Work disability programs in Newfoundland & Labrador and New Brunswick:

Mapping eligibility criteria and identifying barriers for the employment of selected disability populations

Prepared by the
SafetyNet Centre for Occupational Health and Safety Research
Memorial University

June 2019

Research Team

Nominated Principal Investigator:
Stephen Bornstein, SafetyNet Centre for Occupational Health & Safety Research

Co-Principal Investigator:
Kathy Hawkins, InclusionNL: Employer Support Services, EmpowerNL

Co-Investigators:
Barbara Neis, SafetyNet Centre for Occupational Health & Safety Research
Rose Ricciardelli, Department of Sociology, Memorial University
Emily Christy, Coalition of Persons with Disabilities
Susan Tobin, Disability Policy Office

Researcher:
Aleksandra Stefanovic-Chafe, Community Health and Humanities, Memorial University

Table of Contents

List of Acronyms

ASD   Autism Spectrum Disorder

CMHO Children's Mental Health Ontario

DSP   Australian Disability Support Pension

LMAPD Labrador Labour Market Agreement for Persons with Disabilities

NB   New Brunswick

NBESS New Brunswick Employer Support Services

NL   Newfoundland and Labrador

ODSP Ontario Disability Support Program

OECD Organization for Economic Co-operation and Development

Abstract

This study explores and compares provincial work disability policies and maps relevant provincial programs in order to identify red flags for employment for people with disabilities. Specifically, work disability supports for people, and especially youth, who identify as having mental health issues and/or being diagnosed with autism, their experience in accessing support programs, and the challenges in successfully participating in the local labour market is examined in this research.

With a focus on two province, Newfoundland and Labrador and New Brunswick, the methodology of this study included: a scan of relevant peer-reviewed and gray literature on work disability policies at both the federal and provincial levels; interviews with selected government officials, community service providers, and other relevant stakeholders; as well as focus groups with people with lived experience. The main findings and the discussion are presented in this report.

Keywords: Newfoundland and Labrador, New Brunswick, work disability policy, mental health conditions, transition to work, autism

Introduction

Canadians with mental health conditions and autism have been facing significant issues connecting with and being retained in the labour market. While the national unemployment rate is approximately 7%, the unemployment rate of Canadian adults with mental illness ranges from 70-90%, depending on the severity of the disability (CMHA, 2014). According to Autism Speaks Canada, the unemployment rate for individuals with Autism Spectrum Disorder (ASD) is similarly over 80% (Autism Speaks, 2018). Without employment, people with mental health conditions and ASD disproportionately rely on public income support programs. However, many do not benefit from the existing social programs given the heterogenous, complex, and often episodic nature of mental health issues. Research shows that "some individuals may meet diagnostic criteria for a severe disorder without having significant impairments in functioning, while others with "mild" diagnoses suffer functional limitations that impede their ability to work" (Danziger et al., 2009). Relevant social policies and support programs, even when carefully crafted, do not always meet these distinctive needs, and have in the past created disincentives for engaging in a job search.

The purpose of this study is to better understand the accessibility to and eligibility for work disability programs in Newfoundland and Labrador (NL) and New Brunswick (NB), and to identify the barriers to labour market attachment for individuals with mental health conditions and ASD. The study is a follow-up to the research conducted on disability support service in NL from a cross-disability perspective which suggested more insight is needed for specific disabilities and related supports and services, in particular for mental health disabilities (SafetyNet, 2016).

Methodology

We conducted a literature review and a scan of relevant online documents on work disability policy for people with mental health issues and/or autism on a federal and provincial level. We also scanned relevant peer-reviewed and gray literature on work disability policies for Newfoundland and Labrador and New Brunswick. Selected government officials, community service providers, and other relevant stakeholders were invited to participate in key informant interviews. Individuals with lived experiences identifying as having a mental health condition or being diagnosed with ASD were invited to participate in a focus group session. Our partner organizations assisted in the recruitment process of key informants and focus group participants. All interviews and focus groups were audio-recorded. The data analysis and data collection were carried out simultaneously. A thematic analysis approach was used to identify main themes.

