

We Can Act - Case Study

Services to the Physically and Intellectually Challenged on the Lower North Shore

A. The Context

The Canadian Government defines persons with disabilities as individuals who have a long term, or recurring physical, mental, sensory, psychiatric or learning impairment. The physically and intellectually challenged population, throughout the country, face obstacles and struggle daily with aspects of everyday life which many people take for granted. For the physically and intellectually challenged population of the Lower North Shore, however, the level of difficulty is multiplied several fold due to being a remote and isolated region that lacks facilities, services and programs. The PICS project (physically and intellectually challenged services), initiated by the Coasters Association in collaboration with the Community Health and Social Services Network (CHSSN) *We Can Act* project, examined the possibilities of establishing a community group facility on the Lower North Shore to serve the needs of the physically and intellectually challenged population of the Coast.

Identifying the Situation

People who live on the Lower North Shore of Quebec appreciate how difficult it is living in remote, isolated communities. The Lower North Shore is an area rich in heritage and culture but lacks roads between most of the 14 communities; travel is by snowmobile in winter, ferry in the summer, and by air when affordable or absolutely necessary. Transportation is a concern for the general population, and an even greater one for the physically and intellectually challenged population as the lack of roads and expensive airfare keep them virtual prisoners in their communities.

The lack of employment opportunities due to the closure of the fishery as the traditional economic mainstay has forced many people to leave their homes for months at a time to

seek work elsewhere; this has largely eliminated the few local employment prospects for the physically and intellectually challenged. In addition, the general population levels have dropped below the critical mass necessary to ensure the local accessibility of many health and social service, and educational programs, as well as insufficient sports and leisure activities. Social interaction often plays a large part in therapy programs, and this is almost nonexistent in most communities because there isn't a place where the physically and intellectually challenged can get together and participate in activities which encourage and promote interaction.

For those who care for the physically and intellectually challenged, it is a 24-7 job with no local options for respite care. Because there is a lack of programs and facilities for the physically and intellectually challenged population on the Lower North Shore, many have had to be moved to either Sept-Iles or Baie Comeau; this has created a significant burden on families in that they have to travel great distances, and at significant expense, for even a short visit. The individuals are also placed in French language institutions where bilingual staff are few and far between; hospital visits are stressful enough without the additional difficulty of not being able to speak the language.

“We try to integrate our special needs students into the community, i.e. provide work experience; however, we would appreciate and need structured support to make more effective long term programs”

Commission Scolaire du Littoral

B. Building the Knowledge Base

The Coasters Association had identified the lack of residence facilities and services to the physically and intellectually challenged population of the Lower North Shore in the past. As background to this project (*Phase II: Planning a group Facility*) many initiatives were carried out beforehand, including:

- In 2001, the Coasters Association carried out a needs assessment for the physically and intellectually challenged and interviewed 21 challenged individuals residing on the Coast.
- In 2005, the Coasters Association partnered with the Community Health and Social Services Network (CHSSN) to examine the possibilities of social economy projects in the areas of health and social services. From this, a meeting of the Lower North Shore Coalition for Health (LNSCH) identified the need for facilities for the physically and intellectually challenged as a priority.
- The Council of Mayors (regional municipal government) responded by supporting a project in early 2006 entitled *Services to the Mentally and Physically Challenged on the Lower North Shore* to update the identification of needs for the physically and intellectually challenged on the LNS through an assessment of the programs, services and activities already available.
- The Coasters Association dedicated their 2006-2007 project from Canadian Heritage to continuing the development work and laying the foundation (in a literal sense) for the establishment of group facility, specifically determination of the operational parameters (clientele, form, business plan, etc.)
- The two projects enabled the initiation of partnerships and involvement from key stakeholders and members of the community. An Advisory Committee was created which consisted of 16 individuals that represented each of the Municipalities, as well as 8 resource persons representing different areas of expertise (such as the CSSS-Basse-Cote-Nord, and the Centre Locale de Développement) through the Lower North Shore Coalition for Health; the committee was formed for the purpose of sharing information amongst stakeholders and providing advice on the development of the facility.

C. The Outcomes

The assessment brought to light the extent to which the physically and intellectually challenged on the Lower North Shore have been disadvantaged by the lack of programs, services, activities, employment opportunities and social and educational training. Just as importantly it indicated that this was an issue that a wide range of the population felt was important even if they themselves were not directly affected, either individually or through family or friends, at this time. The preparation work through the projects resulted in two important outcomes:

Community

The low numbers of affected individuals (10-15, relative to the large geographic territory) reinforced the initial notion that any facility for the physically and intellectually challenged would have to be a community-owned enterprise. Structured in a non-profit or co-op form, and supported by institutional resources (CSSS funding and resource staff), the facility would be unlikely to become established without a significant level of participation from the community (financial and in-kind support, volunteers and staffing).

