**The 1950's**

In the beginning...

In May, 1955 seven local parent associations joined together to create the B.C. Association for Retarded Children which later became the B.C. Association for the Mentally Retarded, British Columbians for Mentally Handicapped People and finally the B.C. Association for Community Living.

Despite several name changes over the years, the fundamental purpose and goals of the association have remained the same. Those who gathered to found this province-wide association 40 years ago pioneered a movement whose legacy continues today.

Our founding members were: the St. Christopher's School Society in North Vancouver; the Kootenay Society for Handicapped Children; The Vancouver Association for Retarded Children; the Upper Fraser Valley Society for Handicapped Children; the Kelowna and District Society for Retarded Children; the B.C. Society for Handicapped Children in New Westminster; and the Powell River Society for the Handicapped.

On May 21, 1954 Dr. Donald Paterson, a consulting pediatrician for the Handicapped Children's Registry, called a meeting of all persons "interested in the advancement of mentally retarded children." That meeting, which brought together representatives from six parent groups, three government departments (Mental Health, Health, and Education), the Metropolitan Health Committee, and the Vancouver School Board, laid the groundwork for the formation of what is now called the British Columbia Association for Community Living.

When we were officially formed in 1955, however, our founding name was the Association for Retarded Children of B.C. (ARC BC). And it was under this name that we pioneered the initial work of our province-wide association.

The issue at the heart of our formation, which may come as a surprise to some, was education. In the early 1950"s, many parents were struggling to find ways to educate their children, who, because of their "mental retardation" label, were entirely excluded from the public school system.

Many parents passionately believed their children were capable of learning (despite general thinking to the contrary) and that their children had a right to develop their individual potentials, just like the rest of society's children. Faced with a public school system which refused to take any responsibility for educating children with mental handicaps, parents formed their own local societies in communities throughout B.C. to provide schooling for their children.

In this respect, the founding of ARC BC in 1955 represented a major victory for parent-led societies. This was the only vehicle the government would recognize as a legitimate way to fund society schools. Having survived on donations, these fledgling schools at last would receive monies from the public purse. Once ARC BC was formed, legislation allowing government to contribute to the societies quickly followed. The amount was $256.47 per child which included 4.14% for administration!

At the Association"s 1956 AGM, Dr. W.A. Plenderlaith, representing the Department of Education, told delegates, "Government does not wish to go into the field of education for retarded children and believes it is better to leave the matter in the hands of the organizations who are dealing with it."

His counterpart from the Department of Health, Dr. A.M. Gee, was a bit more inspiring and for his time, somewhat visionary. "Every child has the right to develop his potentialities to the maximum," he said. "Every effort should be made to prevent him being cut off, by the special provisions made for him, from his family, from other more normal children of his age, and from the community in general."

That summer, the first "special education" teacher training course was held at UBC. The 39 registrants included teachers, parents, and helpers. ARC BC paid the tuition fees and everyone paid their own transportation.

"We are quite convinced that there are no children who are entirely uneducatable," speaker Dean Scarfe told his audience. "All children who are born are part of society and each one deserves what society brings to all children."

By 1957, the first of what was to become a yearly brief to the provincial government, outlining the ARC BC program for children with "mental retardation," was produced. It stated, "Our function is to point out the necessity, set the standards for providing the adequate educational facilities which are every bit as much the birthright of retarded children as they are of the more fortunate normal ones."

By 1958, ARC BC had jumped to 32 member chapters serving 348 school children. That summer another teacher training course was held at UBC; this time for two weeks with 80 people attending, several of them from out-of-province. This success led UBC to introduce training in the field of mental retardation into their regular teacher training curriculum.

One year later, the first Chair of Special Education was established at UBC with professor Dr. J.A. Richardson appointed to the position. The year 1959 also saw a critical amendment to the School Act, which enabled public school boards to take over full responsibility for the education and training of "moderately retarded" children. This was the first time in Canada that educating children with special needs was recognized as a public responsibility. The Act also permitted school boards to accommodate society classes and the individual student grant was increased by 50%.

Clearly, ARC BC was on a roll. In four short years the association had made astounding progress. At the time, however, it would appear some members were anxious for a speedier resolve to the issues they were facing.

