



# Disability and Housing: Approaches in Other Jurisdictions



An Ghníomhaireacht  
Tithíochta  
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**This research was desk-based, utilising publicly available information in 2021.  
No further verification of data or guidance has been carried out by The Housing Agency.**

# 1 Background and Context

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## 1.1 The National Housing Strategy for People with a Disability 2011 -2016

The National Housing Strategy for People with a Disability 2011 – 2016 was published in October 2011. The associated National Implementation Framework for the National Housing Strategy for People with a Disability 2011-2016 was published in July 2012. These documents are joint publications of the Department of Housing, Planning and Local Government<sup>1</sup> and the Department of Health. They set out the Government’s broad framework for the delivery of housing for people with disabilities through mainstream housing options.

## 1.2 Development of a New Strategy for 2022

The strategy was extended to 2021 and work is currently underway to prepare a new strategy, The National Housing Strategy for Disabled People 2022-2027. The development of the new strategy has involved two rounds of consultation and the commissioning of a number of pieces of research.

## 1.3 Purpose of this Report

This report focuses on housing provision for people with disabilities in other jurisdictions and forms part of the suite of work undertaken to inform the new strategy. To gain insight into how other countries provide housing for people with a disability, publicly available information on five countries was reviewed in 2021. After an initial scoping exercise that looked at practices in many countries, the following five countries were selected: England, Canada, Australia, New Zealand and Sweden. These countries were chosen as they have all ratified the Convention on the Rights of Persons with Disabilities (CRPD)<sup>2</sup>.

It was also envisaged that sufficient information on these countries would be publicly available in order to provide a good insight into their housing policies for people with a disability. This paper aims to show samples of practices in these countries in order to aid the development of the new Housing and Disability Strategy.

The paper provides a country-by-country profile which includes:

- An overview of the Governance and the key stakeholders involved in providing housing for people with a disability.
- Disability and the population.
- Disability legislation.
- Disability related strategies in place.
- Disability and Housing in the country.
- Examples of how housing for people with a disability is provided.

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1 Now the Department of Housing, Local Government and Heritage

2 United Nations, *Convention on the Rights of Persons with Disabilities (CRPD)*. Available at: <https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities.html>

## 2 Summary of International Examples

|                    | Proportion of pop. with disabilities                | Key legislation relating to disability                       | Key strategies related to disability                | Organisation with overall responsibility for disability                                  | Housing examples                                                                                           | UNCRPD ratification <sup>3</sup> |
|--------------------|-----------------------------------------------------|--------------------------------------------------------------|-----------------------------------------------------|------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|----------------------------------|
| <b>England</b>     | 22%                                                 | Equality Act (2010)<br>Care Act (2014)                       | National Strategy for Disabled People (forthcoming) | Government Equalities Office/<br>Office for Disability Issues & Local Authorities        | HOLD (Home Ownership for People with Long Term Disabilities)                                               | Aug 2009                         |
| <b>Canada</b>      | 22%                                                 | Canadian Charter of Rights and Freedoms                      | National Housing Strategy (2017)                    | Office for Disability Issues & Provincial/<br>Territorial Governments                    | ILBC (Independent Living British Columbia Program)<br><br>RAAP (Residential Adaptation Assistance Program) | March 2010                       |
| <b>Australia</b>   | 18%                                                 | Disability Discrimination Act (1992)                         | National Disability Strategy (2011)                 | Australian Government Department of Social Services<br><br>State/Territorial Governments | SDA (Specialist Disability Accommodation)<br><br>SIL (Supported Independent Living)                        | July 2008                        |
| <b>New Zealand</b> | 24%                                                 | Human Rights Act (1993)                                      | New Zealand Disability Strategy (2016)              | Office for Disability Issues                                                             | Supported Living<br><br>Home & Community Support                                                           | Sep 2008                         |
| <b>Sweden</b>      | Surveys show 10-30% of population have a disability | Discrimination Act (2009)<br>Support and Services Act (2001) | Aligned with UNCRPD                                 | Ministry of Health and Social Affairs                                                    | LSS Support<br><br>Housing Modification Grant                                                              | Dec 2008                         |

<sup>3</sup> United Nations, *Convention on the Rights of Persons with Disabilities (CRPD)*. Available at: <https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities.html>  
Details on ratification by country: <https://indicators.ohchr.org/>

## England

In England, the disabled population of approx. 22% can access various types of housing including different supported models. One scheme of note is **Home Ownership for people with Long-term Disabilities or HOLD**. HOLD is a form of shared ownership housing available for people with long term disabilities (this covers physical and learning disabilities, cognitive and sensory impairments, and enduring mental health issues). It offers potential applicants the opportunity to share in the ownership of their home with a housing association.

## Canada

22% of Canada's population has a disability<sup>4</sup>. An interesting housing model is the **Independent Living British Columbia Program (ILBC)**. It is a subsidised assisted living program that provides housing along with support services for people with disabilities and elderly citizens. It is provided by a partnership between British Columbia Housing (a state housing body), regional health authorities, non-profit and private sector providers. Rental housing is provided for vulnerable groups in low income and moderate-income backgrounds who may need assistance so they can live independent lives but do not require 24-hour social care or services. Another scheme of note is the **Residential Adaptation Assistance Program (RAAP)** which is in place in Quebec. It is a tripartite initiative which provides housing adaptation assistance as well as support services for people with disabilities and is delivered by a partnership between Société d'Habitation du Québec (a government body), regional health authorities, non-profit and private sector providers.

## Australia

In Australia 18% of the population have a disability<sup>5</sup>. Housing support is seen as a driving factor of individuals living both stably and independently in their communities and there is a variety of housing supports available. Among these are the **Specialist Disability Accommodation (SDA)** which is a range of housing designed for participants with extreme functional impairment or very high support needs and **Supported Independent Living (SIL)** which provides help and/or supervision of daily tasks to help participants to live as independently as possible, while building their skills. Another scheme of note is the **National Disability Insurance Scheme (NDIS)**, a financial support scheme designed to provide choice for individuals who have an array of different types of disabilities.

## New Zealand

In New Zealand 24% of the population have a disability<sup>6</sup>. An interesting programme here is the **Supported Living** scheme which is a fully funded service accessed through the Ministry of Health designed to assist disabled people with living more independently through the provision of supports most needed by the person. The scheme places the applicant at the heart of its development and puts them centre in the handling of all aspects of assessment and service delivery. **Home and Community Support** is another programme of note, this is a fully funded programme accessed through the Ministry of Health. It offers services to assist people who have a disability to live at home by helping them with personal care and household management.

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4 Statistics Canada, *A demographic, employment and income profile of Canadians with disabilities aged 15 years and over, 2017*. Accessed January 2021: <https://www150.statcan.gc.ca/n1/en/catalogue/89-654-X2018002>

5 Australian Bureau of Statistics, *Disability, Ageing and Carers, Australia: Summary of Findings*. Accessed January 2021: Disability, Ageing and Carers, Australia: Summary of Findings, 2018 | Australian Bureau of Statistics ([abs.gov.au](https://abs.gov.au))

6 Stats NZ, *Disability survey: 2013*. Available at: Disability survey: 2013 | Stats NZ

## Sweden

In Sweden various surveys show a range in the disabled population, this can be up to 30%. In Sweden, **“LSS’ Supports** (from an acronym for the Swedish name of the Act concerning Support and Service to Persons with Certain Functional Disabilities) are available which provide people under age 65 with extensive functional disabilities with a right to free personal assistance. Individuals as well as parents of children with disabilities can obtain state aid for purchasing and adapting services related to care. There is also a **Housing Modification Grant** for private dwellings. If people with disabilities need to have their accommodation modified to fit specific needs, they can apply for a grant from their local council/municipality irrespective of their financial situation.

# 3 England

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## 3.1 Disability Governance and Key Stakeholders

England is the only country in the United Kingdom which does not have its own devolved parliament. Daily issues and policies are handled by the British Government and debated in Westminster Abbey. The country is divided into 48 counties within 9 regions:

1. London
2. North-West
3. North-East
4. Yorkshire and the Humber
5. West Midlands
6. East Midlands
7. East of England
8. South-West
9. South-East

Power from Westminster which is delegated to local government for public policy tends to be quite limited and local government is structured differently depending on the area one is living in. Within the 9 regions of England, there are 343 local authorities categorised into 5 different forms of government (this also includes City of London and Isles of Scilly)<sup>7</sup>:

- County Councils
- District Councils
- Unitary Authorities
- Metropolitan Districts
- London Boroughs

There are two types of local governance in England – Two Tiered and Single Tier. Two-tiered governance consists of county councils and district councils where responsibility is distributed between them. County councils are usually responsible for services around social care and transport while district councils control community safety and environmental health. Single tiered governance on the other hand consists of one authority that carries out all responsibilities and functioning of services in that area. These are typically located in metropolitan areas and the boroughs of London.

The Equality Act 2010 defines a disabled person as “a person who has a physical or mental impairment that has substantial and long-term negative effects on their ability to do normal daily activities”. According to the Care Act 2014, much of the accountability for the provision of welfare for disabled people lies with local authorities<sup>8</sup>. The Care Act states that local authorities have a responsibility to people in their communities and must provide necessary services that contribute

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7 UK Government: *Understand how your council works*. Available at: <https://www.gov.uk/understand-how-your-council-works>

8 UK Government, *Care Act 2014*. Available at: [Care Act 2014 \(legislation.gov.uk\)](https://www.legislation.gov.uk)

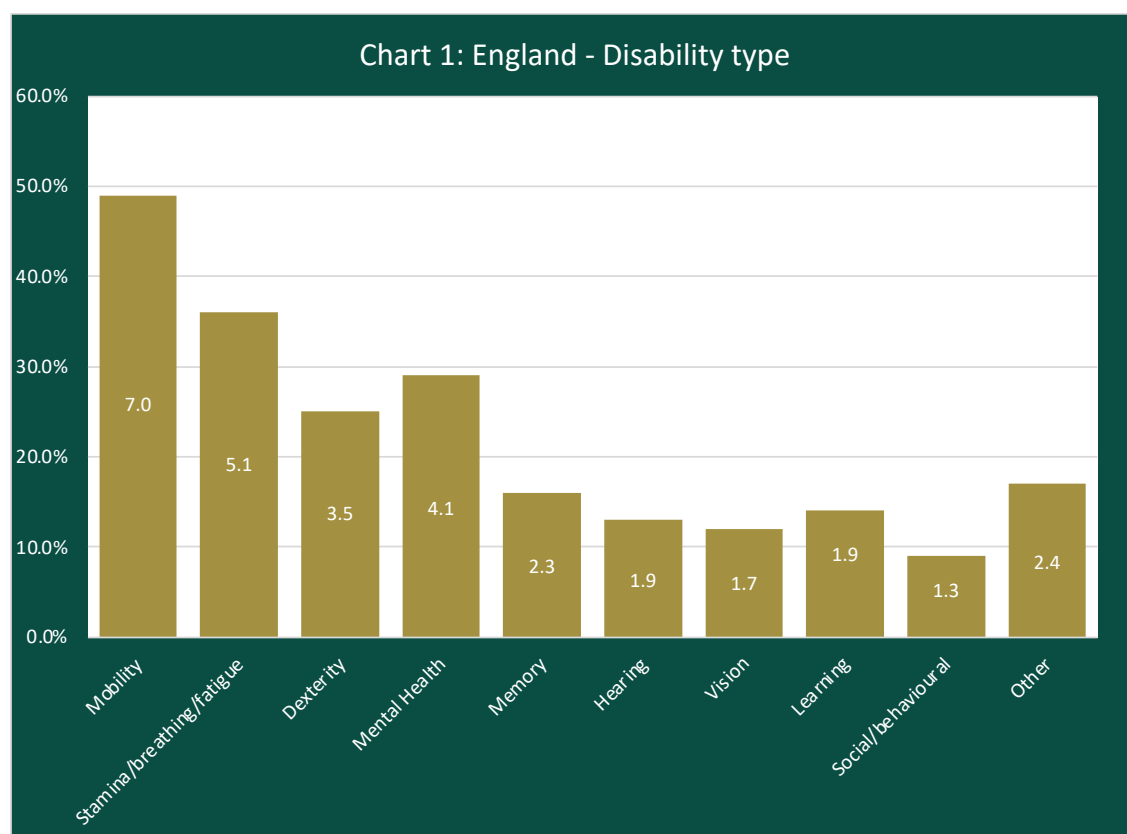
to the prevention of people developing needs for care and support. They also have a responsibility to prevent a delay for any need of ongoing care and support should services become inadequate to meet the person's needs. This means that any decision a local authority makes regarding a care service user must be carefully considered due to the impact that it will have on the individual.

The main obligations for local authorities include:

- Preventing needs for care and support.
- Promoting the integration of care and support with health services etc.
- Providing information and advice to service users or potential service users.
- Promoting diversity and quality in the provision of care services.
- Co-operating generally and in specific cases.

## 3.2 Disability and the Population

According to the latest census for England and Wales which was published in 2011, England has a population of 53 million people. Analysis done in 2020 by the Department of Works and Pensions, shows that 22% of the population (14.1 million) are living with a disability<sup>9</sup>.

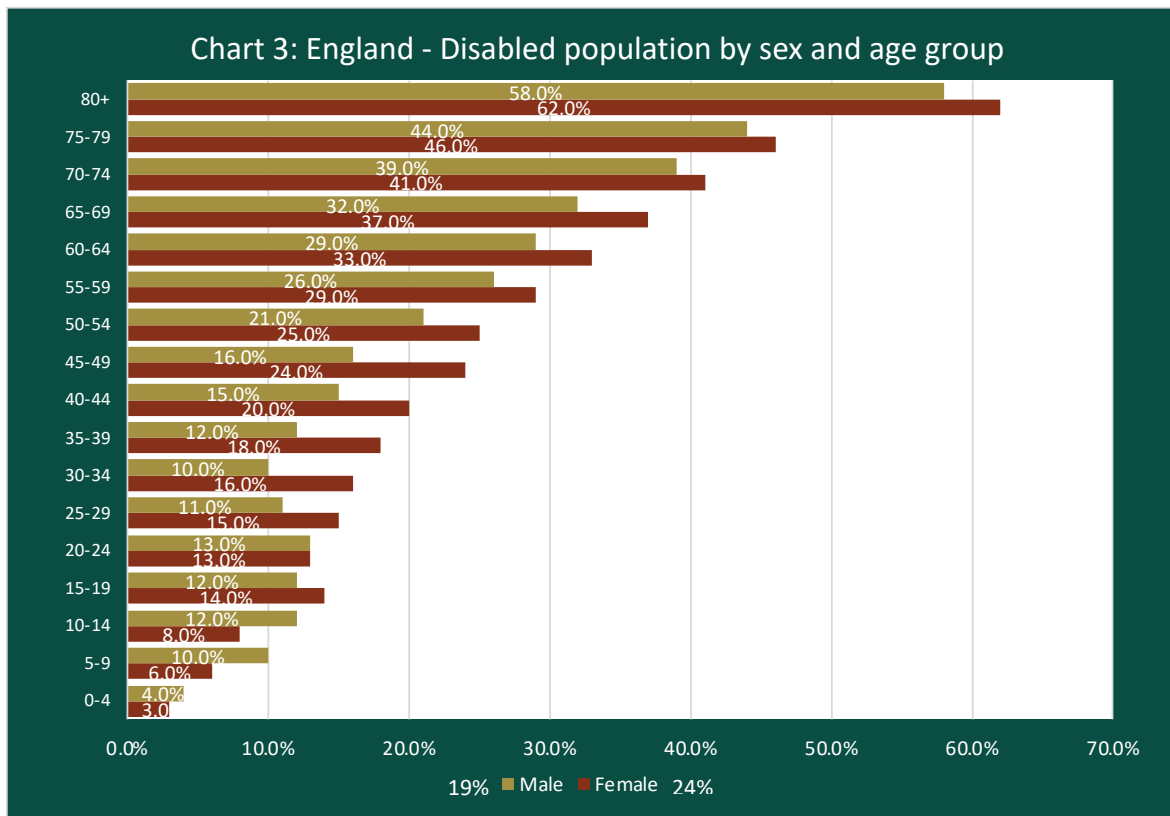


\*Note: The values within each chart were published by the Department of Works and Pensions in the Family Resources Survey 2020.