Ethics approval for the project was granted by Memorial University's *Interdisciplinary Committee on Ethics in Human Research* (ICEHR).

Newfoundland & Labrador

The main qualitative part of the project was conducted in NL. We completed eight key informant interviews with government decision makers, service providers, and disability advocates. Interviews were approximately 60 minutes in length and were conducted with participants from different parts of the province. We organized two focus groups with individuals with lived experiences who are either diagnosed with or self-disclose as having a mental health condition or ASD. Four people attended the first focus group, and two people attended the second. Several individuals who had agreed to attend focus groups did not feel well enough to leave their homes on the designated days. This reaffirmed the burdens and complexities of daily living with episodic and unpredictable mental health issues.

New Brunswick

Our goal in this study was to conduct focus groups and key informant interviews in both provinces simultaneously. With the help of our community partners, we attempted to engage the NB collaborators from the Premier's Council on the Status of Disabled Persons to assist us in recruiting a researcher for NB portion of the study. We also contacted NB Employer Support Services (NBESS), as one of the key organizations to participate in this project. Finally, we connected to a researcher from the Université de Moncton.

While every effort was made to recruit a local, bi-lingual researcher for the project, we did not find a suitable person who could commit to the project and assist with the qualitative part of our research. For the data on NB for this study, we relied solely on the government documents, gray, and peer-reviewed literature.

Literature Review

Canadian disability policies have been described as "fragmented" and "a complex web of legislation, regulations and programs, crossing many departments within government and multiple layers of jurisdiction" (Jongbloed, 1998; McColl, Jaiswal et.al, 2017). Jongbloed (1998) further elaborates on disability policies as policies developed incrementally to deal with separate demands; being part of already fragmented, general welfare-state; and not defining disability in a unified way. Some of these policies directly or indirectly affect labour market participation of people with disabilities, and they may include income support policies, school to work transition supports, and wage subsidy, but also housing, transportation, or prescription drug policies. They each also carry with them certain conditions and criteria that determine how they apply to each person individually. Some policies are means-tested, and some are based on the cause of the disability; some offer support for a long period of time while others are limited, and finally, only workers' compensation allows for partial disability financial support, while others financially support only total disability (Disability and Work in Canada Steering Committee, 2018). These complexities often generate unintended outcomes. There is a concern that "because of the way earnings and income-tested disability supports provided by provincial and territorial governments are treated, the combined loss of income-tested benefits and disability supports outweighs the earnings obtained from work and for some persons with

disabilities acts as a strong disincentive to find or return to work" (House of Commons, 2012). In other words, employment is discouraged before even attempted.

This can be particularly challenging for people identifying as having a mental health conditions and/or diagnosed with ASD. A study in the United Kingdom, *"Only Making Thigs Worse: A qualitative Study of the Impact of Wrongly Removing Disability Benefits from People with Mental Illness",* explores some of the challenges that individuals with mental health issues face when it comes to not having easy access to disability support services, such as: living in poverty; added stress of assessments, rejections, and appeals; challenges of self-identifying; and anger about being mistrusted (Shefer et al.,2016). The study suggests that the challenges can be addressed if policy makers considered particular difficulties for persons with mental health illness and differences in the nature of disabilities, as well as the detrimental impact of the constant re-assessment cycle. Another study notes a trend observed in most member countries of the Organization for Co-operation and Economic Development (OECD), namely an increase in the proportion of people with mental illness claiming disability benefits, rising from about 15-25% in the mid 1990s to 30-50% in 2009/210. Similarly, in the United States people with psychiatric impairments constitute the largest and most rapidly growing subgroup of Social Security disability beneficiaries (Drake, Skinner, et al.,2009). In the past, according to evidence, mental health was never in the mainstream of disability policy in the United States. Disability policies were designed for people with chronic and permanent impairments or lethal illnesses, not for those with episodic, fluctuating, and gradually improving illnesses that could respond well to treatment (Drake, et al., 2019). However, the policy makers have been increasingly more interested in interventions and programs to prevent unemployment with persons with mental illness, especially supported employment program and vocational rehabilitation programs. But as Blyler (2017) suggests in an editorial *The Application and Importance of Disability Policy Research to the Mental Health Field:*

