



Accessibility Standards Development Session Report

October 2024



Feedback regarding the Accessible Service Delivery Standards and Employment Accessibility Standards

Top five themes from the conversation related to the standards:

1. **Barriers** (barriers, exclusion, stigma, tokenism, bullying, accommodations, accessibility)
2. **Diagnosis** (assessments, medical, mental health, females, cost, time, disclosure)
3. **Information** (communication, misinformation, transparency, word choice)
4. **Needs** (advocacy, benefits, coping, consistency, enforcement, guidelines, standards)
5. **Perceptions** (trust, culture, equity, awareness, acceptance, lived experience)

The roundtable discussions highlighted significant gaps in the awareness and implementation of the Accessible Service Delivery Standards and the Employment Accessibility Standards in British Columbia (BC).

Very few participants were aware of these standards before attending, and those with some knowledge found the information vague and questioned whether the standards were enforced.

While the Provincial Accessibility Committee asserts that "all organizations in BC have a role to play in making our province more inclusive and accessible," this mission holds little weight when most BC residents remain unaware of the committee's existence and its projects.

“ I knew [the Accessible BC Act] existed, but my experience has been that it's very vague and thus hard to hold any business or company to anything.

A central focus of the discussions at LDS was the experience of neurodivergent individuals, who often encounter distinct barriers in accessing accommodations due to the non-visible nature of their disabilities. Neurodiversity (e.g., ADHD, autism, dyslexia, etc.) refers to the natural variations in human brain function (i.e., thinking, feeling, acting).

Unfortunately, stigma about neurodiversity still exists due to misunderstandings and societal misconceptions about cognitive differences. This stigma not only leads to stereotyping and discrimination but also contributes to a higher likelihood of bullying and societal isolation. Neurodivergent individuals are more vulnerable to emotional distress, diminished self-esteem, and a sense of isolation, compounding their existing challenges.

In recent years, there has been a surge in diagnoses (not prevalence) of neurodivergent conditions, particularly among adults, largely due to this stigma. Late-diagnosed adults, especially females, were overlooked during childhood because neurodivergent traits in girls often present differently than in boys (e.g., girls with ADHD may have less overt hyperactivity), and their symptoms were misinterpreted, misdiagnosed, or dismissed.

As a result, many women are diagnosed later in life, after years of navigating cognitive differences without the support or understanding they need.

“ The last psychiatrist I saw shrugged off my thoughts on my having autism and acted like it wouldn't matter if it were. It has since been proven my bipolar diagnosis was inaccurate as it was autism and ADHD combined. I was on meds with tons of potential side effects for years.

As a whole, neurodivergent individuals frequently struggle with accessing necessary accommodations and feeling a sense of belonging, as their brain-based disabilities are less likely to be recognized or understood by those unfamiliar with the concept.

Delaying access to accommodations can contribute to long-term emotional and mental health struggles as they face the ongoing effects of undiagnosed neurodivergence in a society that may not have fully recognized or accommodated their needs.

The roundtables aimed to amplify the voices of neurodivergent individuals and advocate for their inclusion within the Accessible BC Act. It was unclear whether neurodivergent individuals were consulted in creating the standards.

It quickly became clear that simply accessing information about the Act is difficult. Participants noted that government resources on accessibility are not easily found or understood, which affects not only those with disabilities but the general population as well.

Participants expressed frustration that the standards are poorly written, with a heavy focus on visible disabilities, neglecting the unique challenges of those with non-visible disabilities, such as neurodivergence.

If organizations are expected to provide equal services to everyone, they must be equipped to support individuals with all types of disabilities. Yet, without proper education and understanding, many organizations are ill-prepared to meet the needs of neurodivergent employees or clients.

The need for private, non-governmental organizations to bridge the gap and help individuals access public services raises the question of why this extra layer of support is necessary for public resources to be utilized.

This led to a major concern raised during the discussions, which was the accessibility of credible information on neurodivergence and disabilities. Most resources are buried in academic, peer-reviewed journals or are tied to medical diagnostics like the DSM (Diagnostic and Statistical Manual of Mental Disorders), which are inaccessible to the average person.

The available information often lacks the lived experience necessary to capture the challenges faced by neurodivergent individuals. Furthermore, due to stereotypes, stigma, and a lack of updated training in the medical field, individuals seeking guidance are frequently forced to look elsewhere for the support they need.

“ It is hard to be sure you're getting [a practitioner who is] up to date with less bias. Some won't diagnose without parents being brought in, and many of us have had childhood trauma and have parents [who] would be bad to involve.

The BC government mandates that organizations have at least one designated person responsible for supporting accessibility initiatives. Even when an organization has an accessibility representative, there is often a lack of education or training on disabilities, leading to inconsistent and potentially biased decisions about accommodations. This is particularly problematic for neurodivergent individuals, whose disabilities may not be immediately visible or understood. Furthermore, it is rarely easy to determine who the accessibility representative is or how to contact them.

“ I had an OHN department go along with suddenly dropping most accommodations I had at a workplace ... with no reasoning behind it other than my management decided to.

Under the Accessible BC Act, written processes for training and accommodation plans outlining participation, involvement, privacy and protections, and the implementation of accommodations are required.