Said President Richard McCallum to the membership in 1959: "I would at this time just remind some of our members who may get a bit impatient with the progress that is being made. To some, it seems as though we are just crawling, and they feel we should be running."

Nonetheless, a Pediatric Journal of the time, commenting on the huge interest by all disciplines in mental retardation, stated: "Much of the credit for the impetus in this important movement belongs to the parents of retarded children who, because of their persistence, perseverance and courage, have shown the way."

Without the tenacity and vision of so many parents, it is hard to imagine where we would be today.

# The 1960's

By 1961 BCACL had grown from seven founding members in the mid-fifties to 49 local chapters. By 1969 we had grown to 60 chapters which included 55 school programs, 23 adult programs and 22 preschool programs.

Clearly this was a decade of tremendous growth. By 1961 we were receiving an average of two thousand pieces of mail per month, making communications one of our most important activities.

It is interesting to note that in 1961 we began producing "Our Children", a publication which was distributed to parents, government, and professionals. Its primary function was to provide parents, local chapters, and other associations with a useful tool for sharing information.

Like the 1950's, the 60s were characterized by many issues and challenges which were dealt with and overcome. The four that stand out are: the development of residential placements; the growth of adult programs; the phenylkenouria initiative and the birth of the BC Mental Retardation Institute.

As we look forward to the closure of the two remaining large institutions - Woodlands and Glendale-by the end of 1996, it is interesting to note that in this period of history we were faced with having to lobby for the development of institutional placements even as we created the first services in the community that would prevent our family members from having to use them. This dual approach was necessary because of the critical lack of services for families in many communities.

Our primary lobby in the early sixties was for small regional residential settings, close to family and friends. As an organization we knew well by then the huge cost to the individual and family of enforced isolation caused by distance and lack of access. The parents who had come together to found BCACL in 1955 had used persistence and growing lobbying power to secure schooling for their children. Their attention was now turned to almost a total lack of community supports.

In the early 60s BCACL"s membership had reached more than fifty chapters. The organization had developed a strong presence with the provincial government and was actively lobbying for alternatives to large institutions. By the end of the 60s there were approximately a dozen member associations operating small and medium size residential settings, mainly for children and young adults.

Another major issue which was one of the main thrusts of this decade's challenges was the need for day programs for adults. Once we had succeeded in getting young children into the schools our attention was increasingly directed to those who were leaving school and who were faced with nothing to do during the day. By 1969, 23 adult programs were operating in B.C. Again, the lobby for funding was long, arduous, and persistent. One factor that appears to have helped our lobby get the provincial and federal governments" attention on this issue was the fact that disabled veterans had secured rehabilitation programs and services after World War 2. At a national Special Adult Services Workshop chaired by the Canadian Association for Retarded Children (CARC) in 1967 we presented our rationale to the government representatives in attendance this way: "If disabled veterans can be considered for rehabilitation, why not individuals who have been congenitally or otherwise disabled?"

This was the same year the Canada Assistance Act was signed, enabling the provinces to cost share rehabilitation (and other) expenses with the federal government. With the advent of cost shared arrangements the negotiations between ARC BC and the province heated up. Slide presentations from the Elford Occupational Center in Victoria and from Tranquille School in Kamloops, as well as a film (produced by CBC) of the Ladner Farm Centre were used to try and convince government of the legitimacy of our claim that training could and would make a difference.

After a 10 year struggle success was finally achieved in 1970. The Department of Welfare agreed to pay a training fee ($50.00 per person) for workers in adult centres. It is interesting to note that prior to that success when there were no government funds available for adult services in the 60s, ARC BC appeared before a board of the Department of Labour in support of an appeal by Beacon Services, New Westminster, opposing a minimum wage ruling.

In addition to the prevailing concerns of residential placements and adult day programs, the 60s were a time when the concept of preventing certain kinds of mental retardation was receiving attention. Dr. Robert Guthrie, a parent and biochemist, became very interested in one of the inborn errors of metabolism called phenylkenouria (PKU) which causes a mental handicap.

PKU is the result of the inability of the body to break down the amino acid phenylalanine. An excessive build up results in progressive damage to the brain of growing infants. If detected early, (at that time, there was no known way to do this) a specific diet during the growth period of the brain was understood to prevent the damage from taking place.