> the ability of individuals with mental health challenges and other disabilities to (a) access needed services, supports, and resources; (b) challenge stigma and discrimination; (c) integrate fully into society; and (d) "be successful and satisfied in the living, working, learning, and social environments of their choice" does not depend solely on the attention and skill of their rehabilitation counselors. Rather, functioning and disability are a complex interaction between the health condition and personal factors of the individual and the contextual factors of the environment. Policies can facilitate or undercut positive societal attitudes, opportunities, and the availability and effectiveness of resources relevant to the recovery and well-being of individuals with psychiatric disabilities. The work of rehabilitation professionals, therefore, is intimately entwined with disability policy.

After reviewing existing research on work disability policies and psychiatric rehabilitation, Blyler argues that, while there are overlaps with other types of disabilities and chronic health conditions, the nature of mental illness is unique and specific, and as such it requires targeted disability policy research.

A study comparing the Australian Disability Support Pension (DSP) and Ontario Disability Support Program (ODSP) using a grounded theory approach, focuses on the policy makers'

consideration of mental illnesses when designing disability policy (McAllister, 2017). The study recognizes that "the Australian DSP has been lauded by the Organisation for Economic Co-operation and Development (OECD) for their work capacity approach and specifically incorporating the fluctuating nature of mental illnesses into the DSP assessment process, making it a "best practice" case in disability income support research. However, the research findings concluded that Australian DSP is not in fact better at incorporating mental illnesses into their policy design compared to the ODSP. The research findings also point towards five challenges and eligibility criteria related to designing disability income support with regards to mental illnesses: validating duration, proving an illness, (un)differentiating mental illnesses from physical disabilities and addiction, managing mental illnesses, and separating the illness from the person. The study also recognizes that there is currently very little research done in the area of mental illness and disability policy design.

In addition to the type of disability, there are unique challenges experienced by specific population groups who identify as having a disability. As youth with disabilities prepare to leave school and transition into adulthood, they often become "lost in transition" as they move away from their "established and trusted circle of care providers to another, often completely different treatment program and set of health care providers (Rayar, 2015). The Children's Mental Health Ontario (CMHO) in its position paper *Easing Transitions for Children, Youth, and Emerging Adults*, recognizes that because of differences in mandates, many young people between the ages of 16 and 25 with mild to moderate mental health problems are not eligible for services in the adult community-based health system, which serves those with severe conditions. Another study describes young persons with autism reaching the age of 18 as "disappearing into a black hole of services and supports in adulthood" (Shepherd and Waddell, 2015). While much of this research describes health related services, this continuity of care is the first, necessary step towards engaging people with disabilities to strive for social and economic independence. Several studies have focused on the issues of employment and employability for adults with ASD (Statistics Canada, 2006; Scott et Al., 2015). Not surprisingly, studies of ASD in Atlantic Canada, and in NL and NB, are less numerous. A recent academic study has documented the high prevalence and incidence rates of ASD in Newfoundland and Labrador, and the NL Autism Society has produced a needs assessment (NL Autism Society, 2015) as well as a fact sheet on provincial services that documents the dearth of services for adults with ASD as well as the total absence of specialized services for anyone with ASD whose IQ exceeds 70. A similar gap exists in the literature on employment challenges for people with mental health disabilities in NL, NB, and Atlantic Canada more broadly. In 2017, the New Brunswick Common Front for Social Justice Inc. published *"Disability and Deep Poverty in New Brunswick"*, a report that outlines the conditions of living of individuals with severe disability in the province, including those with mental health and cognitive disabilities, and recommends two main actions to improve the lives of people with disabilities: introduction of a New Brunswick Assured Income for the Disabled (NBAID) and appropriate rent subsidies.

Overview of the Provincial Work Disability Policies

In Canada, provincial and territorial disability benefits offer social assistance, worker's compensation, and additional resources through designated provincial departments.

