses can amount to hundreds of dollars each month.

These disincentives leave women with disabilities trapped in poverty, trapped in a situation where they cannot even have a sense of self-worth and contribution from their employment. Living in poverty is a tremendous hardship for anyone. It is especially difficult for mothers, and for persons with disabilities who may have particularly high and particularly urgent expenses.

These women with disabilities have told us their experiences. They have described in their own words the barriers they face to being fully integrated into the economic mainstream of Nova Scotia. If progress is to be made, we must heed their words in the creation of strategies that will lead us toward greater equality.

RECOMMENDATIONS

In light of the study findings, which are consistent with a broad range of existing reports documenting the economically disadvantaged circumstances of women with disabilities, the Task Force on the Economic Integration of Women with Disabilities in Nova Scotia makes the following recommendations:

General Recommendations

1. That the Nova Scotia Advisory Council on the Status of Women and the Disabled Persons Commission, in conjunction with the Task Force, give high priority to joint initiatives aimed at the following three purposes:
   (a) to seek funding from the Department of the Secretary of State through the Disabled Persons Participation Programme to organize a one-day workshop for women with disabilities in Nova Scotia. The specific aims of the workshop would be: (i) to enable women with disabilities to become aware of the findings of this study and to consider appropriate strategy development; and (ii) to explore interest in and possible funding sources for an on-going organization of women with disabilities in Nova Scotia to promote on-going self-help strategies and peer support.
   (b) to raise public awareness about the seriously disadvantaged position of women with disabilities in Nova Scotia.
   (c) to promote the development of a significant research proposal under the program of joint research funding recently announced by the Social Sciences and Humanities Research Council and the Status of Disabled Persons Secretariat, Department of the Secretary of State. This proposal should engage the academic community, in partnership with the women's and disabled communities, in conducting significant on-going research into the specific concerns of women with disabilities in Nova Scotia.
2. That the Government of Nova Scotia in partnership with the Government of Canada assure the provision of publicly funded, universally accessible, high quality child care; and that such accessibility specifically include physical accessibility for parents and children with mobility and other physical disabilities.

3. That the Government of Nova Scotia give high priority to revising the Nova Scotia Building Code in order to ensure effective enforcement of the barrier-free design provisions of the code.
4. That the Nova Scotia Department of Transportation and Communications establish an incentive funding initiative with the existing Transport Canada funding under the National Strategy for the Integration of Persons with Disabilities. Such funding would increase the utilization of this program and promote the establishment of accessible services in small town and rural Nova Scotia.

Education and Training Recommendations

5. That universities, community colleges and other post-secondary educational institutions redress current and historical discrimination by instituting affirmative action policies and programmes designed to fully integrate women with disabilities into their educational offerings. Such affirmative action should include provision for educating professors, instructors, administrators and other officials concerning the systemic barriers faced by students with disabilities, and their needs for educational accommodations (such as oral examinations, extended deadlines, and exams in alternate forms or oral sign language).
6. That the Nova Scotia Department of Education actively promote the hiring of more teachers with disabilities in the regular school system, community colleges and universities to enable students with disabilities to identify with positive role models.
7. That the Nova Scotia Department of Education develop training and sensitivity modules for administrators, teachers and guidance councillors in the public school system in the province in order to eliminate pervasive stereotyping and other misconceptions contributing to lowered academic achievement expectations for women with disabilities.
8. That the Nova Scotia Department of Education in partnership with local school boards give high priority to making facilities housing publicly funded educational programs physically accessible to students with mobility and other physical disabilities.
9. That VRDP (Vocational Rehabilitation for Disabled Persons) provide women with disabilities an opportunity for full participation in decision-making about their

educational and support services needs. Students must have significant input into the selection of the support services and accessibility devices they need in order to perform well in their studies. This policy would replace basic standardized assessments of needs based upon categories of disability.

