Labour Market Information Research Report

Closing the gap: Best practices for supporting d/Deaf and Hard-of-Hearing workers in B.C.

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Executive Summary

This is the final research report for the *Closing the gap: Best practices for supporting d/Deaf and Hard-of-Hearing (DHH) workers in B.C.* project funded by the Sector Labour Market Partnerships program. The objectives of *Closing the Gap* were to:

1. Identify barriers to employment faced by BC's DHH population.
2. Investigate access to ASL interpreters for DHH workers and jobseekers.
3. Disseminate the project's findings and resources to employers and organizations serving the DHH community, and through scholarly channels.

In this document, we summarize the research activities and detailed findings addressing the project's key research questions. We also outline the proposed content and structure of the Knowledge Mobilization resources (in development), which will be disseminated to stakeholders for the remainder of the project life cycle and beyond the conclusion of the project.

Closing the Gap identified complex, multifaceted barriers to labour market participation as experienced by the d/Deaf and Hard of Hearing (DHH) community in British Columbia. These barriers were not experienced equally by DHH workers, but intersected with various sociodemographic factors including age, gender, and co-occurring disability. Interestingly, workers who are older *and* have a higher degree of hearing loss or who are d/Deaf were found to have better employment outcomes than younger workers who have the same degree of hearing loss or d/Deafness. We suggest that older workers with higher degrees of hearing loss or who are d/Deaf may benefit from a combination of factors that younger workers do not have, including accumulated career experience, more well-developed self-advocacy and coping strategies such as awareness of employment rights and available workplace accommodations, and, for d/Deaf workers, greater ties to the Deaf community and access to resources and networks. Retention may be another factor, such that employers may be more willing to retain older DHH workers and to provide workplace communication supports for those with significant hearing loss or d/Deafness because these employers value their experience and institutional knowledge. Conversely, younger DHH workers with significant hearing loss or d/Deafness could face challenges getting their 'foot in the door'. The dual discrimination of ableism and ageism may negatively influence employers' perceptions of young DHH adults with significant hearing loss or who are d/Deaf.

Findings from qualitative data collected with DHH workers, ASL interpreters, and employers provided rich insight in how these barriers manifest, as well as the facilitators and strategies used by DHH workers to navigate the job search and employment lifecycle. Perspectives from BC employers collected via survey data and qualitative interviews revealed pervasive attitudinal barriers and capacity challenges. While many employers had previous experience hiring DHH workers and many intended to do so in future, a sizable number of employers were unsure. Only a minority (13%) said they did not intend to hire a DHH worker. Employers may be more likely to express non-commitment or uncertainty as opposed to refusal, possibly due to social desirability effects. Very small employers (i.e., <50 employees) are most likely to express uncertainty about hiring DHH employees. Regional and industry differences were less clear, but findings suggest that employers in more densely populated areas were more likely to plan to hire a DHH worker in the future, possibly due to the greater concentration of resources and services available in metropolitan areas.

Employers identified a variety of barriers to hiring DHH workers, but were overall more likely to state that other employers faced these barriers than that they experienced them at their own organizations. The most commonly identified barriers included being unsure how to communicate with and accommodate DHH workers, being uncertain about DHH employees' capabilities, having limited resources to train and support DHH employees, and concerns about safety. Very small employers were especially likely to have safety concerns, as well as to have limited numbers of DHH applicants in their talent pipelines. Recommended strategies for addressing these barriers include providing education and training, as well as building capacity to recruit, hire, and retain DHH employees.

Finally, ASL interpreters are a critical support for DHH individuals in the labour market, and bolstering access to ASL interpreters is a pressing concern in B.C. Our findings revealed ASL interpreters' perspectives on the profession, and identified potential solutions to strengthening the job outlook of the occupation.

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Introduction and Background

Significant disparities in employment outcomes – including employment rates, employment quality, and income – exist between the working-age DHH population and the general population, both in Canada and internationally.* The most recent publicly available data on employment rates for the DHH population in Canada comes from the 2012 CSD (released in a table in 2017), which identified a 47.9% employment rate among working-age Canadians (15-64 years) with a 'hearing disability' compared to the 73.6% employment rate for Canadians without any disability.[1,2] Similarly, in B.C., 47.6% of working-age adults with hearing disabilities were employed.[2] In The DHH population in Canada also report significantly lower earnings than their counterparts without hearing loss, serving as another key indicator of employment inequity for the DHH community.[3] International research has also found that DHH individuals experience lower quality employment in the form of part-time, low-income, high-stress/high-risk, and non-managerial work.[4,5,6,7,8,9]

In a comprehensive review of scholarly and grey literature conducted at the beginning of the *Closing the Gap* project, our research team identified numerous research gaps related to this employment disparity and, from this, developed a series of research questions to investigate in this project. *Closing the Gap* aimed to better understand the labour market situation of the DHH population in B.C., and explored interrelated factors including access to ASL interpreters as well as the attitudes and intentions of employers.

Key Terms and Approach

There are numerous terms associated with the DHH community, and each term refers to distinct groups within the DHH community or distinct experiences pertaining to the DHH population.

- **"Hearing loss"** is a medical/audiological term that refers to limitations to hearing at thresholds of 20 dB (for example, leaves rustling or a ticking watch) or more in both ears. Hearing loss can affect one ear or both ears and can lead to difficulty in hearing conversational speech or sounds.[10]
- **"deaf"** is a medical/audiological term that refers to persons who have little or no functional hearing, but who do not necessarily identify with the Deaf community.[11]
- **"Deaf"** is a sociological term that refers to individuals who identify with Deaf culture, which is based on Sign language, and whose preferred mode of communication is Sign.[11]
- **"D/deaf"** is a collective noun referring to both "Deaf" and "deaf" persons.[11]
- **"Deafened"** refers to persons who become deaf later in life, and who may not identify with either the Deaf or hard of hearing communities.[11]
- **"DeafBlind"** or **"Deaf-Blind"** refers to persons who experience both hearing and vision loss.[12]
- **"Hard of Hearing"** is a medical and sociological term that denotes persons whose hearing loss is mild to profound and who typically communicate with speech.[11]

* We define "working age" as between the ages of 16-64. Definitions of working age can vary slightly. For example, Svinndal et al. (2020) defined working age as 18-67, and Statistics Canada's labour force status for adults with disabilities by disability type dataset specified 15-64 years (2017).