Dr. Guthrie is credited with having developed a reliable and economical test for PKU which became mandatory for all newborns in the United States in the early 60s.

In 1962 ARC BC took up the issue and began a concerted lobby for the test to become mandatory in B.C. Four years later this lobby was taken up by the Canadian Association for Retarded Children (CARC).

By the end of the decade success had been achieved and the test was made available. Since that time, babies born with this inborn error have been able to prevent a resulting handicapped condition. However, it is now known that when these adult women become pregnant their babies will be born with birth defects unless the mother again uses the restricted diet prior to conception and during the pregnancy. This understanding is credited to Dr. R. Guthrie, Emeritus Professor University of New York - Buffalo and Dr. Richard Koch, Medical Geneticist Los Angeles Children's Hospital and University California School of Medicine.

The mid-60s also saw ARC BC contribute to the founding of a legacy project that would mark Canada"s Centennial. To honor this occasion the BC Mental Retardation Institute (BCMRI) was created.

The Institute linked all three of British Columbia’s universities in the study of mental retardation as it affects medicine, education, home economics, social welfare, recreation and physical fitness, psychology and nursing.

ARC BC contributed some of its own initial funding and was ultimately successful in achieving ongoing funding from the provincial and federal governments. By 1970, BCMRI was a well-known research institute that had achieved national and international respect.

And finally, the first of our many name changes occurred in 1969 when the membership of ARC BC voted to become the B.C. Association for the Mentally Retarded (BCAMR). It was a fitting closure to a decade that had been marked by change, growth, and achievement.

Perhaps the growing awareness of the potential of the individual that is evident throughout the history of our movement, and especially in some of the progress that belongs to the 60s, is captured in the words of Jurgen Hesse who was quoted by Miss Edna Oram, a social worker from Vernon. She spoke strongly in support of work settings for adults at the national Special Adult Services Workshop in 1967, and at one point stated:

If we take people as they are,

we make them worse

If we treat them as if they were

what they ought to be

We help them to become

What they are capable of becoming.

Surely this wise woman must have seen a glimpse of the future.

# The 1970's

"Like a bridge over troubled waters, I will lay me down. Like a bridge over troubled waters, I will ease your mind.' Indifference, ignorance and prejudice - like stormy seas - separated our children from schools and other services..."

Thus begins our audio visual presentation by president R.E. McCallum and executive director D.N. Murphy reporting to the membership in 1971-72. The presentation went on to describe the many bridges that had been built and the many more yet to come.

They pointed to the bridge of education built in 1958 which had increased to an annual operating grant of $1.5 million and been matched by more than $2 million of community funds for the building of schools, workshops and residences. They cited the bridge of communication and liaison between government, other organizations and the BCAMR. This bridge had facilitated the cooperative development of standards of residential care between BCAMR, B.C. Mental Retardation Institute (BCMRI) and National Institute on Mental Retardation (NIMR), in-service training in the institutions of Riverview and Tranquille, long range studies for the training of workers in the field of mental retardation with Canada Manpower and an invitation, along with the Canadian Mental Health Association and Social Planning and Research Council of B.C., to join the Provincial Advisory Committee on Activity Centres set up at the request of the department of Rehabilitation and Social Improvement. The cooperative efforts on standards of residential care progressed throughout the decade and developed a monitoring tool with the Ministry of Employment and Income Assistance (then Ministry of Human Resources) which, by the end of the seventies, was used to evaluate services in various parts of the Province.

This type of involvement with government was only one of the many fronts that were tackled and worked on effectively in the seventies. From a retrospective point of view, the main achievement of this decade was the beginnings of change in consciousness regarding the possible abilities of our labelled sons and daughters and our responses to them.

As we took bold steps forward on their behalf, we were rewarded and amazed by their obvious desire to do and be more.

Our eyes and hearts were opened further when Dr. Wolf Wolfensburger challenged us with his Principles of Normalization, Citizen Advocacy Program, and Program Analysis of Service Systems (PASS). As a Visiting Fellow at NIMR he was available to all Provincial Associations for training. BCAMR invited his expertise and concurred with our national organization, CAMR, which chose the Principles of Normalization, the development of Comprehensive Community Based Services (ComServ) delivery systems and integration into society as their goals for the seventies.

