PhiLab

Research Paper

A Forgotten Cause: The Underfunding of Disability by Quebec Philanthropic Foundations

Felix Chouinard, Diane Alalouf-Hall,
Anne Delorme, Emmanuelle Lajoie

Montréal
February 2026

philab.uqam.ca
in PhiLab

Description du réseau PhiLab

Le réseau canadien de recherche partenariale sur la philanthropie (PhiLab), anciennement Laboratoire montréalais de recherche sur la philanthropie canadienne, a été pensé en 2014 dans le cadre de la conception de la demande de financement du projet développement de partenariat CRSH intitulé "Innovation sociale, changement sociétal et Fondations subventionnaires canadiennes". Ce financement a été reconduit en 2018 sous le nom "Evaluation du rôle et des actions de fondations subventionnaires canadiennes en réponse à l'enjeu des inégalités sociales et des défis environnementaux". Depuis ses débuts, le Réseau constitue un lieu de recherche, de partage d'information et de mobilisation des connaissances des fondations canadiennes. Des recherches conduites en partenariat permettent la coproduction de nouvelles connaissances dédiées à une diversité d'acteurs : des représentants gouvernementaux, des chercheurs universitaires, des représentants du secteur philanthropique et leurs organisations affiliées ou partenaires.

Le centre de recherche (Hub) mère se situe dans le centre-ville de Montréal, sur le campus de l'Université du Québec à Montréal (UQÀM).

Le Réseau regroupe des chercheurs, des décideurs et des membres de la communauté philanthropique à travers le monde afin de partager des informations, des ressources et des idées.

PhiLab Network Description

The Canadian network of partnership-oriented research on philanthropy (PhiLab), previously called the Montreal Research Laboratory on Canadian philanthropy, was thought up in 2014 as part of the conception of a funding request by the SSHRC partnership development project called ''Social innovation, social change, and Canadian Grantmaking Foundations''. From it's beginning, the Network was a place for research, information exchange and mobilization of Canadian foundations' knowledge. Research conducted in partnership allows for the co-production of new knowledge dedicated to a diversity of actors: government representatives, university researchers, representatives of the philanthropic sector and their affiliate organizations or partners.

The project's headquarters are located in downtown Montreal, on the Université du Québec à Montréal (UQAM) campus.

The Network brings together researchers, decision-makers and members of the philanthropic community from around the world in order to share information, resources and ideas.

Résumé

Ce deuxième volet d'une recherche sur la philanthropie et le handicap démontre que les personnes en situation de handicap constituent une population systématiquement sous-financée par la philanthropie canadienne. Malgré le fait que 27 % de la population canadienne vive avec au moins une incapacité, le handicap demeure une cause marginalisée dans les priorités philanthropiques.

Cette recherche révèle un cercle vicieux : le sous-financement chronique empêche la professionnalisation et la structuration du secteur communautaire, ce qui justifie à son tour la réticence des fondations à investir. L'analyse montre que même les cadres d'équité, diversité et inclusion (EDI), qui ont permis l'émergence de financements substantiels pour d'autres groupes marginalisés, excluent systématiquement le handicap ou le relèguent à une position secondaire.

Le rapport identifie trois obstacles principaux : (1) la perception du handicap comme responsabilité exclusive de l'État ; (2) la fragmentation du secteur communautaire, elle-même produite par le manque de ressources ; (3) l'absence du handicap dans l'application concrète des politiques EDI. Il conclut par un appel à un réinvestissement philanthropique transformateur tant dans les causes liées au handicap que dans les stratégies et les cadres philanthropiques eux-mêmes, afin que le handicap devienne une dimension systématique et légitime de l'octroi de subventions. Le rapport formule également des recommandations opérationnelles spécifiques pour soutenir cette évolution. Cette recherche adopte une perspective critique et transformatrice, fondée sur les études sur le handicap et les études critiques sur la philanthropie. Son objectif n'est pas de produire un portrait statistique exhaustif, mais d'analyser les mécanismes d'exclusion.

Mots-clés

philanthropie • handicap • équité-diversité-inclusion • sous-financement • capacitisme • justice sociale • Canada • Québec

Abstract

This second part of a study on philanthropy and disability argues that disability must be more fully integrated into the strategies and funding priorities of Canadian philanthropy. Although 27% of the Canadian population lives with at least one disability, people with disabilities remain significantly underfunded, and disability continues to be treated as a marginal cause within philanthropic agendas.

This research reveals a vicious cycle: chronic underfunding limits and constrains the professionalization and structuring of disability rights charities, which in turn justifies foundations' reluctance to invest. The analysis shows that even equity, diversity, and inclusion (EDI) frameworks, which have enabled the emergence of substantial funding for other marginalized groups, systematically exclude disability as a priority area or relegate it to a secondary position.

The report identifies three main explanatory mechanisms for this phenomenon: (1) philanthropic actors' perception of disability as the exclusive responsibility of the state; (2) the fragmentation of disability-focused organizations, itself produced by a lack of resources; (3) the absence of disability in the concrete application of EDI policies. It concludes with a call for transformative philanthropic reinvestment both in disability-related causes and within philanthropic strategies and frameworks themselves, so that disability becomes a systematic and legitimate dimension of grantmaking. The report also formulates specific operational recommendations to support this shift. This research adopts a critical and transformative perspective, grounded in disability studies and the critical philanthropy studies. Its goal is not to produce an exhaustive statistical portrait, but to analyze the mechanisms of exclusion.

Key words

philanthropy • disability • equity-diversity-inclusion • underfunding • ableism • social justice • Canada • Québec

A Forgotten Cause: The Underfunding of Disability by Quebec Philanthropic Foundations

Research Paper
(Report #2)

Felix Chouinard
Diane Alalouf-Hall
Anne Delorme
Emmanuelle Lajoie

Montreal – February 2026

Table of Contents

Introduction

This report is the second part of the research project entitled *"Vulnerability, Autonomy, and Agency: Towards a Renewed Philanthropy"* (VAA). Conducted in partnership between Humanity & Inclusion Canada (HI) and a team from the Canadian Philanthropy Partnership Research Network (PhiLab), this project is co-directed by Diane Alalouf-Hall and Jean-Marc Fontan, both researchers at the Université du Québec à Montréal (UQAM).

HI is an independent and impartial international solidarity organization working in contexts of poverty, exclusion, conflict, and disaster. It works in particular with people with disabilities, with a mission to defend their fundamental rights and improve their living conditions. PhiLab brings together university researchers and practitioners engaged in the critical analysis of the Canadian philanthropic ecosystem.

The VAA project is part of a shared desire to examine the role of grant-making philanthropy in promoting social justice, with a particular focus on supporting people perceived as vulnerable due to physical or mental disabilities. Structured in three parts, the project will result in the production of three separate reports.

This second report (part 2) presents the analytical component of the study. It follows the first report, which presented a review of the literature on the concepts of vulnerability, disability and agency in the philanthropic field. This first phase of the research laid the theoretical foundations for the project and identified the main issues at stake in the field. This report documents these issues based on an empirical survey of foundations and community organizations, and then makes concrete recommendations for transforming philanthropic practices.

Second phase research team and monitoring committee

The second phase is based on close collaboration between university researchers, graduate students, and partners in the field from the philanthropic and community sectors. This diversity of expertise and perspectives greatly enriched the analysis, ensured an approach rooted in the reality of practices, and fostered a dialogue between academic and experiential knowledge.

The composition of the research team and the Monitoring Committee that supported the project at each stage of its development was as follows.

The research team responsible for this second phase included:

- Diane Alalouf-Hall – UQAM / PhiLab
- Félix Chouinard – Master's student, University of Montreal

- Lucie Dumais – UQAM / PhiLab
- Diane Morin – UQAM / Dr. William Barakett Chair in Intellectual Disabilities and Behavioral Disorders
- Jean-Marc Fontan – UQAM, Department of Sociology / outgoing co-director of PhiLab
- Élisabeth Robinot – UQAM / PhiLab

The Research Monitoring Committee included team members and project partners.

- Anne Delorme – President and CEO of Humanity & Inclusion
- Rabia Khedr – National Director, Disability Without Poverty
- Sara Krinitzki – Philanthropic Foundations Canada
- Lise Roche – Mirella and Lino Saputo Foundation
- Emmanuelle Lajoie – Program Officer and Gender and Inclusion Specialist, Humanity & Inclusion

Context

This report examines a critical gap in Canadian philanthropic practice: the widespread exclusion of disability from funding priorities of grantmaking foundations While Canadian foundations have increasingly adopted equity frameworks and committed substantial resources to other marginalized groups, disability-focused community organizations remain chronically underfunded and institutionally invisible.

Over the past decade, an increasing number of Canadian grantmaking foundations have adopted a social justice and/or EDI orientation. These foundations have reimagined their strategic orientation toward supporting vulnerable populations, emergent social movements, and communities facing systemic barriers. Significant investments have been made in areas such asIndigenous reconciliation, women's rights, combatting anti-Black racism LGBTQIA2S+ inclusion, and marginalized youth empowerment.

Dedicated initiatives, such as the Foundation for Black Communities, the Indigenous Peoples' Resilience Fund (IPRF), the Canadian Women's Foundation, and the Fund for Gender Equality, illustrate this expanding commitment. These initiatives are supported by a wide coalition of private and community foundations across Canada, including several of the largest philanthropic actors in Québec and beyond (see Table 1). Together, they demonstrate a growing willingness to address structural inequities through targeted, long-term investments.

Table 1 - Major foundations Supporting Key EDI Funds in Canada

Fund / Initiative	Supporting Foundations
Indigenous Peoples' Resilience Fund (IPRF)	Calgary Foundation; Carthy Foundation; Donner Canadian Foundation; Edmonton Community Foundation; Inspirit Foundation; Laidlaw Foundation; Lawson Foundation; McConnell Foundation; Medavie Foundation; Metcalf Foundation; Ontario Trillium Foundation; Toronto Foundation; Trottier Family Foundation; Vancouver Foundation, etc.
Foundation for Black Communities (FFBC)	Inspirit Foundation; Laidlaw Foundation; McConnell Foundation; Toronto Foundation; Vancouver Foundatio, etc.
Canadian Women's Foundation (CWF)	W. Garfield Weston Foundation; Ontario Trillium Foundation; Zukerman Family Foundation, etc.
Fund for Gender Equality (CFC)	Toronto Foundation; Fondation du Grand Montréal; Fondation Laurentides; Fondation Québec Philanthrope; Victoria Foundation, etc.

In Québec specifically, private foundations have also increased their engagement in equity-focused programs (table 2). Some support reconciliation and anti-racism efforts, others finance gender equity, youth leadership, or community-led initiatives in marginalized neighbourhoods. Even foundations whose strategies are not explicitly framed through an EDI lens contribute to reducing inequalities by investing in early childhood, poverty reduction, and educational equity.

Table 2 - Examples of Equity-Focused Funds and Initiatives Supported by Québec-Based Foundations

Foundation	Examples of EDI-Focused Funds / Programs Supported
McConnell Foundation	Circle on Philanthropy and Aboriginal Peoples (core funding(2017 to 2020) Cities for People – social inclusion & anti-racism initiatives (2012 to 2021), etc.
Pathy Family Foundation	Pathy Fellowship (launched 2014) — leadership program enabling young changemakers, including racialized participants, to develop community projects.
Trottier Family Foundation	Fund for Gender Equality (via CFC)
Fondation Lucie & André Chagnon	Fondation pour les communautés noires Fonds Afro-Entrepreneurs 2.0 Fonds collectif pour l'équité sociale – personnes migrantes
Fondation du Grand Montréal (FGM)	Fund for Gender Equality (CFC partnership) Programs for newcomer and refugee integration Support for Indigenous cultural revitalization and urban Indigenous initiatives Anti-racism and youth inclusion programs
Fondation Béati	Social justice & anti-oppression funding (1991–present) — core mission supporting grassroots movements challenging inequities. Anti-racism and anti-oppression projects (2000s–present) — long-term support to racial justice organizations. LGBTQ+ inclusion and queer spiritual movements (2010–present) — support for queer-led community organizing.

Combined with the national EDI frameworks promoted by Imagine Canada, these developments have generated new data, narratives, and funding streams that increasingly anchor philanthropy within a social justice paradigm.

But where does disability fit within this broader framework of vulnerability?

Despite the disabled community being one of the largest and most structurally marginalized groups in Canada, it remains widely absent from philanthropic equity agendas. In our sample of 20 foundations, references to vulnerability and EDI (Equity, Diversity, Inclusion) were abundant, yet they overwhelmingly focused on race, gender, and youth. Disability was rarely, if ever, mentioned as a dimension of inequality or as an explicit funding priority.

This silence stands in sharp contrast with the needs identified by organizations serving people with disabilities. Even among Québec's top disability-related charities (table 3 et table 4), only a small proportion of philanthropic investments directly target disability organizations, leaving a significant gap in support for this sector.

Table 3 - Overview of Quebec private foundations active in the field of disability

Foundation	Interest / Mission	Total Amount to Recognized Donees (2024 or 2025)	Minimum Estimated Amount Dedicated to Disability
Mirella & Lino Saputo Foundation 118925148 RR 0001	Support for people with disabilities, older adults, immigration, social inclusion	45 919 006 $ (95,25 %) 1 Jan 2024 – 31 Dec 2024	**At least 18 000 000 $** Approximately 73 disability-related grants. Examples: Centre Philou ($800,000), Espace vie TSA ($500,000), FQLI ($415,000), AQLPH ($400,000), Carpe Diem ($250,000), HAN Logement ($225,000), Baluchon Alzheimer ($200,000), Fédération québécoise de l'autisme ($198,000), Humanity & Inclusion ($150,000), as well as Fondation Mira, Fondation Réa, etc.
J.W. McConnell Foundation	Social inclusion, social justice, support to disability and community organizations	24 522 609 $ (60,01 %) 1 Jan 2024 – 31 Dec 2024	**At least 476 500 $** Only four organizations are clearly disability-focused: Disability Without Poverty ($225,000), Giant Steps ($150,000), Summit School Foundation ($100,000), Centre François-Michelle ($1,500).
Foundation Lucie & André Chagnon	Inclusion, early childhood, poverty reduction, social support (potential disability-related funding via inclusion)	29 433 000 $ (22,25 %) recognized 1 Jan 2024 – 31 Dec 2024	**Not available** The foundation primarily funds early childhood, social inclusion, and poverty reduction. Most contributions go to non-recognized donees: $80,855,000 (61.12%). Direct disability-related funding cannot be identified through CRA data

Foundation	Interest / Mission	Total Amount to Recognized Donees (2024 or 2025)	Minimum Estimated Amount Dedicated to Disability
Pathy Family Foundation 857688428 RR 0001	Inclusion, social justice, community projects (possible disability-related funding)	20 963 867,00 $ (93,56 %) 1 Jan 2024 – 31 Dec 2024	**At least 15 000 $ (AQEPA)**
Trottier Family Foundation	Health, sciences, some social projects (occasional disability funding)	36 849 400 $ (89,21 %) 1 Jan 2024 – 31 Dec 2024	**At least 75 000 $** Among 222 recognized donees, only three are explicitly disability-focused: Neil Squire Society ($20,000), L'Arche Canada ($20,000), Répit Providence Hochelaga ($35,000).
Foundation Marcelle et Jean Coutu 130257678 RR 0001	Health, visual impairment, social initiatives — potential disability support	35 129 234,00 $ (90,08 %) 29 Feb 2024 – 28 Feb 2025	**At least 6 256 509 $** Notable grants include contributions to the Association handicapés adultes de la Mauricie Inc. ($1,000), Cavaletti – Adapted Outdoor Recreation ($35,000), Centre Philou ($200,000), Espace-Vie TSAA ($400,000), the Giant Steps Foundation ($250,000), the Baluchon Foundation for long-term in-home respite ($55,000), the Charlevoix-Saguenay Ataxia Foundation ($100,000), the Habilitas Foundation ($50,000), Le Pilier Foundation ($3,850,000), and the Miriam Foundation ($1,015,000).