Chart 1 displays the disabled population of England by disability type. The three most common disability types in England are Mobility (49%), Stamina/breathing/fatigue (36%) and Mental Health (29%) while the three least common disabilities are Social/behavioural (9%) Vision (12%) and Hearing (13%)<sup>10</sup>.

<sup>9</sup> Department of Works and Pensions, *Family Resources Survey 2019/20*. Accessed November 2021: National statistics overview: Family Resources Survey: financial year 2019 to 2020 - GOV.UK ([www.gov.uk](http://www.gov.uk))

<sup>10</sup> Department of Works and Pensions, *Family Resources Survey 2019/20*. Accessed November 2021: National statistics overview: Family Resources Survey: financial year 2019 to 2020 - GOV.UK ([www.gov.uk](http://www.gov.uk))



\*Note: The values within each chart were published by the Department of Works and Pensions in the Family Resources Survey 2020.

Chart 2 displays the disabled population of England by sex and age group. We can see a larger proportion of women are living with a disability in England compared to men<sup>11</sup>.

### 3.3 Disability Legislation

#### Equality Act 2010

The Equality Act 2010 is an Act of Parliament of the United Kingdom which legally protects British citizens from discrimination whether in wider society or in a plethora of other realms. It consolidated a number of existing acts with many of them dating back to the 1970's. For people living in England who have a disability or illness, the Equality Act 2010 is a legislative framework that protects the individual on several grounds<sup>12</sup>. It is designed to eliminate discrimination, harassment, and the victimisation of marginalised peoples such as those in the disabled community while also being one of the primary drivers in advancing equality of opportunity for a more just and fair society.

The Equality Act 2010 states that it is illegal to discriminate against an individual who:

- Is disabled.
- Is perceived to have a disability (discrimination by perception).
- Is associated to someone who has a disability (discrimination by association).

In its entirety, the Act applies to England and Wales including all its provisions related to disability. This also applies to Scotland except for Section 190 which focuses on "improvement to let dwelling

11 Department of Works and Pensions, *Family Resources Survey 2019/20*. Accessed November 2021: National statistics overview: Family Resources Survey: financial year 2019 to 2020 - GOV.UK ([www.gov.uk](http://www.gov.uk))

12 UK Government, 2010. *Equality Act 2010*. Available at: <https://www.legislation.gov.uk/ukpga/2010/15/> contents

houses". The Act does not extend to Northern Ireland as in its place is a considerably amended Disability Discrimination Act 1995 which had originally extended to the whole of the UK<sup>13</sup>.

## Care Act 2014

The Care Act 2014 is an Act of Parliament of the United Kingdom designed to improve the wellbeing and independence of disabled people, elderly people and people who work in social care<sup>14</sup>. The Act supersedes previous diverse adult social care legislation and aims to enable people to have more control over their own lives, while simultaneously being backed by support services that focus on prevention rather than cooling down demand<sup>15</sup>.

Many of the principles and obligations that are set out by the Care Act 2014 align with the ideals in the 'social model for disability'. This was an approach that originally began in the UK as far back as the 18th century and gained traction in the 1970's due to rights-based movements elsewhere in Europe and North America<sup>16</sup>. The model considers that a person's impairment (physical, learning, sensory etc.) does not have to be the cause of social or economic barriers in their life or the deterioration of their health. Instead, this is caused by society when it fails to take account of these problems<sup>17</sup>.

Under the Care Act 2014, the principle of wellbeing is at the core of its functions and is required to be at the heart of any action that is carried out under this legislation. As wellbeing is an extremely broad concept, this can be interpreted in many ways. The Act defines this by relating it to the following measures which are of equal importance and have no hierarchy.

- Personal dignity
- Physical/mental health and emotional wellbeing
- Control by the individual over day-to-day life
- Participation in work, education, training or recreation
- Social and economic wellbeing
- Domestic, family, and personal
- Suitability of living accommodation
- The individual's contribution to society

## 3.4 Disability Strategies

### The National Strategy for Disabled People

The **National Strategy for Disabled People** is a UK wide strategy published in July 2021<sup>18</sup>. According to the British Government's Disability Unit, the strategy seeks to make practical changes which would strengthen disabled people's ability to participate fully in society and places fairness

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13 The Authority of the House of Lords, HL Paper 117, *The Equality Act 2010: the impact on disabled people*. Available at: <https://publications.parliament.uk/pa/ld201516/ldselect/ldselect/117/117.pdf>

14 Department of Health and Social Care, 2021, *Care and Support Statutory Guidance*. Accessed April 2021: <https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance>

15 Royal College of Occupational Therapists, 2016. *Home Adaptations: The Care Act 2014 and Related Provision Across the United Kingdom*. Available at: <https://www.rcot.co.uk/sites/default/files/Home-adaptations-Care-Act2014.pdf>

16 Nursing Times, 2014, *The Social Model on Disability*. Accessed March 2021: <https://www.nursingtimes.net/roles/learning-disability-nurses/how-the-social-model-of-disability-evolved-09-12-2014/>

17 Scope UK, *Social Model of Disability*. Accessed March 2021: <https://www.scope.org.uk/about-us/social-model-of-disability/>

18 UK Government, *National Disability Strategy*. Accessed March 2021: National Disability Strategy - GOV.UK ([www.gov.uk](http://www.gov.uk))

at the heart of the government's work on disability. The strategy focuses on evidence and data as well as insights shared from the life experiences of people living with disabilities.

The British Government's objectives for the National Strategy for Disabled People, which they state are complements to the principles of the UNCRPD, are to:

- Promote equality of opportunities, outcomes, and experiences, such as in work and in access to services.
- Embedding accessible approaches and services to "consider disability from the start".
- Encourage initiatives that support all disabled people to have choice and control over their lives.
- Strengthen the ways in which disabled people are included in the development and delivery of services and policies.
- Improve the quality of evidence and data and use it to support policies and how they are delivered.

Accompanying these objectives are several major themes which were highlighted to the British Government by charities and stakeholders such as the Disabled Charities Consortium and the Disability Access Ambassadors. These themes which will sit across departmental responsibilities include:

- Housing and wider built environments
- Transport
- Justice system
- Independent Living
- Accessible products and services (including assistive technology)
- Perceptions of disabled people

The strategy includes particular objectives for housing policy, including increasing the supply of affordable homes, improving the administration and delivery of facilities grants and improving the rights of disabled tenants<sup>19</sup>.

### 3.5 Disability and Housing

Disabled or elderly people in England have a variety of different housing schemes and care services to avail of. These schemes and services can provide choices to live independently if desired. Two examples are detailed below, the first being Home Ownership for People with Long-term Disabilities (HOLD) which is a form of shared ownership, the second is a system of home adaptations run by local authorities/councils. Other programs that are on offer in England/ the UK include<sup>20</sup>:

- Social Housing
- Supported Living
- Specialist Supported Housing
- Shared Housing
- Sheltered Housing
- Residential Care

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19 UK Government, *Home: National Disability Strategy explained - The Disability Unit (blog.gov.uk)*. Accessed November 2021: <https://disabilityunit.blog.gov.uk/2021/07/28/home-national-disability-strategy-explained/>

20 My Family Our Needs, *Housing Options for People with Disabilities*. Accessed March 2021: <https://www.myfamilyourneeds.co.uk/supporting-your-child/housing-options/>

## 3.6 Examples

### a) Home Ownership for People with Long-term Disabilities (HOLD)

HOLD is a form of shared ownership housing available to applicants aged 18 years old or over in England. In existence since 1997, it is managed by Homes England<sup>21</sup> and the Ministry of Housing, Communities and Local Government<sup>22</sup>. It is designed for long-term disabled people such as people who have physical and learning disabilities, cognitive and sensory impairments, and enduring mental health issues.<sup>23</sup> It is also a key part of the British Government's Affordable Homes Programme offering potential applicants the opportunity to share in the ownership of their home with a housing association.

It is a low-cost housing scheme designed for disabled people. The programme works on a part buy and part rent basis. If a disabled person wishes to acquire a home, they must meet the scheme's general eligibility criteria which are set out below:<sup>24</sup>

- Have a long-term disability.
- Annual household income of no more than £80,000, or no more than £90,000 in London.
- Unable to purchase a home suitable for needs without assistance.
- Not a current homeowner (or be named on the deeds of another property).
- No outstanding credit issues (i.e., unsatisfied defaults or county court judgments).

Should the applicant be successful in their application, they can then search for a home which meets their preferences. Once a property is selected by them, it is then purchased by the housing association assisting the individual and a share of the home is then sold onto that individual. The share sold on to the applicant is 10% - 75% of the full purchase price to which they can acquire a loan and use this to help pay for their share.

The HOLD programme may not be the preferred choice for all long-term disabled people due to issues around eligibility and living alone. However, for those who can or have availed of it, they can experience many benefits. For example, the programme offers one of the most secure types of tenure available for disabled people and gives the tenant freedom of choice over the care they wish to receive. Many residential care homes come as a package in the form of accommodation and care. However, this type of care may not be suitable for the tenant living there and thus could face surrendering their accommodation to obtain the type of service they desire. HOLD on the other hand gives the individual an opportunity to buy a home of their preference and to choose the type of care they wish to receive without the risk of losing that accommodation or the possibility of facing eviction from the property.

### b) Home Adaptations & Disabled Facilities Grants

Home adaptations are modifications to homes which are provided to people with disabilities to increase their safety and liveable experience inside the home. The purpose of adaptations and modifications is to adjust the environment of the home through the integration of physical assistance to enable and maximise privacy, dignity, and independent living to the individual and their family<sup>25</sup>.

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21 Homes England is a non-departmental public body that funds affordable housing and schemes like 'Own Your Home'

22 UK Government, *Own Your Home*. Accessed November 2021: Learn how we're helping - Own Your Home - Own Your Home

23 Advance UK, *HOLD Shared Ownership*. Available at: [http://www.advanceuk.org/uploaded\\_files/1188/images/Advance%20HOLD%20shared%20ownership%20leaflet%202018.pdf](http://www.advanceuk.org/uploaded_files/1188/images/Advance%20HOLD%20shared%20ownership%20leaflet%202018.pdf)

24 UK Government, Find your Local *Help to Buy Agent*. Accessed November 2021: Find a Help to Buy agent - Own Your Home - Own Your Home

25 Independent Age, *Home Adaptations*. Accessed March 2021: <https://www.independentage.org/information/housing-options/home-adaptations>

Under the Care Act 2014, it is stated that local authorities have a duty to meet the needs in care and support for people with impairments or possible future impairments. This duty applies irrespective of the severity of the person's condition or his or her finances. Regulations require that should someone wish to make adaptations to their home, they can apply for minor aids and adaptations which are often free if less than £1,000. These are often related to mobility and falls prevention such as:

- Short concrete ramps or shallow steps.
- Grab rails or longer external metal handrails.
- Automatic lighting at the front access.
- Door-release intercom system<sup>26</sup>.

To be eligible under the Care Act for home adaptations, there are 3 key questions that must be answered by the applicant:

- i) Does the adult have care and support needs arising from, or related to, a physical or mental impairment?
- ii) Is the adult unable to achieve at least two outcomes as below?
  - a) Managing and maintaining nutrition.
  - b) Maintaining personal hygiene.
  - c) Managing toilet needs.
  - d) Being appropriately clothed.
  - e) Being able to make use of the adult's home safely.
  - f) Maintaining a habitable home environment.
  - g) Developing and maintaining family or other personal relationships.
  - h) Accessing and engaging in work, training, education or volunteering.
  - i) Making use of necessary facilities or services in the local community including public transport, and recreational facilities or services.
  - j) Carrying out any caring responsibilities the adult has for a child.
- iii) As a consequence, is there, or is there likely to be, a significant impact on the adult's wellbeing?

If the applicant answers yes to the 3 questions and at least 2 outcomes are not being achieved, the applicant is then eligible, and their local authority now has a duty to meet those needs by way of care and support. However, if adaptations exceed £1,000, the applicant can apply for the Disabled Facilities Grant (DFG)<sup>27</sup>.

The Disabled Facilities Grant is a grant provided by the local authority that can enable the applicant to make desired changes to their home. Central government funding allocated to these grants totalled £573 million for England in 2021-2022. The applicant must be the owner or tenant of the property and must intend to live in the property during the grant period of 5 years. A landlord with a disabled tenant can also apply. Unlike Housing Adaptations, this is a payment that can be used to purchase equipment and other adaptations which exceed the £1,000 threshold. Another difference is that this is a means tested payment where income and savings are taken into account. The

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26 College of Occupational Therapists, 2016. *Home Adaptations, The Care Act 2014 & Related Provision Across the UK*. Available at: <https://www.rcot.co.uk/sites/default/files/Home-adaptations-Care-Act2014.pdf>

27 Local Government Association, 2020. *Meeting the Home Adaptation Needs of Older People*. Available at: [https://www.local.gov.uk/sites/default/files/documents/5.74%20Accessible%20housing\\_v05\\_1%20-%20BM%20amends.pdf](https://www.local.gov.uk/sites/default/files/documents/5.74%20Accessible%20housing_v05_1%20-%20BM%20amends.pdf)

For further details on eligibility criteria, see <https://www.equalityhumanrights.com/sites/default/files/research-report-114-housing-and-disabled-people-experiences-in-britain.pdf>, p. 72 – 74.

maximum DFG in England is £30,000. If the application is for a disabled child or qualifying young person, there is no means test. Such equipment and modifications that can be purchased include:

- Door widening.
- Long wheelchair ramp.
- Stair lift or through-floor wheelchair lift.
- Wheelchair accessible shower.
- Wheelchair accessible kitchen facilities.
- Adapting controls for heating and lighting to make them easier to use.

Planning permission must be sought by the applicant where relevant, and the grant can be used to pay the fees for an architect or qualified surveyor. Depending on the works required, the local authority may pay the grant in instalments throughout the renovations or in full upon their completion. They may also decide to pay the contractor undertaking the work directly or give the applicant a cheque to pass on to the contractor.

An independent review<sup>28</sup> commissioned by the government identified a number of problems to be addressed within the scheme, including:

- Limited analysis of local needs and demand.
- Restrictive upper limits that have proved to be a deterrent for some applicants.
- A reduction in local authority contributions.
- Changes in available technologies and expectations of applications requiring updates to DFG.