The first Citizen Advocacy Program was begun in B.C. as a pilot project in Victoria under the Greater Victoria Association for the Retarded, with staff trained by Dr. Wolfensburger. Before the decade was out ComServ was going full swing in two areas of the Province - Burnaby and the East and West Kootenay Region 5.

Staff for both these projects were funded by CAMR. Training requirements geared up as a result of ComServ, which, to demonstrate alternatives to institutions and the value of integration, required the development of all needed services to be where the individual and family lived and to be a part of the services for all members of the community wherever possible.

This training was sought wherever it was available, often out of Province. We wanted to develop our ability to respond, as a Province, to all the needs of our people. PASS workshops had been held in many areas with the result that a lot of people's prior conceptions were turned upside down. We were beginning to listen to the consumer!

As president A.M. Schmand commented during the 1973 AGM when people with mental handicaps were, for the first time, invited to speak, ‘It is delightful to have had the opportunity at this convention to hear from the mentally handicapped themselves. It is apparent here today that we are beginning to recognize the mentally handicapped as citizens like ourselves."

He went on to suggest that the clients themselves should be on the local association boards. This was further reinforced by Ms. Diane Richler, then Project Officer, Voluntary Association Affairs NIMR, when she commented the following year on the importance of the consumer in the decision and policy making of the Association.

One wonders, on looking back, just how prepared we were for how much like ourselves our labelled sons and daughters would turn out to be! There was the delightful incident at the Special Olympics held in Toronto in 1971 when three of our B.C. boys walked out of the hotel one evening to investigate the night life. They were discovered critically observing the topless waitresses in a local pub...A little girl from Kelowna had the proud duty of carrying the torch into the stadium for the opening of the Games and a B.C. floor hockey team won the Clarence Campbell Trophy. The contingent from all across Canada captivated the hotel staff and the 3,000 volunteers who assisted them during their stay. Many of these volunteers were off-duty metropolitan police.

Towards the end of the decade a Client Participation Committee was formed with Brian Beaudet as the chair. The purpose of the committee was to encourage the formation of People First groups around the province. At the 1979 AGM a report from this committee appeared for the first time in the AGM program book. This report announced the completion of the publication ‘People First Information Book’ which would go on to be used throughout the province to assist in the formation of many chapters of People First.

With our emerging awareness of the growing autonomy and subsequent vulnerability of the individuals labelled mentally handicapped, came concerns about their legal rights. A Legal Task Force was formed and was chaired by Mark Raetzen from the Department of the Attorney General. Issues before them included guardianship of adults, sterilization of minors, estate planning, the mentally handicapped offender, availability of legal services for people with mental handicaps throughout B.C., needed changes to the Public School Act, the Social Assistance Act, as well as changes to the Human Rights Code. At that time disability was not included in the Code. This was brought to our attention by a young man, David Jefferson, who had been denied employment on the B.C. Ferries due to his physical handicap. By the Fall of ’77 the Task Force had produced and published the first Legal Rights Manual for the Mentally Handicapped, written by Mark Raetzen and, by the end of the decade had prepared enough data on the other issues for the Board of BCAMR to address them in a decisive manner.

In the latter part of the decade, BCAMR formed an Education Task Force that proceeded to turn the education world upside down. Under the capable chairmanship of Phil Russell the concept of integration, with adequate support, that is so widely acknowledged today, began.

By the end of the decade Individual Education Plans were mandated for each student and Community Colleges were being lobbied to provide equal access to regular classes, and to create, wherever necessary, specialized programs. All ages were under the scrutiny of this committee. The Vancouver Association had piloted the first Infant Development Program in B.C. and BCAMR’s education committee was encouraging the development of IDP’s in other regions of B.C. following the tremendous success of the VRAMR example.

At the end of the decade the membership unanimously agreed that influencing government policy was a major priority for the BCAMR. A new committee, Analyzing and Influencing Government Policy’ (A&IGP) was formed. One of their immediate successes was the thwarting of a government initiative to begin to charge parents for services such as special needs day care, infant development, social work support and other children’s rehabilitation services. This committee lobbied each government party prior to the election in 1979 and received a commitment from each of them to support Community Living.