The provinces and territories have employed new and innovative strategies to attempt reforming and improving the income support system and work disability policies and programs for persons with disabilities. Some strategies are all-encompassing, e.g. Poverty Reduction Strategies, while others are targeted and focused, e.g. Accessibility Legislation. In addition to the government policies and programs, local community agencies and organizations provide numerous direct services to people with disabilities to assist them in achieving social and economic independence. In this section, we look at the work disability policies and programs of two Canadian provinces, NL and NB (see Table 1 for a list of characteristics by province).

Table 1: Provincial Characteristics		
	Newfoundland and Labrador	**New Brunswick**
Population (2018)	525,355	770,633
Prevalence of disability (2012)	14.1%	16.4%
Unemployment rate (May 2019)	12.4%	7.2%
Total Social Assistance Income for Single Persons with a Disability (2015)	$11,188	$9,528
Market Basket Measure (MBM) Thresholds (2015) – persons not in economic families	$19,014 (St. John's) $19,876 (rural areas)	$18,275 (St. John) $19,235 (rural areas)

Newfoundland and Labrador:
Employment-related government programs and initiatives

In Newfoundland and Labrador, the Department of Advanced Education and Skills, the Department of Health and Community Services, The Department of Children, Seniors and Social Development, and the Human Resource Secretariat all provide programs and services to assist persons with disabilities. The NL Government also set up the Disability Policy Office within Children, Seniors and Social Development, to ensure the development of policies that include people with disabilities and that are barrier free. In addition, the provincial government also partners with community agencies to deliver specific programs and services. Interventions to improve the employability of persons with disabilities are provided in response to individual need. Accordingly, assistance with employment preparation and attachment to the workforce, or to address vocational crisis, tends to vary in intensity and duration.

The Department of Advanced Education and Skills, with funding under the Canada-Newfoundland and Labrador Labour Market Agreement for Persons with Disabilities (LMAPD), provides a range of services and programs to help persons with disabilities acquire the skills, experience, and supports necessary to successfully prepare for, obtain, and maintain employment. The LMAPD provides cost-shared funding for a range of provincially-delivered programs and services that enhance the labour market participation of working-age adults with disabilities.

The Department of Advanced Education and Skills provides four types of programs:

- Training Services and Employment Supports
- Supported Employment
- Disability Supports to Post-Secondary Institutions
- Grants to Community Partners

The Department of Advanced Education and Skills also delivers income support to all eligible clients. This is particularly important for persons with disabilities "as the single largest component of the incomes of working-age poor people with disabilities is social assistance" (Crawford, 2013). The Department provides financial benefits and other services to eligible low-income people to assist in meeting daily living expenses. Some basic benefits include family and individual benefits to assist with expenses such as food, clothing, personal care, shelter, household maintenance, and utilities. Additional benefits may include medical transportation, child care, eye exams, and prescription glasses.

Health and Community Services

The Department of Health and Community Services provides funding to a variety of community agencies to support individuals with disabilities and to regional health authorities to support persons accessing addictions services. Rehabilitative services are provided to help individuals adapt to a disability, maintain their health, and address barriers to meaningful participation in society. Home support services, personal care, residential options, prescription drugs, and medical equipment and supplies are funded through this department.

The Human Resource Secretariat

The Human Resource Secretariat delivers the Opening Doors Program which provides opportunities for individuals with disabilities to obtain employment within the provincial public service.

Opening Doors Program

The Opening Doors Program is an employment equity initiative of the Government of Newfoundland and Labrador. It is the foundation program of the Office of Employment Equity for Persons with Disabilities of the Human Resource Secretariat, out of which the Office's other services have emerged. The Opening Doors Program involves full-time, permanent Opening Doors positions throughout the provincial public service in various locations of the province. The Opening Doors Program positions have been designated for persons with disabilities and may be filled only by members of this employment equity group who have been accepted for inclusion on the Office's client registry.

The Opening Doors Program recognizes that one of the major obstacles to employment for persons with disabilities is their lack of job experience. Therefore, much less emphasis is placed on experience when recruiting to fill Opening Doors positions. The positions are also protected from bumping by more senior employees so as to ensure they are not lost during periods of downsizing.