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28 UK Government, *Disabled Facilities Grant and other adaptations: external review*. Accessed March 2021: Disabled Facilities Grant and other adaptations: external review - GOV.UK ([www.gov.uk](http://www.gov.uk))

# 4 Canada

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## 4.1 Disability Governance and Key Stakeholders

Canada is a federal state consisting of 3 primary institutions: The Crown, The Senate and The House of Commons. Various key structures of power from the central government (Government of Canada) located on Parliament Hill are devolved to provinces and territories across the country who also possess their own parliaments, assemblies, and authorities. Overall, there are 10 provinces and 3 territories in Canada<sup>29</sup>:

### Provinces

1. Alberta
2. British Columbia
3. Manitoba
4. New Brunswick
5. Newfoundland & Labrador
6. Nova Scotia
7. Ontario
8. Prince Edward Island
9. Quebec
10. Saskatchewan

### Territories

1. North-West Territories
2. Nunavut
3. Yukon

In total, there are 143 regional authorities and 3,600 local governments across all provinces and territories. Further devolution is passed down to cities and towns within these areas. These are known as municipalities which have municipal authorities. However, these authorities do not have much influence and are only responsible for key services such as water, sewage, and waste collection. City governments are structured in a similar fashion while the city councils act as a legislature.

Due to the federal structure of Canadian disability policy, there is no “single, harmonized ‘operational’ definition of disability across federal programs”<sup>30</sup>. The federal government references

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29 Parliament of Canada: Parliamentary Institutions. Available at: <https://www.ourcommons.ca/marleaumontpetit/DocumentViewer.aspx?Sec=Ch01&Seq=2#:~:text=Canada%20is%20a%20parliamentary%20democracy%3A%20its%20system%20of,Crown%2C%20the%20Senate%20and%20the%20House%20of%20Commons>.

30 Government of Canada, Federal disability Reference Guide. Accessed March 2021: Federal Disability Reference Guide - Canada.ca

the WHO definition and that given in the UNCRPD, and some provincial governments have their own distinct legal definitions<sup>31</sup>. For example, Ontario defines disability as:

1. any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect or illness and, without limiting the generality of the foregoing, includes diabetes mellitus, epilepsy, a brain injury, any degree of paralysis, amputation, lack of physical co-ordination, blindness or visual impediment, deafness or hearing impediment, muteness or speech impediment, or physical reliance on a guide dog or other animal or on a wheelchair or other remedial appliance or device,
2. a condition of mental impairment or a developmental disability,
3. a learning disability, or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language,
4. a mental disorder,
5. an injury or disability for which benefits were claimed or received under the insurance plan established under the Workplace Safety and Insurance Act, 1997.

Responsibility for those with a disability is usually shared between the federal government, provincial governments, and the Office for Disability Issues. They work to promote the full inclusion of disabled Canadians in all aspects of society and community life. There are various forms of social assistance that are offered to disabled people especially benefit payments. These can be received from the province or territory the individual is living in or from their municipal government. Health related benefits are also offered from provincial governments such as medications and medical devices. The government's official website provides a list of these benefits from each province<sup>32</sup>.

## 4.2 Disability and the Population

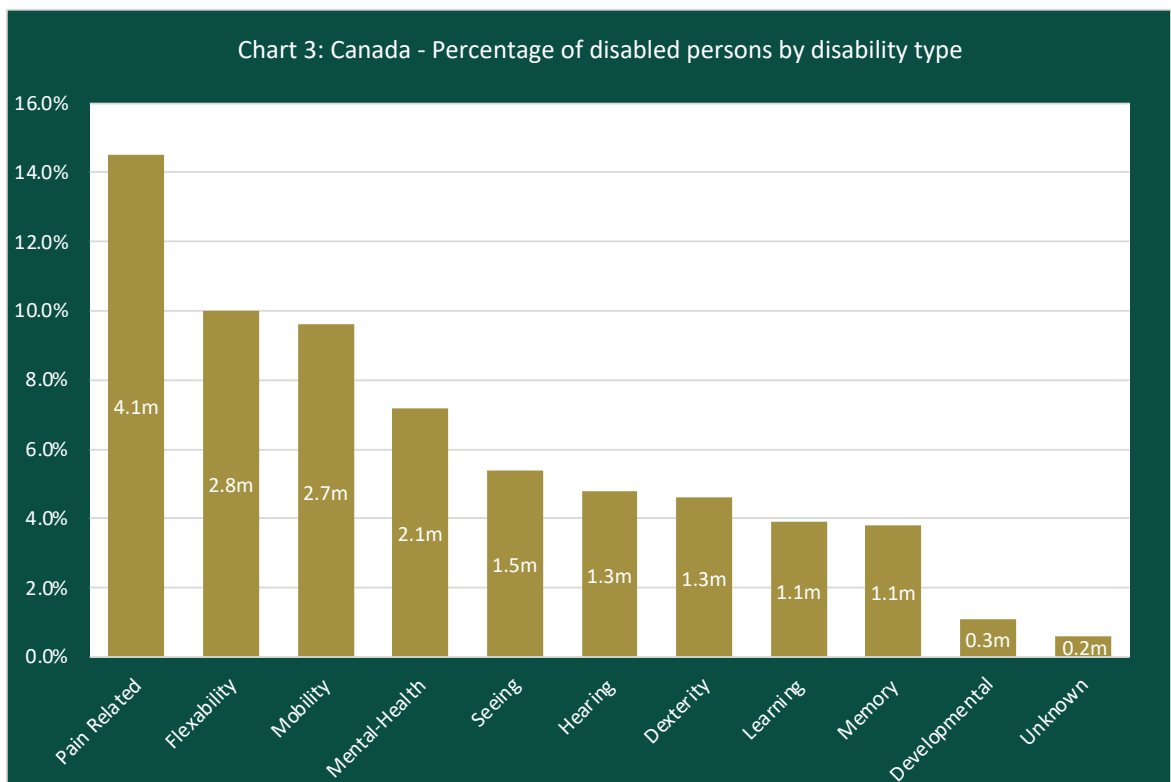
According to Statistics Canada's Survey on Disability 2017<sup>33</sup>, of a population of just over 28 million who are aged 15 years old or over, around 6.2 million of Canada's population are living with one or more disabilities. This constitutes 22% of Canadians.

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31 For example, the following policy from Ontario: <http://www.ohrc.on.ca/en/policy-ableism-and-discrimination-based-disability/2-what-disability>

32 Government of Canada, *Disability Benefits*, Accessed June 2021. Available at: <https://www.canada.ca/en/financial-consumer-agency/services/living-disability/disability-benefits.html>

33 Government of Canada, *Canadian Survey on Disability, 2017*. Accessed November 2021. Available at: The Daily – Canadian Survey on Disability, 2017 (statcan.gc.ca)



\*Note: In the charts below, the sum of the values for each category may differ from the total due to rounding. These methods were carried out by Statistics Canada prior to publishing their figures.

Chart 3 displays the disabled population of Canada by disability type. The three most common disabilities amongst Canadians are Pain Related (14.5%), Flexibility (10%) and Mobility (9.6%). The three least common disabilities are Developmental (1.1%), Memory (3.8%) & Learning (3.9%).

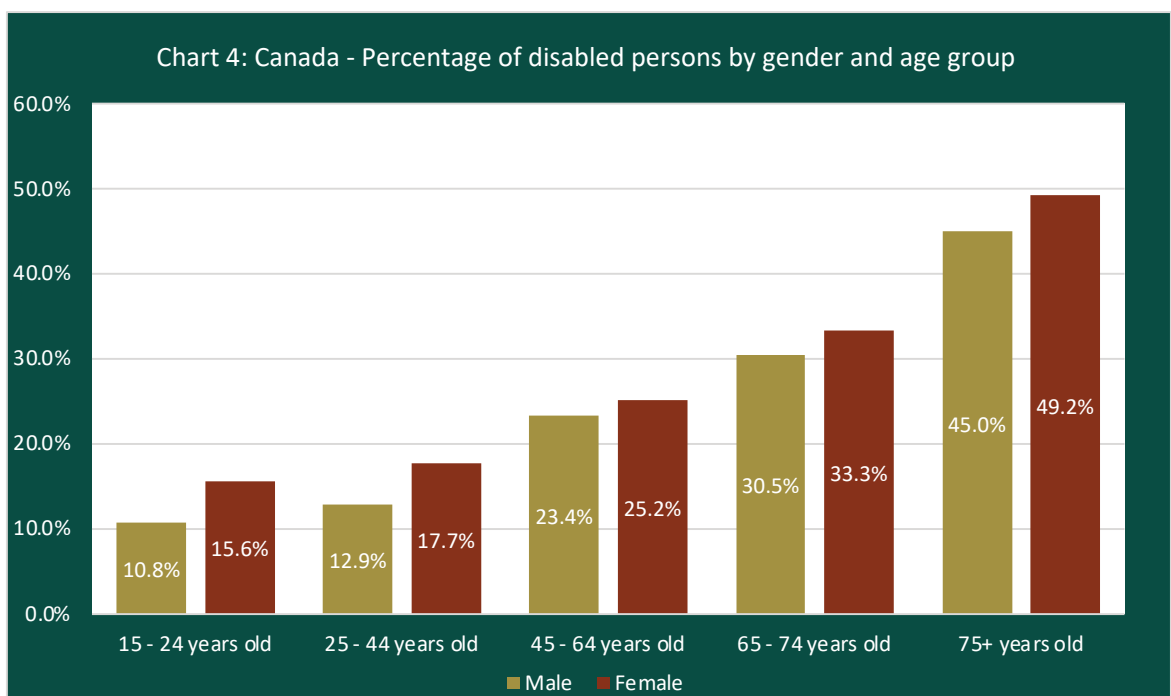


Chart 4 displays the disabled population of Canada by gender and age groups. In all age groups, women have a higher prevalence of disability than men with an overall percentage of 20.2% for males and 24.2% for females.

## 4.3 Disability Legislation

### Canadian Charter of Rights and Freedoms

Canada does not have any specific legislation for people with disabilities at a federal level, but protection is provided under the Canadian Charter of Rights and Freedoms. Disability legislation primarily operates at the Provincial and Territorial level. The Canadian Charter of Rights and Freedoms is a set of laws that form a section of the Canadian Constitution. Enacted on 17th April 1982, the rights that are set out in the charter are the most supreme law across all of Canada and are awarded to every citizen in the entire country, including disabled people. The charter is the most significant piece of legislation in Canada's history and essential to the functioning of its society<sup>34</sup>.

The Canadian Charter of Rights and Freedoms enshrines 34 sections into 8 rights and freedoms:

- Fundamental Freedoms
- Democratic Rights
- Mobility Rights
- Legal Rights
- Equality Rights
- Language Rights
- Minority Language Education Rights
- Other Sections

Section 15 of the Canadian Charter focuses on equality rights guaranteed under the constitution<sup>35</sup>:

- 1) Every individual is equal before and under the law and has the right to the equal protection and equal benefit of the law without discrimination and without discrimination based on race, national or ethnic origin, colour, religion, sex, age or mental or physical disability.
- 2) Section 1 does not preclude any law, program or activity that has as its object the amelioration of conditions of disadvantaged individuals or groups. These include those that are disadvantaged because of race, national or ethnic origin, colour, religion, sex, age or mental or physical disability.

Section 15 of the 1982 charter was not commenced until 17th April 1985. This was to give provincial governments the chance to bring their laws into line with the equality rights stated under the charter. Aligned with the ratification of the UNCRPD in 2010, this has put Canada in a unique position as the only country in the world that explicitly protects people with disabilities in their constitution<sup>36</sup>. However, it must be noted that the right to housing for disabled people has, thus far, not been recognised by Canadian law. Canada has ratified both the Convention on the Right of People with Disabilities and the International Covenant on Economic, Social and Cultural Rights but its commitments under these international laws are not directly domesticated into Canadian law<sup>37</sup>. As a result, the right to housing, conferred by these international laws, is not applicable in Canada.

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34 Government of Canada, *Guide to Canadian Charter of Rights & Freedoms*. Accessed March 2021: <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

35 Government of Canada, Dept of Justice, *Section 15 of CCRF*. Accessed March 2021: <https://www.justice.gc.ca/eng/csj-sjc/rfc-dlc/ccrf-ccd/cdl/check/art15.html>

36 Government of Canada, *Promoting rights of persons with disabilities*. Accessed March 2021: [https://www.international.gc.ca/world-monde/issues\\_development-enjeux\\_developpement/human\\_rights-droits\\_homme/rights\\_disabilities-droits\\_handicapees.aspx?lang=eng](https://www.international.gc.ca/world-monde/issues_development-enjeux_developpement/human_rights-droits_homme/rights_disabilities-droits_handicapees.aspx?lang=eng)

37 Government of Canada, *Canada's appearance at the United Nations committee on Economic, Social and Cultural Rights*. Accessed March 2021: <https://www.canada.ca/en/canadian-heritage/services/canada-united-nations-system/reports-united-nations-treaties/commitments-economic-social-cultural-rights/canada-appearance.html>

## 4.4 Disability Strategies

Canada does not have a specific disability strategy at the national level, though public consultations have begun for the first Disability Inclusion Action Plan (DIAP) <sup>38</sup>. Other national strategies, discussed below, have implications for disability housing policy.

### The National Housing Strategy

The National Housing Strategy is a 10-year \$70+ billion plan designed to provide housing for millions of people living in Canada. Officially announced on 22nd November 2017 and launched on 1st April 2019, it is the first housing strategy of its kind in Canada which plans to build up to 100,000 new housing units and repair or renew a further 300,000 units. With a belief that housing is at the heart of inclusivity, it uses a mix of funding, loans and grants to create homes in affordable, liveable, and stable communities with its first prioritisation being the most vulnerable in Canadian society. This includes people with disabilities, indigenous peoples, senior citizens, people with drug addictions and homeless people<sup>39</sup>. At the heart of the strategy are three key principles:

- People
- Communities
- Participation

Through new initiatives such as the National Housing Co-Investment Fund and the Canada Housing Initiative, the National Housing Strategy hopes to create a new generation of diverse communities and housing across the entire country that is fully entrenched within the community – close to public services, work, and transits. It invests in provinces and territories, so that all regions can achieve better and more affordable housing. It also invests in municipalities, to empower communities and to create new opportunities for the federal government to innovate through partnerships with the community housing sector, co-operative movement, private sector, and research community. Under the strategy 20% of newly built units must meet accessibility standards and projects must be barrier-free or have full universal design. The strategy also states that 20% of renewed and repaired units must also meet accessibility standards and projects must be barrier-free in common areas<sup>40</sup>.

## 4.5 Disability and Housing

Canada is a decentralised federation, and each province or territory oversees their own policy frameworks and funding contributions in relation to housing. There is however a substantial federal role in terms of broad leadership, policy-frameworks, and cost-sharing.<sup>41</sup> In Canada, there are ten provinces, each province has their own approach to disability housing and care services varying from independent living, home modifications and housing assistance. Table 1 below lists some different schemes available in Canada's various provinces.

