

**DPAS 420 Term Assignment Option A**

**Student: Jayson Krawchuk**

## **Introduction**

The not-for-profit agency which is the subject of this report is the Richmond Centre for Disability (RCD). It was originally established in 1985 as the Richmond Committee on Disability. It functioned as an advisory body to the local government and community regarding people with disabilities and the issues and obstacles that they face. By the year 2000 the RCD had evolved into a centre with it's own building. For the last ten years it has been a place where people with disabilities can come to engage in various activities designed towards the purpose of providing them with the needed opportunities and skills to participate and live independently within their community.[1]

## **Mission and Vision**

The RCD's mission is to empower people with disabilities by providing them resources such as information and support that allows them to function and participate in their community to the fullest of their individual potentials.[2] The RCD's vision is one of independence and inclusion where having a disability does not equate to the prevention of an individual's ability to set and achieve personal goals. This vision is reflected in their philosophy of independent living. This philosophy is grounded in the principle that by removing barriers, both physical and attitudinal, people with disabilities have the ability to be active participants of society at a level which has the capacity to change the way in which they are viewed by others as well as how they view themselves.[3]

## **Goals and Objectives**

The RCD strives to provide a supportive base from which their clients have the opportunity to explore their options for themselves, make their own decisions, and learn from their mistakes.[3] The RCD implements a client directed "Participation Model" approach in which the "right" choices for clients are those choices which the clients make for themselves. The role of the center's facilitators in the decision making process is one of providing options to clients and supporting them in whatever it is they decide upon. By taking such an approach the RCD is working towards the goal of full community integration for their clients by promoting the growth of their clients personal independence.

## The Logic Model

The focus of this section will be RCD's "Independent Living Program".

### 1. Components

RCD's "Independent Living Program" is comprised of three core components. The first is "Skills Development and Empowerment". This component focuses on teaching and nurturing skills that allow clients the opportunity to help themselves and take control over the trajectory their own life course.[4] The second component is "Information and Networking". This component is designed to keep clients up to date and engaged with resources and options that are available to them. It functions to support clients in navigating systems that despite providing essential opportunities can be overwhelming to the inexperienced user. It promotes the acquisition of familiarity with these various systems within a supportive environment thereby preventing avoidance and promoting informed decisions.[4] Finally, the third component is "Peer Support and Recreation". This component encourages the interaction of clients and the sharing of experiences and knowledge. It provides various settings which function in reducing individual isolation.[4]

### 2. Activities

"Skills Development and Empowerment" activities include educational courses which cover the following subjects: computer skills, English, financial literacy, health literacy, life skills training, sensitivity training, and volunteer training. "Information and Networking" activities provide the opportunity for one on one sessions with a facilitator who is there to assist in a client led fashion with a broad range of topics. Examples include applying for assistance services, searching for and pursuing employment opportunities, as well as filling out medical forms just to name a few. "Information and Networking" activities basically provide clients the opportunity to assistance with anything that they wish to endeavour upon, investigate, or discuss. It is an area where the RCD's "Participation Model" is perhaps most evident. That is, whatever the client chooses to discuss or pursue is the "right" choice and the agency is there to provide support in those decisions. Finally, "Peer Support and Recreation" activities include various clubs and groups as follows: creative arts, knitting, martial arts, singing, strategy games, table tennis, Tai Chi, as well as client specific social support groups for mothers, youth, and Chinese.[4]

### 3. Target Populations

RCD is all inclusive with respect to which specific disabled populations are eligible to participate in the services that they offer. This is consistent with their philosophy of independent living which regards independent living as an individual right for all.[3] Different clients will of course experience and achieve different levels of autonomy. However, individualized goal setting that is client led creates a centre which

provides the opportunity for achievement and progression in all of its clients regardless of where their start point and end result is in relation to the achievements of others.

#### 4. Short Term Outcomes

The short term outcomes are common to all components, activities, and target populations comprising RCD's "Independent Living Program". The program is designed with the immediate intentions of providing options to clients, encouraging clients to make their own decisions, and supporting clients in whatever courses of action they decide to pursue. The key principle here is empowerment. The significance of this principle being the instillation of the realization within clients that despite their disabilities they are still in control of their own lives and have the capability to choose what trajectory their future course takes. Empowerment involves allowing clients to experience for themselves that they are capable of achievement and have the potential for future achievements without the assistance of others. At the same time they are also provided with the reassurance that assistance is available to them if they feel that they require it.