Table 4 - Overview of Quebec public foundations active in the field of disability

Foundation	Interest / Mission	Total Amount to Recognized Donees (2024 or 2025)	Minimum Estimated Amount Dedicated to Disability
Fondation du Grand Montréal (FGM) 881979124 RR 0001	Support for initiatives that generate impact on the well-being of individuals and communities in the sectors of arts and	17 392 594,00 $ (71,34 %) 1 Jan 2024 - 31 Dec 2024	**At least 70 000 $** Notable grants include contributions to Formation Altergo ($10,000, an organization dedicated to adapted sports and persons with disabilities), Communauté Hadley Inc. ($30,000, services for blind and visually impaired individuals), the Fondation des

Foundation	Interest / Mission	Total Amount to Recognized Donees (2024 or 2025)	Minimum Estimated Amount Dedicated to Disability
	culture, education, social development, the environment, sports, and health.		Aveugles du Québec ($2,000), L'Arche Montréal ($2,000, supporting persons with intellectual disabilities), L'Arche Beloeil Inc. ($309), the Centre d'Intégration à la Vie Active pour les Personnes in La Sarre ($2,980, supporting persons with disabilities), and the Habilitas Foundation ($21,590).
Centraide du Grand Montréal / United Way 118842517 RR 0001	United Way's mission is to support vulnerable individuals as well as the organizations and projects that assist them by investing in communities and building strong relationships with them. United Way of Greater Montréal is an agent of change that promotes collaboration, volunteer engagement, and community involvement.	61 361 909,00 $ (69,56 %) 1 Apr 2023 - 31 Mars 2024	**At least 1 900 000 $** Notable grants include contributions to disability-focused organizations, including AlterGo Expertise ($125,000, adapted sports and leisure for persons with disabilities), the Association d'entraide des personnes handicapées physiques ($105,355), the West Island Association for the Intellectually Handicapped ($77,100), the Montréal Association for Intellectual Disability ($112,880), the Association des parents de l'enfance en difficulté ($140,550, supporting children with disabilities), the Association des personnes handicapées de la Rive-Sud-Ouest ($83,300), ALPABEM – the Laval Association of Parents and Friends for Mental Well-Being ($101,300), the Quebec Association for Children with Auditory Disorders ($181,700) etc.
Fondation Azrieli 892425166 RR 0001		118 115 766,00 $ (67,57 %) 1 Jan 2024 - 31 Dec 2024	
Fondation Habilitas 823328554 RR 0001		4 154 970,00 $ (80,30 %) 1 Apr 2023 - 31 Mars 2024	**At least 4 144 970 $** Notable grants include contributions to o Camp Massawippi ($1,295,177), which provides adapted recreational programs for children and adults with physical disabilities, and to the CIUSSS du Centre-Ouest-de-l'Île-de-Montréal ($2,240,332) in support of rehabilitation and disability-related services. Significant funding was also granted to the Action Centre ($ 587,679), an organization supporting adults with physical limitations and loss of autonomy, as well as to the Québec Federation of the Blind ($ 21,782)

Foundation	**Interest / Mission**	**Total Amount to Recognized Donees (2024 or 2025)**	**Minimum Estimated Amount Dedicated to Disability**
Fondation Béati 137156360 RR 0001		**305 000 $** (22,53 %) 1 Sept 2023 – 31 August 2024	**Not specified** The vast majority of Béati's grants are paid to unrecognized donees, making it impossible to obtain an accurate estimate from the CRA.

(Source : ARC, Liste des organismes de bienfaisance et autres donataires reconnus, consultée en juin 2025 puis octobre 2025)

We searched for publicly available data in the CRA system. It is important to understand that these are the only data currently accessible, and they are not fully accurate or entirely reliable. For this reason, we chose to present what is available while limiting our calculations to donations directed specifically to officially recognized disability-related organizations.

In 2022, nearly 27% of people aged 15 and over (8 million people) in Canada reported living with at least one disability (Statistics Canada, 2022). Globally, 16% of the population lives with a disability, a proportion that rises to 25% in conflict situations. Women are particularly affected: one in five women in Canada lives with a disability.

Yet this massive demographic reality is not reflected in philanthropic priorities. Unlike causes related to ethnocultural diversity, sexual orientation, or gender identity, which have seen the emergence of dedicated funds (e.g., Foundation For Black Communities; Canadian Women's Foundation; Indigenous People's Resilience Fund), national campaigns, and growing institutional recognition, disability remains largely invisible on the Canadian philanthropic agenda.

Given philanthropy's unique capacity to fill in gaps where the state fails and to catalyze social change, this invisibility has concrete consequences for people with disabilities, who are twice as likely to live in poverty as people without disabilities (Campaign 2000, 2024). They face what researchers call a **"double tax"**: significant additional costs (adapted equipment, healthcare) combined with often lower incomes due to underemployment and environmental barriers. This economic precariousness dramatically limits their ability (and that of their loved ones) to financially or voluntarily support the organizations that represent them.

In the United States, where data is more systematically collected, disability-related philanthropic funding represents barely two cents for every dollar granted by foundations (Disability & Philanthropy, 2023).

Moreover, most of this funding remains oriented toward medical or rehabilitative approaches rather than rights-based and socially transformative frameworks.

Figure 1: Foundation 1000 Giving for Disability as a Share of Overall Giving

2019 Foundation Giving	Amount	%	No. of Grants	%
Giving for People w/Disabilities	$755,130,191	2.0%	8,605	4.5%
Other Giving	$36,446,085,770	98.0%	184,519	95.5%
2019 Total	$37,201,215,961	100%	193,124	100%

This table is based on all grants of $5,000 or more included in Candid's Foundation 1000[1] data set (2019. p71).

In Canada, a major challenge is the absence of disaggregated data. Neither the Canada Revenue Agency (CRA), nor Philanthropic Foundations Canada, nor Imagine Canada provide national-level reporting that breaks down charitable giving by cause in a meaningful or systematic way. T3010 declarations do not classify donations by thematic area, making it impossible to assess with precision how much philanthropic funding reaches disability-related organizations..

Limitations and contributions

The collaborative and partnership-based approach adopted in this research brought to light blind spots that a traditional academic approach would likely have overlooked. The active involvement of partners from the early stages of design enriched the methodological approach and contributed to a more nuanced understanding of the dynamics at play in the philanthropic sector.

A striking example of this contribution concerns the difficulty in recruiting foundations that are not committed to disability issues. This observation, raised during the initial fieldwork, led the team to readjust its methodological approach, more explicitly integrating the dimension of equity, diversity, and inclusion (EDI) as a starting point. On the advice of partners, this strategic reorientation made it possible to mobilize a wider

---

[1] Foundation 1000" data set includes all grants of $5,000 or more authorized or paid by 1,000 of the largest U.S. foundations.

range of philanthropic actors, while sparking rich discussions on the uses (sometimes normative or symbolic) of EDI in their practices.

This research has some important limitations. First, foundations not involved in the field of disability and not particularly sensitive to equity, diversity, and inclusion frameworks proved particularly difficult to engage. This absence led to a selection bias that skewed the material collected toward organizations already sensitive to the issues studied. Furthermore, the geographic coverage remains limited. Although the project was initially intended to be Canada-wide, the vast majority of interviews were conducted in Quebec. Only one organization outside this province agreed to participate, and that was in the form of a written questionnaire. The survey conducted in the summer of 2025 partially offset this limitation by collecting responses from 20 foundations, including six from outside Quebec, but this coverage remains insufficient to fully reflect the diversity of provincial contexts.

Despite these limitations, the study makes several meaningful contributions. Methodologically, it shows how partnership-based approaches can help overcome common challenges in qualitative research, such as participant recruitment and tool validation. Strategically, it demonstrates that EDI can be used not only as an analytical lens but but also as a framework that helps establish the relevance and legitimacy of the research in settings that are otherwise difficult to access, thereby facilitating organizational engagement.

Research scope

This study examines how and why disability remains marginal within the strategies and funding practices of Canadian grantmaking foundations. To address this research question, we conducted a focused qualitative study of grantmaking foundations in Québec, where the vast majority of participants are based. While the findings offer insights that may be relevant to the broader Canadian context, the study is not intended to produce claims that are statistically generalizable to the entire country. Instead, it contributes to building a deeper understanding of the mechanisms that shape philanthropic engagement with disability.

While foundations represent only one part of the broader philanthropic landscape—alongside individual giving, corporate donations, and informal support networks—we focus on them because of their strategic role in shaping priorities, legitimizing certain causes, and influencing other funders.

This study therefore offers insight into the relationships between disability, EDI, and philanthropy as observed in Québec, while underscoring the need for continued documentation and expanded comparative work across provinces to better understand the Canadian landscape as a whole.

1.0. Method

This second report is part of a qualitative, collaborative approach rooted in applied social sciences. It constitutes the second phase of the VAA research project, which began with a critical literature review presented in the first report. This exploratory phase laid the conceptual foundations for the research and guided the field surveys based on frameworks derived from critical disability studies (Barnes & Mercer, 2010; Pothier & Devlin, 2006) and equity, diversity, and inclusion (EDI) approaches (Ahmed, 2012; Hankivsky, 2014)..

The literature review identified three guiding questions that informed the development of methodological tools:

1. How is disability conceptualized, perceived, and integrated within foundations and disability-focused organizations
2. How do Canadian grantmaking foundations understand and position disability within their equity, diversity, and inclusion (EDI) priorities?

Based on these questions, we identified a central issue: **understanding the involvement (or lack thereof) of Canadian philanthropy in supporting people living with disabilities, and analyzing the underlying logic behind this engagement or marginalization.**

The fieldwork was based on the principles of partnership-based research and co-construction of knowledge. This approach aims to value expertise gained from lived experience as much as institutional and academic knowledge. It resulted in ongoing dialogue between researchers and stakeholders, particularly through a monitoring committee.

In concrete terms, this methodological phase was based on various elements.

- **Semi-structured interviews** conducted with around 20 representatives of foundations, community organizations, and disability stakeholders during the winter of 2024 and summer of 2025
- A **documentary analysis** of annual reports, public databases (including those of the CRA), and strategic publications of the foundations concerned
- **Discussion workshops** with partners in the field to validate emerging findings and enrich the interpretation of results
- A **qualitative survey** distributed in the summer of 2025 to 20 Canadian foundations to explore their understanding of EDI

This inductive and collaborative method not only provided insight into current perceptions and practices, but also revealed blind spots, tensions, and opportunities across the philanthropic field with regard to disability. Full methodological details (participant selection, interview guides, data organization) **are presented in the appendix.**

2.0. Philanthropic Barriers to Disability Inclusion: Structural Challenges and Funding Gaps

This section analyzes how philanthropic structures, practices, and priorities create barriers to disability funding. While these barriers manifest as organizational challenges within the disability sector, they originate in philanthropic decision-making frameworks that systematically exclude grassroots, lived-experience-led organizations.

Before delving into the analysis, let's look at the demographic scope of disability. Globally, approximately 16% of the population lives with a disability, a proportion that rises to 25% in conflict situations. In Canada, in 2022, nearly 27% of people aged 15 and over (8 million people) reported living with at least one disability (Statistics Canada, 2022). Women are particularly affected: one in five women in the country lives with a disability.

Yet this massive demographic reality is not reflected in philanthropic priorities. Analysis reveals a troubling paradox: despite ubiquitous discourse on equity, diversity, and inclusion (EDI), disability remains systematically excluded from concrete commitments. Although national funding data are limited and uneven, available estimates indicate that less than 2% of Canadian philanthropic grants explicitly target disability-related causes—a proportion strikingly misaligned with the fact that 27% of the population lives with at least one disability. Moreover, among the 20 foundations surveyed in the summer of 2025, only four reported having dedicated programs or funding streams related to disability, and none included disability as a formal category within their EDI frameworks.

2.1. Fragmentation of the sector: a fragmented ecosystem

2.1.1. The "by and for" model: strength and pitfall

The philanthropic sector working on behalf of people with disabilities has historically developed according to a "by and for" model, where initiatives are created and carried out directly by people with disabilities or their loved ones. This model represents a break with traditional approaches to care: it is based on the reappropriation of action, speech, and the power to act. This is an undeniable strength: organizations are deeply rooted in lived realities, driven by sincere, often militant commitment, and possess unique experiential expertise.

However, this same characteristic creates structural limitations. The people who found or lead these initiatives rarely have, at the outset, the resources or organizational skills expected by funders: administrative management, financial monitoring, performance indicators, accountability. A representative of a foundation puts it this way:

> *"These are people who decide to open their homes to others, people with big hearts who welcome certain individuals into their homes, but they don't have the training or the human resources necessary to properly support these people. They need*

> *to be able to guide them in their progress and development, and be able to take the right action if one of the organizations comes along.* " (PHB47)

The "by and for" model often comes into tension with the implicit norms of mainstream grantmaking philanthropy. Concretely, these norms include:

1. **Quantitative impact measurement requirements:** the expectation of numerical indicators and performance dashboards that are not always adapted to the realities of small organizations operating with limited administrative capacity.
2. **Complex application processes:** lengthy forms and technical proposal-writing requirements, coupled with formal accountability procedures that assume familiarity with financial management, outcome reporting, and monitoring frameworks.
3. **Eligibility criteria:** selection processes that tend to privilege already established, professionalized organizations with proven track records, stable staffing, and administrative infrastructure—criteria that many emerging "by and for" groups cannot meet.
4. **Formalized accountability expectations:** detailed financial reports, evaluation data, and compliance documentation that require administrative resources many grassroots groups simply do not have.
5. **Additional barriers for newcomers to the sector:** these constraints are even more acute for organizations that are just beginning their work and have not yet developed relationships within the philanthropic field. Lacking networks or informal access points, they must rely exclusively on rigid, formal application platforms. While these systems provide structure and transparency, they also introduce additional layers of complexity that can discourage or exclude emerging grassroots actors who are unfamiliar with philanthropic norms.