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38 Government of Canada, *Canadians invited to help shape Canada's first Disability Inclusion Action Plan*. Accessed November 2021: Canadians invited to help shape Canada's first Disability Inclusion Action Plan - Canada.ca

39 Government of Canada, 2018. *National Housing Strategy*. Available at: <https://www.placetocallhome.ca/-/media/sf/project/placetocallhome/pdfs/canada-national-housing-strategy.pdf>

40 Government of Canada, *Promoting rights of persons with disabilities*. Accessed March 2021: [https://www.international.gc.ca/world-monde/issues\\_developpement-enjeux\\_developpement/human\\_rights-droits\\_homme/rights\\_disabilities-droits\\_handicapees.aspx?lang=eng](https://www.international.gc.ca/world-monde/issues_developpement-enjeux_developpement/human_rights-droits_homme/rights_disabilities-droits_handicapees.aspx?lang=eng)

41 Submission to the UN Special Rapporteur on the Right to Housing. Accessed November 2021: Microsoft Word - Canada - Right to Housing for Persons with Disabilities - May 15 2017.docx (inclusioncanada.ca)

**Table 1: Examples of housing options for disabled people living in Canada**

| Provinces                               | Disability Housing Options                                   | Housing Adaptation Options                     |
|-----------------------------------------|--------------------------------------------------------------|------------------------------------------------|
| Alberta <sup>42</sup>                   | Subsidised Special Needs Housing                             | Residential Access Modification Program (RAMP) |
| British Columbia <sup>43</sup>          | Independent Living BC Program (ILBC)                         | Home Adaptations for Independence (HAFI)       |
| Manitoba <sup>44</sup>                  | N/A                                                          | Rent Supplement (RS)                           |
| New Brunswick <sup>45</sup>             | The Housing Assistance for Persons with Disabilities program | Homeowner Repairs Program                      |
| Newfoundland and Labrador <sup>46</sup> | N/A                                                          | Home Modification Programme (HMP)              |
| Nova Scotia <sup>47</sup>               | Housing Nova Scotia                                          | N/A                                            |
| Ontario <sup>48</sup>                   | Ontario Disability Support Program                           | March of Dimes                                 |
| Prince Edward Island                    | N/A                                                          | N/A                                            |
| Quebec <sup>49</sup>                    | Public Housing Authority                                     | Montreal HAP (Home Adaptation Programme)       |
| Saskatchewan <sup>50</sup>              | Housing Support for People with Intellectual Disabilities    | Saskatchewan Home Repair Program               |

## 4.6 Examples

### a) British Columbia: Independent Living British Columbia Program (ILBC)

The Independent Living British Columbia Program, also known as ILBC is a subsidised assisted living program in the province of British Columbia that provides housing along with support services for people with disabilities and elderly citizens. It is provided through a partnership

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- 42 Government of Alberta, *Affordable Housing Programs*. Accessed March 2021: <https://www.alberta.ca/affordable-housing-programs.aspx>
- 43 BC Housing, 2015, Program Guide. Available at: [https://www.bchousing.org/sites/Satellite;jsessionid=xgJCLkCYguulQml4lcSBhSIVZnZgjMslFzpWcMQqQ5ICR3tzAIJ0!-548272449?c=BCHDocument\\_C&cid=1479147730543&pagename=bchousing%2FBCHDocument\\_C%2FDocumentLink](https://www.bchousing.org/sites/Satellite;jsessionid=xgJCLkCYguulQml4lcSBhSIVZnZgjMslFzpWcMQqQ5ICR3tzAIJ0!-548272449?c=BCHDocument_C&cid=1479147730543&pagename=bchousing%2FBCHDocument_C%2FDocumentLink)
- 44 Manitoba Government, *Rent Supplement*. Accessed March 2021: [https://www.gov.mb.ca/housing/progs/rent\\_supplement.html](https://www.gov.mb.ca/housing/progs/rent_supplement.html)
- 45 Government of New Brunswick, *Housing Assistance for People with Disabilities*. Accessed March 2021: [https://www2.gnb.ca/content/gnb/en/services/services\\_renderer.19576.Housing\\_Assistance\\_for\\_Persons\\_with\\_Disabilities.html](https://www2.gnb.ca/content/gnb/en/services/services_renderer.19576.Housing_Assistance_for_Persons_with_Disabilities.html)
- 46 Newfoundland Labrador Housing, *Home Modification Programme (HMP)*. Accessed March 2021: <https://www.nlhc.nl.ca/housing-programs/home-modification-program-hmp/>
- 47 Housing Nova Scotia, *Programs and Services*. Accessed March 2021: <https://housing.novascotia.ca/programs-and-services>
- 48 Ontario Ministry of Children, Community and Social Services, *Ontario Disability Support Program*. Accessed March 2021: <https://www.mcscs.gov.on.ca/en/mcscs/programs/social/odsp/>
- 49 Montreal Government, *Montreal Home Adaptation Program (HAP)*. Accessed March 2021: [http://ville.montreal.qc.ca/portal/page?\\_pageid=9437%2C116689596&\\_dad=portal&\\_schema=PORTAL](http://ville.montreal.qc.ca/portal/page?_pageid=9437%2C116689596&_dad=portal&_schema=PORTAL)
- 50 Saskatchewan Government, *Housing and Support for People with Intellectual Disabilities*. Accessed March 2021: <https://www.saskatchewan.ca/residents/family-and-social-support/people-with-disabilities/housing-and-support-for-people-with-intellectual-disabilities>

between British Columbia Housing, regional health authorities, non-profit and private sector providers.<sup>51</sup>

The program's functioning centres around both for profit and non-profit providers who own dwellings within the sector. BC Housing states that under ILBC, these housing providers can receive subsidies for their properties in order to supply assisted living accommodation to vulnerable communities living in British Columbia like disabled or elderly people. Some of the units within these properties are usually already designated for assisted living but some are also converted to assisted living accommodation upon introduction into the program. When an individual begins their tenancy through the ILBC, rent supplements are paid to the provider by BC Housing at a fixed rate. This rate is paid per unit. The resident then pays 70% of their income for their housing, hospitality and any personal care requirements included in the program. These costs are set by the Ministry of Health. If the resident is receiving benefits like Income Assistance, then the costs are set to a flat amount that is also managed by the Ministry of Health.

To become eligible for ILBC, an individual must consult with a health care worker at their nearest health authority. Upon applying for ILBC, their application is then reviewed including their support needs. After an assessment is made, the health worker will then make a referral, if it is appropriate to do so, and they will be put onto a waiting list for accommodation.

**For housing, the accommodation and amenities may include:**

- A self-contained apartment unit
- Shared dining room, social areas, resource room, outdoor space or gardens
- Parking, wheelchair access, scooter access
- Social and recreational activities

**For hospitality, all residences provide:**

- Two meals a day, including lunch and supper
- Weekly housekeeping
- Laundered towels and linens
- Access to laundry for personal items
- 24-hour emergency response system

**For personal care services, each residence offers two of the following:**

- Daily help with bathing, dressing, grooming, mobility or eating
- Reminders or help with taking medications
- Monitoring of food intake and therapeutic diets
- Help with paying bills, managing funds, and making purchases
- Individualised physical, occupational, or psycho-social therapy

**b) Home Adaptations & Disabled facilities grants**

In Quebec, the **Residential Adaptation Assistance Program (RAAP)**, which is offered by the **Société d'Habitation du Québec (SHQ)**, is for people with disabilities.<sup>52</sup> The initiative provides financial assistance to the owners of a dwelling which is occupied by a person with a disability to carry out adaptation works. It aims to allow the person with a disability to enter or leave their

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51 BC Housing, *Independent Living BC Program*. Accessed March 2021: <https://www.bchousing.org/housing-assistance/housing-with-support/independent-living-bc-program>

52 Société d'Habitation du Québec, *Residential Adaptation Assistance Program*. Accessed November 2021: Residential Adaptation Assistance Program - Société d'habitation du Québec ([gouv.qc.ca](http://gouv.qc.ca))

home, to access the essential rooms of their home and to perform everyday activities independently and safely.

Depending on the needs of the person with a disability, one of three options may be offered:

- Option 1 – **Professional Support** allows for the provision of between \$16,000 and \$33,000. Applicants can also avail of the support of an occupational therapist and certified inspector. The amount offered depends on household income and whether specialised equipment needs to be installed. The work to be done is decided by an occupational therapist. Such equipment and modifications that can be purchased include:
  - Work which facilitates entering and exiting the home e.g., installation of an access ramp, widening and replacing entrance door.
  - Work which facilitates access and mobility between rooms within the home e.g., widening a door.
  - Bathroom works e.g., grab bars, ceiling lift, changing table, shower without a threshold.
  - Kitchen works e.g., clearance under kitchen sink.
  - Bedroom works e.g., ceiling lift, changing table.
- Option 2 – **Self-determined needs and work** allows for the provision of up to \$8000 and does not provide for any supports. The work done is chosen based on a list established by the SHQ. Such equipment and modifications that can be purchased include:
  - Work which facilitates entering and exiting the home e.g., installation of an access ramp, widening and replacing entrance door.
  - Work which facilitates access and mobility between rooms within the home e.g., widening a door.
  - Bathroom works e.g., grab bars, ceiling lift, changing table, shower without a threshold.
- Option 3 – **Retroactive Adaptation Assistance Program** applies only to work which has been completed in the twelve months prior to registration and allows for the provision of 50% of eligible expenses, up to a maximum of \$4000. The scheme does not provide for any supports. Such equipment and modifications that can be purchased include:
  - Work which facilitates entering and exiting the home e.g., installation of an access ramp, widening and replacing entrance door.
  - Work which facilitates access and mobility between rooms within the home e.g., widening a door.
  - Bathroom works e.g., grab bars, ceiling lift, changing table, shower without a threshold.

Any person with a disability which limits their capacity to carry out their everyday activities at home can benefit from the RAAP initiative, on condition that they:

- Provide supporting documentation that proves their disability is significant and persistent.
- Are not eligible for financial assistance for residential adaptation work under a private or public programme or insurance plan.

# 5 Australia

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## 5.1 Disability Governance and Key Stakeholders

Australia is a federal state where, much like Canada, political power and public policy is less centralised nationally and more equally distributed through the country's various regions. It exercises power through its three arms of government at federal level, Parliament, the Executive, and the Judiciary<sup>53</sup>. It also exercises governance on three levels: Federal, State and Territorial, and Local. Overall, there are six states and three territories in Australia<sup>54</sup>.

### States

1. New South Wales
2. Queensland
3. Victoria
4. Western Australia
5. Tasmania
6. South Australia

### Territories

1. Northern Territory
2. Australian Capital Territory
3. Jervis Bay Territory

Highlighted under Section 51 of the Australian Constitution, each state also has its own parliament and constitution that are permitted to pass laws in relation to any matter that is not dealt with by the Commonwealth.

Disability tends to be governed by all federal, state, and territorial parliaments holistically. Disability is defined as an individual who has a limitation, restriction or impairment which has lasted, or likely to last for at least six months and restricts everyday activities<sup>55</sup>. This includes episodic conditions if they are likely to occur. Under the National Disability Strategy, the Commonwealth, states, and territories are committed to working together to support disabled people across a plethora of areas such as health, housing, education, employment, and transport. All governments are committed to giving access to disabled people's families and carers to a range of supports to assist disabled people to live independently in their communities. This includes:

- Making sure services give information, choice, and control to people with a disability.
- Developing flexible supports for people with high needs.

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53 Australian Government, *Parliament of Representatives*. Accessed June 2021: [https://www.aph.gov.au/About\\_Parliament/House\\_of\\_Representatives/Powers\\_practice\\_and\\_procedure/00\\_-\\_Infosheets/Infosheet\\_20\\_-\\_The\\_Australian\\_system\\_of\\_government](https://www.aph.gov.au/About_Parliament/House_of_Representatives/Powers_practice_and_procedure/00_-_Infosheets/Infosheet_20_-_The_Australian_system_of_government)

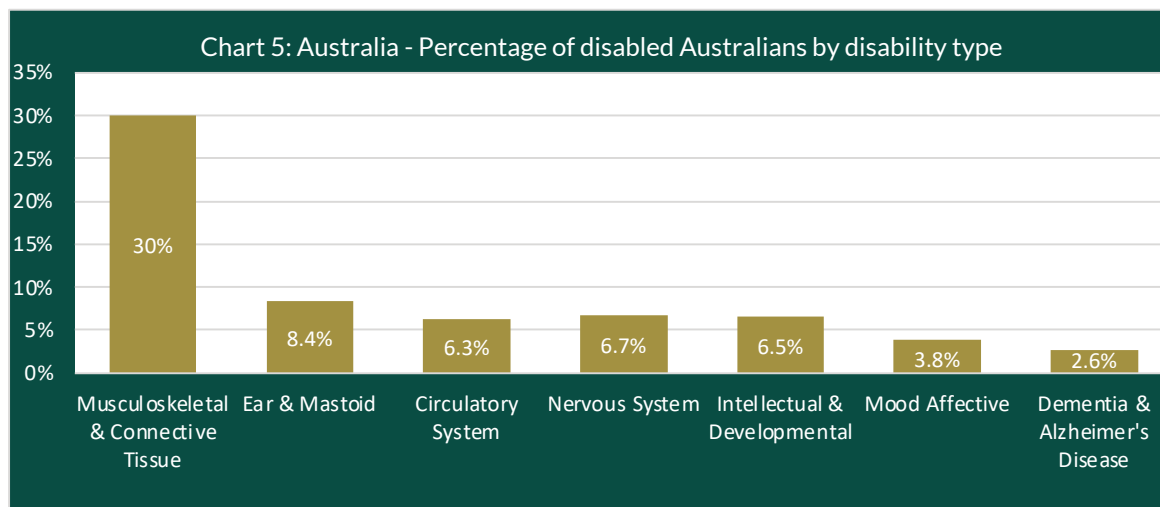
54 Parliamentary Education Office. Accessed June 2021: <https://peo.gov.au/understand-our-parliament/how-parliament-works/three-levels-of-government/three-levels-of-government-governing-australia/>

55 Australian Public Service Commission, *Definition of Disability*. Accessed November 2021: Definition of disability | Australian Public Service Commission (apsc.gov.au)

- Improving access for people with disability in community support services.
- Making sure community support networks are available to provide information and support to families and carers.

## 5.2 Disability and the Population

Australia has a population of just over 25.5 million people<sup>56</sup>. According to the People with Disability in Australia Report 2020, around 4.4 million people are living with a disability. This constitutes around 18% of the population. Ethnically, there is a notable distinction in the population of those with disabilities when we look at Australia's indigenous Aboriginal and Torres Straits Islander communities. In 2016, it was estimated that the population of Aboriginals and Torres Strait Islanders was just under 800,000 with 727,000 identifying as Aboriginal, 38,000 identifying as Torres Strait Islander and 32,000 identifying as both. In 2019, it was recorded that over 58% of Aboriginals or Torres Strait Islanders were living with a disability<sup>57</sup>.