At this time we were becoming more and more aware of the power we had as a united organization to influence government policy in a way that would accommodate our sons and daughters in the mainstream of community life. The need for this unanimity and political effort by all members of the BCAMR was clearly enunciated by then - president Jack Collins in his farewell address to the membership in 1979.

"The political power of the BCAMR resides with you" he said, "not with the board or staff. We stress therefore, that we will achieve nothing if you do not work actively at the local level influencing politicians, government agencies and school boards to respond to the needs of handicapped persons. If we are going to be an influential body it will come about through the concerted efforts of volunteers throughout the province."

# The 1980's

80's... what a decade!

Perhaps it only seems so to those of us who lived in those tumultuous times. It began with the United Nations designating 1981 as the International Year of the Disabled which provided numerous opportunities to raise awareness about the rights of people living with a disability.

At the B.C. Association for the Mentally Retarded (BCAMR), we seized the year to present a public awareness campaign. Sponsored by the B.C. Association of Public Broadcasters, under the creative direction of Miles Ramsay and Rod Gunn, the "My Turn" campaign featured self advocates living in the community and working at paid employment, an almost unheard of event in the history of the AMR movement. Hailed as 'One of the most outstanding campaigns of its kind in North America", the self advocates involved presented their own message which was broadcast throughout the province.

Little did we know then how frequently the media would be used in the coming years to help advance the rights of individuals with mental handicaps and their families.

In the fall of 1981 the Provincial Cabinet announced that the institutions of Woodlands, Glendale and Tranquille would be phased out within the following ten years. The Speech from the Throne acknowledged the work of the BCAMR and promised support to provide community based services. However, it wasn’t until 1983 that the actual process began.

In the meantime, many exciting developments were happening with self advocacy. In 1982, 35 self advocates from all over B.C. met at Hero’s Restaurant in Vancouver for a two-day leadership training workshop. The enthusiasm from this session was instrumental in increasing the number of People First/Self Advocacy Groups throughout the province to 18 and it led directly to a pre-conference day for self advocates at the 1983 AGM. What a day that was! There had never been so many self advocates at a conference before and it was the same AGM where the membership voted to change our name to British Columbians for Mentally Handicapped People - BCMHP. This name change reflected our desire to eliminate the word "retarded" from our identity as an organization and to respect the pain many self advocates felt from living under that label.

In July 1983, the B.C. government announced that Tranquille, outside Kamloops, would be closed by December '84. This left a mere 18 months to move more than 300 people back to community. It was a daunting task but it was attacked with gusto. Dot Ewen was hired to assist local associations to develop support services for those who would be returning to the community. The "Tranquille Bulletins" were created to keep all the federation members aware of new developments throughout the province. The Ministry of Social Services and Housing was persuaded to fund community developers to assist local associations in their task.

Right in the middle of all this activity, the axe fell. People who used wheelchairs were given the label "extended care eligible" which meant that they would be moved to a hospital instead of the community simply because they could not transfer from a chair to a bed without assistance.

The result was a major confrontation with government. A blockade was erected at the entrance to Tranquille. More than fifty family members, self advocates, and supporters from all over the province gathered in the pre-dawn rain to protest the transfer of 25 individuals who were being moved to Glendale instead of to the community. In the days and weeks that followed we made headlines, we held vigils, we wrote letters, and we demanded that those individuals be given the right to return home. Finally, on September 23, 1985 then Minister of Health Jim Neilson announced a change in policy that would allow those people labelled "extended care eligible" to live in group homes.

What a relief to the families involved, the local associations and BCMHP who had supported them. In time, the success of these community placements led to changes in the Community Care Regulations to allow individuals who use wheelchairs to live in the community. It also led to the formation of a new division in the Ministry of Health - Services to the Handicapped (STTH). Unique in its structure and approach, this division was destined to pioneer new ways of supporting individuals with complex needs to live in the community. Family involvement was respected by the Division as an important part of the planning process.

This emphasis on family involvement was another important thrust of the 80’s. Picking up on a study that verified that the most cost effective ways of caring for children with severe handicaps is in their own home with their families, BCMHP undertook a massive lobby to support families. For almost all of the decade, we worked to gain recognition of the importance of the role of families in the lives of their handicapped children. Family Support Committees encouraged the development of Pilot Parent and Parent to Parent Groups throughout the province. In the mid 80’s the Family Support Institute (FSI) was born and eventually became an independent society. Together BCMHP and FSI were responsible for the formation of the Associate Family Program, which paid associate families to care for children with severe disabilities who were housed in hospitals, and the At Home Program which provided families with respite support and assistance with extraordinary purchases.