When organizations operate with limited resources, extensive volunteer work, and/or little public support, these requirements become additional barriers to meeting philanthropic standards. The model, which is originally a lever for autonomy, can thus be transformed into a factor of isolation: lacking the time and means to structure themselves according to these standards, organizations struggle to access funding.

A comparison with the women's movement reveals this discrepancy. The latter is also based on a "by and for" model, but has succeeded in gaining major philanthropic recognition (e.g., Canadian Women's Foundation). Several factors explain this difference:

- a broader and more socially diverse activist base;
- strategic alliances with academic and corporate circles;
- less exposure to the economic "double tax";
- an ability to present a unified collective discourse.

This comparison highlights the heterogeneity of the disability sector: a multitude of small local structures coexist with a few rare, more professionalized organizations. As Boucher (2005) and Prince (2009) have pointed out, this diversity is not problematic in itself; the problem arises when funding standards tacitly favour already professionalized organizations. By requiring solid structures, precise indicators, and formalized consultation processes, philanthropy unintentionally reinforces inequalities in access to resources.

2.1.2. The hyperspecialization of philanthropic funding

The organizational diversity of the sector is amplified by the specialization of philanthropic funding. As one respondent points out:

> *"When we think about disability, we can already think of different related causes, but often there is a slight distinction in the mission."* (PHB43)

Missions vary according to the type of disability, the age of the beneficiaries, the territories served, the modes of intervention (individual support, collective advocacy, respite services, education, employability), or cultural and linguistic identities. This plurality is constitutive of the sector, but makes it difficult for a strong collective voice to emerge.

On the philanthropic side, several foundations target specific subcategories, creating a sometimes exclusive specialization.

> *"If an organization writes to us, ultimately, it's for autistic people, and there are no people with reduced mobility in there, we won't support that foundation, because we're really focused on physical disabilities."* (PHB42)

Others acknowledge their inability to broaden their scope despite their interest.

> *"I have a big heart. I would support everyone. There are some really interesting causes, but sometimes, I'm really sorry, it just doesn't fit."* (PHB42)

These targeting strategies, while not illegitimate, contribute to creating silos within philanthropic funding for disability. Organizations adapt their discourse or projects to meet narrow criteria, limiting cross-sector alliances and cross-cutting demands.

2.1.3. Fragmentation as a symptom of an unfavourable structural context

One of the most frequently expressed observations by respondents concerns the organizational fragmentation of the disability sector. The latter is often perceived as a fragmented ecosystem, difficult to grasp in terms of strategic funding. Foundations cite a lack of coordination, scattered initiatives, and uneven organizational capacity among actors, which makes planning structural interventions more complex. A respondent from a Montreal foundation sums up this reality well.

> *"In ecosystems involving people in precarious situations, refugees, immigrants, people with disabilities, etc., we realized that they are not structured."* (PHB56)

This lack of structure (another finding of the same research), perceived as an obstacle to investment, sometimes requires adjustments in the terms of philanthropic support. As the same person explains.

> *"We cannot ask them to meet our criteria for collective action, or impose them on them. It cannot work because it is a fragmented sector or ecosystem."* (PHB56)

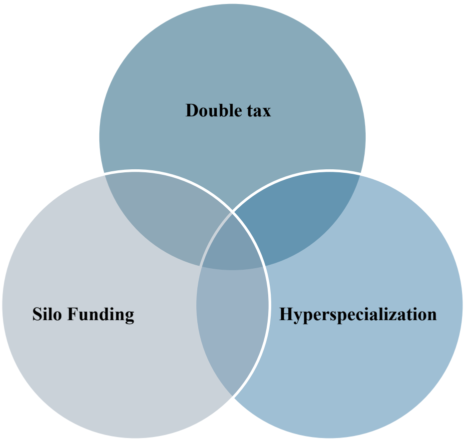
In this sense, several foundations recognize that their traditional criteria (designed for already well-structured environments) are difficult to apply to the field of disability. This situation creates a double paradox: on the one hand, they are looking for partners with strong organizational capacity; on the other hand, it is precisely the lack of structure that would justify more flexible and committed support.

This vicious circle is not new. An instructive parallel can be drawn with the women's movement twenty years ago: deemed "too small," "too militant," and "not professional enough," it struggled to access philanthropic resources even though its fragility made support crucial (Bashevkin, 2002; Tremblay, 2005). Current philanthropic criteria reproduce the same pattern of exclusion with regard to disability.

2.1.4. Structural factors that perpetuate fragmentation

The fragmentation observed is not solely due to a lack of coordination or an internal flaw in the sector. It can also be explained by several structural factors related to the context in which community organizations operate.

Figure 2: Structural factors contributing to fragmentation



The economic "double tax"

Unlike other social movements that have quickly become professionalized (notably the LGBTQ2I movement), people with disabilities and their loved ones face major material constraints.

- High costs of adapted equipment.
- Recurring health care expenses.
- Time spent navigating healthcare systems.
- Employment difficulties limiting income.

This "double tax" of higher costs combined with lower incomes is well documented in the literature (Batavia and Beaulaurier, 2001; Wensink, 2009; Hughes and Avoke, 2010). It drastically limits the ability to engage in advocacy or professionalize organizations. It manifests itself in very concrete ways in the day-to-day operations of organizations. The recurring precariousness of core funding limits their ability to plan for the long term and forces them to operate in a survival mode.

A revealing comparison

According to the Boston Consulting Group (2020), LGBTQ2I networks in the workplace are heavily overrepresented by white gay men with significant social capital and time availability.

Forced hyperspecialization

Added to this is the hyperspecialization of mandates by type of disability, age group, or type of service. In Quebec, for example, some organizations focus exclusively on autism in children, others on intellectual disabilities in adults, and still others on motor impairments. While this specialization allows for detailed expertise, it also fragments the collective movement, making it more difficult to form broad and coherent alliances. Territorial, linguistic, and institutional disparities further accentuate this dispersion, producing a fragmented ecosystem where resources and opportunities are not accessible on an equitable basis.

The lack of cross-cutting funding

Finally, most of these organizations have neither the means nor the time to fund essential cross-cutting functions, such as consultation, evaluation, or shared administration, which are rarely covered by donors. The cumulative effect of these constraints prevents the sector from developing a common vision and equipping itself with robust collective tools, thereby perpetuating a structural fragility that hinders its potential for transformation.

This fragmentation is not simply an abstract organizational flaw: it has direct and often serious impacts on the daily lives of people with disabilities and their loved ones.

2.1.5. The result is a breakdown in relations between foundations and organizations.

During the interviews, several respondents mentioned the difficulty of establishing and maintaining structured links with organizations working to promote the inclusion of people with disabilities. This situation is perceived as one of the side effects of the disorganization of the sector, which is itself exacerbated by the wide diversity of profiles, approaches, and scales of action that make up this sector.

One respondent from the "foundation" group, who is familiar with the realities on the ground, shared a revealing experience:

> *"I go there, I explain to them: you could apply for this, for that, blah, blah, blah. It's a pleasure. I haven't received any applications. Not one out of six."* (PHB34)

This testimony illustrates what we might call a form of "relational disconnect" between foundations and community organizations, which is even more pronounced between large urban areas and rural regions. Despite the awareness-raising efforts and openness shown by some funders, many organizations do not take advantage of the funding opportunities offered to them. This disconnect cannot be explained solely by a lack of interest or willingness. It points to deeper issues.

- **Limited capacity**: Organizations often lack the qualified staff to draft complex applications.
- **Lack of time**: Teams are overwhelmed by day-to-day operations and cannot spare resources for philanthropic development.
- **Mistrust**: A perceived disconnect between philanthropic expectations and the realities on the ground, or between "big city" and "regional" perspectives.
- **Technical barriers**: Application procedures, eligibility criteria, or reporting requirements can appear as symbolic or technical barriers.

Funding opportunities sometimes exist, but communication channels and institutional codes are not aligned with the actual capacities of organizations. This structural fragmentation is compounded by another issue: chronic underfunding.

2.2. Human impacts of underfunding

Chronic underfunding of the disability sector not only creates a "structural deficit," it also has direct and massive human impacts. Interviews with organizations and foundations describe an environment that, due to a lack of resources, struggles to stabilize its teams, plan for the long term, and meet the administrative requirements of funders. Caught between day-to-day intervention and growing institutional expectations, stakeholders too often have to choose between "holding the fort" and "seeking growth." In practice, four major impacts emerge from the analysis.

2.2.1. Insufficient services, especially in terms of respite: The exhaustion of family caregivers

The services available are often fragmented. Each organization covers part of the process (whether it be health, education, employment, transportation, or psychosocial support) but rarely the whole, forcing those affected to navigate between a multitude of actors without continuity or comprehensive support. This fragmentation creates "gray areas" where complex needs remain unmet and where the burden of coordination falls unfairly on families themselves.

In Canada, approximately 8.1 million people are caregivers, a significant proportion of whom care for people with disabilities (Statistics Canada, 2012). The underfunding of respite services leads to:

- The need to reduce or give up employment (lasting economic consequences).
- Physical and psychological exhaustion.
- Emergency placements in institutions (often traumatic).
- Social isolation of families.

> *"All parents say there is a lack of respite services. When you go to respite organizations, they all have space, you know, but they're all open from Friday evening to Sunday afternoon."* (PHB12)

2.2.2. Wasted human potential

Systemic barriers that limit access to education, employability, and civic and social participation not only deprive people with disabilities of their full autonomy, but also deprive society of their skills, creativity, and contributions. Every exclusion, every barrier that remains in place, results in a collective economic and social loss.

A study by the Conference Board of Canada (2018) estimates that the inclusion of persons with disabilities in the workforce would add $16.8 billion to Canada's GDP. At 59%, the employment rate for persons with disabilities in Canada remains significantly lower than that of persons without disabilities (80%). Statistics

Canada reports that in 2017, 645,000 people living with a disability and having the potential to work were not employed and were not attending school.

Employability programs remain chronically underfunded despite their proven effectiveness. As a result, the unemployment rate for these individuals is higher than that of the general population; their talents and skills are untapped; and they are forced to rely on social assistance when support would actually increase their independence.

2.2.3. Advocacy: Imposed Silence

Insufficient funding for the defense of rights is a structural obstacle to true equality. Due to a lack of resources, many cases of discrimination, exclusion, or rights violations are neither documented nor challenged, leaving those affected without effective recourse. Discriminatory practices thus remain invisible, are rarely punished, and sometimes end up being normalized. This lack of resources also hinders collective action: without recognized voices capable of making themselves heard in the public debate, organizations struggle to influence political decisions and demand lasting structural change.

This chronic underfunding also limits the capacity for collective action, which is essential for developing a strong and coordinated voice. As one participant illustrates:

> *"I think there's a question of weight, of numbers, so we're fewer in number, less visible. And then we're talking about people with disabilities, so sometimes it's a little harder to mobilize."* (PHB12)

At the institutional level, the lack of organizations with the capacity to participate (drafting briefs, attending consultations, providing legal expertise) leads to exclusion from decision-making processes that directly shape the living conditions of people with disabilities. The weakness of their means of representation weakens their voice in public debates, reforms, and standardization mechanisms. One of the most telling illustrations of this paradox is the Accessible Canada Act (2019 / Bill C-81), which came into force on July 11, 2019. This Act aims to establish a federal framework for identifying, eliminating, and preventing barriers in federally regulated sectors (transportation, communications, public services, workplaces, etc.). Although it represents an important legislative advance, the lack of resources for organizations of persons with disabilities limits their ability to participate fully in its implementation and to monitor its practical application.

Finally, it is important to note that women with disabilities, as well as racialized and Indigenous people with disabilities, are even more marginalized, (Garland-Thomson, 2002; Mkutumula, 2024) in these dynamics of exclusion. Their unique position at the intersection of gender and disability reinforces the barriers they face: invisibility in decision-making spaces, multiple forms of discrimination in access to housing, employment, or reproductive health, and lack of specific representation in consultation mechanisms. Failing to take this reality into account risks reproducing and exacerbating their exclusion, even though their participation is essential to achieving real and inclusive equality.

2.2.4. Political and media invisibility

Underfunding has a direct impact on the visibility of disability as a social cause in the public sphere and in philanthropic circles. While 8 million Canadians, including 1 million Quebecers, live with a disability, the issue remains on the margins of media, political, and philanthropic debates. This invisibility can be explained in particular by a structural difficulty in occupying the public sphere with a clear, continuous, and audible voice. Disability has long been taboo: historically in Canada, it was perceived as a negative phenomenon, a source of stigma and marginalization that confined people with disabilities to the fringes of society and public spaces. Discriminatory practices and physical and social barriers limited their full and equal participation. Although progress has been made through policies such as the Action Plan for the Inclusion of Persons with Disabilities and the Accessibility for Canadians Act, the legacy of this exclusion persists. This legacy is still evident in social discomfort with disability, avoidance, and unresolved awkwardness that still permeates social interactions. In addition, people generally have a stereotypical view of persons with disabilities: First, people think exclusively of visible disabilities, often reduced mobility associated with the use of a wheelchair ([2]). Second, influenced by the charity model of disability, people tend to imagine persons with disabilities as "victims," people for whom they should feel pity or compassion (Habilomedia, 2025). This invisibility, accompanied by a narrow and stereotypical view, further contributes to the marginalization of disability. A representative of a foundation involved in the sector sums up the situation as follows:

> *"Disability is, in a way, an orphan cause. It's not the only one, of course, but unfortunately there is a certain 'voiceless' aspect to it. Some people with disabilities are perfectly capable of defending their rights, but for many, there is also a difficulty in representing themselves."* (PHB66)

This difficulty in representation is all the more significant given that community organizations often have to speak on behalf of the people concerned, while also carrying out day-to-day support operations. Due to a lack of time and resources, the capacity for public mobilization is often relegated to the background, which weakens the sector's ability to influence. In a context where the most "visible" causes attract increased attention from donors, disability is often relegated to the background—perceived, according to several respondents, as a "less mobilizing," "less strategic," or even "unfashionable" cause.