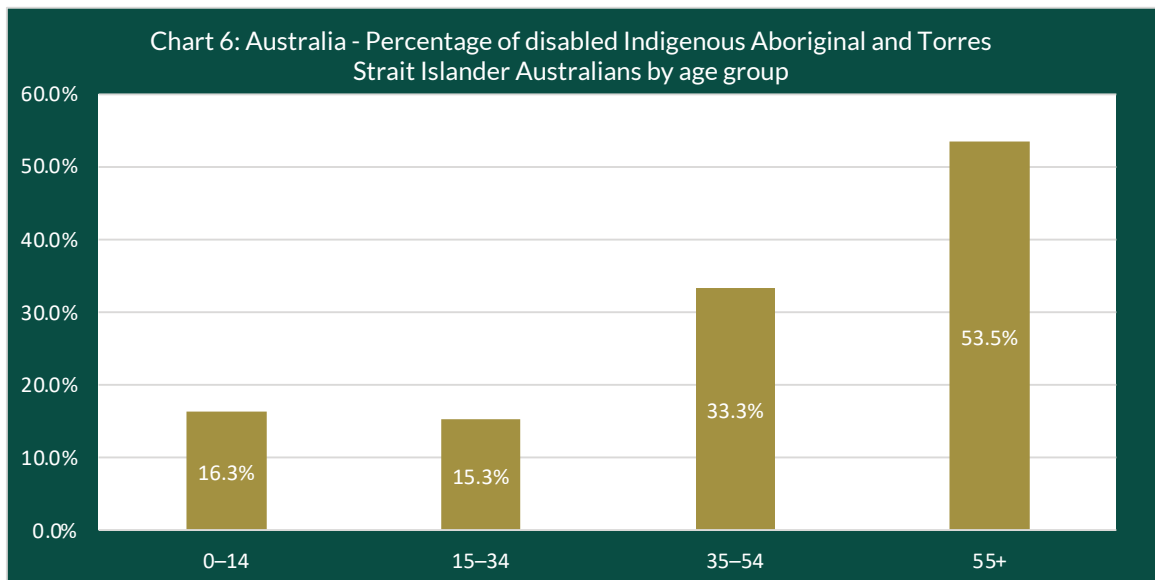
\*Note: The breakdown of the values observed in these charts can be found through the Australian Bureau of Statistics.

Chart 5 displays the disability population of Australia by the type of disability. The most common type of disabilities amongst the population are physical disabilities with Musculoskeletal and Connective Tissue impairments being the highest type. The lowest type of disability is Dementia or Alzheimer's disease<sup>58</sup>.

56 Australian Bureau of Statistics, *Population national, state & territory*. Accessed March 2021: <https://www.abs.gov.au/statistics/people/population/national-state-and-territory-population/latest-release>

57 Australian Institute of Health & Welfare, *Disability Supports for Indigenous Australians*. Accessed March 2021: <https://www.aihw.gov.au/reports/australias-welfare/disability-support-for-indigenous-australians>

58 Australian Institute of Health & Welfare, *People with Disability in Australia 2020*. Accessed January 2021: <https://www.aihw.gov.au/getmedia/ee5ee3c2-152d-4b5f-9901-71d483b47f03/aihw-dis-72.pdf.aspx?inline=true>



*\*Note: The breakdown of these values observed in these charts can be found through the Australian Bureau of Statistics.*

Chart 6 displays the disability population of Indigenous Aboriginal and Torres Strait Islander Australians by age group. The data was taken from the Australian Bureau of Statistics (ABS) 2015 Survey of Disability, Ageing and Carers (SDAC) and was measured by indigenous Australians living in a household<sup>45</sup>.

## 5.3 Disability Legislation

### Disability Discrimination Act 1992

The Disability Discrimination Act 1992 (DDA) is an act of legislation introduced by the Federal Government of Australia providing extended rights and protection to people with disabilities. Brought into force on 1st March 1993, it was designed to provide security and protection from unlawful discrimination to some of the most vulnerable citizens in Australian society<sup>59</sup>.

Under the DDA, it is illegal to discriminate against a disabled person in a number of areas within the public sphere. These include employment, education, services, facilities and notably accommodation. Where housing is being provided as a publicly funded or not-for-profit service, failure to provide equal access for people with disabilities to those services or facilities could be subject to a complaint of discrimination. Section 25 of the DDA, focuses on eliminating discrimination in relation to the provision of rental accommodation and the right of a tenant to make (restorable) alterations to the accommodation at their own expense<sup>60</sup>. There could be grounds for complaint if a landlord refuses to allow the tenant to make reasonable alterations, so long as the specified conditions are met. While there are a multiplicity of issues and concerns in the bill that were highlighted including the definition of disability, housing was one feature that was included because there were no provisions in Federal anti-discrimination law expressly requiring facilities in private housing to be made accessible to people with disabilities.

A variety of reforms were made under The Disability Discrimination and Other Human Rights Legislation Amendment Act 2009<sup>61</sup>. The majority of reforms commenced on 5th August 2009. The main impetus for the changes to the DDA was the 2004 report of the Australian

59 Australian Government, *Disability Discrimination Act 1992*. Accessed January 2021: <https://www.legislation.gov.au/Details/C2016C00763>

60 Federal Register of Legislation, *Disability Discrimination and Other Human Rights Legislation Amendment Act 2009*. Available at: <https://www.legislation.gov.au/Details/C2009A00070>

61 Australian Human Rights Commission. Accessed January 2021: <https://humanrights.gov.au/our-work/disability-rights/dda-guide-what-areas-life-does-dda-cover>

Productivity Commission, Review of the Disability Discrimination Act 1992 which recommended a range of changes to improve the operation of the DDA<sup>62</sup>. However, another major influence was the launch of the United Nations Convention on the Rights of Peoples with Disabilities in 2007. Australia was one of the first countries in the world to ratify the convention and did so on 17th July 2008<sup>63</sup>. The amendments of 2009 made a range of significant changes to federal discrimination laws including the improvement of rights to accessible housing and numerous support and care services. The 2009 amendments inserted an explicit reference to the Convention in Section 12 of the DDA.

## 5.4 Disability Strategies

### The National Disability Strategy (NDS)

The National Disability Strategy (NDS) is Australia's primary initiative for the improvement of services and well-being for people with disabilities. Officially launched in February 2011, it is a national approach designed to support people with disabilities and to maximise their potential to participate and to be included as equal citizens in Australian society.

The strategy serves a number of purposes, such as establishing a high-level policy framework to give coherence to, and guide government activity across mainstream and disability-specific areas of public policy. It also drives to improve the performance of mainstream services in delivering outcomes for people with a disability. It gives visibility to disability issues and ensures they are included in the development and implementation of all public policy that impacts on people with disability and provides national leadership toward greater inclusion of people with disabilities<sup>64</sup>.

The NDS was first devised after the publishing of the Shut-Out Report in 2009. The report revealed many shared and lived experiences amongst disabled people and the disadvantages that many of them go through every day in Australian society. Alongside ratifying the UNCRPD and the signing of the National Disability Agreement in 2008, the Strategy plays an important role in protecting, promoting, and fulfilling the human rights of people with a disability<sup>65</sup>. It helps ensure that the principles underpinning the Convention are incorporated into policies and programs affecting people with disability, their families, and carers.

The NDS sets out six priority areas for action to improve the lives of people with disabilities, their families, and carers. These areas are:

- Inclusive and accessible communities
- Rights protection, justice, and legislation
- Economic security
- Personal and community support
- Learning and skills
- Health and wellbeing.

The Commonwealth, State and Territory governments have specific roles and responsibilities across the range of policies and programmes that impact on people with disabilities, their

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62 Australian Human Rights Commission. Accessed January 2021: <https://humanrights.gov.au/our-work/improved-rights-protection-people-disability-2009>

63 Department of Social Services, *Disability and Carers*. Accessed February 2021: <https://www.dss.gov.au/our-responsibilities/disability-and-carers/program-services/government-international/international-participation-in-disability-issues>

64 National Disability Strategy 2010 – 2020. Accessed January 2021: <https://humanrights.gov.au/sites/default/files/NDS%20PDF.pdf>

65 Australian Government, *Shut Out Report: The Experience of People with Disabilities and their families in Australia*. Accessed January 2021: [https://www.dss.gov.au/sites/default/files/documents/05\\_2012/nds\\_report.pdf](https://www.dss.gov.au/sites/default/files/documents/05_2012/nds_report.pdf)

families, and carers. The Strategy does not change the nature of these roles and responsibilities but seeks to create a more cohesive approach across all governments. The development of this National Disability Strategy is the first time in Australia's history that all governments have committed to a unified, national approach to improving the lives of people with disability, their families, and carers, and to providing leadership for a community-wide shift in attitudes.

A new strategy has been developed with consultation carried out over the last 3 years. In August 2021, the Disability Ministers from State and Territory Governments agreed that the new strategy was ready to proceed for endorsement by all governments. The new strategy will have a slightly altered name, Australia's Disability Strategy, to avoid confusion between this and the NDIS and NDIA. The strategy was not published at the time this document went to print.

## 5.5 Disability and Housing

Housing support in Australia is an essential provision for people living with disabilities. It is a driving factor in the expansion of the number of individuals living both stably and independently in their communities. There are a variety of different housing supports and services available for disabled people living at home or residentially:

- Specialised Disability Accommodation.
- Shared Supported Accommodation.
- Supported Independent Living.
- Supported Residential Services.

### The National Disability Insurance Scheme (NDIS)

The National Disability Insurance Scheme (NDIS) is a financial support scheme designed to introduce a fresh approach in providing appropriate services to people with disabilities, their families, and their carers<sup>66</sup>. The scheme recognises that there are individuals in Australia who have a diverse array of different disabilities. It is considered that the most appropriate way to support these people is to provide them with the right to choose the appropriate support schemes for themselves. By treating each case individually instead of a one size fits all approach, people with disabilities can choose the type of care and services that are necessary and appropriate to their condition and living arrangements. The NDIS is implemented by the National Disability Insurance Agency, an independent statutory agency. The NDIA provides funding and support for services for Australians with disabilities<sup>67</sup>.

By formulating an insurance-based scheme, NDIS demonstrates a long-term view on disability as it seeks to improve the outcomes of its clients based on need. It is a person-centred model of care that can significantly improve service users lives. It also funds support for people who meet early intervention criteria. This covers cases where early intervention can significantly improve an individual's outcomes and is cost effective. The focus on early intervention reflects the lifetime approach of the scheme.

To be eligible for NDIS support, the person must meet all of the following criteria:

- Have a permanent disability that significantly affects their ability to take part in everyday activities
- Are aged less than 65 years when they first enter the NDIS
- Are an Australian citizen or hold a permanent visa or a protected Special Category visa

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66 Australian Government, *National Disability Insurance Scheme Act 2013*. Accessed January 2021: <https://www.legislation.gov.au/Details/C2020C00392>

67 National Disability Insurance Scheme. Accessed December 2021: <https://www.ndis.gov.au/understanding/what-ndis>

- Live in Australia where the NDIS is available.

If the applicant meets the criteria, they will receive access to services that are provided by NDIS funding and coordination. These include:

- Aids such as wheelchairs, hearing aids and adjustable beds.
- Items such as prosthetics and artificial limbs (but not surgery).
- Home modifications, personal care and domestic assistance that helps people exiting the health system to live independently.
- Therapies required because of the patient's impairment, including physiotherapy, speech therapy or occupational therapy (but not treatments).

The NDIS also funds a range of Home and Living Supports, such as **Specialist Disability Accommodation (SDA) and Supported Independent Living (SIL)**. These are outlined below:

## 5.6 Examples

### a) Specialist Disability Accommodation (SDA)

Specialist Disability Accommodation (SDA) is a form of housing that is designed for people who have extreme functional impairment or very high support needs. This specific type of housing is designed to allow the tenant's support networks to provide care more accessibly within the home. It is important to note that SDA as a scheme is focused on the construction and the design of the homes themselves and does not include any support packages. Most SDA homes are shared housing with other disabled people and a person can apply for their own home should their conditions and circumstances best suit that recommendation. Specialist Disability Accommodation is offered by providers of the scheme. Dwellings are submitted for review and must meet four main categories under NDIS criteria<sup>68</sup>:

- **Improved Liveability** - Housing which improves the physical accessibility of the property and enhanced provision for people with sensory, intellectual, or cognitive disabilities.
- **Robust** – Housing that is designed to be of reasonable physical access and resilient in order to reduce the likelihood of reactive maintenance and reduce the risk to the resident and community.
- **Fully Accessible** - Housing that has been designed to incorporate a high level of physical access provision for people with significant physical impairment.
- **High Physical Support** - Housing that has been designed to incorporate a high level of physical access provision for people with significant physical impairment and requiring very high levels of support.

To be approved for an SDA payment the person must be a participant of the NDIS and meet the following conditions:

- Their informal supports cannot meet their personal care needs.
- They have spent an extended period in group homes or residential aged care.
- They exhibit behaviours which can pose a risk to themselves or others.

The tenant of the home uses their SDA funding to pay the provider (landlord) of the property. Usually, they will still need to pay rent or other personal costs to live in SDA<sup>69</sup>.

68 Lexology, *Specialist disability accommodation: an emerging asset class for investors*. Accessed January 2021: <https://www.lexology.com/library/detail.aspx?g=cf860209-5973-4440-8d1d-4943e6c6ff80>

69 National Disability Insurance Scheme (Specialist Disability Accommodation) Rules 2020. Accessed January 2021: <https://www.legislation.gov.au/Details/F2020L00769>

The NDIS can provide necessary SDA payments for the client through their personal plan with the scheme. They allocate funding to whoever is eligible, therefore allowing the person to source the supports which appeal to them from the market. A support worker or assistant may also help with finding the best SDA option for them. Typically, participants who get SDA approved in their NDIS plans are people who, even with appropriate home modifications and assistive technologies, still need a high level of in-home support with daily activities from a paid worker. This could be tasks as common as getting in and out of bed, preparing meals or getting dressed.

## **b) Supported Independent Living (SIL)**

Supported Independent Living (SIL) is a form of assistance and funding under the guidance of the NDIS. Originally called Supported Accommodation, it provides the individual or a group with supervision and support with their daily needs inside the home in order to develop their capacities to live as independently as possible<sup>70</sup>. It is best suited for those with higher support needs. Regardless of property ownership, it can be offered to an individual or shared with a group co-living in a dwelling. Under SIL, the supports offered to the recipient/recipients can vary from household tasks and personal errands to aiding with life building skills to boost their own self-sufficiency. This includes basic duties such as getting dressed, showering, housekeeping, and cooking. SIL may also help with activities such as going out for a meal or attending an appointment. However, this assistance does not include rent, other day-to-day living expenses such as food or activities, or capital costs associated with a participant's accommodation. It also does not cover supports when a participant is absent from their residence for an extended period.

The application process for SIL is set out in the NDIS Supported Independent Living Operational Guidelines<sup>71</sup>. An individual begins an application for SIL by contacting NDIS and completing a Home and Living Supports Request Form<sup>72</sup>, which may require input from a health professional to assess the applicant's needs. Depending on this assessment, alternatives to SIL such as Individualised Living Options<sup>73</sup> or personal care supports<sup>74</sup> may be offered. If SIL is deemed to be suitable for the applicant's needs, a Local Area Coordinator (LAC)<sup>75</sup> or support coordinator<sup>76</sup>, who works with persons with disabilities on behalf of NDIS, will find a suitable provider for the applicant. The provider will then draw up a Roster of Care, which details the supports that will be provided. This is then submitted to NDIS for approval.