10. That VRDP actively promote the involvement of women with disabilities; and that the Nova Scotia Department of Community Services develop and distribute widely an easily readable plain language brochure to give direction to persons wishing to apply for assistance under this program.
11. It is recommended that technical aids and support services issued for the purpose of training under VRDP, be made available on a permanent basis upon completion of the training. This would particularly benefit women who typically enter the VRDP program with few or no financial resources at their disposal.
12. That funding under VRDP be extended to include programs and support services at the post-graduate educational level.
13. That, in partnership with the deaf community and former students, the Atlantic Provinces Special Education Authority - Resource Centre for the Hearing Impaired undertake evaluation and appropriate revision of its programme of education, especially with regards to the use of sign language during instruction, the implementation of a standardized grading system, the use of deaf teachers as role models, and any other areas of concern to the stakeholders.
14. That the Nova Scotia Department of Labour, in consultation with the Disabled Persons Commission, sponsor educational opportunities designed to sensitize members of the Provincial Labour Force Development Board to the barriers faced by women with disabilities, and to familiarize them with services available under VRDP and other sources.
15. That Canada Employment Centre training programs extend eligibility to women with disabilities, whether or not they are in receipt of Unemployment Insurance benefits.

Employment Recommendations

16. That the Government of Nova Scotia immediately give priority to employment equity through affirmative action to addressing the barriers to employment and upward mobility for employees who are women with disabilities; and that the definition of

clear equity goals, strategies and timetables take due account of the combined negative effects of gender and disability on employment and promotion opportunities for women with disabilities.

17. That the federal government review the criteria of its Employment Equity Program with regard to the inclusion of workplaces with less than 100 employees, and with particular regard to rural areas.
18. That the Government of Nova Scotia develop a clear policy of accommodation to the requirements of persons with disabilities in accessing employment opportunities administered through the Nova Scotia Civil Service Commission. Such accommodation should include interpreter services and attendant services, as well as day care for women with disabilities who are restricted from accessing interviews.
19. That Canada Employment Centres declare a high priority on job training and job placement opportunities for women with disabilities. Job training programmes should contain a significant module addressing the prevalent low self-esteem among women with disabilities resulting from the long-standing discrimination they have experienced; and job placement efforts should address directly the long-standing and significant systemic barriers to the participation of disabled women in the labour force.
20. That Canada Employment Centres make job postings accessible in alternate media and ensure that all CEC funded outreach projects and programs are located in facilities accessible to persons with mobility and other physical disabilities.
21. That the Nova Scotia Department of Supply and Services undertake an audit to determine the accessibility of provincial government facilities; and that the Department of Supply and Services review and adopt federal government policy relating to the accessibility of owned and leased office space.
22. That Canada Employment Centres provide support for accommodation to those individuals with disabilities who are applying for employment through CEC programs. This would include such items as attendant services and interpreter services, and importantly, day care services.
23. That Canada Employment Centres, in partnership with consumer-based community organizations, develop and implement a program of sensitivity and awareness training for employers, the media, the community, women with disabilities, etc. This programme should highlight the abilities of women with disabilities in the workforce.

24. That all technical devices purchased through Employment and Immigration Canada grants for accommodation purposes in the workplace be on permanent loan to the woman with a disability to ensure real freedom in employment opportunities.

Income Support Recommendations

25. That the Province of Nova Scotia eliminate the two-tier social assistance system in Nova Scotia and replace it with a single provincially administered system which recognizes the unique costs of being a woman and having a disability.

26. That, in moving towards a provincially administered system, any disincentives to employment which may impose a barrier to women with disabilities should be eliminated (for example, loss of prescription drug coverage, attendant services, etc. upon gaining employment).

Information Recommendation

27. That the Nova Scotia Advisory Council on the Status of Women, in partnership with the Disabled Persons Commission, compile, maintain and disseminate information on all programs and services available to women with disabilities. Such information should be available in alternate formats as required.

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APPENDIX A: INFORMATION GATHERING

Instructions to be Read to the Women

The Task Force on Economic Integration of Women with Disabilities is concerned about the high percentage of women with disabilities not being able to work due to the barriers they face. The Task Force consists of representation from the Nova Scotia Advisory Council on the Status of Women, the Nova Scotia Disabled Persons Commission, Nova Scotia League of Equal Opportunities (a provincial consumers' organization for disabled people), Employment and Immigration Canada, and the Coordinating Council on Deafness of Nova Scotia (an advocacy group for deaf and hard of hearing people).

For this study, we are interested in understanding the barriers which prevent women with disabilities from fully participating in the work force. We are especially interested in any feedback and comments about your experiences and points of view both as a woman and as a woman with a disability.

Each respondent will be assigned a code number, thus no names will be mentioned anywhere on the questionnaire. Your name will not be used or associated with the results of the study. As well, any identifying detail will be masked to protect your privacy. More importantly, please be aware that any information will be accessed by only the Project Coordinator and her assistant. Questionnaires will be destroyed upon the completion of the Task Force Report. In addition, the information will not be shared or seen by any social worker or community services official or any other person.