Combined Facility

Again, the low numbers of affected individuals signalled that the long-term sustainability of the facility would be dependent on a combined service that would address the needs of another constituency requiring health and social services from a localized facility; this would most likely to be combined with services to seniors (housing, supervised care).

D. The Results

The results of the assessment work confirmed that there was a both a particular need and a generalized desire to establish a community facility for the physically and intellectually challenged on the Lower North Shore. While the two projects had provided a lot of preparation work for the establishment of the facility, the expected results had to be adapted as the reality was clear: the knowledge-base supported the concept of combined

group facilities (including recreation) that would accommodate the elderly and the physically and intellectually challenged in order to ensure the long-term financial viability of the facility.

As a result, the CSSS-BCN and the CLD of the Lower North Shore, with funding from the Council of Mayors, launched a further initiative to evaluate the needs of the territory in terms of lodging for persons with a loss of autonomy (for both seniors and for those experiencing physical and intellectual challenges.) This assessment will complement the information collected and preparations completed by the Coasters Association and, once finished (June 2007), will help to determine the best possible location and type of facility to meet the needs of these two constituencies in need of local health and social services.

E. The Lessons Learned

Numerous lessons were learned, or reinforced, along the way and a few are described below:

✓ Evidence Base

The essential nature of establishing an evidence base from the beginning of this type of initiative was reinforced by the project outcomes. Without the considerable effort devoted to collecting information on the needs of the physically and intellectually challenged on the LNS, a lot of work in the subsequent implementation phases may have gone to waste in trying to establish a stand alone group facility for the physically and intellectually challenged that would not be viable in the long-term.

✓ Assumptions

Even though there was considerable effort devoted to collecting information on the needs of the physically and intellectually challenged on the LNS, it was only at the end of the process that it became evident (hence *evidence based*) that the best way to respond to these needs would be by addressing the needs of a wider range of persons dealing with a loss of autonomy (seniors and the physically and intellectually challenged). The unanimity of opinion amongst partners pointed to the need for a facility for the physically and intellectually challenged (which was not unfounded), but it also directed the focus of the project activity too narrowly right at the outset. While the exercise of having built a

knowledge base on the needs for the physically and intellectually challenged will bear fruit in the near future once the additional needs assessment (persons with loss of autonomy) has taken place, examining the situation from a broader perspective at the beginning and not relying on the assumption that only one segment of the population required service improvement, might have significantly reduced the timeline from inception to implementation.

✓ **Champion**

The Coasters Association, after initial contact through the CHSSN, assumed the role of champion for the project. They were able to secure the engagement of the Lower North Shore Coalition for Health, as well as make project funding applications to the Council of Mayors and the Department of Canadian Heritage. Having a local champion for such an initiative is essential for success.

✓ **Multi-stakeholder Approach**

Even though the project adopted a partnership approach from the beginning (Lower North Shore Coalition for Health), not all eventual stakeholders were present in the development process. The subsequent interaction between the Coasters Association and the Coalition with the Lower North Shore Table for Seniors lead (in part) to the conclusion that a combined group facility for persons with a loss of autonomy would be a better direction to pursue. Including, or at least canvassing all potential stakeholders, even if they subsequently withdraw from the process, would improve communications and ensure that all bases are covered from the beginning.

✓ **Continuity**

The reliance of several smaller projects to carry out the development work hampered the overall effectiveness of the exercise as there was a stop and start element to the initiatives that contributed to a loss of momentum and continuity. One longer term initiative would certainly have reduced the timeline and resulted in more effective development work.

✓ **Targeted Expertise**

Care for the physically and intellectually challenged, notwithstanding the circumstances of the Lower North Shore, is a complex dossier. It also involves state-mandated care and services, which complicates matters for a community-based enterprise. While contacts were made with potential sources of institutional and organizational support (Office des Personnes Handicapées du Québec, regional federation for coop development), the

project could have benefited from closer or more formal involvement in the development work to facilitate the acquisition of knowledge as well as establish closer working relations with potential stakeholders for the long-term.

For more information on the Group Facility for the Lower North Shore, you can contact Cornella Maurice, Executive Director, Coasters Association at 418-379-2006 or coasters@globetrotter.net

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