Organizations must share this information and let people know they can ask for it. It is rare to find an organization that openly shares this information, and individuals are typically unaware that they can ask.

While organizations are not supposed to ask for proof of accommodation requests, neurodivergent individuals whose disabilities are non-visible often find themselves in a position where they must "convince" them of their need for accommodations.

“ Honestly, when I read through the act and hear other people’s comments, the feeling I get is that it's still the PWD [person with disability] having to educate and tell the able-bodied org what to do because they may not be represented on that committee.

Financial constraints within organizations will create significant barriers to implementing accessibility. Accessibility initiatives are often secondary to the organization's financial bottom line. It will take significant resources to implement many of the accessibility standards and to offer accommodations.

If an organization cannot afford the time it takes to implement the standards and provide accommodations, individuals with disabilities—especially those who are neurodivergent—are left without support, facing the prospect of struggling through their daily lives or going without necessary services. This issue is compounded by the fact that neurodivergent individuals may have to provide documentation of their disability to receive accommodations.

Employers who request proof are responsible for covering the cost associated with expert services related to diagnosis and documentation. The act fails to consider the severely limited services available in BC (and Canada), particularly experts who administer psychometric evaluations, leading to a lengthy and costly process.

Most individuals cannot afford these services, and it is unlikely that an employer will want to pay for them, which means access to accommodations may be delayed or foregone.

The Provincial Accessibility Committee has suggested a phased approach to implementing these standards, believing that most organizations could become compliant within two years. However, throughout the Accessible BC Act, there are many instances where the disabled individual has the onus to obtain information or services, and information about the enforcement of these standards is minimal.

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Participants shared that there is a lack of trust in the government to uphold these standards and to provide support to disabled individuals. This creates a sense of tokenism within the standards. While employers may claim to be inclusive, the onus remains on the disabled individual to determine whether an organization is genuinely accessible. In addition, participants noted that the government's attempt to tackle many small initiatives across different sectors weakens the overall effectiveness of their efforts.

While any progress toward accessibility is positive, it is not meaningful if the core barriers that individuals with disabilities face remain unaddressed. Without enforcement, the Accessible BC Act is just another document.

The Accessible Service Delivery Standards and the broader Accessible BC Act, while well-intentioned, fall short of addressing the needs of neurodivergent individuals. Without clearer guidelines, better enforcement, and a deeper understanding of visible and non-visible disabilities, accessibility will remain an unrealistic goal.

Recommendations emerging from discussions:

Focus on a government-supported, community-led culture shift surrounding awareness and acceptance of an accessible province that takes a clear stance on “nothing about us without us.” This may involve public campaigns, information sharing, events, and other initiatives. Where BC organizations are already working toward this culture shift, support furthering their mission.

“ There are no requirements or guidelines set on what disabilities are to be represented. Who sets that agenda on who will be represented? How does someone fight or apply to have a seat at that table? For example, where is the ADHD or Down Syndrome representation, and how can that representation be put forward?

Create clear, consistent, credible information about disabilities that is easily accessible to all BC residents, with equal emphasis on neurodiversity. Ideally, this comes with an update to government infrastructure, especially technological infrastructure. Information sources should include a range of professionals, experts, and individuals with lived experience. All information must be written in plain language with simplistic or explained terminology, organized in short and clear paragraphs, and available in multiple formats.

Training modules should be created for various audiences, with regular, mandatory training for medical professionals, teachers/educators, policy-makers, other government professionals, employment-based organizations, employers, and business owners.



There does not seem to be a clear line drawn between what this act would cover vs what other government acts (both federal and provincial) would cover.

Following established information sources and training, create relevant accessibility standards with a clear plan to enforce the act with serious and actionable consequences for non-compliance. Establish a grant for organizations based on the prevalence of disabilities and the size of an organization to implement accessibility standards and offer accommodations.

Following the start of implementation, a hotline should be established where organizations, individuals, employers, and employees can receive real-time advice about accessibility standards.

This hotline should be connected to a central, easily navigable information source that includes all relevant information and easy-to-read and easy-to-access guidelines and templates.

A non-exhaustive list of examples of guidelines/templates includes accessibility standards, accessibility plans and protocols (including emergency protocols), accessibility training, hiring and employment practices, recording, storing, and sharing information, types of accommodations, how to create a flexible work environment, how to create a neuroaffirming space, how to create sensory spaces, how to self-advocate, how to create transparency, etc.

“ I have found out some interesting things talking to the Surrey Accessibility Leadership Team (SALT) committee (since it was formed because of the Act). When I asked the question, “Where can I find the meeting minutes from last year?” here is what I was told. There are none. SALT is not a committee of council and therefore, they do not have to keep any records or minutes; they do not report to Surrey City Council. There is no requirement for the SALT committee to go to the public and update them on anything. There are no public meetings either.”

Related, the government should work toward the following:

- Increase the availability of psychometric evaluations.
- Increase financial support or reduce the cost of psychometric evaluations.
- Remove “expiry dates” for psychometric reports.
- Increase access to general practitioners and other medical professionals.
- Increase accessibility for non-urgent medical support.
- Increase the number of mandatory personal days available to employees.
- Increase financial support for adults with disabilities.
- Increase accessibility of services to rural communities to meet the delivery standards in major cities.