- **"Hearing difference"** (i.e., "a person with a hearing difference") is sometimes used to refer to d/Deaf and Hard of Hearing persons as an alternative to terms like "hearing loss" or "low hearing", which can be interpreted as negative or deficiency-based.[ii]
- **"Hearing impaired"** signifies a medical condition, but is not a collective noun; it is considered an unacceptable term when referring to persons with hearing loss.[11]
- **"Sign language"** is a language family that uses the visual-manual modality to convey meaning. Deaf persons and communities use Sign languages to communicate and these Sign languages vary regionally and culturally.[11]
- **"Interpreters"** provide communication support for DHH persons. There are several types of interpreters. ASL interpreters are typically hearing individuals who provide communication services in American Sign Language, while LSQ interpreters are typically hearing individuals who provide communication support in *Langue des Signes Québécoise*. Deaf interpreters are Deaf professionals who provide communication support using their native Sign language and other communication strategies.[13]

Many DHH – and especially Deaf – persons do not consider deafness or becoming hard of hearing a disability.[14] Deaf culture does not problematize deafness; deafness is not a medical deficiency which must be fixed.[15] To be deaf, for Deaf persons, has positive associated meanings, not meanings associated with deficiency, loss, or lack. Despite this, wider governmental, legislative, policy, and data collection frameworks have linked deafness and DHH persons with disability.[7] For DHH persons to get access to social support services, they frequently must classify themselves as persons with disabilities.[14]

CCRW, and the researchers on *Closing the Gap*, utilize the social model of disability. The social model of disability understands disability as resulting from societal barriers, in contrast to the medical model that views disability as an inherent impairment needing a cure.[16],[17] In this view, persons become disabled by a lack of infrastructure, like ramps or accessible toilets, or by people's attitudes, behaviors, and perceptions, and not by impairment. CCRW and our research team acknowledge that many DHH persons do not identify as persons with disabilities, but we recognize that the social model emphasizes that existing barriers disable DHH persons, rather than medicalized notions of 'impairment' or inherent deficiency. Accordingly, reducing barriers for the DHH community involves activities such as providing Sign language interpreters, captioning services, or visual aids to support communication; recognizing the Deaf community as a cultural and linguistic minority; recognizing Sign languages as primary languages for communications; and acting to reduce attitudinal barriers by promoting that DHH persons should not be discriminated against, or defined by, limited, or excluded on the basis of hearing loss. Through *Closing the Gap,* we aimed to produce knowledge that can reduce and eliminate barriers that the DHH community experiences to labour market participation.

Reflexivity

Acknowledging that research is never value- or assumption-free, the research team adopted a reflexive approach. Members of the research team have varying experiences with the phenomenon being

[ii] "Hearing impaired" is a term which signifies a medical condition; it is considered an unacceptable term when referring to persons with hearing loss.[11]

explored (i.e., employment barriers experienced by DHH workers). Having cultural "insiders" (i.e., members of the DHH community) on the team may help build rapport and trust with study participants, however, "insiders" must recognize that not all DHH individuals will have the same experiences and be open to alternative views. Having cultural "outsiders" on the team can add value by seeking clarity on concepts and experiences that are implicitly understood by "insiders." The researchers' position(s) as "insiders" or "outsiders" may influence the collection and interpretation of findings and will be reflected upon throughout the study.

The researchers identified and articulated their positionality with respect to the research topic via positionality statements locating themselves – including their personal, philosophical, and theoretical perspectives – in relation to the DHH community, and how these factors may influence or impact their approach to the research.[18] The positionality statement is intended to provide context for the knowledge user and assist in the researchers' own critical examination of their approach.

Vanessa Sinclair

Dr. Vanessa Sinclair is a hearing person living with multiple disabilities. She is a cultural outsider to the DHH community. She began this project with some awareness and exposure to the DHH community and DHH individuals through her workplace and personal relationships. Vanessa's approach to this research was informed by the social model of disability, recognizing that barriers to labour market participation arise from the interplay of bodily experience and the conditions of the environment (physical, digital, or social); as well as by the principles of community-based research and the importance of amplifying the perspectives of those with lived experience.

As the principal investigator overseeing the *Closing the Gap* project, Vanessa's goal was to approach the research from a learner's perspective – seeking to grow her knowledge about the DHH community while striving to de-center her own assumptions and perspectives about what questions to ask, methodologies to use, or interpretations to make. Seeking dialogue with community members and advocates via the project governance committee was an important reflexive exercise. Vanessa did not participate in conducting the thematic analysis of qualitative data; however, one challenge she experienced was in interpreting the study findings and determining the most relevant and beneficial information to mobilize to different audiences, such as the DHH community, without imposing hearing-centric or other assumptions. To help address this, part of the knowledge mobilization process involved sharing the proposed content for the knowledge mobilization resources to gather feedback and input from community representatives and advocates via the governance committee.

Lauren Renaud

Lauren positions herself as a cultural outsider, having experienced only temporary workplace barriers related to hearing difficulties. At the start of the study, she had some awareness of workplace barriers for DHH people based on her own experiences and the experiences shared by close family members (e.g., difficulty following conversations in workplace and social settings with background noise, hostile attitudes of coworkers or customers toward people who are Hard of Hearing or who use hearing aids). She had had some exposure to Deaf culture and Deaf people through ASL lessons and camps in her youth, led by Deaf instructors. Her personal goal through supporting this research was to broaden her awareness of employment barriers. She considered herself a student in relation to the study participants, seeking a strong understanding of their experiences and situating DHH jobseekers as experts on the topic.

From a theoretical standpoint, Lauren's assumptions at the start of the study were shaped by the social model of disability. She anticipated learning about environmental factors that introduce barriers for DHH people (e.g., employer attitudes, infrastructural barriers, policy barriers). She also views the topic under study as a social justice issue, reflecting the need for societal transformation to address inequity and promote human rights. One challenge Lauren experienced during the research process was to remain neutral during employer data collection and analysis to avoid conveying her personal assumptions about employer engagement and motivation to hire DHH workers.