2.3. The role of the state: Between providential responsibility and disengagement

The issue of disability funding cannot be addressed without examining the role of the state. During the interviews, this dimension quickly emerged as essential. Whether community-based or philanthropic, the

---

[2] The Center for Independent Living in Toronto (CILT) and Dnext Accessible Media Lab present, "Disability Representation in the Media and Popular Culture in Canada." 2019 videohttps://www.youtube.com/watch?v=7dLTgMTMeKI

social actors we met agreed on one key point: the state is omnipresent in discussions about support for people with disabilities. This is true whether through its historical responsibilities, its current mechanisms, or, more worryingly, through the modulation of the funding it provides.

2.3.1. Disability perceived as a state responsibility

Several people interviewed from the foundation sector indicated that their level of commitment to the cause of disability is largely determined by the role that the state plays or should play. Disability, often associated with the health sector, is considered a field of intervention that falls under social policy. It is therefore up to the state to provide adequate funding to ensure both decent living conditions and appropriate support for those affected.

As two people from a Montreal-based foundation put it

> *"Disability, like aging, is closely associated with the concept of health, where it is the government's responsibility to take care of it."* (PHB26)
>
> *"I think it would be very irresponsible for the operating costs of a residence to depend on philanthropy."* (PHB87)

This perception is based on the "providential" function of the state. If the state must ensure the proper functioning of the economy in order to support activities that generate wealth, it should also ensure that this wealth is used to meet the providential needs of society. Therefore, philanthropic action should complement that of the state and, above all, should not replace it. Likewise, support for people with disabilities is a public responsibility and can only be partially supplemented by the philanthropic sector and citizen action (e.g., informal care).

Given this view of the state's responsibilities, foundations are reluctant to intervene in areas they perceive as already "covered" by the state, or where their involvement could be seen as a substitute or palliative for the public sector's failure to take full responsibility.

The philanthropic discourse thus oscillates between the desire to help and the fear of duplicating public intervention or even contributing to the state's abdication of responsibility.

> *"Sometimes, we get the impression that the government is transferring a lot of responsibility to foundations. We find ourselves taking on issues that would basically require greater public commitment."* (PHB66)
>
> *"Some foundations are less involved in disability issues. We finance hospitals, we finance research, we finance the purchase of equipment, but we don't finance direct services, because that falls under the broad category of health."* (PHB26)

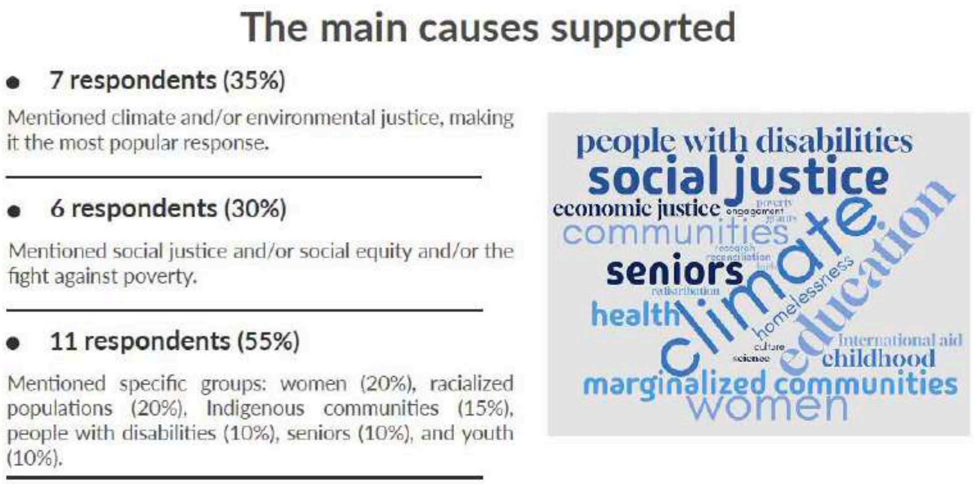
This position leads foundations to invest only in complementary areas (research, equipment, innovation), avoiding funding direct services to the population, which are perceived as the prerogative of the state.

2.3.2. The paradox of state responsibility

This reflex to withdraw is all the more paradoxical given that other areas historically assumed by the state—such as early childhood and maternal health—receive significant philanthropic support. One foundation respondent questioned the basis for this logic of shared responsibility.

> *"When it comes to both disability and the elderly, the perception among foundations is that it's up to the government to take care of it. It's something that can't be explained, because after that they're going to give to early childhood anyway. It's as if children and pregnant women weren't the government's responsibility. There's something imaginary about it."* (PHB34)

Figure 3: Results of the survey conducted in parallel with the interviews



The main causes supported

- **7 respondents (35%)**

  Mentioned climate and/or environmental justice, making it the most popular response.

- **6 respondents (30%)**

  Mentioned social justice and/or social equity and/or the fight against poverty.

- **11 respondents (55%)**

  Mentioned specific groups: women (20%), racialized populations (20%), Indigenous communities (15%), people with disabilities (10%), seniors (10%), and youth (10%).

This paradox becomes even more striking when we examine the priorities stated by Canadian foundations. The responses obtained in a survey of 20 Canadian philanthropic foundations reveal a troubling finding: disability is not among their priorities for action. Instead, issues related to climate change, poverty, and the fight against racial discrimination are at the top of their list of concerns.

Yet climate change is clearly a matter of state and international responsibility, as are food security and early childhood services. Why, then, is disability an exception? The explanation is not based on a coherent logic of subsidiarity, but on deeply entrenched normative representations. Disability continues to be perceived primarily as a matter of medical and institutional "care" rather than as an issue of social justice and structural transformation.

2.3.3. The gradual withdrawal of the state and its consequences

One of the most striking findings of our investigation is the paradox experienced by community actors working in the field of disability. While the state is gradually withdrawing from its historical role of supporting the sector, philanthropic foundations are struggling to take over in a meaningful way. This reality places community organizations in a position of structural fragility.

> *"There is a shift away from responsibility on the part of the government, which wants to rely not only on foundations. This forces organizations to self-finance, to have hybrid models of service sales, etc."* (PHB28)

Faced with the reorganization of public subsidies, organizations have no choice but to reinvent their economic models, multiplying self-financing or budget diversification strategies. However, this forced adaptation is not without tension.

> *"For several years now, we have been trying to reinvent ourselves, because we realize that, ultimately, this contribution from the government is shrinking. We have to be careful not to become dependent on the government."* (PHB42)

In theory, less dependence on state funding should open up space for philanthropic actors to intervene. However, as demonstrated in the first part of our research, the philanthropic sector's involvement in supporting disability remains timid and often confined to general reflections or one-off actions, without providing a structured response to the needs on the ground.

Organizations express recurring difficulties in getting public programs to recognize the relevance of their actions, particularly when they deviate from the dominant biomedical model in favour of more social, inclusive approaches rooted in self-determination.

> *"Very often, I get the impression that when we talk to public program officials, they don't understand anything about our field. We try to explain it to them, but it doesn't always work."* (PHB72)
>
> *"It has been difficult to get recognition for the relevance of the services we wanted to offer."* (PHB43)
>
> *"The government does not recognize all the particularities of the cause."* (PHB87)

This mutual misunderstanding creates a form of dissonance: organizations feel both neglected and misunderstood by the government, while at the same time unable to find a partner in philanthropy capable of fully compensating for this withdrawal. This disconnect fuels a sense of institutional isolation, where community actors must constantly justify their approach and fight for minimal recognition, whether from public authorities or private donors.

2.4. Conceptual approaches to disability

Beyond the structural and relational issues discussed above, the interviews reveal views of disability that profoundly influence the practices of community and philanthropic actors. Far from being neutral or universal, these conceptions help define what is considered legitimate to intervene in, fund, or transform. This section explores two central dimensions: the definition of disability as a social phenomenon, and the place given to ableism as a structural barrier. The interviews show that, despite stated adherence to the social model, a charitable repertoire continues to inform practices and justifications for action, particularly in philanthropy. This conceptual analysis will be further explored in section 2.5, where we will examine how these representations translate (or not) into approaches to equity, diversity, and inclusion.

2.4.1. Ableism as a structural barrier

Historically originating in charitable organizations and foundations, this model defines disability as a condition requiring compassion and assistance, where effectiveness is measured by the volume of donations or services distributed, and legitimacy by moral intentions ("opening a program," "having a big heart"). This grammar of assistance reinforces everyday ableism: it refocuses attention on "individual vulnerability" rather than structural barriers (accessibility, communication, organizational norms, agency) and reproduces power asymmetries (donors and decision-makers / recipients and those affected). According to the Ontario Human Rights Commission[3] .

> *Ableism, negative attitudes, stereotypes, and stigma (fact sheet) Discrimination against people with mental health issues or addictions is often linked to prejudicial attitudes, negative stereotypes, and the general stigma surrounding mental health issues and addictions. All of these concepts are interrelated. Negative attitudes and stereotypes toward people with mental health issues or addictions, and the stigmatization of these individuals, are often based on belief systems centered on ableism. "Ableism" refers to societal attitudes that devalue and limit the potential of people with disabilities. Ableism is similar to racism, sexism, or ageism, in that it assumes that a person with a disability is less worthy of respect and consideration, less able to contribute and participate in society, or less inherently valuable than others.*

In the philanthropic sector, ableism manifests itself in three ways: (1) perceiving a deficit rather than a difference, (2) imposing exclusionary eligibility criteria, and (3) perpetuating a charity model rather than a rights-based model.

---

[3] https://www3.ohrc.on.ca/fr/capacitisme-attitudes-negatives-stereotypes-et-stigmatisation-fiche

Table 5: Manifestations of ableism

Manifestations of ableism	Description	Effect
1. Perception of deficit rather than difference	Foundations evaluate organizations led by people with disabilities according to organizational standards designed by and for non-disabled actors. Different organizational models are interpreted as a lack of competence. *"These are people with big hearts, but they don't have the training, and they don't have the necessary human resources" (PHB47).*	This renders experiential knowledge invisible (or devalues it) and reinforces a hierarchy of abilities. → *People are seen only as beneficiaries, not as strategists or leaders.*
2. Exclusionary eligibility criteria	Requirements for "performance," "measurable impact," and "organizational capacity" assume that there is a single "effective" way of operating (that of large, non-disabled organizations).	Systemic exclusion of small disability organizations, which are less formalized but rooted in the needs of communities.
		Refusal of funding due to lack of "structure" or "demonstrated capacity."
3. Persistent charity model	Disability is treated as an individual tragedy requiring compassion and assistance (Barnes & Mercer, 2010; Oliver, 1990). This model, which was dominant until the 1970s and is still present today, defines people with disabilities as objects of compassion requiring assistance and charity. Thus, the organization is valued for its "good intentions" rather than for the redistribution of power. *"Traditional charity reinforces the dependence it claims to alleviate"* (Longmore, 2016).	Maintaining asymmetry: decisions are made for the people concerned, not with them. Control therefore remains in the hands of foundations, donors, or non-disabled experts. → *Decisions are made outside the communities concerned.*
		Reproduction of institutional dependency: disability organizations find themselves in a cycle of short-term funding, unable to invest in transforming systems. → *They "must remain vulnerable" in order to continue receiving funding.*
		Stigmatization and reinforcement of ableist stereotypes: Charitable philanthropy spreads the image of people with disabilities as "needing help," "courageous," or "inspiring." → *This perpetuates the image of individual tragedy.*

2.4.2. The social model of disability: a necessary break

A large majority of the actors interviewed adhere to a social conception of disability, which breaks with the biomedical approach to highlight the physical, institutional, and social barriers that produce disabling situations.

> *"There's no such thing as a disabled person. We say there are people with disabilities."* (PHB12)

This distinction emphasizes the conditions that produce disability, i.e., the systemic barriers that limit full participation in society. According to Scotch (2000), disability should be viewed as *"a social construct shaped by environmental factors, including the physical characteristics of the environment, cultural attitudes [...] and institutionalized rules, procedures, and practices*" (free translation, Scotch, 2000, p. 215).

Figure 4: From charity to social model: implications for philanthropy

	Charity model	**Social model**
Intervention	Individual assistance	Systemic transformation
Stance	Deciding FOR	Co-decision WITH
Measure	Volume of services	Removal of barriers
Governance	Donor decision-makers	People with disabilities in charge
Indicators	Beneficiaries served	Accessibility, accommodations, effective remedies

A perspective aligned with the social model and human rights considers disability to be the product of non-inclusive environments. It shifts investment towards removing barriers, co-decision-making, and accountability. In concrete terms, this means moving from a logic of "projects for" to mechanisms "with": shared governance, participatory budgets, universal accessibility indicators, monitoring of reasonable accommodations, and effective remedies. Recognizing the persistence of the charity model does not mean condemning philanthropy, but rather reorienting its value criteria: prioritizing the transformation of systems rather than the mere distribution of aid.

Recognizing the persistence of the charity model does not mean condemning philanthropy, but rather reorienting its value criteria: prioritizing systemic transformation rather than simply distributing aid.

2.4.3. Autonomy and interdependence

Based on this social conception of disability, one of the objectives most often mentioned in the interviews is that of personal autonomy. For many community organizations and foundations, supporting greater autonomy represents both a path to emancipation and a lever for social inclusion. This objective is particularly valued in interventions with young people, where the acquisition of skills, empowerment, and the development of self-esteem are promoted as drivers of integration.

> *"Autonomy at all costs is not a value for us. There is no point in life when we are asked to be 100% autonomous—why, as we age, would we be asked to be? [...] We are not 100% autonomous in all areas of our lives."* (PHB33)

However, this emphasis on autonomy is also subject to criticism and nuance within the community itself. This perspective invites us to think of autonomy not as a standard to be achieved, but as a relational and contextual process. Autonomy must be integrated into interdependent relationships, where support is not a sign of weakness but a normal part of human life. Policies should aim to create the material, social, and relational conditions for autonomy, rather than assessing or prescribing its degree. This dual stance (valuing autonomy as a lever for dignity while recognizing its structural limitations) reflects a nuanced understanding of the trajectories of people with disabilities. It suggests the need for foundations and organizations alike to rethink indicators of success, which often focus on individual gains, by incorporating collective, relational, and structural dimensions of empowerment.

These conceptual approaches to disability directly influence how philanthropic foundations integrate (or fail to integrate) disability into their equity, diversity, and inclusion frameworks. As we will see, the persistence of the charity model and everyday ableism partly explains why disability remains a "blind spot" in EDI, despite the rhetoric of inclusion.