#### 5. Long Term Outcomes

The long term outcomes are also common to all components, activities, and target populations comprising RCD's "Independent Living Program". The program is designed with the future intentions of allowing clients to achieve independent living. That is, to achieve a level of independence which fulfills and maximizes clients personal goals and potentials. By doing so, clients will realize that they have the ability to be active participants of society at a level which has the capacity to change the way in which they are viewed by others as well as how they view themselves.[3]

### **The Logic Model-Summary**

All of the information in the previous section regarding RCD's "Independent Living Program" is summarized on the following page in Figure 1.

## RCD Logic Model

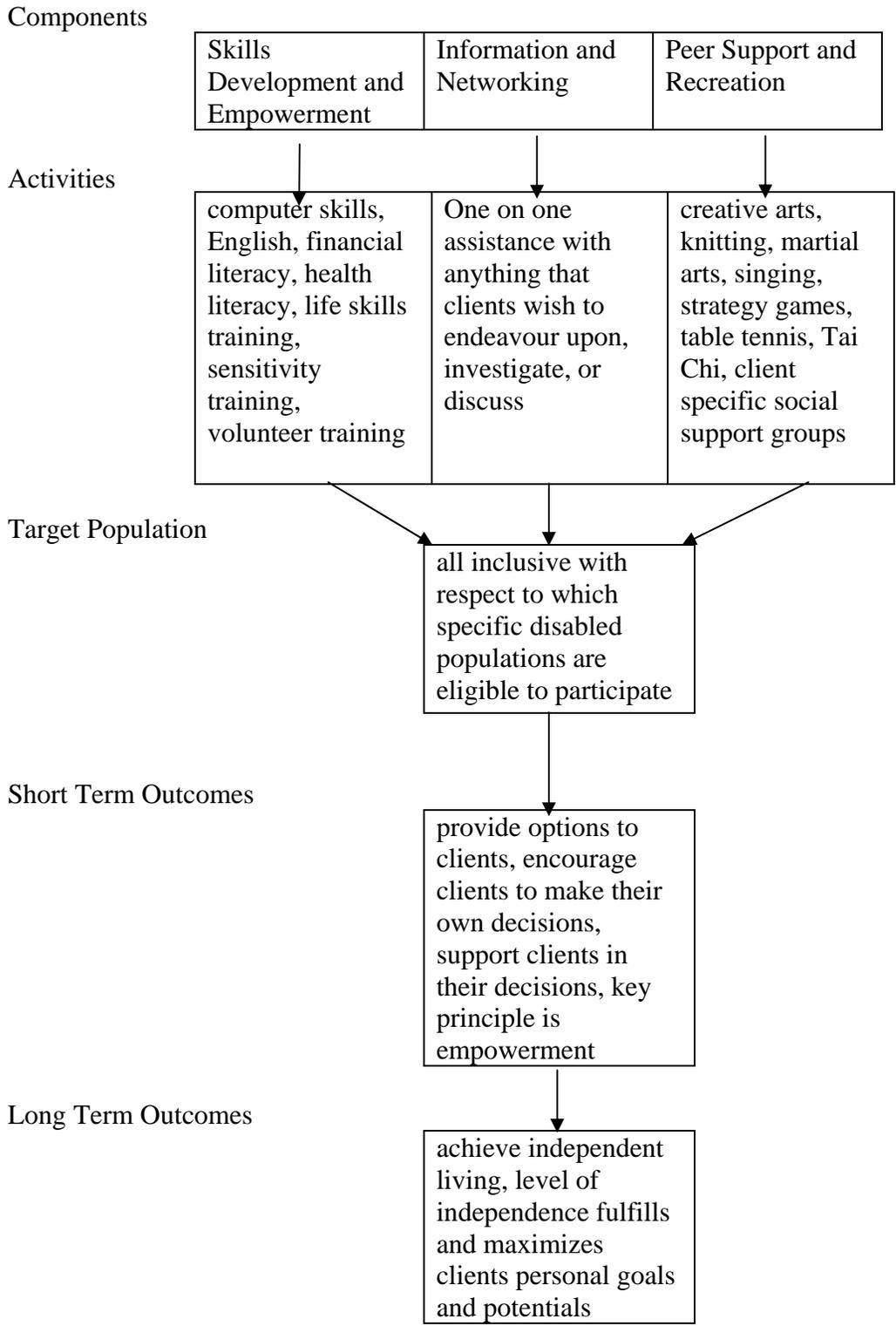


Figure 1. RCD's "Independent Living Program" Logic Model

## **Service Gap Addressed**

The RCD's "Participation Model" is designed to address areas of care left unaddressed by the "Medical Model". That is, it provides clients with the opportunity to be a part of a client directed process where all decisions are made by the client and the agency's role is to support whatever decisions are made. As mentioned earlier, in this type of model the "right" decisions are those that are regarded as the client to be the right choice. The result is a centre that provides a unique opportunity for clients to define their own motivations and acquire a sense of empowerment. This serves as a base towards clients achieving personally set goals and individualised levels of independent living.

## **Funding and Sustainability**

Core funding for RCD is provided at municipal, provincial, and federal levels. At the municipal level funding comes from the City of Richmond. At the provincial level funding is provided by BC Gaming. At the federal level RCD receives financial support from it's governing body Independent Living Canada. Despite the breadth of RCD's core funding, sustainability is a constant concern. Donations are a valuable additional component to funding and strategies geared towards raising community awareness and support are essential. Another issue of sustainability is with regards to human resources. The employees at RCD work for wages that are lower versus other sectors of health care. To protect against turnover RCD searches to recruit employees who obtain intrinsic satisfaction from serving the disabled population in this unique fashion. Approximately half of their employees are people with disabilities and this further establishes RCD as a role model for the integration of the disabled population into community participation.