Melissa Pagliaro

Melissa Pagliaro identifies as a profoundly deaf cochlear implant user, which provides insider insight into the lived experience of being deaf and hard of hearing. Melissa has encountered barriers such as stigma, hostile attitudes, communication challenges, listening fatigue, and inadequate government and insurance coverage for cochlear implant upgrades. Melissa has engaged with diverse members of the DHH community through communication camps, schools, public speaking engagements, organizations for the deaf and hard of hearing, and various professional roles. Melissa also acknowledges that the DHH community encompasses diverse identities and experiences, therefore positioning themselves as a cultural outsider within the culturally Deaf community. This dual positioning as insider-outsider shapes Melissa's perspective and approach to the *Closing the Gap*.

Melissa's approach to *Closing the Gap* was guided by the principle that disability research must not only prioritize but amplify the voices of those most affected, particularly marginalized groups within the DHH community, such as Deaf-Blind and DeafPlus/DeafDisabled individuals. As a reflexive practice, Melissa sought out literature on Sign language communication and Deaf-Blind experiences prior to conducting interviews to ensure informed and respectful engagement.

Grounded in both the social model of disability (e.g., disability is framed as the interaction between of bodily or mental conditions and environmental barriers), and the affirmative (which views disability as a positive source of identity and value) models, Melissa approaches this research with a commitment to equity, inclusion, and challenging deficit-based narratives. This positionality informs how Melissa interprets findings and strives to center diverse perspectives within the DHH community.

Rachel Bath

Rachel Bath identifies as a hearing individual with minimal lived experience of hearing-related barriers, apart from occasional difficulty processing auditory information in high-stimulation environments due to sensory overwhelm. As a cultural outsider to the Deaf and hard of hearing (DHH) community, Rachel had limited prior interaction with DHH individuals before her current role at CCRW. Since then, her exposure has primarily occurred in professional contexts.

As a hearing researcher, Rachel occupies a position of relative privilege in relation to DHH participants. Her approach to the *Closing the Gap* study was guided by the principle that disability research must prioritize the voices and lived experiences of those most affected, alongside an awareness that knowledge is situated and shaped by power relations. Acknowledging her outsider position, she engaged in ongoing reflexivity to avoid imposing hearing-centric assumptions or privileging intermediary perspectives. Her commitment was to create conditions where DHH perspectives could be heard and valued, while avoiding occupying disproportionate space in the process.

During the research process, Rachel observed a tendency to gravitate toward the perspectives of ASL interpreters. She recognized this inclination as a reflection of her own positionality. To address the risk of centering hearing perspectives rather than those of DHH participants, she actively worked to ensure that the experiences of DHH individuals remained the foundation for analysis and interpretation.

Governance Committee

The committee oversaw the execution of the Closing the Gap project, provided ongoing oversight and strategic direction, ensured alignment with project goals, and endorses deliverables before submission to the Funder. Committee members included DHH community advocates, persons with lived experience as DHH, individuals associated with the ASL interpreting profession and/or who were or are ASL interpreters, as well as representatives and advocates of other disability communities. As of the completion of the project, the committee included the following members:

- Ruth Warick, Senior Director, Strategic Initiatives + Impact, Wavefront Centre for Communication Accessibility
- Deloris Piper, Program Coordinator, ACE-BC
- Neil Belanger, Chief Executive Officer, Indigenous Disability Canada (IDC)/BC Aboriginal Network on Disability Society (BCANDS)
- Dr. Joe McLaughlin, Ed.D., CEO, McLaughlin Educational Consulting Services and Adjunct Professor, University of British Columbia
- Melissa Mykle, Team Leader/Consultant, Provincial Child and Youth Mental Health & Deaf and Hard of Hearing Services
- Suzie Giroux, Treasurer, Westcoast Association for Visual Language Interpreters
- Lori Climenhaga (Ex-Officio Member), Director of Employer Engagement Initiatives, Community & Employer Initiatives Branch, Employment and Labour Market Services Division, Ministry of Social Development and Poverty Reduction
- Cody Willett (Ex-Officio Member), Policy Analyst, Post-Secondary Education and Future Skills Division, Ministry of Post-Secondary Education and Future Skills
- Matthew Boddy (Ex-Officio Member), Senior Program Manager, Labour Market Development Division, Ministry of Post-Secondary Education and Future Skills

Rationale

Our initial literature review identified research gaps related to the experiences of DHH jobseekers, ASL interpreters, and employers. As our overarching objective was to identify and reduce barriers to labour market participation for the DHH community in B.C., the triangulation of all three perspectives – jobseekers, interpreters, and employers – facilitated a holistic analysis on the barriers faced by this community.

First, there is little to no existing research about DHH workers in the BC context specifically, and there is minimal published literature in the Canadian context on the barriers and facilitators of labour market participation for the DHH community. Indeed, DHH persons may be underrepresented in national data: 'hearing disability' affects 5.6% of Canadians according to the 2022 Canadian Survey on Disability (CSD), and are the 6th most reported disability type.[19] However, a report from 2015 by the Canadian Association of the Deaf estimates that there are 357,000 culturally Deaf and 3.21 million hard of hearing

Canadians.[20] Statistics Canada may not be capturing a comprehensive picture of the DHH population in Canada, due to how questions are phrased, and may be underreporting the DHH population in Canada. For example, those who do not self-identify as living with a disability may be excluded from the CSD.

Additionally, very little published literature describes how different demographics within the DHH community experience labour market attachment. No two DHH individuals share the exact same experience of deafness, or experience in the labour market. While the Deaf community shares a culture and language with which they identify, late-deafened adults, for example, may identify more with the hearing community and rely on assistive technologies; Deaf-Blind individuals have distinct experiences and needs that may vary greatly. Sociodemographic factors such as age, culture, ethnicity, co-occurring disability, and gender also play a role in labour market experiences, as do experiential factors like the degree of hearing loss, preferred communication methods, and use of assistive technologies. A detailed and current understanding of labour market participation among the DHH population in Canada remains a significant challenge, with many demographic, intersectional, and longitudinal gaps.