During the interview, I will be asking you some questions about your background, your experiences with the needs of women with disabilities, your experiences with employment and employment agencies, barriers you experience due to your disability in terms of employment, your goals and hopes, and your suggestions or ideas about what should be done. If there are any questions during the interview you would prefer not to answer, please let me know and we will ignore them.

Individual Questionnaire

A. DEMOGRAPHIC INFORMATION

1. In what year were you born? ____________

2. What is your marital status?

   a. married/living with a partner

   b. single

   c. separated/divorced

   d. widowed

   e. other; please explain ____________

3. a. Do you have any children? yes no

   b. [If yes], how many children do you have? ____________

4. a. What is your main disability?

   b. At what age did your disability begin? ____________

   c. Do you have any other disabilities? yes no

   d. [If yes], please explain

5. What is your present living arrangement?

   a. renting a boarding room (room and board; hotel)

   b. renting a house, apartment, mobile home, or condo

   c. owning a house, apartment, mobile home or condo

d. living in a group home with other residents

e. living in a nursing home or home for special care

f. paying no rent

g. other; please explain ______________________________

6. With whom are you living?

a. living on my own

b. parents/relatives

c. my personal care worker/attendant

d. my friend, roommate

e. my husband/boyfriend/partner

f. my husband/partner with child(ren)

g. my child(ren)

h. living in a home care institution

i. living with group home residents

j. other; please explain ______________________________

B. EDUCATIONAL BACKGROUND

7. What was the highest grade you completed?

a. Elementary (Grade) School P 1 2 3 4 5 6

b. Junior High School 7 8 9

c. Senior High School 10 11 12 13

d. Non-graded system 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15
(academic level)
(School for the Deaf, etc)

e. G.E.D. - Grade 12 1 2 3 4 5 6 7 8 9

f. no education

8\. a. Do you have any technical, vocational or university training?

yes no

b. [If yes], how many years of technical, vocational or university do you have?

Technical/Vocational 1 2 3 4 5 6+

University/College 1 2 3 4 5 6+

c. What was your training/educational program? Where were the courses taken?

Program	Institution	Were you Disabled?	Was it Accessible?	Satisfaction Rating
		y n	y n n/a	1 2 3 4 5 6
		y n	y n n/a	1 2 3 4 5 6
		y n	y n n/a	1 2 3 4 5 6
		y n	y n n/a	1 2 3 4 5 6
		y n	y n n/a	1 2 3 4 5 6
		y n	y n n/a	1 2 3 4 5 6
		y n	y n n/a	1 2 3 4 5 6

1\. strongly satisfied 2. somewhat satisfied 3. no opinion
4\. somewhat dissatisfied 5. strongly dissatisfied 6. no answer/not applicable

d. As a woman with a disability, please describe your experiences with the programs you took.

9. A. Have you taken (or tried to take) any of the following:

	Were you Disabled?	Was it Accessible?	Satisfaction Rating
a) upgrading	y n	y n n/a	1 2 3 4 5 6
b) self-improvement courses	y n	y n n/a	1 2 3 4 5 6
c) career courses	y n	y n n/a	1 2 3 4 5 6
d) job training	y n	y n n/a	1 2 3 4 5 6

1. strongly satisfied
2. somewhat satisfied
3. no opinion
4. somewhat dissatisfied
5. strongly dissatisfied
6. no answer/not applicable

B. As a woman with a disability, please explain any successes or difficulties you may have had with these programs.

10. a. Are you aware of any educational/training/sponsorship programs for persons with disabilities?

yes no

b. If yes, what programs are you aware of?

Program	Sponsor	Did you Participate?	Satisfaction Rating
		y n	1 2 3 4 5 6
		y n	1 2 3 4 5 6
		y n	1 2 3 4 5 6
		y n	1 2 3 4 5 6

1. strongly satisfied
2. somewhat satisfied
3. no opinion
4. somewhat dissatisfied
5. strongly dissatisfied
6. no answer/not applicable

11. As a woman with a disability, what changes or improvements would you suggest for these educational/sponsorship programs?

12. a. Do you feel that being a woman with a disability has affected your level of education?

yes no

b. Please explain your answer.