Opening Doors positions are filled based on merit. Those persons who have the education and experience requirements as identified in the competition poster/statement of qualifications are identified by the registry system and "screened into" the competition, i.e., they are referred to the hiring department for the interview process. The candidate who best meets the qualifications for the job and who demonstrates this in the interview process is then offered the position.

Disability Policy Office

The main purpose of the Disability Policy Office is to:

- promote the inclusion of people with disabilities in all aspects of society
- engage people with disabilities and advocates in developing ways to identify and remove barriers
- help government departments make sure their policies and programs do not exclude people with disabilities
- promote positive attitudes
- raise awareness of disability issues.

The Disability Policy Office works with all government departments and agencies to develop policies and programs that include people with disabilities and that are barrier free. This work is important to make sure everyone has the same opportunities.

The Disability Policy Office works with community organizations, businesses and other government groups to break down all sorts of barriers: in buildings, attitudes, and policies.

NL Poverty Reduction Strategy

The Newfoundland and Labrador government introduced a comprehensive Poverty Reduction Strategy in June 2006 – *Reducing Poverty: An Action Plan for Newfoundland and Labrador* – with an explicit goal of achieving the lowest poverty rate in the country by 2014. Beginning in 2007, a number of changes were made to the province's disability support services. Among other strategic directions, the government called for strengthening disability-related supports by increasing flexibility, improving access, and reducing financial costs associated with living with a disability. In 2014, the government issued a report on its poverty reduction strategy, describing some of the actions undertaken to meet the goals of the inclusion strategy. Income Support clients with disabilities who require supportive services receive a higher flat rate exemption to recognize the cost associated of working with a disability. This has been increased from $95 to $150 for single people and $190 to $250 for families. In 2013, about 180 of the 2,000 people who worked while receiving Income Support benefits were people with disabilities.

The government also provided support for ten adaptive technology internships annually with the Independent Living Resource Centre in St. John's, Carbonear, Grand Falls-Windsor, Corner Brook, and Happy Valley-Goose Bay per year. These internships help reduce barriers and enhance participants' skills in adaptive technology.

The Home Support Program provides subsidized services to more than 3,300 adults with disabilities and 4,000 seniors each year. The Special Assistance Program supports more than 11,000 individuals annually through the provision of subsidized medical supplies and equipment. In addition, the monthly personal allowance was increased by $25, bringing it to $150, benefiting approximately 10,000 individuals who either are paid a personal allowance or are permitted to retain the $150 from their income.

In 2007, the Department of Health and Community Services changed the Family Board and Lodging Supplement to allow adults with disabilities living with family members (child, parents, grandparents) to receive the same board and lodging supplement as those living with non-relatives. In 2012/13, almost 2,000 individuals benefited from this change.

Community-based agencies

A number of disability-specific agencies at the community level offer various pre-employment preparation services and supports, as well as wage subsidies for employers. These agencies, such as Autism Society, Empower, Choices for Youth, Thrive, Waypoints, Stella's Circle, Avalon Employment, and Channal, work directly with consumers to assist with their labour market attachment.

New Brunswick:
Employment-related government programs and initiatives

In New Brunswick, the following departments are administering programs and initiatives for persons with disabilities: Social Development; Post-Secondary Education, Training and Labour; Finance and Treasury Board; and Premier's Council on Disabilities.

Social Development

Social Development includes Disability Support Program and Housing Assistance for Persons with Disabilities.

As part of a Social Assistance Reform, New Brunswick government made changes to its Social Assistance Rates, and by April 2014, the rates were increased by seven percent. For a single person with a disability this would mean an increase to their monthly payments from $618 to $663. The province also made changes to its wage exemption policy. It retained the fixed wage exemption, but instead of reducing the benefits by $1 for every $1 earned, the government is allowing clients to keep 30 cents of every additional $1 earned. There are also additional shelter deductions for disabled clients, as well as new exemptions to the Household Income policy that include persons with disabilities.