Second, ASL interpreters play a key role in supporting the employment and workplace activities of DHH persons, and particularly d/Deaf persons, through activities like job searching, interview, training, presentation support, workplace learning, participation, and networking. However, B.C. is currently experiencing a shortage of ASL interpreters. Poor access to ASL interpreters is acknowledged as a key barrier to labour market participation among DHH persons, yet access to ASL interpreters in B.C. remains limited. According to the Government of BC, as there are "less than 300 registered interpreters in BC and thousands of Deaf signing individuals […] Interpreter services may not be able to fill short notice requests".[21] There is a demonstrated need to identify barriers to entering the interpreting profession, and strategies to mitigate these challenges.

Third, employers' willingness to hire and retain DHH workers is impacted by stigma, discrimination, lack of knowledge about assistive technology, the cost of accommodations, and misconceptions about the capacity of DHH persons. Past research suggests that educational interventions and training programs can be effective strategies to improve hiring and retention of DHH workers, especially if those interventions aimed to increase employers' awareness of their duty to accommodate and equipped them with knowledge and skills to create inclusive work environments. However, data on BC employers is limited, as is research on the most effective strategies promoting behavioural change among different types of employers (e.g., small versus large organizations; employers in different industries; etc.). In this project, we sought to explore perceptions and hiring intentions among B.C. employers, and determine the ideal strategies for engaging employers and encouraging them to hire DHH employees.

Research Questions

Our specific research questions were as follows:

1. **What is the demographic distribution of labour market participation within the broader DHH community?** And, particularly,

    a. Who, in terms of demographic group membership, within the DHH community is most underrepresented in the labour market with regards to unemployment, underemployment, job loss, and job quality?

   b. Within what sectors and industries are DHH workers underrepresented and/or overrepresented?

2. **What are the experiences and intentions of employers in B.C. regarding the hiring and employment of DHH workers?** Specifically,

   a. What percentage of employers have hired DHH workers in the past?

   b. Among employers who have not hired a DHH employee, what proportion intend to in future?

3. **What are the primary barriers to labour market equity faced by DHH employees?**

   a. What do employers perceive as the primary barriers (e.g., stigma, lack of knowledge, lack of resources) to hiring DHH employees, and how could employers be better supported and motivated to overcome these barriers (e.g., resources, tools, financial supports)?

   b. What do DHH workers and interpreters (who serve as 'labour market liaisons' for the DHH community) perceive as the primary barriers faced in obtaining and retaining employment by DHH workers?

   c. What barriers (e.g., recruitment challenges) must be overcome to facilitate greater access to ASL interpreters?

   d. What unique barriers are faced by DHH workers who are members of other underrepresented or equity-denied groups?

4. **What new resources, tools, or supports can be produced to better meet the needs of the DHH community and potential employers in the B.C. labour market?**

Methodology

Closing the Gap took place in three phases, employing a sequential mixed-methods design (quantitative to qualitative; phases 1 and 2) followed by knowledge mobilization activities (phase 3).

Beginning with a quantitative analysis of secondary data facilitates the identification of patterns in the data that may be generalized to populations, and may inform next steps and hypotheses. Qualitative data can be used to explore in-depth the potential underlying explanations for these patterns and amplify the experiences of often-underrepresented groups. The mixed-methods design of the *Closing the gap* project utilizes both quantitative and qualitative methods to access the advantages offered by both methodologies.

Knowledge translation has been integrated throughout the project through the engagement of knowledge users as active participants and co-creators in the knowledge generation process. To this end, we have solicited input from our committee members on the methodology, data collection tools, and execution of research activities, incorporating feedback from community members, advocates, and experts and adjusting our approach as necessary. Further, our committee is providing direction and support identifying knowledge users who would benefit from the insights created in this project and

advise on the development of an outreach/knowledge dissemination plan to best reach these communities.

Phase 1 (Intersectional Analysis of Secondary Quantitative Data)

An intersectional analysis is one that explores the experiences of underrepresented groups across multiple sociodemographic dimensions (social identities), such as gender, age, socioeconomic status, ethnicity, and disability, and not just one aspect of identity at a time. That is, researchers investigate whether, and how, respondents' experiences are influenced by multiple aspects of social identity.

Quantitative analysis enables researchers to identify patterns that can potentially be generalized to populations. The application of intersectionality theory to quantitative research is relatively recent, compared to its use in qualitative research.[22] There is therefore little consensus on best practices for intersectional quantitative methodologies. Many researchers have thus advocated for qualitative or mixed methods designs.[23] Nonetheless, quantitative methods can be applied to intersectional research when data on sociodemographic factors are collected and included in data sets. The CSD is the most comprehensive survey dataset available on Canadians with disabilities. Because it contains detailed sociodemographic data, it enables researchers to investigate how outcomes, like labour market participation, vary across these indicators, facilitating an intersectional interpretation of the data. Findings from the CSD data can be bolstered through other research, including qualitative research, to reveal potential explanations for the experiences of underrepresented groups and ensure that marginalized experiences are not overlooked.

Method

Using disaggregated data from the 2022 CSD obtained through Statistics Canada's Research and Data Centre, we conducted a quantitative intersectional analysis of labour market data collected from the population of DHH individuals in B.C. This data supports our exploration of research question 1, which focuses on quantifying labour market participation across the DHH community in B.C. with regards to demographic group membership, sectors, and industries.

Additionally, we present supporting data collected from DHH clients who have accessed CCRW Employment Services, including sociodemographic indicators and employment outcomes. The small sample size of this data does not allow for us to carry out inferential statistical analysis. The descriptive analysis of this data is intended to supplement the findings from the analysis of CSD data, and any findings from the Employment Services data should be interpreted cautiously.

Participants

CSD 2022

Data collected by Statistics Canada through the Canadian Survey on Disability meets rigorous sampling standards, ensuring sufficiency, randomness, and representativeness of the sample. Detailed information about methodology for the CSD 2022 can be found on Statistics Canada's website and is summarized here.[24,25]

The CSD captures detailed information about respondents' sociodemographic characteristics, disability status, and labour market experiences. The data collection process for respondents to the CSD involves multiple stages to ensure accurate identification and comprehensive information on disability-related

characteristics. Respondents to the CSD are first identified through the Census – Activities of Daily Living (ADL) Questionnaire, which is used to screen individuals based on their responses to questions about difficulties performing everyday activities. Those who indicate limitations are flagged as potential participants for the CSD.