3.0. Disability and the Equity, Diversity, and Inclusion Approach

Equity, diversity, and inclusion (EDI) is now the dominant framework for thinking about philanthropic intervention with marginalized groups. This approach has led to significant advances: the creation of funds dedicated to Black *communities*, recognition of LGBTQ2I+ issues, and the integration of Indigenous perspectives into philanthropic governance.

Faced with the difficulty of reaching foundations that are not particularly involved in disability issues, we approached our problem through the prism of EDI. This entry point enabled us to mobilize a wider range of philanthropic actors. Their responses reveal several troubling findings: EDI, although widely discussed, remains a vague, malleable, and unevenly institutionalized concept that struggles to structure coherent and transformative action with regard to disability. Why is this? This section analyzes why disability remains systematically excluded from EDI initiatives, despite the rhetoric of inclusion.

3.1. The diffuse uses of the EDI approach: between moral principle and lack of framework

The use of the EDI approach by the philanthropic foundations observed is characterized by a wide variety of situations, both in its definition and in its implementation. Few foundations have formal policies in this area, and this lack of a normative framework is often justified by the desire to preserve their own identity and freedom of action.

> *"If we don't define a certain framework, we're kind of anywhere."* (PHB01)
>
> *"We didn't necessarily feel the need to put it into a policy and frame it, because we accept everyone as they are, in fact."* (PHB26)

This stance reveals a conception of EDI as a moral orientation rather than a structured lever for action. Without formalization, EDI does not designate any specific person in charge, impose any concrete organizational change, or require any accountability. The reluctance to formalize is accompanied by a fear of rigidity:

> *"A policy might be a step too far."* (PHB01)

> *"It [EDI] is cross-functional and everywhere, and it's part of our stance."* (PHB28)

This vague approach to integration avoids administrative constraints, but raises questions about its real capacity to produce structural effects. In the absence of a clear framework, EDI is mobilized as a general principle, championed by many foundations but rarely translated into concrete or measurable actions.

> *"We don't necessarily have an official policy [...], but I know that we put it into practice in everyday life, without necessarily making it official, you know."* (PHB42)

This vague and informal mode of integration allows foundations to avoid the administrative constraints associated with EDI governance, but it also raises questions about the real capacity of this stance to produce structural effects. In the absence of a clear framework, EDI is mobilized as a general principle, claimed by many foundations, but rarely translated into concrete or measurable actions. Foundations see it primarily as a set of values to be cultivated, rather than a set of standards to be applied.

3.2. A broad definition that hinders action

EDI, as understood by the foundations studied, tends to be defined in broad, overly inclusive, and even vague terms. This stance is part of a stated desire not to exclude anyone, but paradoxically leads to implicit exclusion. By refusing to define the scope of EDI or explicitly name the target groups, the foundations fear that a formal strategy would restrict their field of action.

> *"We didn't want to close the door on anyone with an [EDI] strategy."* (PHB01)

EDI thus becomes a flexible, malleable principle that each organization adjusts according to its priorities. While this flexibility protects decision-making autonomy, it simultaneously prevents the articulation of clear strategic priorities. By defining EDI as a general philosophy of openness, foundations give themselves considerable leeway at the expense of clarity about who actually benefits from this openness.

Many stakeholders recognize the evolving nature of the concept, making its formalization difficult, even risky. Vocabulary changes, social expectations evolve, and foundations want to adapt their responses accordingly. This refusal to freeze EDI into a formal policy also stems from a fear of identifying blind spots too late, of rigidifying a tool that is perceived as malleable, and above all, of losing the capacity for innovation. EDI is thus conceptualized as a dynamic process rather than a stable framework.

However, this adaptive approach has a significant effect: a loss of strategic clarity. By favoring the implicit, foundations sometimes lose sight of the very objectives of their commitment:

> *"And that's when it might be time to ask ourselves: OK, but what do we actually want?"* (PHB56)

Conceptual vagueness then becomes a source of organizational discomfort. While all foundations can claim to be committed to EDI, few seem compelled to adjust their practices or change the selection of causes they support:

> *"I would say, in fact, the irony is that it becomes very general."* (PHB01)

In this logic, the EDI approach is often used as a moral banner that can be applied "almost anywhere and anytime," but without any real structuring effect. Its generalist use allows it to be brandished without making any decisions, without excluding, without reorienting—and, in doing so, without necessarily including historically marginalized groups such as people with disabilities in a meaningful way.

3.3. Personalization of EDI concepts

Beyond the vague generality that characterizes the use of EDI, there is a striking phenomenon: the personalized appropriation of the concept. Each organization shapes its own understanding of Equity, Diversity, and Inclusion based on its values, institutional history, strategic priorities, and available resources. While the fundamental principles of EDI remain formally recognized, the concept's plasticity allows each organization to embrace it without a common normative reference point or obligation to align with existing frameworks.

One respondent refers to an "EDI language" specific to their organizational structure, revealing both a rejection of standardized approaches and a need to adapt to the specific realities on the ground:

> *"It's because we have our own language. But yes, there is some resistance to this DEI language, because it feels like a checkbox exercise."* (PHB56)

In this testimony, DEI is perceived as a series of boxes to be checked—a bureaucratic exercise disconnected from the essence of philanthropic action. This perception justifies the development of flexible and evolving frameworks, shaped by the organization's own experience. This desire also reflects a critical stance toward the standardization of inclusion practices, which are deemed inadequate to reflect the diversity of philanthropic missions.

The addition of the "J" for Justice (acronym JEDI) or the integration of the term "*belonging*" illustrate this desire to reformulate according to specific priorities:

> *"We used EDI, then we added the J for justice, Jedi, then we added belonging, because inclusion is no longer enough."* (PHB56)

This terminological tinkering reflects a tension between the desire for conceptual innovation and the rejection of vocabulary perceived as imposed. Some foundations prefer to distance themselves from a normative framework they consider rigid or disembodied in order to chart their own course. This stance reveals a dual dynamic: on the one hand, an adaptation to social change; on the other, a mistrust of administrative standards, particularly those emanating from the state.

Several foundations say they are reluctant to adopt the official lists of groups targeted by EDI, as proposed by the Canadian government. When asked about this, they cite a need for flexibility that these lists would not allow:

> *"It's about keeping the definition flexible, because the government is not flexible."* (PHB01)

Figure 5: Results of the survey conducted in parallel with the interviews

This rejection of state definitions is less a challenge to the principles of EDI than a criticism of their application, which is perceived as rigid in public policies that are disconnected from the day-to-day operations of foundations. For the latter, flexibility remains inseparable from freedom of action, which is imperative in a philanthropic environment often constrained by limited resources, diverse commitments, and a strong demand for agility.

This desire for autonomy is also reflected in the survey results. While several foundations occasionally use the definitions or tools provided by the government to target certain groups, the majority say they are not influenced by government frameworks in developing their EDI strategy. This apparent contradiction reinforces the hypothesis that foundations selectively draw on public resources without necessarily adhering to their underlying logic.

This observation reveals that, even though the government remains a key player in promoting and defining EDI, foundations do not recognize its influence on their activities. Their EDI practices are distinct from those of the government, characterized by adaptation and reappropriation according to each organization's specific activities and ambitions. This conceptual and practical fragmentation undermines the emergence of a coherent framework capable of correcting the systematic exclusion of certain groups, particularly people with disabilities.

3.4. EDI as a source of internal tensions

During the interviews, a more subtle but significant aspect emerged: EDI, far from being merely a consensual tool or a mobilizing principle, can become a real source of internal tensions within foundations themselves. These tensions do not only concern the application of the principles of equity, diversity, and inclusion in external actions, but also affect internal governance, particularly the dynamics between staff teams and boards of directors.

In some organizations, it is the staff members who embody a stronger commitment to the principles of social justice, while the board of directors, which is sometimes more conservative or cautious, slows down their implementation. This tension manifests itself in a form of strategic avoidance.

> *"The team really wants to play a greater role in equity and social justice, while our board is a little more conservative. One way of dealing with this tension is not to mention it. If we don't mention it, it's a bit like... we, the staff, can say yes, we are very committed to justice and equity, and the board doesn't need to make too much effort."* (PHB99)

In this context, the absence of formal EDI policies may appear not simply as a choice of flexibility, but as an organizational compromise. Not formalizing allows us to avoid crystallizing ideological debates or forcing positions. The strategic indeterminacy of EDI then becomes a workaround: it allows progressive teams to assert certain principles without provoking rejection from the leadership.

This avoidance strategy, while preserving internal cohesion, nevertheless prevents EDI from becoming a real lever for transformation. In practice, foundations can continue to claim to support EDI while maintaining their practices unchanged. Far from advancing the causes they support, this general approach perpetuates an implicit hierarchy of priorities, where certain issues continue to be marginalized.

The cause of disability particularly illustrates the limitations of this approach. Even when foundations claim to be committed to EDI, this in no way guarantees increased attention to historically neglected issues. The vague and non-binding nature of the concept is insufficient to bring about new priorities:

> *"EDI, as I said at the outset, is often reduced to a question of representation. But just because you are a representative group does not mean you give it real, effective power."* (PHB28)

In other words, without an explicit and transformative framework, EDI risks being reduced to a showcase approach, focused on symbolic visibility rather than on power or effective recognition. Internal tensions around EDI are therefore not limited to ideological differences; they directly influence the way in which certain causes, such as disability, remain on the margins of major philanthropic priorities, not because of explicit rejection, but because of a strategic vagueness that makes truly transformative inclusion more difficult to achieve.

3.5. The two fronts of EDI: the observation of systematic exclusion

Analysis of philanthropic practices surrounding EDI reveals the implicit existence of a two-pronged approach. While, in theory, foundations assert an inclusive agenda, recognizing the diversity of situations of discrimination (including disability, poverty, and aging), the concrete implementation of their programs shows a clear prioritization of identity issues. In practice, the causes supported in the name of EDI focus mainly on racialized groups, Indigenous peoples, and LGBTQIA2+ communities.

This reality does not necessarily stem from the explicit exclusion of certain causes, such as disability, but from the fact that disability is positioned in a secondary area of intervention. Disability is considered an amplifying factor, a "*something and*," to quote one respondent:

> *"We are starting to better recognize that it [disability] is always a* 'something and.'" (PHB01)

In other words, disability is only recognized as a priority issue when combined with another source of discrimination that is more directly related to identity. This stance introduces an implicit hierarchy in the use of EDI: certain conditions are considered sufficient to justify priority intervention, while others, such as disability, only become visible in the background, as support, as a complement, rarely as such.

This hierarchy is often constructed under the guise of an intersectional approach, which foundations are increasingly using in their discourse. However, far from promoting a better understanding of the complexity of lived experiences, intersectionality sometimes seems to be used as a philanthropic sorting tool, allowing layers of vulnerability to be added without granting equal recognition to all.

> *"There is more intersectionality in their words. You have migrant populations, but within migrant populations, you can add older people..."* (PHB34)

Far from criticizing the support given to marginalized groups, on the contrary, this observation highlights a tension in the strategic use of intersectionality: instead of deconstructing hierarchies of invisibility, it reproduces them in another form. Disability, old age, and poverty thus become *secondary issues*, useful for reinforcing the seriousness of a case, but rarely presented as central causes.

This bias is reflected in the recurring feeling, expressed by organizations working in the disability sector, that their cause is structurally devalued. Several point out that disability is perceived as *unfashionable*, *invisible,* or *unattractive* to funders.

> *"In other words, the group of 'people with disabilities' is not a privileged group in society."* (PHB01)

The logic of the two fronts thus produces a double erasure: on the one hand, disability is excluded from the core of EDI priorities; on the other hand, it is relegated to a subordinate place in programs, as an aggravating factor rather than an issue in its own right. This approach undermines the inclusive promise of EDI and calls into question the philanthropic sector's real capacity to embrace historically marginalized causes such as disability.

3.6. The blind spot of disability in EDI initiatives

The data collected is unequivocal: when foundations roll out EDI initiatives, they target almost exclusively issues related to race, sexual orientation, and gender identity. Disability, although formally included in the theoretical definitions of EDI, remains largely absent from structural funding and priority programs.

This exclusion reveals an implicit hierarchy of oppression. Discrimination based on ethnocultural or sexual identity is perceived as an injustice requiring active correction, while disability remains associated with a "condition" to be addressed, falling within the realm of medical charity rather than social justice.

Three structural factors explain this difference in treatment:

1. The legacy of institutionalization

Historically, disability has been used to justify segregation. Despite legislative advances (Canadian Accessibility Act, 2019), this legacy still shapes collective representations.

2. Persistent social discomfort and avoidance

The presence of disability in public spaces still often provokes avoidance or embarrassment, unlike other identities that are now more widely recognized:

> *"Disability is, in a way, an orphan cause. Unfortunately, there is a certain 'voiceless' aspect to it."* (PHB66)

This perception of disability as a "voiceless" cause reflects not only the political invisibility of the people concerned, but also the reluctance of institutions to fully commit to this issue.

3. Less political and media visibility

The disability movement, hampered by the "double tax" (high costs of participation combined with lower incomes) and barriers to participation, has limited capacity to occupy the public space in the same way as feminist, LGBTQ2I+ or anti-racist movements. This reduced capacity for mobilization translates into less pressure on philanthropic institutions to make disability a strategic priority.

Unlike causes related to ethnocultural diversity or sexual orientation, which have seen the emergence of dedicated funds (For Black Communities, Canadian Women's Foundation), national campaigns, and growing institutional recognition, disability remains largely invisible on the Canadian philanthropic agenda.

This invisibility has concrete consequences. People with disabilities are twice as likely to live in poverty (Campaign 2000, 2024). They face a "double tax." This economic precariousness dramatically limits their ability to financially support or volunteer for organizations that represent them.

The conceptual vagueness of EDI, its *fragmenting* personalization, its instrumentalization as a tool for avoiding internal tensions, and the implicit hierarchy of oppressions it allows, converge to systematically exclude disability while maintaining a formal discourse of inclusion. This analysis demonstrates that EDI, in its current form as implemented by philanthropic foundations, is not a sufficient lever to correct the historical exclusion of disability. It requires a profound overhaul that places disability among the top priorities, with measurable indicators, accountability mechanisms, and binding institutional commitment.

4.0. Towards transformative philanthropy

The previous sections have shown the systemic exclusion of disability in Canadian philanthropy and the mechanisms (structural, ideological, and practical) that reproduce it. This section proposes concrete ways to transform this reality.