C. WORKING EXPERIENCES

13. What is your present employment status? Please check as many as apply to you.

a. homemaker

b. working part time

c. working full time

d. self-employed; starting own business

e. working in a sheltered workshop

f. taking upgrading/GED courses

g. student at university/community cllege

h. unemployed; looking for work

i. not seeking work

j. other; please explain ______________________________

FOR THOSE WORKING FULL- OR PART-TIME, GO TO QUESTION 17

FOR THOSE NOT WORKING BUT SEEKING WORK, GO TO QUESTION 25

FOR THOSE NOT SEEKING WORK, GO TO QUESTION 28

D. PAST WORK EXPERIENCES

14. a. Have you had paid employment in the past?

yes no

b. If yes, what type of work did you do? For how long?

Type of work	Employer	How Long?	Were you disabled then?
			Y N
			Y N
			Y N
			Y N

15.a. Have you ever lost your job due to being a woman?

yes no n/a

b. [If yes] Please explain your experiences

16. a. Have you ever lost your job due to having a disability?

yes no n/a

b. [If yes], please explain your experiences.

E. FOR THOSE WORKING FULL OR PART TIME

17. a. What is your occupation (job title)? ________________

b. Are you working full or part time ? ________________

18. A. How satisfied are you with your job?

a. strongly satisfied

b. satisfied

c. no opinion

d. dissatisfied

e. strongly dissatisfied

f. no answer/ not applicable

B. As a woman with a disability, please explain your level of satisfaction with your work.

19. A. Is your workplace accessible for you as a woman with a disability?

a. strongly agree

b. somewhat agree

c. no opinion

d. somewhat disagree

e. strongly disagree

f. no answer/ not applicable

B. As a woman with a disability, please explain your opinion and identify your workplace needs.

20. A. As a woman with a disability, are you satisfied with the income you are earning?

a. strongly satisfied

b. satisfied

c. no opinion

d. dissatisfied

e. strongly dissatisfied

f. no answer/ not applicable

B. As a woman with a disability, please explain your level of satisfaction with your income.

21. A. How positive are your co workers' attitudes towards you as a woman with a disability?

a. all workers positive

b. most positive; few not

c. half positive; half not positive

d. few positive; most not

e. no one positive

f. no opinion

g. no answer/ not applicable

B. As a woman with a disability, please explain your above answer regarding your co-workers' attitudes.

22. A. How positive is your supervisor' attitude towards you as a woman with a disability?

a. strongly positive

b. somewhat positive

c. no opinion

d. somewhat not positive

e. strongly not positive

f. no answer/ not applicable

B. As a woman with a disability, please explain your above answer regarding your supervisor's attitudes.

23. a. Have you tried to look for another job?

yes no

b. [If yes], as a woman with a disability, please describe your experiences.

c. [If no], as a woman with a disability, please describe your reasons for not looking for another job.

24. a. Have you tried to get your employer to improve the level accessibility in your workplace?

yes no

b. [If yes], as a woman with a disability, please explain your experiences.

F. FOR THOSE LOOKING FOR WORK

25. a. How long have you been looking for work ? ______________

b. As a woman with a disability, please explain your background.

26. a. Have you received help in looking for work?

yes no

b. [If yes], please explain.

27. a. As a woman with a disability, have you had any experiences with employment agencies?

yes no n/a

b. [If yes], please explain your experiences with employment services and agencies.

G. FOR THOSE NOT SEEKING WORK

28. If you are presently not seeking work, please indicate as many of the following reasons for not looking for work as apply to you:

a. severity of my disability; health problems; no energy

b. benefits pay better than hourly wages

c. I am worried about losing my benefits if I go to work

d. my children need me for care

e. day care/babysitting too expensive

f. I do not have any employable skills

g. I do not have enough education/training

h. employers will not make the workplace accessible

i. there is no accessible transportation in my area

j. my car is not fitted; too expensive

k. no one will drive me to work

l. no job sharing or part time work

m. no work which I could do at home

n. there is no suitable work for me in this area

o. no one would hire me

p. employers will only give me repetitious chores

q. I am a full time student

r. other; please explain ______________________________

29 a. Have you tried to get off your social assistance to work?

yes no

b. [If yes], as a woman with a disability, please explain your experiences.

30 a. Would you like to enter or re-enter the work force?

yes no

b. As a woman with a disability, please explain your answer.

31. I am going to name a few things which some women may feel they would need in order to obtain employment. I would like you to tell me how important they would be for you, on a scale from 1 to 5, where...