Selected participants are invited to complete the CSD, which includes the Disability Screening Questionnaire (DSQ). The DSQ assesses functional limitations and their impact on daily living and participation in society to identify disability.

The CSD is administered primarily online, but other modes of data collection, such as telephone interviews may also be offered to ensure accessibility and accommodate the diverse needs of participants.

Sample Frame

The population eligible for the CSD includes residents of Canada age 15 or over who report a disability on the long-form census questionnaire; specifically, the Activities of Daily Living (ADL) questionnaire. From these respondents, the CSD sample is selected to ensure sufficient sample sizes for groups of interest including province, rurality/urbanity, and age group. The sample frame of the CSD 2022 included over 24,000 submissions.

In the CSD, the Disability Screening Questionnaire (DSQ) asks respondents about the presence and severity of barriers or limitations to participating in daily life. Using the DSQ, the CSD identifies and reports data on 10 types of disability: hearing, vision, mobility, flexibility, dexterity, pain, learning, mental health, memory, and developmental. The screening questions used to identify DHH persons (i.e., per the CSD, individuals with a hearing disability) are:[26]

- *[With your hearing aid or cochlear implant], which of the following best describes your ability to hear?*
    - *You have no difficulty hearing*
    - *You have some difficulty (hearing)*
    - *You have a lot of difficulty (hearing)*
    - *You cannot hear at all*
    - *You are Deaf*
- *How often does this [difficulty hearing / hearing condition] limit your daily activities?*
    - *Never*
    - *Rarely*
    - *Sometimes*
    - *Often*
    - *Always*

Thus, the sample of DHH persons includes those who have “some or a lot of difficulty hearing, cannot hear at all, or [are] Deaf, and who are sometimes, often, or always limited in [their] daily activities because of this condition” as well as those who have “a lot of difficulty hearing, cannot hear at all or [are] Deaf and [are] rarely limited in [their] daily activities because of this condition,” regardless of whether or not they use a hearing aid or cochlear implant.[27] The sample size for the population of interest – DHH individuals residing in B.C. – was N = 513.

Sampling Error and Bias Mitigation

CSD data are subjected to data quality validation measures, including reviews for inconsistent responding, duplicate records, and so forth. Data bias arising from non-response errors is mitigated through adjustments (such as imputation of missing data), as well as quality assurance measures conducted to ensure the questionnaire itself is clear and easy to interpret.

Margin of error refers to the likely size of sampling error, assuming random sampling. Estimates of sampling error for CSD statistics are computed using bootstrap weights (1000 sets) and are reported through 95% confidence intervals. In brief, this means that if the CSD were repeated 20 times, 19 times out of 20 the confidence interval around the statistic will contain the real population statistic.

Each respondent in the CSD is assigned a sample weight, a numeric value indicating the number of people in the population they 'represent' per the sample design. These survey weights are applied to both descriptive and inferential statistical outputs to reduce sample bias and ensure analyses are representative (i.e., to address the potential issue of over- or under-representation of any particular group within the sample). Interpreting weighted outputs theoretically provides a more accurate estimate of the true population parameters, allowing more valid inferences and generalizations to be made from the data about the DHH population.

CCRW Employment Services

All CCRW clients self-identify as persons with a disability, which may include reporting a hearing disability, or identifying as d/Deaf or hard-of-hearing. N = 107 DHH clients across Canada were identified from the previous 4 years of CCRW Employment Services records. We are unable to report on the sample of DHH clients residing in B.C. due to the relatively small number of clients who meet this inclusion criteria, making the results potentially identifying.

Materials

CSD 2022

This analysis utilized a comprehensive set of predictor and outcome variables from the 2022 Canadian Survey on Disability (CSD) dataset, each carefully operationalized and, where necessary, recoded to align with the objectives of this analysis. Variable names as they are written in the CSD Data Dictionary are indicated in parentheses. The dataset was first filtered to include only individuals were identified as having a hearing-related disability (DHEAR_FL = 1) and who resided in British Columbia at the time the survey was collected (PROV = 59).

Outcomes

Outcome variables included labour force status, full- or part-time employment, permanent or temporary work status, total individual income earned (before taxes, in 2020), as well as industry and occupation of employment among respondents that indicated they were employed.

Labour force status (DLFSTAT) measures overall labour market engagement by classifying individuals as employed, unemployed, or not in the labour force. For our analysis, we operationalized this variable by focusing on individuals that are in the labour force versus those who are not. Employment type (DFTPTE) distinguishes between full-time and part-time employment, while employment permanency (PW_05) captures whether respondents are in permanent or temporary positions, providing insights into job intensity and security.

Additional variables explore the nature of employment, including occupation and industry. Collapsing the industry and occupation response categories was necessary to ensure data quality and maintain the statistical reliability of our analysis, in addition to meeting vetting requirements of the CSD dataset as outlined by the RDC. The original classifications for these variables included many categories which had limited representation within the DHH population in British Columbia. The inclusion of variables with insufficient data in regression models can lead to unreliable estimates and unstable model performance, as well as inflate standard errors and hinder the ability to detect meaningful patterns.

Occupation (DOCC21_1), which categorizes jobs into nine major occupational groups based on the National Occupational Classification (NOC).[28] To meet the minimum bin requirements outlined by the RDC, some categories were collapsed: groups 3 (health occupations), 4 (occupations in education, law, and social, community, and government services), and 5 (occupations in art, culture, recreation, and sport) were combined into one category; and groups 7 (occupations in art, culture, recreation, and sport) were combined into one category; and group 7 (trades, transport, and equipment operators), 8 (natural resources, agriculture, and related production occupations), and 9 (occupations in manufacturing and utilities) were combined into another.