From the realization that families were the experts regarding their children, it was not a very big leap to the realization that perhaps the individuals with the label would know what would be best for themselves. This meant education and training in self advocacy to assist people in learning leadership and decision-making skills.

The influence of self advocates grew in leaps and bounds. Funding for the **"Rights Now!"** project (see photo above) to develop strong and vital self help organizations and a provincial network of self advocacy groups, was sought and received from Health and Welfare Canada for three years, and then extended to five. The three communities chosen for the project were Mission, Duncan and Parksville. The staff involved in the project included Barb Goode, a self advocate who was instrumental in helping other self advocates to tell their stories. These stories spoke of loneliness, of not being listened to, and of the need for friends. Doug Walls, President of BCMHP from 86 - 89 listened.

Self advocates soon became members of every BCMHP committee. We also pledged $30,000 to the direct support of self advocates within the federation which enabled their committee to meet eight times per year, to prepare for board meetings and to advocate on their own issues. One of the first issues they brought to the government’s attention was the fact that they lived in poverty. They wanted to access the enhanced earning capabilities open to regular GAIN recipients and within a year they succeeded. Not only did they achieve their original goal, the time limit on the qualification for exemptions was removed altogether. The committee’s original name was the President’s Advisory Committee. However, the self advocates preferred to be known as the Caucus, a name with much more political clout! So in 1987 the Self Advocacy Caucus was born.

Although self advocacy was steadily gaining influence and respect within our organization we had not yet dealt with the lack of friendship in many people’s lives. For this reason, funding for the 'John McKnight Project’ was sought and received. Two communities, Powell River and Prince George, were chosen to demonstrate ways in which people with mental handicaps could be included in community life. The results of the two year project showed how the lives of the people involved were transformed and their communities enhanced, principally through friendships.

When we reached the end of the decade, the Caucus was beginning to take on a variety of projects. In 1989, self advocates began publishing their own quarterly newsletter, ‘The Voice’, which set the stage for several plain language publications on a variety of topics that would follow. Self advocates were also becoming an important part of our training initiatives for social workers, schools, and police cadets. Also in addition to the minimum four self advocates required by our constitution to sit on the BCMHP Board, the Caucus was now electing an additional six members from the Caucus to sit as ex-officio members.

Self advocates were becoming more and more visible on boards and in their own groups, but what about the majority who weren’t on boards? What did their day look like? This was a time when massive changes were taking place in day programs and Adult Special Education policy, which was developed to ensure resources at B.C.’s 15 community colleges would be available to local associations and individuals with mental and physical handicaps. Grants to research vocational options and to assist in the employment of individuals were also obtained. BCMHP’s "Work Stations in Industry", a three year project to develop work and training enclaves in industry, was extremely successful in demonstrating the consistency and reliability of the people involved, many of whom received regular employment. Vocational Bulletins kept all the federation aware of the progress being made. A resource manual and a ‘How To’ kit was prepared in cooperation with the Vancouver-Richmond Association.

Then, in 1987 the closures of Woodlands and Glendale were announced. The government’s break neck speed, however, excluded adequate involvement from families. Neither was enough thought given to the monitoring of pri-care contractors. BCMHP called for, and won, a freeze on deinstitutionalization activity to resolve these, and other issues. The Provincial Advisory Committee (PAC) was formed with representation from both for-profit and non-profit service providers, self advocates, family groups, and government.

Progress in education didn’t take a back seat in this decade. The federation was successful in preventing cuts in Special Education budgets during the economic downturn in the early 80’s. The province wide response to the Royal Commission on Education, as well as the work of various government committees, on which we had strong representation, were instrumental in achieving a Ministerial Order in the regulations of the new School Act which ensures placement for our children in their neighbourhood school in a regular classroom.

Legal issues, at times, dominated the work of BCMHP. We cooperated with the Pacific Association of Autistic Citizens (PAAC) in the Warren Lowe case. We worked with the family in the Arron Bales case. We took a stand with the Ministry against the family and the medical profession in the Stephen Dawson case and were successful in saving his life.