"1" means "not at all important"

"5" means "very important"

____ a. Go back to school, but with financial support for my living expenses for myself (my children, if any)

____ b. Enough money for babysitting/day care expenses so I can work and support myself (and my family, if any)

____ c. Enough money for medical expenses so I can work and support myself (and my family, if any)

____ d. Enough money for my personal care worker so I can work and support myself (and my family, if any)

____ e. Need confidence and overcome my low self esteem to try again

____ f. I need counselling to deal with abuse

____ g. I need counselling to deal with my personal problems

____ h. I need career counselling

____ i. I need devices (e.g., hearing aid, braille equipment, computer, TDD, etc)

____ j. I need a support worker

____ k. Workplace should be accessible (bathroom, desk, ramp, etc)

____ l. I need an interpreter for my job interview in order to be hired

____ m. I need an interpreter for upgrading/job training

____ n. I prefer to work for the employer at home

____ o. I prefer to job share with another person, not working full-time

____ p. I need upgrading/literacy to improve my English. Am embarrassed by my English.

____ q. Others; please explain ______________________________

32. As a woman with a disability, what would you like to learn to make yourself more employable?

33. A. Have you had any career counselling?

yes no n/a

B. [If yes], as a woman with a disability, how satisfied were you with the counselling you received?

a. very satisfied

b. somewhat satisfied

c. no opinion

d. somewhat dissatisfied

e. very dissatisfied

f. no answer, not applicable

C. As a woman with a disability, please explain your level of satisfaction with the counselling.

H. INCOME

34. Do you receive income from any of the following sources?

a. husband, boyfriend, partner

b. parents, relatives

c. part time work

d. full time work

e. self employment (babysitting, crafts, etc)

f. alimony

g. child support from my ex-husband

h. municipal social assistance

i. provincial social assistance (family benefits)

j. disability insurance

k. Canada Disability Pension/Guaranteed Income Supplement

l. workers' compensation

m. unemployment insurance

n. other; please explain

35. What is your monthly income AFTER taxes and deductions?

a. $0 - 499
b. $500 - 999
c. $1000 - 1499
d. $1500 - 1999
e. $2000 - 2499
f. $2500 - 2999
g. $3000 or more

36. A. As a woman with a disability, how satisfied are you with your income level?

a. strongly agree
b. somewhat agree
c. no opinion
d. somewhat disagree
e. strongly disagree
f. no answer

B. As a woman with a disability, please explain your answer.

37. What particular financial needs do you have as a woman with a disability?

a. technical aids (TDD, CC decoder, Braille machine, computer, etc), ramps. bathroom, etc

b. pay for my personal care worker

c. save money to take educational courses

d. transportation

e. day care

f. counselling

g. children's extracurricular activities

h. bills, expenses

i. others; please explain

38. Is there anything else you would like to add or share?

Thank you for participating in the study. Your answers and comments will be helpful for improving the situation of women with disabilities in the work force.

For Halifax and Cape Breton participants only:

We will be conducting discussion groups on this same topic within a few days. We are wondering if you would be interested in participating in this second phase of the study. The discussion group should take approximately two hours.

Focus Group Introduction

1. The Project

   a. Explanation of research study

   b. Task Force membership

   c. Statistics from the HALS, (71 percent of women with disabilities not working)

2. The Focus Group

   a. Purpose

   b. Goals

   c. Objectives

3. Focus Group Rules

   a. No interruptions please; one person should speak at a time

   b. Respect for every one's views, etc.

   c. Each participant will have a fair opportunity to present her views and concerns.

   d. No names will be mentioned anywhere in the report; however, quotes may be used. Any information will be carefully presented to avoid identification of any participant

4. Focus Group Participants

   a. basic background/experience of each participant

Focus Group Questions

1. As women with disabilities, what experiences have you had with the:

   existing educational system

   vocational schools

   community colleges

   universities

   business/computer programs

   continuing education

   Were you satisfied with them? Please explain.

2. Have you taken any skills training programs, any life skills, assertiveness training, time management, management skills,leadership training? Please explain your experiences. Are there other courses/programs you would like to take? Did they address your needs as women with disabilities? Please explain your experiences as women with disabilities.

3. What are your experiences with the existing employment agencies? What improvements and changes are needed in these services? Did they meet your needs as women with disabilities?

4. If you are presently working, what type of working conditions have made this possible, if any? For example, job sharing, job shuffling, working out of your home, etc.? As a women with a disability, what kinds of working conditions would you like to have? What things are needed?