The analysis presented demonstrates that disability exclusion is produced by philanthropic structures, criteria, and decision-making processes. Transformation therefore requires changes **within philanthropy itself**—not simply better 'communication' with disability organizations or more 'education' about disability issues. These recommendations target philanthropic practices, governance, and accountability mechanisms. They are grounded in the recognition that foundations possess concentrated resources and structural power to catalyze change—and therefore bear responsibility for addressing the exclusion their practices have produced

However, this model conflicts with the dominant practices of philanthropy:

- standardized and reactive calls for projects, where foundations expect organizations to adjust to their priorities, rather than reaching out to them or co-constructing needs;
- highly formalized impact measurement requirements, favoring quantitative indicators and social return on investment logic, which are ill-suited to the relational and long-term impacts of community work;
- short-term and fragmented funding, often limited to one year, which prevents strategic planning and creates precariousness for teams;
- Implicit criteria that favor organizations already equipped with administrative resources, i.e., those capable of absorbing accountability tasks, producing complex reports, and mastering the expected philanthropic language.

These mechanisms create a reverse selection effect: the closer an organization is to the realities on the ground, the less likely it is to access funding.

On the part of foundations, the integration of disability into EDI strategies remains largely declarative. Foundations often acknowledge that they lack expertise, fear doing the wrong thing, or consider disability to be "secondary" to other issues, despite its official inclusion in EDI regulatory frameworks.

As one respondent explicitly summarized:

> *"If we just wait for them to come to us, it won't work. We have to be intentional in our approach." (PHB21)*

This testimony illustrates a key point: the responsibility for change rests primarily with foundations. Bridges between the two sectors cannot be built solely through competitive processes and passive calls for projects. Truly inclusive philanthropy requires proactive approaches, targeted invitations, funding for organizational capacity, and trust-based partnerships. In other words, it is not up to disability to conform to the norms of philanthropy; it is up to philanthropy to adapt its practices to include disability.

4.1. Financial investment: targets and mechanisms

The analysis reveals a chronic deficit in philanthropic funding for disability issues. While other areas have benefited from structural commitments and dedicated financial mechanisms, disability remains underfunded and marginalized. To correct this imbalance, three complementary levers can be considered.

Recommendation 1: Establish quantitative targets

Canadian foundations should collectively commit to devoting a minimum of 10% of their intervention budgets to disability-related causes within ten years**.** This target remains below the actual proportion of the population concerned, but it would already represent significant progress compared to the current situation, where structural philanthropic funding remains virtually non-existent. Such a goal would send a strong signal: that disability should be recognized as a societal priority in its own right, rather than a marginal cause relegated to the fringes of philanthropy.

Recommendation 2: Create a dedicated Canada-wide fund

Following the example of pioneering initiatives such as *For Black Communities* and the Canadian Women's Foundation, there is a clear need to establish a national philanthropic fund specifically dedicated to disability**.** Endowed with substantial initial capital, this fund should be governed by persons with disabilities to ensure that strategic directions, funding criteria, and priorities for action directly reflect the needs and perspectives of the communities concerned. Such a structure would be a powerful tool for addressing the current deficit, supporting social innovation, and strengthening the visibility of the disability movement in Canada.

Recommendation 3: Abolish unsolicited proposal policies

The majority of Canadian foundations now state on their websites that they "do not accept unsolicited proposals." While this practice is intended to channel demand, it has the effect of reproducing exclusion by limiting access to resources to a small circle of already recognized organizations. In the disability sector, where many organizations are young, not very institutionalized, or just starting out, this barrier is a major obstacle. Foundations must make their processes more flexible, open windows for project submissions, and, at a minimum, put in place proactive mechanisms for identifying and supporting emerging organizations. Such a reform would promote the renewal of the sector, the diversification of funded actors, and the emergence of innovative practices currently stifled by barriers to entry.

4.2. Transformation of organizational practices

Beyond financial investments, transforming the relationship between foundations and disability organizations requires a profound overhaul of organizational practices.

Recommendation 4: Funding for organizational strengthening

In order to consolidate the disability association network, foundations should create funds dedicated to organizational capacity building. These funds would be used to support the creation of key coordination and management positions, offer training in philanthropic development, finance the technological and communication infrastructure necessary for the modern functioning of organizations, and promote intersectoral consultation. Such an approach would help reduce the structural inequalities that currently undermine many organizations.

Recommendation 5: Intentional and proactive approach

Finally, foundations must adopt a more intentional and proactive stance in their relationships with disability organizations. As one respondent to this research pointed out, "if we just wait for them to come to us, it won't work." Rather than limiting themselves to a reactive model, foundations should actively seek out stakeholders in the field, establish lasting relationships ahead of formal requests, support organizations in their funding efforts, and ensure a regional presence that is truly rooted in local realities. This approach would promote more equitable, sustainable, and transformative partnerships.

4.3. Transforming conceptual frameworks

The transformation of philanthropic practices cannot be limited to financial and organizational adjustments. It must also be accompanied by a thorough review of the conceptual frameworks used by foundations to guide their actions. The dominant approaches to equity, diversity, and inclusion (EDI), when they include disability, too often do so in a marginal, secondary, or conditional manner. To correct this distortion, one recommendation appears essential.

Recommendation 6: (Re)formulation of EDI

Foundations that rely on EDI frameworks must place disability among their top priorities, rather than as a secondary or "additional" factor that is only recognized when it intersects with other identities (gender, sexual orientation, racial identity, etc.). Breaking with this "*something and*" logic means considering disability as a fundamental dimension of EDI in itself, rather than as an ancillary category.

It also means raising awareness and providing in-depth training for staff and boards of directors to better understand ableism, the system of discrimination that values so-called "able-bodied" people and marginalizes those who live with physical, sensory, intellectual, or mental limitations by reinforcing social, institutional, and environmental barriers.

Adopting this perspective means embracing the social model of disability, which highlights that it is not the impairment itself that excludes, but rather the collective and structural barriers that prevent full participation.

Finally, the integration of disability into EDI must be accompanied by the establishment of precise and measurable indicators, making it possible to concretely assess the reality of its inclusion and prevent it from remaining an abstract principle with no operational translation or impact on practices.

4.4. Empowerment and accountability

The transformation of philanthropic practices in relation to disability can only be sustainable if it is accompanied by mechanisms for transparency and inclusive governance. Without accountability, commitments risk remaining declarative and becoming diluted over time.

Recommendation 7: Transparency and monitoring

Foundations should publish accurate data annually on the portion of their budget allocated to disability-related causes. These reports should include a clear breakdown of investments by type of intervention, as well as an analysis of changes in their practices regarding disability inclusion. It is also important to include a reflection on the obstacles encountered and lessons learned, in order to transform accountability into a real tool for progress rather than a minimal administrative exercise.

Recommendation 8: Inclusive governance

Accountability cannot be effective without a transformation of governance practices. For their commitment to be credible, foundations wishing to act in the field of disability must include people with disabilities on their boards of directors and decision-making committees. This is not a symbolic exercise or a quota system, but an essential condition for the legitimacy and relevance of decisions. The presence of people directly affected enriches strategic debates, brings expertise rooted in lived experience, and prevents funding choices from being disconnected from the realities on the ground.

Such an approach also requires ensuring universal accessibility at all stages of governance: accessibility of physical locations, documents, and work tools, as well as deliberation and decision-making processes. Inclusive governance is not simply a matter of "inviting" people with disabilities to the table, but involves creating the conditions for them to participate fully and on an equal footing. The foundations thus affirm that social justice also requires the effective sharing of decision-making power.

Recommandation 9 : Améliorer la collecte de données désagrégées

L'un des obstacles majeurs à une meilleure compréhension de la place du handicap dans la philanthropie canadienne réside dans l'absence quasi totale de données désagrégées sur les bénéficiaires des financements. Cette lacune n'est pas unique au handicap, mais elle affecte particulièrement ce secteur en raison de son invisibilité historique. Les fondations devraient collectivement investir dans le développement d'outils de suivi permettant d'identifier les populations rejointes par leurs interventions, incluant les personnes en situation de handicap. Cette amélioration de la reddition de comptes permettrait non seulement de mesurer les progrès réalisés, mais aussi de mieux comprendre où se situent les lacunes et de justifier des investissements ciblés. Une telle initiative pourrait être menée en partenariat avec Fondations philanthropiques Canada afin d'établir des standards communs de collecte de données respectueux de la vie privée et adaptés aux réalités du secteur.

4.5. Advocacy and collective mobilization

Philanthropic action cannot be limited to funding isolated projects. To bring about lasting change in social representations and institutional structures, foundations must also invest in advocacy and collective mobilization. Disability must be recognized and promoted as a major social justice issue, on a par with other causes that have gained prominence in the Canadian public sphere.

Recommendation 10: Public awareness campaign

Foundations should support the development of large-scale public campaigns aimed at increasing the visibility of disability in the media and political arena. These campaigns would aim to combat *ableist* representations*,* highlight the social, economic, and cultural contributions of people with disabilities, and promote an image that goes beyond the paradigm of "care." Funding cultural and artistic productions created by and for people with disabilities is a powerful lever for transforming the collective imagination, deconstructing prejudices, and promoting a positive understanding of disability as a constitutive dimension of human diversity.

4.6. Special case: international philanthropy

The paradox is striking: some foundations express a desire to promote disability inclusion in international projects, while neglecting this same issue on Canadian soil. This dissonance reflects a compartmentalization in the way foundations conceive their interventions. For many of them, "international" and "disability" appear to be two distinct causes, rarely considered compatible in terms of financial support. The international arena is often associated with humanitarian emergencies, temporary and sporadic situations, a field perceived as requiring ad hoc solidarity rather than structural commitment. However, the logic of disability, based on equal rights and sustainable social transformation, is difficult to reconcile with this vision of emergency intervention. In addition, many Canadian foundations do not consider themselves humanitarian actors and are reluctant to integrate disability into their international projects, believing that this is not their role.

> *"No. No, we don't want to go international, just Canadian, yeah. [...] In terms of the strategy, vision, and mission of the foundation we started, it was really focused on Canadian society and how to improve it, to bring about systemic change for Canada."* (PHB01)

> *"So the international branch of the Foundation is not for tomorrow. No, not yet. I'm very aware of what's happening internationally as well, because I think there are some great models abroad that we could implement."* (PHB26)

However, experience shows that linking international issues and disability is not only possible, but necessary. The Convention on the Rights of Persons with Disabilities (UN, 2006), ratified by Canada, states that inclusion must be a cross-cutting principle, applicable in all spheres of public and private action, including international cooperation. In this sense, Canadian foundations have an opportunity to fill a blind spot by aligning their domestic and international commitments and contributing to a comprehensive and coherent approach to social justice.

Recommendation 11: Consistency between domestic and international action Canadian foundations that fund international projects should systematically assess the consideration of disability in their programs, apply the same standards of accessibility and inclusion abroad as in their domestic interventions, explicitly support international organizations led by persons with disabilities, and establish strategic partnerships with specialized organizations, such as Humanity & Inclusion, to strengthen their expertise.

Conclusion

This research documents a significant gap in Canadian philanthropic practice especially in Québec: despite widespread commitment to equity, diversity, and inclusion, disability remains systematically underfunded and largely absent from strategic priorities. This pattern persists even as foundations have successfully mobilized substantial resources for other marginalized populations.

The evidence is compelling. While 27% of Canadians live with at least one disability—representing 8 million people, disability receives minimal attention in philanthropic portfolios. In our sample of 20 foundations, EDI commitments were widely articulated, yet overwhelmingly focused on race, gender, and youth. Disability was rarely mentioned as a funding priority. Meanwhile, other causes have benefited from dedicated infrastructure: national funds, coordinated campaigns, and growing institutional recognition.

This gap raises an important question: **Why has disability not received comparable philanthropic attention, and what would it take to change this?**

Our analysis reveals that the exclusion of disability from philanthropic priorities is not intentional neglect, but rather the unintended consequence of well-established practices that inadvertently create barriers to disability inclusion.

Many disability organizations have developed through "by and for" models—grassroots initiatives created and led by people with disabilities and their families. This approach represents a powerful form of community self-determination and lived expertise. However, it often conflicts with standard philanthropic expectations around formal governance, impact measurement, and administrative capacity. The result is a mismatch: organizations rooted in authentic community experience struggle to meet criteria designed for more institutionalized structures, while foundations hesitate to invest in organizations that appear "not ready" by conventional standards. Neither side is at fault—the issue lies in the incompatibility between different legitimate models of organizing and impact.

People with disabilities face what researchers call a "double tax": higher costs (adapted equipment, healthcare, accessibility accommodations) combined with often lower incomes due to employment barriers. This economic reality profoundly limits both individual participation in advocacy and organizational capacity to develop traditional fundraising infrastructure. Unlike some other social movements that have successfully professionalized, disability organizations often operate with extensive volunteer labor, limited paid staff, and minimal administrative support—not due to poor management, but due to the material constraints their communities face. This creates a cycle where organizations cannot demonstrate the "capacity" foundations seek without first receiving the resources that would build that capacity.

Many foundations express uncertainty about their role in disability support, viewing it primarily as a government responsibility. This perspective is understandable—disability services have historically been provided through public systems. However, this same logic is not consistently applied: foundations regularly invest in early childhood, poverty reduction, and maternal health despite these also being government mandates. This inconsistency suggests that foundations' hesitation stems less from principled subsidiarity than from uncertainty about how disability fits within philanthropic frameworks increasingly oriented toward social justice and systemic change. The challenge is recognizing disability not just as a service delivery issue, but as a fundamental equity concern requiring philanthropic engagement.

Our research reveals that EDI, despite its promise, has not yet proven sufficient to address disability exclusion. Most foundations approach EDI with considerable flexibility—valuing adaptability over rigid frameworks. While this prevents overly bureaucratic implementation, it also allows disability to remain perpetually deferred as a "secondary" consideration. When disability is acknowledged within EDI, it often appears as an "add-on" factor—recognized when combined with other identities (disability *and* gender, disability *and* race) but rarely prioritized as a standalone dimension of inequality. This pattern suggests that current EDI frameworks, as typically implemented, may need strengthening to ensure disability receives equivalent attention to other marginalized identities. The good news is that Canadian philanthropy has already demonstrated its capacity to address complex equity challenges. The mechanisms, partnerships, and strategies developed to support Black communities, Indigenous peoples, women, and LGBTQ2I+ populations can be adapted for disability. The infrastructure exists—what's needed is the intentionality to deploy it. This is not about starting from scratch. It's about extending proven approaches to a population that has been inadvertently overlooked.