The funding of SIL is determined through a quotation basis where if a service provider has a vacancy for someone, they will provide a quote to the NDIA for assessment. This means that unlike some quotes which can be linked to the potential tenant, this is linked to the provider instead. Once this quote is approved by the NDIA after negotiation with the provider, funding is included in the applicant's plan with other necessary supports<sup>77</sup>. Before the quoting begins however, the NDIA must determine whether SIL is suitable for the person. These considerations can include<sup>78</sup>:

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- 70 NDVR Endeavor Foundation, *What is supported living (SIL)?*. Accessed January 2021: <https://www.endeavour.com.au/media-news/blog/supported-independent-living>
  - 71 Australian Government, *Supported Independent Living Guidelines*. Accessed November 2021: Supported Independent Living | NDIS
  - 72 Australian Government, *Home and Living Supports Request Form*. Accessed November 2021: Home and Living Supports Request Form | NDIS
  - 73 Australian Government, *About Individualised Living Options*. Accessed November 2021: Individualised Living Options for providers | NDIS
  - 74 Australian Government, *Including Specific Types of Support in Plans Operational Guideline – Personal Care Supports*. Accessed November 2021: Including Specific Types of Supports in Plans Operational Guideline – Personal care supports | NDIS
  - 75 Australian Government, *LAC Partners in the Community*. Accessed November 2021: LAC Partners in the Community | NDIS
  - 76 Australian Government, *Support Coordination*. Accessed November 2021: Support coordination | NDIS
  - 77 Scope, *Supported Independent Living*. Accessed January 2021: <https://www.scopeaust.org.au/wp-content/uploads/2020/11/19572-SCO-SIL-A4-4pp-brochure-DIGITAL-SINGLE-Final.pdf>
  - 78 Joint Standing Committee on the National Disability Insurance Scheme, *Report into Supported Independent Living*. Accessed January 2021: [https://www.dss.gov.au/sites/default/files/documents/08\\_2020/joint-standing-committee-jsc-national-disability-insurance-scheme-ndis-report-supported-independent.pdf](https://www.dss.gov.au/sites/default/files/documents/08_2020/joint-standing-committee-jsc-national-disability-insurance-scheme-ndis-report-supported-independent.pdf)

- The participant's individual circumstances, including goals and aspirations.
- Independent living skills and capacity building requirements, supports required to assist the participant's independent living goals.
- Supporting information, reports and assessments, alternative housing arrangements and the associated SIL requirements.
- That SIL represents value for money and is reasonable and necessary.

SIL also requires the provider to specify for each participant in the arrangement whether the participant has lower, standard, or higher needs. The funding for the recipients is based on the level of care needed.

### c) Home Modifications

Home modifications are changes to the structure, layout or fittings of the participant's home that are required to enable the participant to safely access and move around frequently used areas in their home.<sup>79</sup> The NDIS is administered by the NDIA. Home modifications would only be considered where the home to be modified is the participant's primary residence and the participant intends to remain living at the residence. If the property is a rental property, then the written agreement of the owner of the property will be required before any modifications take place.

There are a number legal and regulatory structures which regulate home modifications, such as the **Building Codes and Australian Standards**.

Also, the NDIA must be satisfied that the modifications under consideration represent value for money in that the costs of the support are reasonable relative to both the benefits achieved and the cost of alternative support. When determining if the home modifications represent value for money, they will consider the following:

- whether the proposed home modification represents value for money when compared to the cost of other lower cost alternatives
- whether the proposed home modification is cost effective when compared to the cost of other supports
- the expected length of tenure for participants and whether this is commensurate to the cost of the home modifications.

The NDIA must also be satisfied that the home modifications will be, or likely to be, effective and beneficial to the applicant. Therefore, the NDIA will also consider whether the home is suitable to be modified and will consider:

- any structural constraints such as size, surrounding terrain, or the condition of the building
- whether the homeowner, and where applicable, any body-corporate, agrees and gives their permission for modifications to be made.

If complex and/or extensive home modifications are required, the NDIA may also fund oversight by a project manager or independent building certifier to ensure compliance of the modification and a qualified and experienced Occupational Therapist to certify the effectiveness of the modification to meet the applicant's goals and future needs. Generally, the NDIA will fund reasonable and necessary home modifications:

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79 National Disability Insurance Scheme (NDIS), *Home Modifications*. Accessed November 2021: Including Specific Types of Support in Plans Operational Guideline - Home modifications | NDIS

- to the participant's primary residence where, due to the impact of the participant's disability, the participant or their carers are unable to reasonably access and use frequently used rooms and spaces
- when the participant's primary residence, in its current condition, has a significant and adverse impact on the sustainability of current living and care arrangements
- where a suitably qualified Occupational Therapist has performed an assessment and recommended home modifications considering all possible alternatives, including the use of equipment.

The NDIA will also fund reasonable and necessary supports that are related or incidental to home modifications which may include:

- assistance with the cost of moving to accessible premises as an alternative to home modifications where this is cost effective to provide access. It is expected that any new premises would be chosen with the aim to lower the costs of expected modifications. Potential costs covered include:
  - costs associated with selling the participant's current property
  - costs associated with the purchase of the alternate property
  - removalist costs
  - minor modifications to install special equipment if necessary
- additional costs incurred if the NDIA recommends or requires the use of qualified builders, trades people, project managers, building certifiers, building assessors or occupational therapists
- the costs of normal repairs and maintenance to specialised fittings and assistive technology that have been installed as part of a home modification
- costs related to council or other building approvals which are payable as a result of the required home modification.

There are things which the NDIS will not fund, including:

- fixtures, fittings or materials which are above standard grade
- the installation of swimming pools (including hydrotherapy) and spas
- home modifications to group homes, residential facilities and other specialist accommodation, or other public buildings, including boarding schools
- ongoing repairs and maintenance to non-specialised structures, fixtures or fittings of the home even when these form part of the modification work. For example, repainting a modified bathroom and maintaining plumbing.

Where the NDIA has funded complex and/or extensive schemes and the participant or their family sells the property, the NDIA expects:

- future premises selected will be as accessible as possible
- money from the sale of the first property, commensurate with the value of the modifications funded by the NDIA will be directed towards modifying the participant's new premises
- if there is more than one residence that a participant needs to access, for example in a shared parenting arrangement, modifications to the second property will be restricted to access and basic hygiene requirements.

# 6 New Zealand

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## 6.1 Disability Governance and Key Stakeholders

New Zealand adopts a unitary administrative system where central government confers powers onto local governments by the New Zealand Parliament. Its constitutional system possesses three branches: the Legislature, the Executive, and the Judiciary. Overall, there are 16 regions in New Zealand<sup>80</sup>:

1. Northland
2. Auckland
3. Waikato
4. Bay of Plenty
5. Gisborne
6. Hawkes Bay
7. Taranaki
8. Manawatu-Wanganui
9. Wellington
10. Tasman
11. Nelson
12. Marlborough
13. West Coast
14. Canterbury
15. Otago
16. Southland

New Zealand has two tiers of local government, Regional Councils (11), Territorial Authorities (61) and Unitary Councils (6) which are Territorial Authorities with Regional Council responsibilities. Regional councils are responsible for public transport and environmental planning. They also have responsibility for functions such as civil defence, flood control and water navigation. Territorial authorities perform the same duties except they have a larger focus on communities and road accesses.

The definition of disability in New Zealand is any self-perceived limitation in activity resulting from a long-term condition or health problem lasting, or expected to last, 6 months or more and not completely eliminated by an assistive device.

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80 New Zealand Government, *How Government Works*. Accessed June 2021: Available at: <https://www.govt.nz/browse/engaging-with-government/government-in-new-zealand/>

## 6.2 Disability and the Population

New Zealand has a population of just over 5 million people<sup>81</sup>. According to the New Zealand Disability Survey 2013, there were around 1.1 million people living on the two islands of New Zealand who had a disability or an impairment. This constitutes about 24% of the population. An estimated 850,500 Māori are currently living in New Zealand as of June 2020, 16.7% of the entire population<sup>82</sup>. There is a higher incidence of disability amongst New Zealand's indigenous population (see Chart 8).



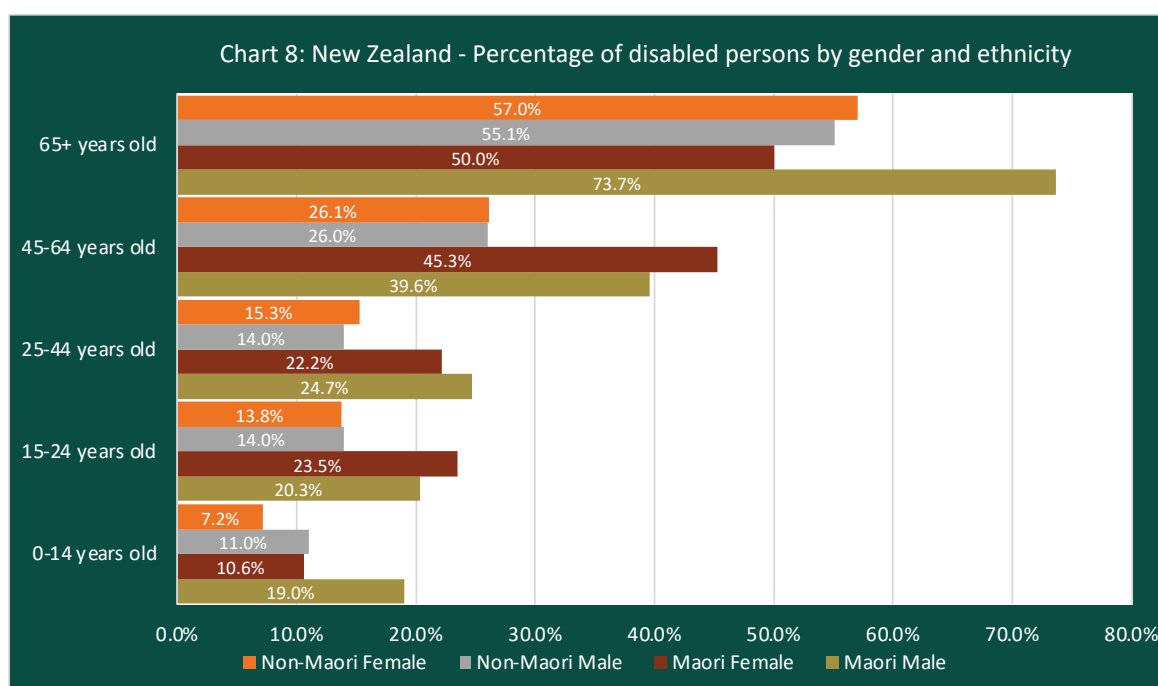
\*Note: The values found in the chart above can be found in the New Zealand Disability Survey 2013.

Chart 7 shows the disability population of New Zealand by disability type. We can see that physical disabilities are the most common type of impairments in both male and female New Zealanders and the least common disabilities are intellectual impairments<sup>83</sup>.

81 Statistics New Zealand, *Disability Survey 2013*. Accessed February 2021: <https://www.stats.govt.nz/assets/Uploads/Disability-survey/Disability-survey-2013/Disability-survey-2013-additional-documents/Disability-Survey-2013.pdf>

82 Stats NZ, *Māori population estimates*. Accessed February 2021: <https://www.stats.govt.nz/information-releases/maori-population-estimates-at-30-june-2020>

83 Ministry of Health, *Disability*. Accessed February 2021: <https://www.health.govt.nz/our-work/populations/maori-health/tatau-kahukura-maori-health-statistics/nga-mana-hauora-tutohu-health-status-indicators/disability>



\*Note: The values found in the chart above can be found in the New Zealand Disability Survey 2013.

Chart 8 displays the disability population of New Zealand by gender and by ethnicity. We can see that Māori men are more likely than Māori women to develop a disability while both Māori men and women are more likely to develop a disability compared to non-Māori men and women<sup>84</sup>.

## 6.3 Disability Legislation

### Human Rights Act 1993

The Human Rights Act 1993 is an act of parliament introduced by the Government of New Zealand that seeks to tackle discrimination in several different areas of its society<sup>85</sup>. It aims to give all citizens of New Zealand equal opportunities regardless of their background, and to prevent any unfair treatment of a person on the basis of irrelevant personal characteristics. This includes people with disabilities. The Act was passed on 10th August 1993 and brought into force on 1st February 1994. It continues and extends the work which was already set out from the establishment of the Human Rights Commission in 1977<sup>86</sup>.

Under the Human Rights Act 1993, it is illegal to discriminate against a person based on 13 primary characteristics. The 13 characteristics are:

1. Sex (including pregnancy and childbirth)
2. Marital status
3. Religious belief
4. Ethical belief
5. Colour
6. Race

84 Ministry of Health, *Disability*. Accessed February 2021: <https://www.health.govt.nz/our-work/populations/maori-health/tatau-kahukura-maori-health-statistics/nga-mana-hauora-tutouhu-health-status-indicators/disability>

85 New Zealand Legislation, *Human Rights Act 1993*. Accessed March 2021: <https://www.legislation.govt.nz/act/public/1993/0082/latest/DLM304212.html>

86 New Zealand Human Rights Commission. Accessed March 2021: <https://www.hrc.co.nz/your-rights/your-rights/>

7. Ethnic or national origins
8. Disability
9. Age
10. Political opinion
11. Employment status
12. Family status
13. Sexual orientation

For people with disabilities, this means that the Human Rights Act 1993 provides protections to them and other groups in a range of different circumstances such as:

- Access to land, housing, and accommodation
- Public education and health services
- Employment
- Access to public places, vehicles, and facilities
- Access to goods and services
- Access to education

New Zealand has continued to strengthen its approach to disability rights by adopting the UNCRPD on 13th December 2006, the charter was ratified on 25th September 2008<sup>87</sup>.

### **The Building Act 2004**

This legislation governs the construction industry in New Zealand and forms the legislative basis of the building code<sup>88</sup>. This legislation states that any new public buildings, or renovations on existing public buildings, must meet basic standards of accessibility.

## **6.4 Disability Strategies**

### **New Zealand Disability Strategy (NZDS)**

The New Zealand Disability Strategy is a framework administered by the Ministry of Social Development that guides the New Zealand Government in the removal of barriers that prevent people with disabilities from participating fully in society. As an overarching document, the strategy's vision is to classify New Zealand as a non-disabling nation where the principles and approaches agreed will give people with disabilities respect, visibility and acknowledgement, assuring them that they feel valued and given the opportunity to live a life of dignity and achieve their aspirations<sup>89</sup>.

### **NZDS Key Principles**

The NZDS has been in place since 2016 and is expected to come under review in 2026 upon its expiration. The strategy is based on 3 key principles:

- The Treaty of Waitangi\*
- The Convention on the Rights of People with Disabilities
- Ensuring disabled people are involved in the decision making which impacts them.

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87 Ministry of Justice New Zealand, *Constitutional Issues & Human Rights*. Accessed March 2021: <https://www.justice.govt.nz/justice-sector-policy/constitutional-issues-and-human-rights/human-rights/international-human-rights/crpd/>

88 New Zealand Government, Building Act 2004 No 72 (as at 08 June 2021), Public Act Contents – New Zealand Legislation. Accessed November 2021: How the Building Code works | Building Performance

89 Office for Disability Issues, *New Zealand Disability Strategy 2016 – 2026*. Accessed March 2021: <https://www.od.govt.nz/assets/New-Zealand-Disability-Strategy-files/pdf-nz-disability-strategy-2016.pdf>

\*The Treaty of Waitangi is a treaty based on the relationship between the British Crown and the Māori people, playing a vital role in framing the political relations between the native Māori population and the eventual parliament of New Zealand. Originally signed on 6th February 1840 by representatives of the British Crown and Māori chiefs, also known as Rangatira from the north island, it gave them full rights and protections as subjects of the British Empire and retained their full chieftainship of the lands under their control<sup>90</sup>.