In 2007, the political leadership in New Brunswick committed to a unique community-focused poverty reduction design process and, in 2009, released the five-year *Overcoming Poverty Together: The New Brunswick Economic and Social Inclusion Plan 2009-14*. In May 2014, the province announced the renewal of its plan to reduce poverty. *Overcoming Poverty Together* is based on four pillars:

1. Community empowerment – addresses community development, communication and networking, and volunteerism
2. Learning – focuses on child and youth education and adult education, training and preparation for work
3. Economic inclusion – addresses participation in the labour market and business activity
4. Social inclusion – focuses on food security and healthy food avail- ability, housing and transportation.

Post-Secondary Education, Training, and Labour

The Training and Employment Support Services (TESS) component of the Employment Services Program provides supports to case managed New-Brunswickers who have a permanent physical, intellectual, psychiatric, cognitive, or sensory disability to participate in training and/or employment opportunities.

Finance and Treasury Board

Equal Employment Opportunity Programs in NB is the equivalent of the Opening Doors program in NL, with the objective to provide a more balanced representation of qualified designated group persons in the public service by providing them with meaningful employment opportunities. However, while NL programs is designated for persons with disabilities, the NB program also included Aboriginal persons and members of visible minorities.

In the *Employment Action Plan for Persons with a Disability in New Brunswick 2012-2017*, the government recognizes that progress on addressing access to transportation and reform of social assistance policies and programs are crucial aspects of an Employment Action Plan, and it has made clear commitments to, among other things, introduce a new and distinct income program for persons with disabilities (as

Premier's Council on Disabilities

Premiers Council on Disabilities has the same mandate as the Disability Policy Office in NL.

Qualitative Research - Main Findings

The qualitative research part of the study involved key informant interviews with government policy makers, community agencies with employment supports for persons with disabilities, and more specifically persons with mental health issues and ASD, and disability advocates. It also involved focus groups with people with lived experience. The main themes we identified based on the data collected through our qualitative research are described below.

Employment isolated from "survival" issues

People with severe mental illnesses may be supported by targeted employment programs and supports, such as vocational rehabilitation, supported employment program, Individuals Placement and Support (IPS), or Assertive Community Treatment (ACT). Individuals are offered streamlined services to help them find employment or re-integrate into the labour market. When it comes to self-disclosed mental health issues or mental health issues that are episodic or not as debilitating, according to the study participants, there are no programs or services specifically designed to assist with their employment related issues. This is particularly true for youth and emerging adults with mental health issues. According to most key informants, these population groups are encouraged to avail of employment support services which are open to all members of the general public. While there are numerous accessible and inclusive employment centres across the province, many of these service providers are not trained or adequately equipped with resources to successfully address employment for individuals with mental health issues. As one key informant points out:

> "as an employment counsellor, when faced with a number of complex issues, employment frequently becomes secondary to the "survival" issues that stem from mental health conditions, such as homelessness, addiction, school dropout, poverty, and inability to access prescription drugs."

As a result, survival issues and employment are continuously addressed as two isolated problems, and the outcome is prolonged dependence on income support programs. According to the study participants, this is particularly common with young adults who are transitioning from childhood to adult services, have no self-management skills, and often feel lost within the system.

Information sharing challenges

Information sharing is one of the main challenges when it comes to assisting individuals with mental health issues or ASD. The study shows that most agencies and departments place great value on collaboration and shared responsibility. Most key informants agree that having established lines of communication with other relevant professionals in the field and providing services through established interdisciplinary groups is key to successfully providing necessary supports. However, there are significant challenges in sharing information across different teams and service providers due to existing privacy policies, and ethical and legal rights of individual consumers, especially those who identify as having mental health conditions, but may not feel comfortable disclosing their condition to everyone. Study participants found that it was perhaps counterintuitive to separate services and departments within the government for this particular population and the supports they require. The separation of departments, according to some key informants, created disjointed services and too much unnecessary work.

Outcome measurements across the agencies and service providers

Outcome measurement is particularly challenging for service providers who are sometimes caught between meeting the required outcomes of the program to secure continuous funding and ensuring meaningful and appropriate support even if it does not fit the evaluation form. One key informant said that the outcomes they measure need to be focused on individual's growth and potential, which current outcome requirements do not reflect. Considering unique and complex needs of those with mental health conditions and ASD, there is a real need to review and reassess current outcomes measurements to better align them with the diversity of experiences.