## **Relation to DPAS Topics**

The Ottawa Charter for Health Promotion was discussed in DPAS 420 block I "From Person to Population". The charter identifies specific action areas regarding health promotion such as the creation of supportive environments, and the development of personal skills. It states that strategies required to address these action areas include advocacy, and collaboration that involves independent organizations. The RCD is a fine example of an organization dedicated towards advocating for the rights of the disabled population while providing them with a supportive environment designed towards the development of personal skills required for community involvement and independent living.

DPAS 420 block I "From Person to Population" also included discussion regarding health goals for British Columbia. One of the goals which has relevance to this report is that all individuals should have opportunities to acquire skills which are required for meeting the various challenges of life. The long term outcome of the RCD's Independent Living Program is consistent with this provincial health goal.

## **Reflections**

I chose to do my report on RCD because I live in Richmond and I have been past their facility numerous times. I had no idea what it was all about and I felt that this assignment would be a great opportunity to learn about a resource existing within the same community that I belong to. I learnt that fostering independent living can be a means to overcoming stigmatization, that addressing the psychosocial impact of one's medical condition is an essential component of total patient care, and that being aware of the resources available to my future patients will allow me to provide them with a higher quality of care.

Independent living can help overcome stigmatization of the disabled population by showing both the clients themselves as well as others that having a disability does not equate to an individual being unable to participate in the society to which they belong. If the psychosocial impact of living with a disability was not addressed by agencies such as the RCD, the quality of life that these patients experience would likely be devastated by social exclusion due to insurmountable obstacles. In my future practice, having knowledge of resources such as the RCD will allow me to direct patients towards doors of opportunity that I would never have the ability to open for them on my own.

## References

1. Richmond Centre for Disability [Online]. [2008?] [cited 2011 Feb 27]; Available from: URL:<http://www.rcdrichmond.org/OurStory.php>
2. Richmond Centre for Disability [Online]. [2008?] [cited 2011 Feb 27]; Available from: URL:<http://www.rcdrichmond.org/pdfs/Brochure%202008.pdf>
3. Richmond Centre for Disability [Online]. [2008?] [cited 2011 Feb 27]; Available from: URL:<http://www.rcdrichmond.org/AboutCentre.php>
4. Richmond Centre for Disability [Online]. [2008?] [cited 2011 Feb 27]; Available from: URL:<http://www.rcdrichmond.org/pdfs/Centre%20Services%20Info.pdf>

\* non-cited information re. RCD was obtained via interview with a RCD public relations representative