## NZDS Approaches

The three key principles in the strategy are underpinned by 2 approaches:

### i) **Whole of Life and Long-Term**

Whole of life and long-term approaches must be prioritised when social investment decisions are being made by the NZ Government on issues that impact people with disabilities. The NZDS recognises that disability is not unique to just one single age group. It has the capacity to enter our lives at any stage especially as people get older. The approach acknowledges this and wants to ensure that throughout the life of a disabled person, no matter their age, they will be given the opportunity to be independent, to participate as much as possible in society and have the ability to contribute to their community<sup>91</sup>.

### ii) **Specific and Mainstream Services and Supports - Twin Track Approach**

The function of the twin track approach is to make sure that mainstream services and supports are always inclusive and accessible to people with disabilities. This centres around the ability to choose the preferred services at the right time or in the right place for the individual and is not about the specific services themselves. This reflects the fact that people's needs relating to services and levels of care will not be consistent overtime<sup>92</sup>.

## 6.5 Disability and Housing

The NZDS strives to remove all barriers that prevent people with disabilities from participating fully in society. This is reflected in their approach to housing and the provision of housing supports for people with disabilities. New Zealand recognises that people will need different types of housing supports at different times throughout their life. They aim to make these supports available at the right time and in the right place so that the individuals accessing them can live as independently as possible. These strategies are outlined below.

## 6.6 Examples

### a) **Supported Living**

Supported Living is a fully funded service accessed through the Ministry of Health by the New Zealand Government. It is designed to assist disabled people to live more independently through the provision of supports in areas most needed by the person. The scheme places the applicant at the heart of its development and puts them centre in the handling of all aspects of assessment and service delivery<sup>93</sup>.

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90 New Zealand History, *The Treaty in Brief*. Accessed March 2021: <https://nzhistory.govt.nz/politics/treaty/the-treaty-in-brief>

91 Office for Disability Issues. Accessed March 2021: <https://www.odi.govt.nz/nz-disability-strategy/about-the-strategy/new-zealand-disability-strategy-2016-2026/read-the-new-disability-strategy/new-zealand-disability-strategy-read-online/principles-and-approaches/>

92 Office for Disability Issues, *Principles and Approaches*. Accessed March 2021: <https://www.odi.govt.nz/nz-disability-strategy/about-the-strategy/new-zealand-disability-strategy-2016-2026/read-the-new-disability-strategy/new-zealand-disability-strategy-read-online/principles-and-approaches/>

93 Ministry of Health, *Supported Living*. Accessed April 2021: <https://www.health.govt.nz/your-health/services-and-support/disability-services/types-disability-support/supported-living>

Should a person wish to apply for Supported Living, they must be 17 years old or over but are not required to go through a means test. They are recommended however to speak to a Needs Assessment and Service Coordination (NASC) organisation. NASCs are organisations contracted by the Ministry of Health to work with people with disabilities and their families or carers. Their role is to identify the strengths and support needs of the applicant, outline what disability support services are available and to determine their eligibility for Ministry-funded support services. If an applicant is eligible for these supports, it is NASC's responsibility to ensure that the support and services allocated to them are fair and fit within the disability support services budget.

Upon eligibility, the provider chosen by the applicant will help prepare a personal plan for them. It will describe what they want to achieve through the support and is usually done in writing so that the applicant can clearly understand the process. The provider will then prepare a proposal for the applicant outlining how they plan to support him or her and including how often, for how long, when, and where. The proposal is sent to the NASC, and a support package is agreed – the applicant will sign this to show that they agree with the support that will be provided. The provider will generally arrange for an identified staff member to meet the applicant at agreed times to work on the goals that are written in their plan. Under supported living the person retains full control over their financial affairs. However, if the applicant requires budgeting support, then the professional staff supporting the person will work alongside them in managing this.

There is no specific housing scheme for people with disabilities in New Zealand. Instead, the **Ministry of Health (MOH)** works in partnership with the disabled community and various private companies and charities to provide disability services in the community. This method aligns with the **Enabling Good Lives** approach which has been piloted in several areas with plans to roll it out nationally<sup>94</sup>.

One such charity involved is the **IHC Group**. They have been providing property services and homes to people with intellectual disabilities for over sixty years. In 2010, they established **Accessible Properties** to manage IHC's property portfolio and to enable them to register as a community housing provider. While Accessible Properties provides an array of services, such as affordable rental properties and public housing, many of their tenants have physical or intellectual disabilities or have mobility issues.<sup>95</sup>

Accessible Properties operates primarily on the North Island of New Zealand in locations such as Auckland, Tauranga, Hamilton and Wellington but also provides services to Christchurch which is located on the South Island. They work closely with the **Ministry of Social Development (MSD)** to provide placement of applicants on the public housing register. The MSD passes the housing register to Accessible Properties and if a suitable property becomes available, they get in touch with the applicant. Placements will give preference to people with disabilities who need support to live in the community and are on low incomes<sup>96</sup>.

Accessible Properties also has a small number of affordable rentals available<sup>97</sup>. Many of these homes are modified for accessibility. Applications for this type of property are welcomed from everyone but Accessible Properties gives preference to people with disabilities who need support to live in the community and are on low incomes. To be eligible for an affordable rental, applicants must satisfy residency criteria. They should be one of the following:

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94 Ministry of Social Development, *Enabling Good Lives*. Accessed November 2021: Enabling Good Lives (EGL) - Ministry of Social Development (msd.govt.nz)

95 Accessible Properties, *Our commitment to housing for people with disabilities*. Accessed November 2021: Our Commitment | Accessible Properties

96 Accessible Properties, *Public Housing*. Accessed November 2021: Public Housing | Accessible Properties

97 Accessible Properties, *Affordable Rentals*. Accessed November 2021: Affordable Rentals | Accessible Properties

- A New Zealand resident.
- An immigrant granted refugee status.
- An immigrant in possession of a NZ resident visa.
- An immigrant in possession of a NZ permanent resident visa.

There are also income limits which an applicant must satisfy.

People with disabilities who are looking for Supported Living or Residential Services are usually advised by Accessible Properties to contact IHC subsidiaries, **IDEA Services** or **Choices NZ**. They find the accommodation or assistance that is right for the applicant.

IDEA Services is New Zealand's largest provider of services to people with intellectual disabilities and their families. IDEA Services supports adults of all ages with intellectual disabilities to live in their own homes and be part of their local communities, which includes residential care, supported living and vocational support.

IDEA Services offers quality, specialist, intensive support including Residential Services and Supported Living.

Residential Services provides support for people with intellectual disabilities who require a level of care and want to live in a supportive community<sup>98</sup>. If an applicant takes up this scheme they will:

- Have their own bedroom.
- Live in a shared home with a few others.
- Be encouraged to take part in the running of their home and make decisions about what happens there.

Supported Living is for people who want to live in their own home and have some support<sup>99</sup>. Included among these supports are:

- Managing and learning new daily living skills.
- Meeting new people and making friends.
- Looking for a job.
- Accessing other community services.

Access to these initiatives is usually based on the evaluation of a **Needs Assessment and Service Coordination (NASC)** (see 6.6 a).

Another subsidiary of IHC is Choices NZ which was established following the introduction of Enabling Good Lives<sup>100</sup>. They facilitate flexible support relationships and access to community services to help people achieve their goals.

They offer assistance to people with disabilities in a variety of ways, including:

- Helping them to achieve greater independence by working with them to identify their goals and then working with them to build their skills.
- Developing and maintaining their social networks to connect with individuals and groups with common interests.
- Accessing community services.
- Living independently and choosing the best living situation.

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98 IDEA Services, *Living with support-Residential*. Accessed November 2021: Living with support – Residential | IDEA Services

99 IDEA Services, *Supported Living*. Accessed November 2021: Supported Living | IDEA Services

100 Choices nz. *About us*. Accessed November 2021: About Us | Choices NZ

- Gaining employment.
- Experiencing new challenges or pursuing new interests.
- Transitioning from school.

## **b) Home and Community Support**

Home and Community Support is a fully funded programme accessed through the Ministry of Health of the New Zealand Government. It offers services to assist people who have a disability to live at home by helping them with personal care and household management. Some of these tasks can include<sup>101</sup>:

### Personal Care

- Eating and drinking
- Getting dressed and undressed
- Getting up in the morning and getting ready for bed
- Showering and going to the toilet
- Getting around the home

### Household Management

- Preparing meals
- Washing, drying, or folding clothes
- House-cleaning, vacuuming and tidying up

Should a person wish to apply for Home and Community Support, they must be under the age of 65, meet the Disability Support Service's (DSS) eligibility requirements and have had a needs assessment. The DSS's eligibility requirements state the programme is available to people who have a physical, intellectual, or sensory disability (or a combination of these) which is likely to continue for at least 6 months or limits their ability to function independently, to the extent that ongoing support is required. For an applicant to receive household management, they must possess a Community Services Card or be a child under the age of 16 years old. The child's parents or guardians must also be in possession of a Community Services Card.

A Community Services Card can be obtained if they are:

- 16 or over
- Not a dependent child
- A New Zealand citizen, a permanent resident or have applied for refugee or protection status.

Similar to Supported Living, the applicant is recommended to contact a NASC organisation where they will assess their circumstances and prepare an individual plan which outlines:

- What the applicant can do for themselves and what they need help with.
- Information for the support worker about the person's culture or how they like to do things.
- Information for the support worker about the applicant's home, for example, if they have a dog.
- What days or time of day the applicant would they prefer to get support.

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101 Ministry of Health, *Home and Community Support Services*. Accessed April 2021: <https://www.health.govt.nz/your-health/services-and-support/disability-services/types-disability-support/home-and-community-support-services>

If the applicant needs Home and Community Support Services, the NASC will discuss with them whether this support is for household management, personal care, or for both, and how they will help them meet their goals. The NASC will also talk with the applicant about which service providers in their area are able to provide them with a support worker. They can have an advocate, carer, or a member of their family with them while the applicant is going through this process.

### c) House Modification Funding

House modification funding is a payment which helps someone pay for changes to their home because they or their child have a disability<sup>102</sup>. This scheme is administered by the Ministry of Health in New Zealand. The type of modifications that are funded for a person's home depends on the person's disability-related need and their situation. Modifications that are funded under this scheme include:

- Handrails
- Ramps or lifts
- A shower with level access
- Changes to doorways
- Fencing

To begin the process of making modifications to a home, the person must contact the Ministry of Health's Equipment and Modification Service (EMS). A qualified housing assessor then assists the person in determining what modifications are the most cost-effective for their disability needs. If a person is eligible for the funding, the EMS assessor will assist in requesting the funding and will work with the person until the modifications are complete and paid for.

EMS assessors are occupational therapists and can be contacted through a person's local district health board, GP's and phone information lines.

Generally, the Ministry of Health will pay a contribution towards the cost of some modifications to a home related to a person's disability needs, if the costs exceed more than \$1,000 and at least one of the following situations apply:

- A person is building a new home to meet their disability related needs
- A person is doing more or different modifications to their home than the Ministry of Health housing assessor recommends
- The builder who is doing the modifications does not have a contract with the Ministry of Health
- The cost of access modifications into or between the home is more than the Ministry of Health's funding limit of \$15,334.

The modification scheme allows for access modifications and a person can avail of up to \$15,334. This funding covers:

- Building and installation costs
- Associated building costs
- Any access modifications

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<sup>102</sup> Ministry of Health, *Housing Modifications for disabled people*. Accessed November 2021: Housing modifications for disabled people | Ministry of Health NZ.

If the Ministry of Health has agreed to pay the full amount for the modifications, they will manage the full building process for the individual. However, if the costs are more than \$8,076, then a person may have to pay toward some of the costs. This is called a 'part payment'. The person will then have to complete an income and cash asset test to determine if they need to contribute an amount towards the modification costs. The Ministry of Social Development will assist a person in completing this part of the assessment.

If a person is to partially pay towards the modifications, the Ministry of Health will pay their share of the cost directly to the builder when the work is completed, and the person must do the same with their share of the payment.

# 7 Sweden

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## 7.1 Disability Governance and Key Stakeholders

Sweden is divided into 21 counties with associated regional councils. The county councils are responsible for overseeing tasks such as health care and are entitled to levy income taxes to cover their costs. At a more local level there are 290 municipalities which are responsible for a broad range of facilities and services including housing, roads, water supply and wastewater processing, schools, public welfare, elderly care, and childcare. They are legally obliged to provide certain basic services and can levy income taxes on individuals. They also charge for various services.<sup>103</sup> These authorities are all members of the Swedish Association of Local Authorities and Regions, an employer organisation that represents and advocates local government.

The Ministry of Health and Social Affairs<sup>104</sup> coordinates disability policy in Sweden, incorporating several other ministries and policy areas. There is an interdepartmental group with representatives from different ministries who, through dialogue, share experiences and discuss topical issues. Swedish disability policy is based on the UNCRPD and deals with the rights and interests of people with disabilities in society.

## 7.2 Disability and the Population

Sweden has a population of around 10 million people. Myndigheten för delaktighet (MFD)<sup>105</sup>, or the Swedish Agency for Participation set out that there is no 'official register' or census count of people with disabilities in Sweden, instead, statistics are available from various surveys. As a result, the proportion of people with disabilities varies depending on how the question is asked, surveys tend to return a result of 10-30% of Swedish people having a disability.

Also of note is that MFD highlight that if the basic question "Do you have a disability?" is asked in a survey, it gives a smaller share than if there are several issues queried that then together create a definition of disability. Examples such as long-term illness, sight, hearing and mobility or difficulty remembering are given as instances that may sometimes be overlooked, even though people meeting one or more of these categories may ultimately have a disability. Some examples of how Swedish disability information is sourced are set out as follows:

- Statistics Sweden's<sup>106</sup> annual **surveys of living conditions**<sup>107</sup> uses several questions to identify the group of people with disabilities. These can then be compared with the rest of the population for a wide range of issues concerning living conditions. The general proportion of people with disabilities in this survey is over 30%.

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<sup>103</sup> Sweden.se, *Swedish Government*. Accessed March 2021: Swedish government - sweden.se

<sup>104</sup> Ministry of Health and Social Affairs, *Disability*. Accessed March 2021: <https://translate.google.com/translate?sl=auto&tl=en&u=https://www.regeringen.se/regeringens-politik/funktionshinder/>

<sup>105</sup> Myndigheten för delaktighet (MFD) or the Swedish Agency for Participation is an expert government agency that promotes the implementation of disability policy. Available at: Startsidan Myndigheten för delaktighet - MFD

<sup>106</sup> Statistiska centralbyrån (SCB) or Statistics Sweden is a government agency responsible for producing official statistics.