Eligibility criteria for programs and supports too rigid and structured

Overall, eligibility criteria and success criteria for programs and supports were described as very structured and rigid; and in some cases, such as the existing IQ criteria for individuals with intellectual disability, inappropriate. Service providers discussed the many cycles of mental health that are difficult to place within a 5-6-week timeframe of most of the existing programs. Most of the employment programs have full-time employment as a strict mandate. Study participants highlighted the reality that for many young people starting work, transitioning or dealing with complex needs, full-time employment is not the best option, and it can be overwhelming. They further emphasized the importance of considering different labour market realities across the country. The nature of the labour market in Newfoundland and Labrador is such that there is more part-time work available to get started and then work towards a more stable, full-time employment. According to most key informants, allowing for part-time employment opens more opportunities and creates more partnerships with employers.

Necessity of circles of care and support networks

All the participants in the study discussed the importance of the circles of care and support networks. This is especially true for individuals with complex needs and those with dual diagnosis who would benefit from wrap around support services. Support staff in different agencies and departments may not have sufficient training and may be overwhelmed with tasks that may not even require professional assistance. Circles of care bring together not only those professionals tied to social programs, but also other individuals in the community who could provide a variety of expertise, time, and attention, including family members, neighbours, educators, employers, or local entrepreneurs. This ties into the idea of "microboards", which represents a system of support for an individual with a disability from different walks of life. Microboards were first created in the 1980s in Canada to enable individuals with disabilities to move away from traditional services and receive a personal, individualized support package. They are active as a not-for-profit entity and incorporation that allows for the board to manage or raise funds on behalf of the person being assisted, and like a circle of support, they gather people committed to forwarding the goals and interests of a person with disability. At this time, there may be informal circles of care in the province, but there is a need to consider establishing more formal support networks.

Discussion

It is evident from the review of the best practices and the scan of policies and programs in two Canadian provinces that work disability policies for individuals with mental health issues and/or autism are only superficially explored. While there are differences in the way provinces are trying to reform social assistance programs and disability policies to improve opportunities for labour market participation of individuals with disabilities, there is a recognition that each province operates within a distinct demographic, geographic, and financial circumstance. The qualitative findings of this CRWDP Seed Grant Study further outline the realities of individuals with mental health conditions and ASD accessing employment opportunities based on current work disability policies and programs in Newfoundland and Labrador. The complex nature of mental health conditions and ASD, and the lack of tailored services and supports for these population groups are also emphasized in the findings.

It is evident that eligibility criteria for existing employment support programs does not offer the flexibility necessary for the self-disclosed, episodic, and unpredictable nature of some mental health conditions. The expected program outcomes are often rigid and not articulated in a meaningful way. For those who deliver these programs, as well as those who benefit from them, getting a job and finding a job alone is not always a good measure of success. It is believed that individuals with complex needs would be better served if the outcomes that are measured were focused on individual growth and potential. The lack of adequate support, including employment as one of the most important survival issues, can have significant and long-term consequences, especially for young adults.

The study shows that young adults with mental health conditions or ASD are particularly vulnerable when it comes to employment services. The response in addressing their basic survival needs often does not include employment, but all study participants agree that employment cannot be viewed in isolation from these needs. The most effective way to address these issues, as discussed in the study, is through wrap-around support service and circles of care. Establishing circles of care is crucial for those transitioning from childhood to adulthood and experiencing profound change in service provision, including health, education, employment, and other related services.

Conclusion

The findings from this study reaffirm the need to review and reassess work disability policies and programs for individuals who identify as having a mental health condition or are diagnosed with ASD in Newfoundland and Labrador. There is a particular need to reassess disability support services for young adults looking for employment in the province from a person-centred perspective and taking into consideration Newfoundland and Labrador labour market realities.