Industry (DIND22_1), which originally classified employment into 20 sectors following the North American Industry Classification System (NAICS),[29] was similarly collapsed to meet bin size requirements. The following groups were combined: Sectors 41 (wholesale trade), 48 (transportation), and 49 (warehousing); sectors 44 (retail trade), 45 (retail), and 72 (accommodations and food services); sectors 52 (finance and insurance), 53 (real estate and rental), and 56 (administrative and support services); sectors 51 (information and cultural industries), 71 (arts, entertainment, and recreation), 61 (educational services), and 62 (health care and social assistance); sectors 11 (agriculture, forestry, fishing, and hunting), 21 (mining, quarrying, and oil and gas extraction), 23 (construction), and 33 (manufacturing).

Lastly, total income (TOTINC) was recoded as INCOME_CAT and categorized into $10,000 brackets ranging from $0 to $100,000, and a category for respondents with incomes over $100,000.

Initially, we had intended to include Looking for Work (LW_10), a continuous variable that measured the duration of time individuals without a job at the time of survey collection had spent job searching. However, due to the limited sample size within this category, this variable was excluded from analysis.

Predictors

Demographic predictor variables included gender, age, educational attainment, LGBTQ status, visible minority status, immigrant status, and Indigeneity. Disability-related predictors included the presence or absence of co-occurring disabilities, including vision, hearing, mobility, flexibility, pain, learning, developmental, memory, and mental health-related disabilities, as well as disability severity, which assessed the overall impact of disability on daily functioning via the DSQ. Binary variables were recoded for data quality and interpretability, such that 0 = absence of the specified demographic characteristic and 1 = presence of the specified demographic characteristic. Invalid responses were set to *NA*.

Gender (Gender2) was included as a binary variable and is a two-category variable in the CSD dataset, comprising Men+ and Women+. Men+ includes men as well as some non-binary persons, while Women+ includes women and some non-binary persons. This aggregation is necessary to protect the confidentiality of responses, given the small population size of this demographic.[30] For this analysis, this variable is recoded such that 0 = Women+ and 1 = Men+.

Age (INTAGE) was categorized into the groups (1) Under 25; (2) 25 – 34; (3) 35 – 44; (4) 45 – 54; (5) 55 and older.

Educational attainment (EDB_05) measured the highest level of education completed, ranging from less than high school, to postsecondary qualifications, and LGBTQ status.

LGBTQ status (DLGBTQ2), as described in the Data Dictionary, is a derived variable that consolidates individuals who identify as sexual minorities, non-binary, or transgender into one category. This grouping helps ensure sufficient representation for meaningful analysis while protecting the confidentiality of respondents from smaller demographic groups. This variable was operationalized as a binary variable such that 0 = non-LGBTQ identity and 1 = LGBTQ identity.

The variable capturing visible minority status (DVISMIN) was originally categorized into 14 groups, representing specific visible minority groups such as South Asian, Chinese, Black, Filipino, Arab, Latin American, Southeast Asian, West Asian, Korean, and Japanese. It also included categories for "multiple visible minorities" and "Indigenous peoples." However, due to limited sample sizes across these categories within our target population, the variable was collapsed into a binary format (0 = not a visible minority, 1 = visible minority) to meet the minimum bin requirements outlined by the RDC. Additional demographic variables included immigrant status (IMMDER), representing immigrants and non-immigrants, and Indigeneity (ABDERR), representing persons identifying with the Indigenous peoples of Canada, both coded as binary variables.

Disability-related predictors focused on both the presence and type of disability, all operationalized as binary variables. These included indicators for vision (DVIS_FL), hearing (DHEAR_FL), mobility (DMOB_FL), flexibility (DFLEX_FL), pain (DPAIN_FL), learning (DLRN_FL), developmental (DDEV_FL), memory (DMEM_FL), and mental health-related disabilities (DMENT_FL). Disability severity (DCLASS) was categorized into four levels, capturing the degree of functional limitations caused by disabilities. Initially, the variable capturing unknown disabilities (DUNK_FL) was included as a binary variable but was excluded from the final models due to insufficient sample size.

CCRW Employment Services

CCRW collects detailed data from clients on sociodemographic factors. At intake, clients complete an Employment Equity questionnaire which collects information including gender; age; Indigeneity; race/ethnicity (visible minority status; and, separately, Black Canadian identity); 2SLGBTQIA+ identity; new immigrant status (newcomer to Canada); educational attainment (completed/not completed secondary school); status as involuntarily NEET (not in education, employment, or training); low-income household status; low literacy/numeracy status; language minority status; rural/remote location; and prolonged workforce detachment (defined as 6+ months).

At the conclusion of service (i.e., when clients find work, the file is closed by CCRW Employment Services staff, or clients choose to exit service for any other reason), CCRW collects service outcome data, recording whether clients found employment (including self-employment); were unemployed; returned to school or training; cannot be reached; or quit service with no reason provided.

Data Analysis

CSD 2022

To identify sociodemographic predictors of employment outcomes among the DHH population in B.C., regression modelling was conducted using the R statistical software through RStudio. Recognizing the small sample size of our population, regression modeling also respects the confidentiality of our population insofar as it involves analyzing aggregate data rather than individual responses. This means that while the analysis explores relationships between variables at the group level (e.g., employment rates among different demographic groups), it does not reveal information about specific individuals.

Logistic regression modeling was chosen due to its ability to assess the relationships between various categorical and continuous predictors (such as demographic characteristics, disability severity, etc.) and categorical employment outcome variables, revealing statistically significant predictors of employment outcomes as well as relative probability (odds ratios), providing insight into factors influencing labour market participation and enabling population generalizations about these effects.[31]

CCRW Employment Services

Descriptive statistics (proportions) are reported for service outcomes of DHH clients, as well as for DHH clients by sociodemographic indicators collected by CCRW at intake.

Phase 2 (Primary Data Collection)

In Phase 2, we conducted primary data collection from employers, interpreters, and the DHH community to address research questions 2 and 3. We utilized a mixed methods approach to employer data collection, involving quantitative analysis of survey data and qualitative analysis of focus group findings, and qualitative interviews and focus groups with interpreters and DHH workers.