<sup>107</sup> SCB, *Survey of living conditions*. Accessed April 2021: <https://www.scb.se/en/finding-statistics/statistics-by-subject-area/living-conditions/living-conditions/living-conditions-surveys-ulfslc/>

- The Swedish Public Health Agency's<sup>108</sup> biannual **national public health survey**<sup>109</sup>, uses several questions that together give a proportion of just over 20 per cent of people with disabilities aged 16–84.
- Statistics Sweden conducts a **supplementary survey to the labour force survey**<sup>110</sup>. In the supplementary survey, people of working age (16–64 years) may state whether they have a disability. In 2018 this was 16 per cent.
- The European Union **Statistics on Income and Living Conditions** (EU-SILC) asks whether it is difficult to participate in activities or do chores that most others can. Questions are also asked about whether the difficulties are long running and due to health. This definition returns a result of 13 per cent which is noted as low by European standards. The definition of disability under EU-SILC is based on the following factors:
  - Impaired vision
  - Impaired hearing
  - Reduced mobility
  - Greatly reduced mobility
  - Have severe problems with allergy and/or with asthma
  - Severe problems of anxiety, worry, fear
  - Severely reduced activity capacity
  - Great trouble due to dyslexia and/or dyscalculia
  - Neuropsychiatric diagnosis

### 7.3 Disability Legislation

There are three Acts that are relevant to Swedish disability policy - the Discrimination Act 2009, the Act on Support and Services for Certain Disabled People 1994, and the Social Services Act 2001.

#### The Discrimination Act (2009)

As is the case in many other jurisdictions, Sweden has a general (anti) Discrimination Act<sup>111</sup>. Introduced in 2009, this act strengthens the legal protection of people and helps victims of discrimination to obtain redress and financial compensation. The Act is concerned with discrimination on the following grounds:

- Gender
- Transgender identity or expression
- Ethnicity
- Religion or other beliefs
- Disability
- Sexual Orientation
- Age

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108 Folkhälsomyndigheten or the Swedish Public Health Agency is an expert government agency with responsibility for public health issues at a national level

109 Folkhälsomyndigheten, *National public health survey, national and regional results*. Accessed April 2021: [https://translate.google.com/translate?sl=auto&tl=en&u=http://fohm-app.folkhalsomyndigheten.se/Folkhalsodata/pxweb/sv/B\\_HLV/](https://translate.google.com/translate?sl=auto&tl=en&u=http://fohm-app.folkhalsomyndigheten.se/Folkhalsodata/pxweb/sv/B_HLV/). Available at: Public Health Reporting - The Public Health Agency of Sweden (folkhalsomyndigheten.se)

110 This is on behalf of the Swedish Public Employment Service.

111 Diskrimineringsombudsmannen (Swedish Equality Ombudsman) *What is discrimination?*. Accessed April 2021: <https://www.do.se/other-languages/english/what-is-discrimination/>

The Act is both proactive and reactive. It is proactive in the sense that it imposes a duty to take positive action in working life and in the education system. It is reactive as it deals with the prohibition of discrimination in working life, education, and other areas of society. The Diskrimineringsombudsmannen (DO)<sup>112</sup> is the Swedish Equality Ombudsman that monitors compliance with the Act.

### Act on Support and Services for Certain Disabled People (1994)

In Sweden, a person has a legal right to independence, and this is set out in a 1994 act translated as the Act 'on support and services for certain disabled people'<sup>113</sup>. Another translation of this act was found to be the Act 'on support and services for people with certain functional impairments'. This act was designed to offer people with extensive disabilities greater opportunities to lead independent lives and to ensure that they have equal living conditions and enjoy full participation in community life. The law also gives people with certain disabilities the right to personal assistance, a form of support that is mostly funded by taxes. The level of support a person can receive is determined by the extent of their disabilities.

### Social Services Act (2001)

If a person's needs are not covered by the Act on Support and Services for Certain Disabled People, they may seek assistance from the equivalent of a local authority under the Social Services Act<sup>114</sup>.

## 7.4 Disability Strategies

### Overall Governance

As set out previously, the Ministry of Health and Social Affairs<sup>115</sup> coordinates disability policy and there is an interdepartmental group in operation which feeds into the overall disability policy. Swedish disability policy is based on the UNCRPD and deals with the rights and interests of people with disabilities in society.

Sweden does not have a current strategy or action plan for the area of disability. The Swedish Parliament has, however, decided on the direction and objectives of disability policy. The goal is to achieve equality in living conditions and full participation in society for people with disabilities in a society based on diversity, taking the UNCRPD as a starting point.

In order to achieve the national goal, the implementation of disability policy focuses on four areas:

1. The principle of universality.
2. Existing shortcomings in accessibility.
3. Individual support.
4. Solutions for individual independence and preventing and combating discrimination<sup>116</sup>.

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112 The Equality Ombudsman (DO) is a government agency that works on behalf of the Swedish parliament and government to promote equal rights and opportunities and to combat discrimination

113 Sveriges Rikstag, *Act on support and service for certain disabled people*. Available at: [https://translate.google.com/translate?sl=auto&tl=en&u=https://www.riksdagen.se/sv/dokument-lagar/dokument/svensk-forfattningssamling/lag-1993387-om-stod-och-service-till-vissa\\_sfs-1993-387](https://translate.google.com/translate?sl=auto&tl=en&u=https://www.riksdagen.se/sv/dokument-lagar/dokument/svensk-forfattningssamling/lag-1993387-om-stod-och-service-till-vissa_sfs-1993-387)

114 *Social Services Act, 2001*. Available at: [https://translate.google.com/translate?sl=auto&tl=en&u=https://www.riksdagen.se/sv/dokument-lagar/dokument/svensk-forfattningssamling/socialtjanstlag-2001453\\_sfs-2001-453](https://translate.google.com/translate?sl=auto&tl=en&u=https://www.riksdagen.se/sv/dokument-lagar/dokument/svensk-forfattningssamling/socialtjanstlag-2001453_sfs-2001-453)

115 Ministry of Health and Social Affairs, *Disability*. Accessed March 2021: <https://translate.google.com/translate?sl=auto&tl=en&u=https://www.regeringen.se/regeringens-politik/funktionshinder/>

116 MFD, *Objectives and Focus of Disability Policy*. Accessed March 2021: Objectives and focus of disability policy - MFD ([www.mfd-se.translate.goog](http://www.mfd-se.translate.goog))

## Other Organisations involved in Disability Policy

The Swedish Agency for Participation<sup>117</sup>(Myndigheten för delaktighet, formerly Handisam) (MFD) develops policy and guidelines, monitors international methods, and disseminates research and knowledge. The agency's mission is governed by goals and strategies for disability policy based on the UN Convention on the Rights of Persons with Disabilities. MFD has a special responsibility for the implementation of and follow-up on disability policy. MFD follows up on, among others, public actors and living conditions. MFD's task is to work to ensure that disability policy has an impact throughout all corners of society.

The Health and Social Care Inspectorate (Inspektionen för vård och omsorg) (IVO)<sup>118</sup> is a state agency which supervises health and medical care, social services, and services under the 'Act on Support and Services for Certain Disabled People'. The IVO is also responsible for the consideration of permits in these areas, this refers to authorisation for providers of personal assistance.

## 7.5 Disability and Housing

Swedish housing policy focuses on good housing for all, and public housing is open to all to apply for.<sup>119</sup> There is a housing subsidy policy with the intent of ensuring a supply of good quality and affordable accommodation across tenure types irrespective of household income.<sup>120</sup> The Swedish government has committed to ending "institutional" type housing for people with disabilities but have come under criticism for their lack of detail in the provision of mechanisms for independent living, special accommodation or community-based living.<sup>121</sup> The following are interventions which specifically relate to people with disability and their housing.

## 7.6 Examples

### a) LSS Disability Support

The support stemming from the aforementioned act on 'Support and Service for Certain Disabled People' is commonly referred to as LSS support and was introduced to guarantee good living conditions for people with severe disabilities. As may be the case in other countries, there is increasing concern on maintaining older people with disabilities in their homes due to an increasing older cohort.

### Accommodation with Special Service

In Sweden accommodation with special service is offered to people with disabilities, who need more extensive support than what can be provided in ordinary housing. Under LSS support, special accommodation for adults is provided as housing with special service or other specially adapted housing for adults with certain kind of disabilities. The types of disabilities included are intellectual disabilities, autism spectrum disorders and severe (multiple) disabilities.

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117 MFD, *About the Swedish Agency for Participation*. Accessed March 2021: <https://www.mfd.se/other-languages/>

118 Government Offices of Sweden, *Health and Social Care Inspectorate*. Accessed March 2021: Health and Social Care Inspectorate (Inspektionen för vård och omsorg, IVO) - Government.se

119 Housing Europe, *Social Housing in Europe – Sweden*. Accessed April 2021: <https://www.housingeurope.eu/resource-125/social-housing-in-europe>

120 Housing Agency, 2010, p52. *Review of Good Practice Models in the Provision of Housing and related Supports for People with a Disability*. Available at: <http://www.housingagency.ie/publications/review-good-practice-models-provision-housing-and-related-supports-people-disability>

121 The Academic Network of European Disability Experts (ANEC), *Living independently and being included in the community*. Accessed November 2021: [http://ec.europa.eu/employment\\_social/empl\\_portal/ede/SE-ANED%202018-19-Country%20report%20Living%20independently%20-%20Sweden\\_final%20for%20web.docx](http://ec.europa.eu/employment_social/empl_portal/ede/SE-ANED%202018-19-Country%20report%20Living%20independently%20-%20Sweden_final%20for%20web.docx)

The municipality is responsible for arranging the special accommodation, of which group residence and service housing are the most common forms. Group residence is small-scale housing (for three to five persons) with staff around the clock. Service housing consists of a number of apartments where the residents have access to shared service and permanent staff. Under LSS, accommodation for children is provided as accommodation in family homes or in homes with special services for children or young people with certain kinds of disabilities.

Special accommodation for adults provided under the Social Service Act (the Swedish acronym, SoL), is provided in group residences with staff around the clock, similar to group residences provided under LSS. Special accommodation provided under SoL is foremost provided to people with psychiatric disabilities with extensive care and supervision needs that extend over much of the day.

### Personal Assistance

People under age 65 with extensive functional disabilities have a right to free personal assistance. Individuals as well as parents of children with disabilities can obtain state aid for purchasing and adapting services related to care. Each local authority has organised home help services for people in their jurisdiction who are older and/or have disabilities. This can include daily tasks and the provision of assistance for activities such as helping someone go for a walk.<sup>122</sup>

In 2020, more than 67,500 individuals in Sweden received LSS support due to developmental disabilities, autism, and autism-like conditions under the Act. Around two thousand received these services for significant and enduring intellectual disability after brain injury in adulthood, and around 6,200 for other permanent physical or mental disabilities that cause difficulties in daily life<sup>123</sup>.

### Trends in special housing according to SoL

The number of people with the special accommodation according to SoL has, for several years, been around 4,100 people, but in recent years there has been an increase to almost 4,300 people. If this is a trend break or a temporary change is not yet known.

### Trends in special housing according to LSS

Special accommodation with service for adults has increased since 2013 by 8%, while for children and young people it has decreased by 10%.

The population increase and the increase in diagnoses within the autism spectrum are, according to the National Board of Health and Welfare, two of the explanations for the increase in special accommodation according to both to LSS and to SoL. Another conceivable reason may be that the persons who have had the assistance allowance withdrawn instead are granted special accommodation according to SoL or LSS.

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122 The Academic Network of European Disability Experts (ANEC), *Living independently and being included in the community*. Accessed November 2021: [http://ec.europa.eu/employment\\_social/empl\\_portal/ede/SE-ANED%202018-19-Country%20report%20Living%20independently%20-%20Sweden\\_final%20for%20web.docx](http://ec.europa.eu/employment_social/empl_portal/ede/SE-ANED%202018-19-Country%20report%20Living%20independently%20-%20Sweden_final%20for%20web.docx)

123 Statista, *Number of people receiving LSS disability service in Sweden 2020, by disability type*. Accessed April 2021: <https://www.statista.com/statistics/530601/sweden-disability-by-type/>

## b) Design and Adaptations

In Sweden there are strict accessibility regulations in the Planning and Building Act and the Planning and Building Ordinance<sup>124</sup> which aim to enable as many people as possible to participate in society on equal terms. Since 1959 Sweden has had a housing modification grant, this enables adaptations to be made to private dwellings in line with current building regulations. If people with disabilities need to have their accommodation modified to fit specific needs, they can apply for a grant from their municipality<sup>125</sup>. There is an obligation on local authorities to provide support to people with disabilities living in their catchment area irrespective of the financial situation of the applicant, the tenure, or type of home.

All costs that are considered necessary for older people or people with disabilities to perform everyday activities are covered by this housing modification grant. Everyday activities include entering and exiting the home, moving around the home as well as managing personal and domestic tasks. However, the following general rules apply when modifications are being undertaken:

- Modifications must be in line with current building regulations.
- The least expensive option for modifications and construction equipment should be used. More expensive options can be carried out with the individual contributing the price difference.
- Modifications must be necessary; they cannot be undertaken for convenience alone.
- Modifications must be permanent to the dwelling; they could not be removed when the individual leaves.
- The modification grant does not apply to ordinary building maintenance.

There is a four-part assessment for financing these housing modification grants, incorporating:

- The applicant's self-assessment of his/her problems and needs.
- An occupational therapist's assessment of disability and ability and ways to resolve functional problems.
- An engineer's technical assessment of adaptive solutions for solving the problems of structural barriers.
- An examination of legal guidelines concerning how the grant may be used.

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124 Boverket (National Board of Housing, Building and Planning), *Accessibility in the built environment*. Accessed April 2021: <https://www.boverket.se/en/start/building-in-sweden/swedish-market/laws-and-regulations/national-regulations/accessibility/>

125 Boverket (National Board of Housing, Building and Planning), *Housing Adaptation Grant*. Accessed November 2021: Housing adaptation grant - Boverket - Boverket

# 8 International Practice Informing the New Strategy

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This paper forms part of a suite of work being carried out to inform the development of the next strategy for housing for people with different disabilities. This research provides some insight into the stakeholders involved in providing housing options for people with disabilities in other jurisdictions and the legislation and strategies which inform the approach in each country.

The delivery of various options often involves the work of multiple actors including central government departments, state agencies, local authorities and the NGO sector. Whilst the examples provided are not exhaustive, they highlight that even within countries, providing housing options for people with disabilities involves multiple approaches and thus a variety of schemes and models are pursued.

These include the following:

- Funding for home adaptations.
- Assistance with home ownership.
- Funding for supports to enable people to remain in their own home.
- Delivery of homes through social and/or affordable housing schemes.
- Delivery through specific schemes for the provision of suitable homes for people with disabilities.
- Provision of housing through schemes which provide both a housing option and support services in one package.

It is worth noting that a number of countries examine functionality accessing, moving around and leaving the home as a basis for their decisions on modifications and adaptations.

Other areas of interest included:

- The approach in Quebec to an approved list system for adaptation grants.
- The early interventions approach by the NDIS in Australia.
- The home modification approach in private rented accommodation in Australia.
- Enable Good Lines in New Zealand.
- The New Zealand Accessible Properties Affordable Rental Scheme.
- Sweden's Service Housing which sees people having their own apartment with shared services and permanent staff.

None of the countries researched have a specific Housing Strategy for disabled people.

A further examination of the above schemes and an examination of the operation of the England's Disability Facilities Grants would benefit any review of schemes in Ireland.

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