5. Have you ever had to leave a job because of lack of accessibility in the workplace? What would have made it possible for you to stay at the job?

6. In your opinion, what are the main barriers a woman and/ or a woman with a disability face in relation to the workforce? Please explain.

7. Have you ever been placed in a "stereotyped" occupation designed for a certain type of disability? Please explain.

8. What are your experiences and opinions about the existing system which provides social assistance or other benefits? Are the policies helpful or not helpful in relation to your participation in the work force? Please explain.

9. Do you have any solutions, suggestions, recommendations for overcoming barriers to participation in the workforce? What effects would they have on women with disabilities?

10. What views do you have on employment equity in federal, provincial and private sectors? Please explain.

11. Have you ever been involved with groups dealing with people with disabilities? or with a specific disability? Did they address your concerns as a woman with a disability? Please explain.

APPENDIX B: PROGRAMS/RESOURCES OF WHICH RESPONDENTS WERE AWARE

Adult Training and Vocational Centre (Upgrading)
Atlantic Centre for Disabled Students
Atlantic Provinces Special Education Authority
Atlantic Technological and Vocational Centre (Amherst)
Business Development Centre
Centre For Adapted Computer Education - Dalhousie University
CEIC re-training
Dalhousie University
LEO Self-Improvement Program [no longer offered]
Literacy Programs
McKenzie College - Computer Training for the Visually Impaired
Recreation Council on Disability of Nova Scotia Recreation Program
Resource Centre for Visually Impaired Students (Dalhousie)
Vocational Rehabilitation for Disabled Persons (VDRP)
Work Activity Program - Dartmouth
Workers Compensation Board
WOW (Work-Orientation Workshop)

APPENDIX C: FACTORS IMPORTANT TO OBTAINING EMPLOYMENT

Thirty-two women who were not seeking employment rated each of 18 concerns from 1 (less important) to 5 (very important).

N = 5, (5.0) Severe disability

N = 6, (4.8) Need transportation

N = 7, (4.3) Need an interpreter for upgrading/job training

N = 30, (4.3) Go back to school, but with financial support for my living expenses for myself (my children, if any)

N = 28, (4.3) Need enough money for medical expenses so I can work and support myself (and my family, if any)

N = 24, (4.2) Need devices (hearing aid, braille equipment, computer, teletypewriter)

N = 6, (4.2) Need an interpreter for my job interview in order to be hired

N = 28, (3.6) Workplace should be accessible

N = 26, (3.5) Need career counselling

N = 18, (3.4) Need enough money for my personal care worker so I can work and support myself (and my family, if any)

N = 26, (3.3) Need confidence, need to overcome my low self-esteem to try again

N = 8, (3.1) Need enough money for babysitting/day care expenses so I can work and support myself (and my family, if any)

N = 19, (2.9) Need a support worker

N = 21, (2.8) Need upgrading/literacy to improve my English. Am embarrassed with my English

N = 27, (2.7) Prefer to work for the employer at home

N = 21, (2.6) Need counselling to deal with my personal problems

N = 26, (2.5) Prefer to job share with another person, not work full-time

N = 21, (2.4) Need counselling to deal with abuse

APPENDIX D: GLOSSARY

Disability: Prior to using the figures included in this handbook, it is important to acknowledge the operational definition of "disability" used by Statistics Canada in collecting this data. In the context of health experience, a disability is any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being.[1]

Mobility: Limited in ability to walk, move from room to room, carry an object for ten metres, or stand for long periods.[2]

Agility: Limited in ability to bend, dress or undress oneself, get in and out of bed, cut toenails, use fingers to grasp or handle objects, reach, or cut own food.[2]

Seeing: Limited in ability to read ordinary newsprint or to see someone from 4 metres, even when wearing glasses.[2]

Hearing: Limited ability to hear what is being said with one other person or two more persons, even when wearing a hearing aid.[2]

Speaking: Limited ability to speak and be understood.[2]

Other: Limited because of a learning disability, a mental health condition, a mental handicap, or because of labelling by others.[2]

Technical aid: For the purpose of this study, a technical aid will be defined as anything that persons with disabilities and/or health-related concerns can use to attain and maintain their independence and well-being.

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[1] World Health Organization (1980). International Classification of Impairments, Disabilities and Handicaps, p.143.

[2] Statistics Canada (1991). Health and Activity Limitation Survey Leisure and Lifestyles of Persons with Disabilities in Canada. Catalogue No. 82-615, p.C-2.