References

Autism Speaks Canada. (2018) Retrieved from https://www.autismspeaks.org/family-services/employment

Blyler, C. R. (2017). The application and importance of disability policy research to the mental health field. Retreived from: https://psycnet.apa.org/fulltext/2017-25655-001.pdf

Canadian Mental Health Association (2014) *Employment.* Retrieved from http://www.cmha.ca/mental-health/find-help/employment/

Canadian Mental Health Association. (2014). Unemployment, mental health and substance use. Retrieved from: https://cmha.bc.ca/documents/unemployment-mental-health-and-substance-use/

Children's Mental Health Ontario (2013). Easing transitions for children, youth and emerging adults https://www.cmho.org/documents/transitions__final_jan2013.pdf

Crawford, Cameron (2013). Looking into Poverty: Income Sources of Poor People with Disabilities in Canada. Toronto: Institute for Research and Development on Inclusion and Society (IRIS) and Council of Canadians with Disabilities. Retrieved from http://www.ccdonline.ca/media/socialpolicy/Income%20Sources%20Report%20IRIS%20CCD.pdf

Danziger, S., Frank, R. G., & Meara, E. (2009). Mental illness, work, and income support programs. *American Journal of Psychiatry*, *166*(4), 398-404.

Disability and Work in Canada Steering Committee. (2018). Moving forward Together: A Canadian Strategy for Disability and Work. Retrieved from: https://www.ccrw.org/wp-content/uploads/2018/11/DWC-Draft-Strategy-Document-Nov-20-2018.pdf

Drake, R. E., Skinner, J. S., Bond, G. R., & Goldman, H. H. (2009). Social security and mental illness: Reducing disability with supported employment. *Health Affairs*, *28*(3), 761-770.

House of Commons. (2012). Exploring Employment Opportunities for Persons with Disabilities: Report of the Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities. Retrieved from http://www.parl.gc.ca/content/hoc/committee/411/huma/reports/rp6213884/humarp12/hu marp12-e.pdf

Jongbloed, Lyn. (2003) Disability policy in Canada. *Journal of Disability Policy Studies*, 13(4): 203–20.

McAllister, A. (2017) Five challenges of designing disability income support for people with mental illnesses: a qualitative case study of Australia and Ontario. *Canadian Journal of Community Mental Health*, 36:109-126,https://doi.org/10.7870/cjcmh-2017-035

New Brunswick Common Front for Social Justice Inc. (2017). Disability and deep poverty in New Brunswick. Retrieved from:

http://frontnb.ca/userfiles/file/Disability%20&%20Deep%20Poverty-Final%20Version%20(3).pdf

Rayar, Meera. (2015) Lost in transition: the gap between child and adult mental health services. Healthy Debate. https://healthydebate.ca/opinions/mental-health-transitions

Resourcing Inclusive Communities. Microboards. Retrieved from https://www.ric.org.au/learn-about/building-support-networks/microboards

SafetyNet Centre for Occupational Health and Safety & The Coalition of Persons with Disabilities - Newfoundland and Labrador (2016). Disability support services in Newfoundland and Labrador and Canada: Impacts on labour market participation for individuals with disabilities. CRWDP Seed grant project Final Report.

Scott, M., Falkmer, M., Girdler, S., & Falkmer, T. (2015) Viewpoints on factors for successful employment for adults with autism spectrum disorder. *PLoS One, 10(10):* e0139281

Shepherd, C. A., & Waddell, C. (2015). A qualitative study of autism policy in Canada: Seeking consensus on Children's services. *Journal of autism and developmental disorders*, *45*(11), 3550-3564.

Stapleton, J., Tweddle, A., Gibson, K. (2013). What is happening to disability income systems in Canada? Council of Canadians with Disabilities. http://www.ccdonline.ca/en/socialpolicy/poverty-citizenship/income-security-reform/disability-income-systems

Statistics Canada (2019). Canadian Survey on Disability 2017. https://www150.statcan.gc.ca/n1/en/daily-quotidien/181128/dq181128a-eng.pdf?st=2GlWCzSE

Statistics Canada (2006). Participation and Activity Limitation Survey 2006: *Labour Force Experience of People with Disabilities in Canada.*