Then in 1989, we became the B.C. Association for Community Living - making our stated purpose the substance of our identity.

What a power this federation has been! Although the way has not been easy we have pulled together well in those times and circumstances that mattered most. As Doug Walls said in his report to the 88 AGM "It should be readily apparent that we accomplished more when we worked together... We have to keep reminding each other, every chance we get, that by working together, talking to each other, planning jointly rather than independently, we build on our strengths."

As we journey through the 90’s it is important to remember that our primary purpose continues to be seeking the goal of equality for our daughters, our sons, our family members, our friends and all those who wish to live a full life as active and equal citizens in communities throughout B.C.

# The 1990's

The '90s, a landmark decade that signaled the end of B.C.'s large institutions. For more than a century it had been common practice in B.C. to segregate and confine people with developmental disabilities in large institutions. But in 1996 that practice finally came to an end when Glendale institution in Victoria and Woodlands institution in New Westminster closed their doors. On October 21, 1996, the last two residents of Woodlands institution moved to their new homes in the community.

The experiences of those who lived in the institutions have not been forgotten. Following the closures, BCACL supported the Self Advocacy Foundation (SAF) in producing a film that would break the silence about systemic abuse in institutions as it sought acknowledgement and restitution, giving testament to the courage, endurance, dignity and creativity of the former residents. From the Inside/OUT! became an award-winning multimedia art show that told the stories and expressed the views of 28 former residents of B.C.'s large institutions. The exhibit eloquently makes the case against life in institutions while contributing to an important but little known chapter in B.C.'s social history.

Attached to Woodlands was a cemetery where over 3,300 former residents were buried. When the construction of Queen's Park Hospital began in 1977, adjacent to the Woodlands property, the cemetery was closed and re-designated as a park. At that time, an estimated 1,800 grave markers were removed and all but a few hundred were "recycled" or disposed of. Some were used to construct a barbeque patio on the Woodlands site for the use of staff. Others went off site for use at construction sites, and others were used to build retaining walls for the creek flowing through the Woodlands property.

From the Inside/OUT! brought the cemetery's fate to light and in the late 1990s, BCACL and BCSAF secured an agreement from the provincial government (through what was then the Ministry for Children and Families) to work jointly to restore the cemetery site. Efforts began to create a fitting memorial to those buried there and to publicly recognize the changes that have led to a better life in community for those who were once institutionalized.

The ’90s was a significant time in community living history because individuals with developmental disabilities were finally living outside institutions, in community. But this advancement came with challenges. Work needed to be done to insure that supports were in place for those now living in community.

During the ’90s, BCACL advocated for a better definition of disability in income support legislation, the creation of a community training program to increase access to health care for adults with developmental disabilities, and new landmark guardianship legislation. All three were achieved.

In 1996, as a result of lobbying by the Ad Hoc Coalition (BCACL, the B.C. Coalition of People with Disabilities and the Canadian Mental Health Association, B.C. Division) the B.C. Government eliminated the GAIN for Handicapped program and introduced the Disability Benefits Act as part of a comprehensive overhaul of income assistance in B.C. The Disability Benefits Program Act included a definition of disability that no longer required an individual to prove they were "permanently unemployable" and had exhausted all possible avenues for retraining and rehabilitation in order to qualify as having a disability. Instead, qualification for disability benefits focused on a person's functional abilities and needs and the ongoing costs associated with the disability. Like all income assistance recipients, applicants with disabilities were also required to demonstrate financial need.

As institutions closed, individuals with developmental disabilities were living in community and accessing community-based health care services and supports. However, a 1996 report, "A Summary of Important Health Issues for Persons with Disabilities in British Columbia,” (1996), released by the British Columbia Ministry for Children and Families and Ministry of Health, confirmed that individuals with disabilities were not always appropriately treated nor supported when attempting to access health care services. Among its findings, the report revealed that "There is, perhaps, a general lack of distinction between disability and incurable illness,” and "Personal, competent and aggressive medical advocacy has been required in order to safeguard the lives of some individuals.”