Canadian foundations have shown impressive innovation in recent years:

- Creating dedicated funds with substantial initial capital
- Developing trust-based philanthropy approaches that reduce administrative burden
- Centering community voice in governance and strategy
- Investing in movement infrastructure, not just service delivery
- Coordinating across foundations to maximize collective impact

These same strategies can transform disability philanthropy. The question is not whether foundations **can** do this work, the evidence shows they can, but whether disability will become a priority that receives comparable investment and attention.

Based on our analysis, we propose five complementary approaches that foundations can adopt, either individually or collectively, to strengthen disability inclusion.

- **Establish meaningful financial commitments** : Foundations should set clear targets for disability funding as a percentage of their portfolios (we suggest working toward 10% within ten years) and consider collaborative approaches such as a national disability fund governed by people with disabilities. These commitments send a signal that disability is a strategic priority deserving sustained investment.
- **Adapt criteria and processes** : Standard eligibility requirements often unintentionally exclude disability organizations. Foundations can:
    - Create pathways for emerging organizations to access funding
    - Provide capacity-building support alongside grants
    - Value lived expertise as equal to traditional credentials
    - Offer flexible reporting that respects different organizational capacities
    - Eliminate "no unsolicited proposals" policies that create barriers

- **Adopt proactive engagement strategies** : Rather than waiting for disability organizations to find them, foundations can actively build relationships through intentional outreach, provide pre-application support, create learning cohorts that bring disability organizations together, and ensure regional presence that reaches beyond major urban centers.
- **Strengthen EDI implementation** : Disability should be explicitly named in EDI policies (not left implicit), included in governance through board participation by people with disabilities, tracked through specific indicators in annual reporting, and integrated across all program areas rather than siloed in "disability" streams.
- **Invest in collective infrastructure** : Individual organizations need support, but so does the broader ecosystem. For example, Build networks that strengthen the entire sector

We want to acknowledge several constraints that shape what is possible. First, Canadian foundations can only fund registered charities, a regulatory limit that excludes a number of grassroots disability initiatives. Although foundations cannot change this framework on their own, they can advocate for regulatory reform and maximize the support they provide within existing rules. Second, Canadian philanthropic giving operates at a comparatively smaller scale than in some other countries, which naturally limits overall investment capacity and makes strategic coordination and collective action even more crucial. Finally, persistent data gaps—particularly the absence of disaggregated information on disability-related funding—make it difficult to measure progress and understand the landscape. Foundations could work together, for example through Philanthropic Foundations Canada, to develop tracking mechanisms that protect privacy while enabling accountability. These challenges are real and help explain the context, but they do not justify exclusion.The

While our focus has been on philanthropic practices, we must remember what's at stake.

The funding gaps we've documented translate into:

- Exhausted family caregivers struggling without adequate respite services
- Talented individuals unable to access education or employment due to systemic barriers
- Rights violations that go unchallenged because advocacy organizations lack resources
- Weakened collective voice in policy debates that directly affect people's lives

These outcomes are not inevitable. They result from choices—including choices about where philanthropic resources flow. Foundations have the power to make different choices.

We frame these recommendations not as accusations but as an invitation. Canadian philanthropy has repeatedly shown it can lead on difficult issues, challenge established practices, and catalyze meaningful change. Disability inclusion represents an opportunity to demonstrate that leadership once again. The women's movement, LGBTQ2I+ organizations, and racial justice initiatives have all benefited from sustained, coordinated philanthropic commitment. That investment has produced profound social transformation. Disability deserves—and requires—the same commitment. This is not about philanthropy "saving" people with disabilities. People with disabilities are already leading remarkable organizations, developing innovative solutions, and advocating powerfully for change. What they need from philanthropy is partnership: resources that match their vision, flexibility that respects their expertise, and accompaniment that recognizes their agency.

The transformation we envision requires Canadian philanthropy to embrace an uncomfortable recognition: current practices, however well-intentioned, are not adequately serving disability communities. The "lack of capacity" foundations sometimes cite is often a symptom of chronic underfunding rather than an inherent organizational weakness. The "fragmentation" observed reflects a sector operating without the stable infrastructure that funding would provide. But this recognition need not be paralyzing. It can be energizing. It opens space for innovation, experimentation, and learning. It invites foundations to apply the creativity and strategic thinking they bring to other challenges. It offers an opportunity to deepen EDI commitments in ways that truly embrace the full diversity of Canadian society.

The question facing Canadian philanthropy is not whether foundations should engage with disability—the evidence for doing so is overwhelming. The question is how quickly, how substantially, and how collaboratively they will choose to act.

The path forward is clear. The resources exist. What's needed now is the will to act.

Bibliography

Ahmed, S. (2012). *On Being Included: Racism and Diversity in Institutional Life*. Durham: Duke University Press.

Barnes, C., & Mercer, G. (2010). *Exploring Disability: A Sociological Introduction* (2nd ed.). Cambridge: Polity Press.

Bashevkin, S. (2002). *Welfare Hot Buttons: Women, Work and Social Policy Reform*. Toronto: University of Toronto Press.

Batavia, A. I., & Beaulaurier, R. L. (2001). The Financial Vulnerability of People with Disabilities: Assessing Poverty Risks. *Journal of Sociology and Social Welfare*, 28(1), 139-162.

Boston Consulting Group (2020). *A New LGBTQ Workforce Has Arrived—Inclusive Cultures Must Follow*. Boston: Boston Consulting Group.

Boucher, N. (2005). Disability, research, and social change: The emergence of the emancipatory paradigm in the study of social exclusion of persons with disabilities. *Lien social et Politiques*, (54), 147-164. https://doi.org/10.7202/012867ar

Campaign 2000 (2024). 2024 Report Card on Child and Family Poverty in Canada. Toronto: Campaign 2000.

Candid & Disability & Philanthropy Forum. (2023). Foundation giving for disability: Priorities and trends (Full report).

Cargo, M., & Mercer, S. L. (2008). The Value and Challenges of Participatory Research: Strengthening Its Practice. *Annual Review of Public Health*, 29, 325-350.

Chevalier, J. M., & Buckles, D. J. (2019). *Participatory Action Research: Theory and Methods for Engaged Inquiry* (2nd ed.). London: Routledge.

Combessie, J.-C. (2007). *La méthode en sociologie* (5th ed.). Paris: La Découverte.

Conference Board of Canada (2018). *The Business Case to Build Physically Accessible Environments*. Ottawa: Conference Board of Canada. https://www.odenetwork.com/wp-content/uploads/2023/08/The-Business-Case-to-Build-Physically-Accessible-Environments.-9434_Accessible-Environs_RPT_Accessible.pdf

Fontan, J.-M., Longtin, D., & René, J.-F. (2013). Participatory research in the context of citizen engagement: a social innovation of disruption or continuity? Nouvelles pratiques sociales, 25(2), 125–140. https://doi.org/10.7202/1020825ar

Garland-Thomson, R. (2002). Integrating Disability, Transforming Feminist Theory. *NWSA Journal*, 14(3), 1-32.

Habilomedias (2025). *Common representations of people with disabilities*. Retrieved from https://habilomedias.ca/litteratie-numerique-education-aux-medias/enjeux-des-medias/diversite-et-medias/personnes-handicapees/representations-courantes-des-personnes-handicapees

Hankivsky, O. (ed.). (2014). *An Intersectionality-Based Policy Analysis Framework*. Vancouver: Institute for Intersectionality Research and Policy, Simon Fraser University.

Hughes, C., & Avoke, S. K. (2010). The Elephant in the Room: Poverty, Disability, and Employment. *Research and Practice for Persons with Severe Disabilities (RPSD)*, 35(1-2), 5-14.

Israel, B. A., Eng, E., Schulz, A. J., & Parker, E. A. (Eds.). (2005). *Methods in Community-Based Participatory Research for Health*. San Francisco: Jossey-Bass.

Kaufmann, J.-C. (2011). *L'enquête et ses méthodes : L'entretien compréhensif* (3rd ed.). Paris: Armand Colin.

Longmore, P. K. (2016). *Telethons: Spectacle, Disability, and the Business of Charity*. Oxford: Oxford University Press.

Maxwell, J. A. (2010). Using Numbers in Qualitative Research. *Qualitative Inquiry*, 16(6), 475-482.

Minkler, M., & Wallerstein, N. (Eds.). (2008). *Community-Based Participatory Research for Health: From Process to Outcomes* (2nd ed.). San Francisco: Jossey-Bass.

Mkutumula, R., Nthenge, M., Pecourt, S., Rossignol, A.-C., & Vulimu, P. (2024). *Powerful but ignored: African women with disabilities and the struggle for inclusion, 30 years after Beijing*. Lyon: Humanity & Inclusion.

Oliver, M. (1990). *The Politics of Disablement*. London: Macmillan.

United Nations (2006). *Convention on the Rights of Persons with Disabilities*. New York.

Paillé, P., & Mucchielli, A. (2021). *Qualitative Analysis in the Humanities and Social Sciences* (5th ed.). Paris: Armand Colin.

Pothier, D., & Devlin, R. (Eds.). (2006). *Critical Disability Theory: Essays in Philosophy, Politics, Policy, and Law*. Vancouver: UBC Press.

Prince, M. J. (2009). *Absent Citizens: Disability Politics and Policy in Canada*. Toronto: University of Toronto Press.

Scotch, R. K. (2000). Models of Disability and the Americans with Disabilities Act. *Berkeley Journal of Employment and Labor Law*, 21(1), 213-222.

Statistics Canada (2012). *2012 General Social Survey: Overview of Care Given and Received in Canada*. Ottawa: Statistics Canada.

Statistics Canada (2022). *Canadian Survey on Disability, 2022*. Ottawa: Statistics Canada.

Tremblay, M. (2005). *What are they doing in power? Women and governance*. Montreal: Les Éditions du remue-ménage.

Wensink, K. R. (2009). How does the double jeopardy of learning disabilities and living in poverty affect student performance? (Master's thesis, University of Wisconsin–Stout). University of Wisconsin–Stout Repository

Government and legislative sources

Ontario Human Rights Commission (n.d.). *Ableism, negative attitudes, stereotypes, and stigma (fact sheet)*. Retrieved from https://www3.ohrc.on.ca/fr/capacitisme-attitudes-negatives-stereotypes-et-stigmatisation-fiche

Government of Canada (2019). *Accessibility for Canadians Act* (Bill C-81). Ottawa: Parliament of Canada.

Appendices

Detailed method

A partnership approach

This research was conducted in close collaboration with two key partners: the international organization Humanity & Inclusion (HI) and the Mirella and Lino Saputo Foundation. Their active involvement in all phases of the project helped consolidate a partnership-based research approach founded on mutual recognition of knowledge, alignment with concrete issues in the field, and a desire to produce socially useful and actionable knowledge.

In line with participatory and collaborative research approaches (Chevalier & Buckles, 2019; Fontan et al., 2013; Cargo & Mercer, 2008), this project values the expertise of actors in the field, while integrating their needs, priorities, and operational constraints into the definition of research objectives, the construction of tools, and the interpretation of results. This approach involves a shift in the traditional relationship between researchers and practitioners, focusing on the co-production of knowledge and the sharing of decision-making power (Israel et al., 2005).

From the very beginning—even before the first report was written—co-construction meetings were organized with partners to define the project's guidelines and identify the issues considered to be priorities. This dynamic continued throughout the process: the findings from the literature review were presented, discussed, and validated collectively, which made it possible to adjust the objectives and design of the field phase in a concerted and reflective manner.

Beyond simple consultation, this approach aims to strengthen the agency of the partners involved—that is, their ability to influence and guide decisions that affect them—by recognizing their role as co-authors of the research process. It also ensures greater social relevance of the results and a better chance of implementing the recommendations arising from the research.

Data collection

Following exploratory discussions and co-construction meetings with partners, it was agreed to conduct a series of semi-structured interviews with three categories of key players in the Canadian philanthropic landscape:

1. **Community organizations** working primarily with people with disabilities;
2. **Philanthropic foundations** already committed to supporting this cause;
3. **Foundations with little or no involvement** in disability inclusion.

This strategic sampling choice was intended to **document the diversity of perspectives** and provide a nuanced picture of practices, perceptions, and priorities in philanthropic support for disability. By comparing the discourse and rationale for action among involved and uninvolved foundations and community organizations, the research seeks to highlight the factors explaining the low visibility of disability in the priorities of the philanthropic sector.

This question, which is central to our approach, was not imposed a priori, but emerged directly from the concerns expressed by partners in the field, particularly those from the community sector. It reflects their experience of recurrent marginalization in access to philanthropic resources, despite the pressing needs on the ground.

The interviews were conducted using a flexible guide, allowing for the discussion of cross-cutting themes (views on disability, funding criteria, relationships between foundations and organizations, perceived barriers) while leaving room for participants to express themselves freely. All interviews were recorded, transcribed, and then analyzed using a thematic grid that cross-referenced conceptual axes from the literature with emerging dimensions in the field.

In addition to these interviews, a qualitative survey was conducted in the summer of 2025 among a broader sample of actors in the philanthropic and community sector. This survey aimed to explore more specifically their understanding of the concept of equity, diversity, and inclusion (EDI), as well as how it is taken into account in their policies, representations, and funding practices. It enriched the analysis with additional data from organizations that did not participate in the interviews, while consolidating the findings from the field.

Selection of participants

Participants were selected in close collaboration with project partners, based on an initial list of community organizations and foundations working in the field of disability. This initial database was supplemented by suggestions from partners, particularly organizations with which they had already collaborated or had established relationships of trust. The goal was to optimize the conditions for initial contact while diversifying the profiles encountered.

Aware of the importance of not limiting ourselves to organizations already committed to the cause of disability, we also targeted foundations with little or no involvement in this field. This choice was made in order to understand the logic behind the exclusion or invisibility of disability in the philanthropic agenda. In order to open dialogue with these actors, a different entry strategy was adopted: rather than addressing the issue of disability outright, discussions were initiated around their understanding and implementation of the principles of equity, diversity, and inclusion (EDI)—whether or not disability was included—which broadened the scope of the discussion and circumvented some initial resistance.

Recruitment was based on a multi-phase approach. First, personalized emails, standardized in their structure, were sent to organizations on the priority list. This strategy made it possible to contact several foundations and community organizations, leading to a significant number of interviews. Next, a "snowball" method was tested, asking the people we met to recommend other relevant actors. However, this method proved to be ineffective: very few new organizations were recruited through this channel. As a result, recruitment was mainly carried out through direct first-level contacts, with occasional but valuable support from partners, whose recommendations opened doors that would otherwise have been difficult to access.