We had intended for the findings from the secondary analysis to also inform the recruitment process of phase 2; specifically, our goal was to seek to recruit DHH workers facing complex barriers to labour market participation as identified in phase 1 (i.e., high rates of unemployment or underemployment). While every effort was made to recruit DHH jobseekers from diverse backgrounds (and indeed, our final sample was diverse in terms of gender, ethnicity, and other sociodemographic factors), recruitment challenges made it infeasible to focus our recruitment efforts solely on underrepresented demographics within the DHH community. Nonetheless, the findings from the secondary analysis informed our understanding and interpretation of the qualitative data gathered from DHH jobseekers by providing insight into the sociodemographic factors linked to greater labour market participation barriers.

Non-probability-based approaches to sampling and recruitment were used to facilitate greater outreach towards hard-to-reach populations within the community of DHH workers in B.C., interpreters, and employers.[32] We utilized primarily convenience sampling (outreach based on non-random criteria, i.e., through social media advertisement, organizational distribution channels, etc.), leveraging our partnerships in B.C. and channels such as listservs, distribution lists, and social media to distribute recruitment materials to employers, interpreters, and DHH community members through our network of partners working with the DHH community in B.C. Additionally, we utilized the services of a third-party recruitment panel, SAGO Asking Canadians, to support recruitment of employers in BC.

Quantitative Data (Employer Survey)

Methods

An online survey hosted on the Qualtrics web platform was distributed through CCRW's network of employers in the B.C. region and via SAGO's Asking Canadians panel (a platform where interested individuals can register to take part in research surveys and receive points and offers).

Materials

The survey contained questions about participants' organization (size, industry, B.C. economic region where they were based, and their roles); past experiences and future intentions regarding hiring DHH workers; and perceived barriers and supports for hiring DHH workers.

Participants

To be eligible to complete the survey, participants' organizations had to be based in B.C., and participants had to have hiring authority in their roles at their organizations. Data quality measures were used to screen for incomplete, low-quality or otherwise invalid responses, including attention-check items in the survey, as well as Qualtrics' built-in fraud detection variables (which are intended to flag duplicate responses as well as potential bots). After data cleaning, 196 respondents were included in the data set.

Data Analysis

The survey data were analyzed to address research questions 2 (experiences and intentions of employers in B.C. regarding the hiring and employment of DHH workers) and 3 (the primary barriers to labour market equity faced by DHH employees). Descriptive statistics were produced summarizing the size of organizations, industries, and respondents' job roles (e.g., Executive, manager, etc.). Additionally, we summarized the most important supports identified by employers for mitigating and overcoming barriers to hiring DHH workers based on the rankings respondents assigned to the available choices using a weighted average.

To determine whether organizational factors such as size and industry are predictive of employers' intentions and experiences hiring DHH workers, chi-square analyses were conducted.

Qualitative Data (Interviews and Focus Groups)

Methods

Brief demographic screener surveys were administered to all prospective participants (including DHH workers, ASL interpreters, and employers) prior to participating in the focus groups to assess demographic characteristics and strive for diverse representation among focus group participants.

All participants reviewed and signed a Letter of Information and Consent form before participating in a focus group. To ensure the Letter of Information and Consent was accessible and delivered in participants' preferred language, participants could choose to receive it in English or ASL (via a recording). Participants were also offered the option to submit their consent electronically via a digital signature or a video recording that captures their signed consent.

Semi-structured data collection was used to collect data with participants. Recruitment and scheduling constraints meant that the majority of employer data collection, as well as some ASL interpreter and jobseeker data collection, took place in an interview-style format (i.e., through one-on-one interviews), rather than in the focus group setting. Three in-person focus groups took place at the Wavefront Centre

for Communication Accessibility, including one group for Deaf participants, one for Deaf-Blind participants, and one for Hard of Hearing participants. All other data collection activities took place virtually (via Zoom).

Methodological approaches to obtaining informed consent and conducting research with Deaf-Blind participants followed Wittich et al.'s (2023) approach,[33] such that the research process was initiated by the research team and mediated by a community partner and/or other representative, who were provided with the eligibility criteria and assisted in reaching potential participants, as well as supported the coordination of potential Deaf-Blind participants and their communication facilitators.

Employer and interpreter focus group participants were compensated with a $50 gift card for participating in a 90-minute focus group, and DHH workers were compensated with a $100 gift card for participating in an up to 180-minute focus group.

Materials

We conducted 90-minute semi-structured interviews and focus groups with ASL interpreters to gain better understanding on the barriers to providing comprehensive access to interpreter services, the role interpreters occupy as 'labour market liaisons' for DHH workers, and the barriers workers perceive to labour market attachment for the DHH community.

Up to 180 minutes were allotted for the DHH worker focus groups to allow for time taken to interpret or to read captions; to provide a break period for participants and supporting interpreters (if present); and in keeping with research finding that lengthier discussion periods – allowing time for establishing context through visual-gestural language and storytelling – are advantageous when conducting focus groups with participants who use signed language.**Error! Bookmark not defined.**

Interview guides focused on job search experiences, workplace experiences, career progression, sociodemographic identity, and supports and policy recommendations (for DHH jobseekers); perspectives on the interpreting profession, how to support DHH workers, and recommendations for policy and practice (for ASL interpreters); and hiring processes and experiences, challenges, and recommendations (for employers).

Participants

Our participation targets were 30 DHH jobseekers, 20 ASL interpreters, and 20 employers. We experienced significant challenges recruiting all participant groups, but particularly employers and ASL interpreters. In total, 26 DHH jobseekers, 6 ASL interpreters, and 4 employers took part in qualitative data collection activities.

Data Analysis

Focus group facilitators took detailed field notes (i.e., summarizing participant responses and overall impressions of the focus group) to enable early themes to be identified, and to flag potential methodological challenges.

To analyze these data, two research staff members reviewed a selection of focus group/interview transcripts to develop a list of initial codes for each of the three participant groups. Through discussion, a final list of codes was agreed upon by both staff. Focus group and interview transcripts were coded using NVivo software, and the staff conducted a thematic framework analysis of coded data. Framework

analysis involves the creation of a 'framework' or 'matrix' of themes identified in transcript data. These matrices hold summaries of the data as well as illustrative direct quotes, where relevant. The researchers ensured the validity of the data and rigour of the analysis by cross-comparing the coding of themes with each other, as well as presenting both supporting cases and 'negative cases' (i.e., cases which contradict the emerging theme).