Believing that all individuals with developmental disabilities and their families must receive equitable access to health care services, BCACL, in partnership with Health Services for Community Living and the Public Guardian and Trustee, launched a province-wide community training program to increase access to health care for adults with disabilities. The program would turn out to be hugely successful, reaching over 100 service providers, MCFD staff, and Ministry of Health Services staff.

1999 saw the proclamation of major portions of B.C.’s new guardianship legislation, which represented the culmination of many years’ of collective work by the Community Coalition for the Implementation of Adult Guardianship Legislation. The landmark legislation upheld the rights of people with disabilities to have supported decision making, enshrined in law. It was the first of its kind, anywhere.

BCACL had been an active member of the coalition, which included several provincial advocacy organizations for seniors and people with various disabilities, as well as hundreds of individual “consumers.” The new regulations and policies paved the way for self advocates who have never entered into a legal contract before to make a Standard Section 7 Representation Agreement. With the assistance of lawyers, the Enhanced (Section 9) Representation Agreements are available to individuals who have large trust funds and/or complex medical issues that may require “end-of-life” decision-making powers.

In 1997, the Community Inclusion Fund (CIF) was launched under the National Strategy for the Integration of Persons with Disabilities. The primary aim of the Initiative was to strengthen community capacities to secure inclusion and citizenship for people with intellectual disabilities and their families. BCACL joined the national project and in the late 1990s, the Government of Canada and provincial/territorial governments signed In Unison, promising to turn two decades of government commitment into real change in public policy for people with disabilities.

Building on an idea first conceived by members of the Victoria Association for Community Living, BCACL launched a provincial community development initiative called "Celebrating the Spirit of Community Living" in 1996. This project encouraged members of community living associations and their community partners to plan events during the month of October which would celebrate the gifts and talents that people with developmental disabilities bring to their communities. The project generated great enthusiasm and the idea began to expand. Inspired by the tremendous success of others, organizations across the province and country began to adopt October as a time to celebrate community living. The BCACL Board of Directors first endorsed October as Community Living Month in June 1998.

# The 2000's

* [From the Inside/OUT!](http://www.bcacl.org/self-advocates/bc-self-advocacy-foundation/inside/out) video wins National Film Board award
* BCACL speaks out on [institutional abuse](http://www.bcacl.org/our-priority-areas/disability-supports/institutions)
* BCACL hosts first provincial youth conference, Youthquake
* VOICES youth project trains young champions of inclusion
* Supreme Court of Canada upholds conviction of Robert Latimer for the murder of Tracy, his daughter with disabilities
* BCACL publishes [*Everyone Belongs in Our Schools*](http://www.bcacl.org/resources/everyone-belongs-our-schools-making-case-inclusive-education-british-columbia), and partners with university and college programs to improve teacher training on inclusive education
* VOICES youth host second provincial youth conference, Everyone Belongs
* BCACL launches work on the justice system and explores [restorative justice](http://www.bcacl.org/resources/criminal-justice) for people with developmental disabilities
* families raising children with autism win early intervention supports in Supreme Court decision
* BCACL publishes award-winning [12 Inclusive Activities: A guide for youth group leaders](http://www.bcacl.org/resources/12-inclusive-activities-guide-youth-group-leaders)
* BCACL supports successful lobby for consumer participation in transforming community living services
* BCACL and SAF begin creation of [Woodlands Memorial Garden](http://www.bcacl.org/our-priority-areas/disability-supports/institutions/woodlands-memorial-garden)
* BCACL raises the roof at its 50th Anniversary celebration and conference “Everyone Belongs!” with more than 600 self advocates, families, volunteers, community and government leaders and friends in attendance.
* BCACL conquers the peak of Mt. Kilimanjaro! A group of 41 individuals with developmental disabilities and their support climbers from BCACL-member associations accompanied by a BCACL Board member and its Executive Director climbs Mt. Kilimanjaro and reach the summit. Dubbed Climb for Community Living, this public awareness and fund-raising activity was a first of its kind for the community living community.
* BCACL co-hosts with the BC Self Advocacy Foundation and the provincial government, the official opening of the [Woodlands Memorial garden](http://www.bcacl.org/our-priority-areas/disability-supports/institutions/woodlands-memorial-garden), June 22, 2007. Approximately 400 people attend the moving commemoration.