Recruiting foundations located outside Quebec presented particular challenges. Despite numerous efforts, very few interviews were conducted outside Quebec. To overcome these limitations, in the summer of 2025, the team distributed a qualitative online survey, shared on the social networks of researchers and the PhiLab laboratory, and aimed at Canadian foundations. This survey focused on their understanding of EDI issues and invited respondents to take part in an interview. While this initiative did not result in the recruitment of new interview participants, it did yield responses from 20 foundations, including six located outside Quebec, thereby helping to broaden the geographic scope of the analysis.

In the end, 17 organizations participated in the interviews. Among them were 14 foundations (including 8 specifically active on disability issues) and 3 field organizations. Most of the interviews lasted about an hour and half (deux heures pour un peu plus de la moitié) and were conducted online or by telephone. Only one organization outside Quebec agreed to participate, in the form of a very detailed written questionnaire.

Although the Canada-wide coverage was more limited than desired—possibly due to the absence of pre-existing networks in certain philanthropic circles outside Quebec—the online survey helped to reduce this gap somewhat by providing valuable data on the EDI practices of several foundations across the country. This combination of methods therefore helped to ensure minimal representativeness and avoid restricting the analysis to a single province.

Interview grids

With a view to methodological rigor and suitability for the participants' profiles, the research team developed three semi-structured interview guides**,** each tailored to a specific type of stakeholder. This choice is based on recommendations for qualitative interviews in the social sciences (Combessie, 2007; Kaufmann, 2011), while taking into account the principles of partnership-based research.

The grids were built around open themes, promoting rich, nuanced, and in-depth exchanges, while allowing for minimal comparability of responses between the different groups encountered. This approach ensures both the flexibility of the interview—necessary to capture the uniqueness of experiences—and the structuring of data for analysis.

The main themes of each grid were as follows:

- **Community organizations working with people with disabilities**
    - Relationships with funding foundations
    - Issues of access and sustainability of funding
    - Structural and systemic barriers encountered
    - Perceived representations of disability in the philanthropic community
- **Foundations involved in the field of disability**
    - Reasons for and trajectories of engagement
    - Types of support provided (financial, strategic, structural, etc.)
    - Difficulties and tensions in implementing support
    - EDI practices integrated into their governance and programs
- **Foundations not involved**
    - Understanding and application of EDI principles
    - Budget allocation according to prioritized funding areas
    - Representations of disability and reasons for lack of involvement
    - Conditions for a possible expansion of their actions

The grids underwent an iterative validation process with the project partners. Adjustments were made following a test interview with Humanity & Inclusion, allowing certain formulations to be refined and the vocabulary to be better adapted to the realities of the target environments.

This co-construction process reinforced the relevance, clarity, and contextual sensitivity of the questions asked, while fully adhering to the principles of partnership-based research, such as active listening, reciprocity, and adaptability (Minkler & Wallerstein, 2008).

Data organization

The analysis of the data collected was conducted using an inductive qualitative approach, inspired by the content analysis methods developed by Paillé and Mucchielli (2021). Once the interviews had been fully transcribed, an initial phase of thematic coding was carried out using QDA Miner software, allowing for an in-depth reading of the collected discourse.

The initial reading aimed to identify cross-cutting issues and recurring themes in the participants' comments. Based on this exploratory reading, an initial coding grid was developed, grouping excerpts into broad categories representing major lines of thought, such as:

- **Intra-environmental relationships** (between actors in the same field),
- **External relationships**,
- **Equity, diversity, and inclusion (EDI)**,
- **Conceptions of disability**,
- **Role of the state**,
- and other systemic dimensions.

A second reading allowed us to refine and reorganize the coding structure. Some categories with blurred boundaries were merged, while others were subdivided. This process led to the development of four main categories:

1. **Relationships** (internal and external),
2. **EDI**,
3. **Disability**,
4. **Environment** (referring to sectoral, institutional, or contextual dynamics).

Within these four main categories, **21 sub-codes** were defined to enable a more detailed reading of the comments. The complete list of codes is presented in the appendix. This coding system enabled the team to make cross-cutting links between the interviews, compare the perspectives of foundations and community organizations, and develop an overall picture of the dynamics surrounding disability in the philanthropic sector.

Throughout the analysis, particular attention was paid to accurately reflecting the participants' words. While thematic groupings were used to structure the analysis, they were never intended to obscure the uniqueness of each experience. On the contrary, the inclusion of verbatim excerpts throughout the report allows the voices of the actors to be placed at the heart of the interpretation, in line with a comprehensive and partnership-based approach.

Integration of survey data

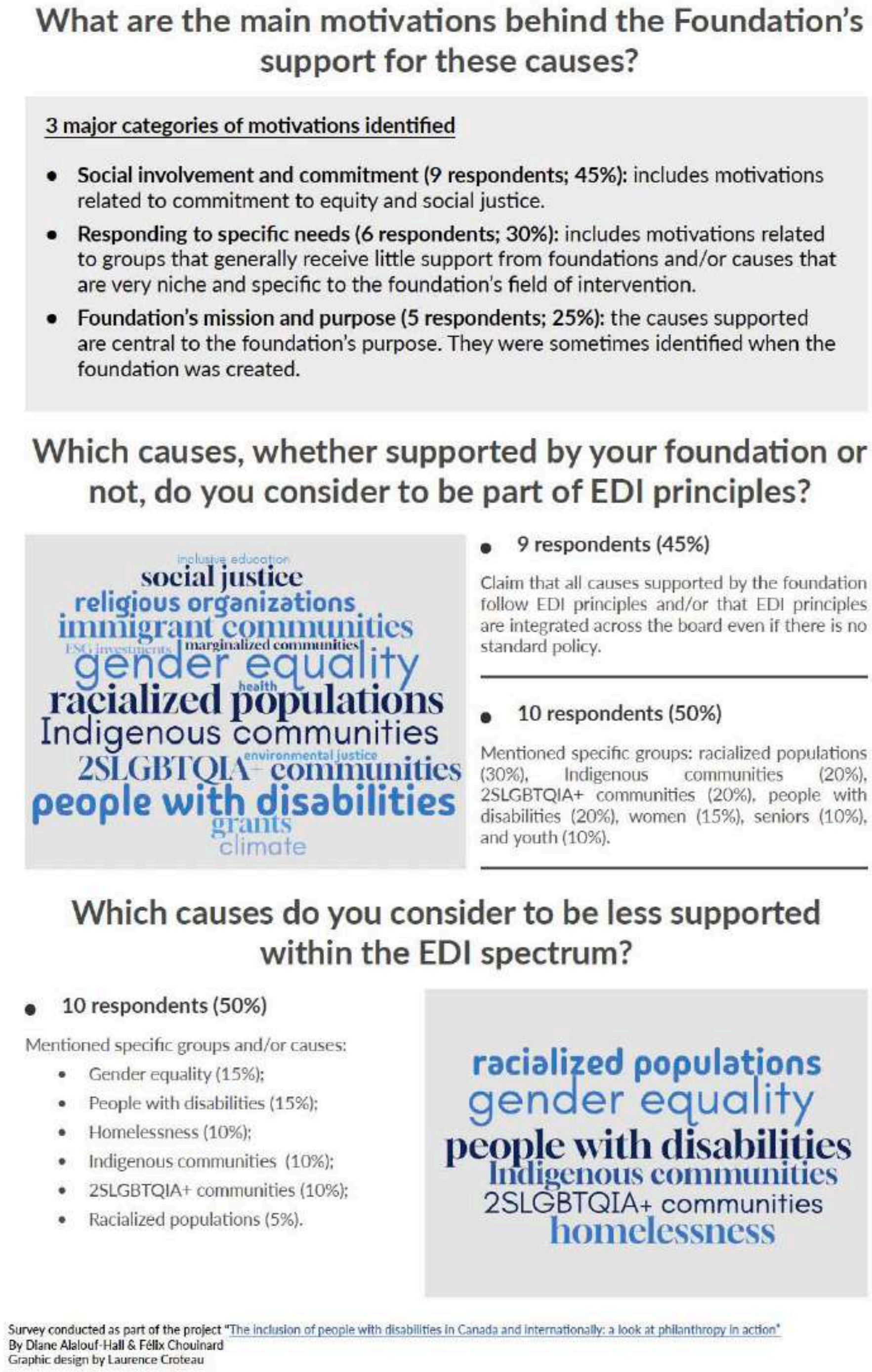
In addition to the qualitative analysis, data from the survey conducted in the summer of 2025 provided further insight, particularly into Canadian foundations' understanding of EDI. The survey, administered via Microsoft Forms, collected responses from 20 foundations, including six located outside Quebec.

After a team member removed identifying information, the responses were anonymized and then analyzed by a second team member to ensure the integrity of the process. The tool provided an initial descriptive summary in the form of graphs, enriching the qualitative analysis with quantitative indicators.

Although the survey contained certain quantitative elements (e.g., proportions of respondents who had adopted an inclusive definition of EDI), it was not designed according to strictly quantitative standards. Thus, the research does not follow a mixed-methods approach in the strict sense of **the term**, but rather an expanded qualitative logic, strategically integrating numerical data to illustrate and deepen the findings from the interviews (Maxwell, 2010).

This light triangulation of sources supports certain elements of the analysis, while maintaining the primacy of the qualitative approach based on the participants' stories and experiences.

Survey



What are the main motivations behind the Foundation's support for these causes?

3 major categories of motivations identified

- **Social involvement and commitment (9 respondents; 45%):** includes motivations related to commitment to equity and social justice.
- **Responding to specific needs (6 respondents; 30%):** includes motivations related to groups that generally receive little support from foundations and/or causes that are very niche and specific to the foundation's field of intervention.
- **Foundation's mission and purpose (5 respondents; 25%):** the causes supported are central to the foundation's purpose. They were sometimes identified when the foundation was created.

Which causes, whether supported by your foundation or not, do you consider to be part of EDI principles?

- **9 respondents (45%)**

Claim that all causes supported by the foundation follow EDI principles and/or that EDI principles are integrated across the board even if there is no standard policy.

- **10 respondents (50%)**

Mentioned specific groups: racialized populations (30%), Indigenous communities (20%), 2SLGBTQIA+ communities (20%), people with disabilities (20%), women (15%), seniors (10%), and youth (10%).

Which causes do you consider to be less supported within the EDI spectrum?

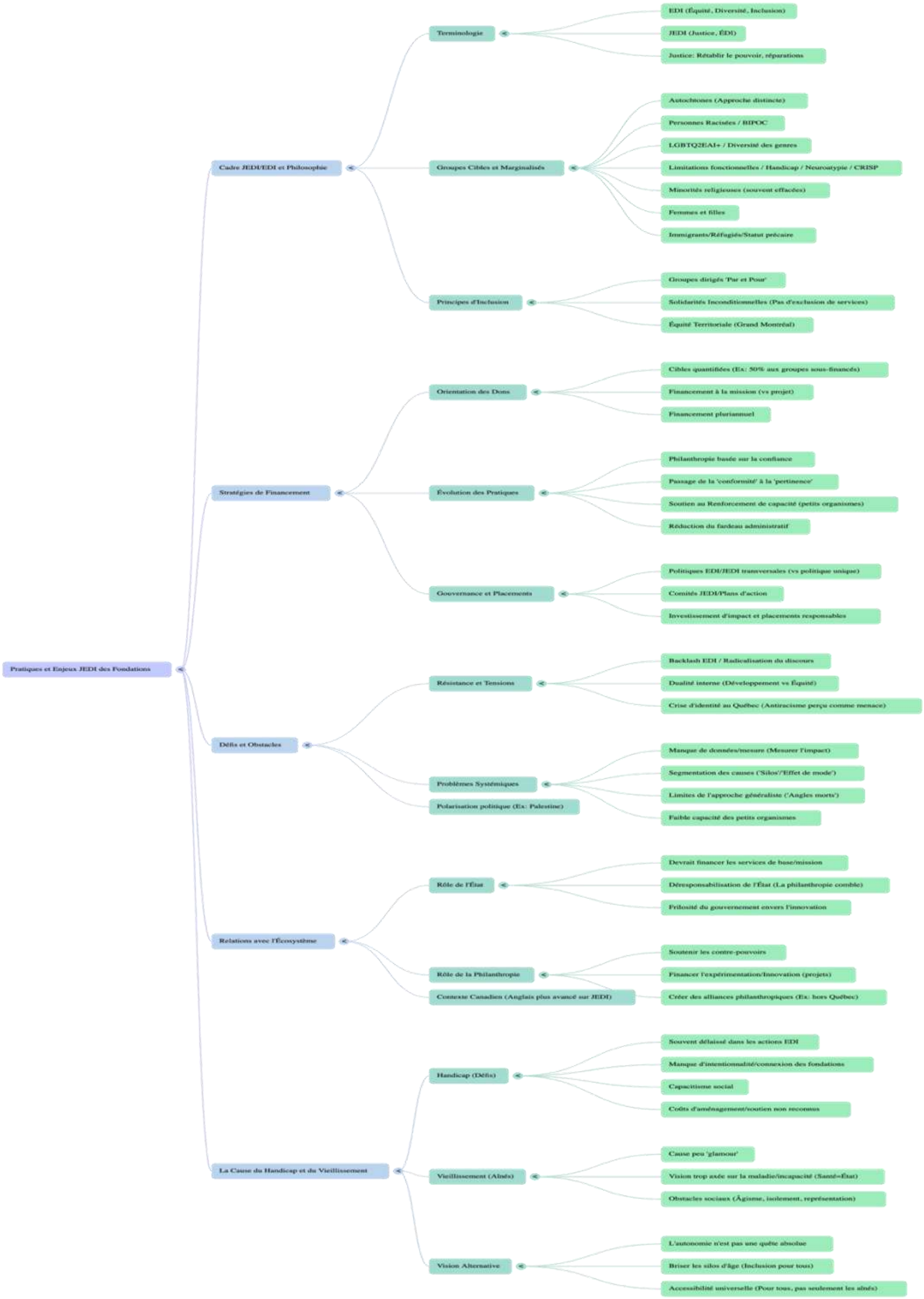
- **10 respondents (50%)**

Mentioned specific groups and/or causes:

- Gender equality (15%);
- People with disabilities (15%);
- Homelessness (10%);
- Indigenous communities (10%);
- 2SLGBTQIA+ communities (10%);
- Racialized populations (5%).

Survey conducted as part of the project "The inclusion of people with disabilities in Canada and internationally: a look at philanthropy in action"
By Diane Alalouf-Hall & Félix Chouinard
Graphic design by Laurence Croteau

Classification of topics discussed by participants during interviews



philab.uqam.ca | in PhiLab