Phase 3 (Knowledge Mobilization)

In phase three, we are using the knowledge generated through our research with employers, DHH workers, and interpreters to inform the creation of resources and tools that can be used to support labour market participation for the DHH community in B.C. Per the iKT model, knowledge users (e.g., policymakers, advocates, DHH community members) were engaged throughout the *Closing the gap* project and their input is being solicited to select and shape the resources that will be most valuable to our target audiences.

The content of the resources in preparation is summarized in the section titled Knowledge Mobilization and Next Steps.

Findings

Intersectional Analysis (Phase 1)

To address research questions 1a and 1b, we 1) summarized descriptive data (i.e., crosstabulations) on the sociodemographic characteristics of the DHH community as they relate to labour market attachment outcomes, and 2) computed regression models to determine significant sociodemographic predictors of these outcomes for the DHH community.

Of particular note were the findings that older age, as well as more severe disability-related barriers, were both associated with a greater likelihood of employment. The weak but significant interactive effect of age and disability severity scores on employment status, as well as the significant main effects of these variables suggest a complex relationship between age, experience of d/Deafness or hearing loss, and access to employment. Initially, we suggested that the main effect of older age on employment could be driven by factors like longer career tenures and larger professional networks; that is, age may be acting as a proxy for work experience. However, the inclusion of the interaction term suppressed the effects of age, which suggests age's influence on employment is linked with disability severity scores as assessed by the DSQ (i.e., the degree and frequency of barriers to hearing).[iii]

[iii] Deafness is not equated with disability by all members of the DHH community; however, due to the way the data is captured by the DSQ in the CSD, Deaf individuals are likely assigned to the category of severe hearing-related disability. The communication resources and supports needed by members of the DHH community to access employment are varied, and many individuals who are Deaf may primarily communicate in ASL and thus require the support of an ASL interpreter in the workplace. Conversely, many individuals categorized as having 'less severe' hearing-related disability may also be those who are less likely to use ASL as their primary language, and thus require different types of accommodations.

We had also initially thought that the influence of disability severity – which in the main effects model was significant and positive (i.e., linked to an increased likelihood of employment) – could have reflected the fact that many respondents with high scores on this variable are Deaf and may have stronger ties with the Deaf community, which could in turn be related to greater access to specific employment networks, community services, and accessibility supports. However, the descriptive statistics show employment outcomes are lowest among those with the highest disability severity (13%), and **on introducing the interaction term, the direction of the main effects of disability severity flipped**, indicating that a higher degree of hearing loss and/or d/Deafness is negatively related to employment access. The significant but small effect of the interaction suggests that **with increasing age, the negative impact of disability severity weakens.** That is, workers who are older *and* have a higher degree of hearing loss or who are d/Deaf have better employment outcomes than younger workers who have the same degree of hearing loss or d/Deafness. It is important to note, however, that the relatively small sample sizes of the regression analyses[iv] make interpretation more challenging. Regression coefficients can fluctuate greatly when changes are introduced (e.g., the inclusion of the interaction term) when sample sizes are small. Repeating these analyses with a larger sample (nation-wide data) in future research would improve the validity of these estimates.

There are a number of possible explanations for this complex pattern of results. Older workers with higher degrees of hearing loss or who are d/Deaf may benefit from a combination of factors that younger workers do not have, including accumulated career experience, more well-developed self-advocacy and coping strategies such as awareness of employment rights and available workplace accommodations, and, for d/Deaf workers, greater ties to the Deaf community and access to resources and networks. Retention may be another factor, such that **employers may be more willing to retain older DHH workers and to provide workplace communication supports** for those with significant hearing loss or d/Deafness because these employers value their experience and institutional knowledge. Conversely, younger DHH workers with significant hearing loss or d/Deafness could face challenges getting their 'foot in the door'. **The dual discrimination of ableism and ageism may negatively influence employers' perceptions of young DHH adults with significant hearing loss or who are d/Deaf.** There is research to suggest that youth with disabilities experience uniquely damaging stigma owing to societal expectations about young people's health, independence, and activity levels.[34] It is possible this discrimination is even more salient for young workers with higher degrees of hearing loss and d/Deafness. Younger DHH individuals may face more significant barriers to labour market entry, suggesting a need for better early career supports.

Trends in occupation and industry over- and under-representation were observed along intersecting sociodemographic lines, although the findings were mixed. Of note are the findings that educational attainment was associated a lower likelihood of employment in sales and service and trades occupations, LGBTQ identity was associated with lower likelihood of employment in management, business, science, and arts occupations, and co-occurring developmental disability was associated with a greater likelihood of employment in sales and service roles. Outcomes for industry of employment were challenging to interpret, as many categories had to be collapsed to meet minimum cell sizes for export. These analyses should be repeated with a larger sample (nation-wide data) in future research.

[iv] We are unable to report exact sample sizes due to the RDC's confidentiality requirements for outputs.

Meaningful patterns were observed for income along gendered lines. DHH women reported lower incomes than men, with women less likely to earn in the range of $80,000-$100,000 than men, suggesting intersecting influences on wage disparities.

The findings from the descriptive statistics in combination with the regression analyses suggest that gender and sexual identity, racialized group membership, and the presence of certain co-occurring disabilities affect employment outcomes for DHH jobseekers. In particular, women and racialized DHH workers as well as those with co-occurring seeing disabilities are much less likely to earn high incomes. DHH workers with mobility disabilities face severe barriers to employment, with very low employment rates compared to DHH workers without mobility disabilities (16% versus 50%). LGBTQIA+ DHH workers are more likely to work part-time.

Canadian Survey on Disability (2022)

Labour Force Status

The analysis of employment outcomes for DHH individuals revealed significant effects for several sociodemographic predictors, indicating employment outcomes within the DHH community vary along sociodemographic lines. The pseudo R^2 value suggests that the included sociodemographic predictors account for about 25.6% of the variability in employment status.

For employment status, age was a significant predictor, with participants aged 55+ significantly more likely to be employed than unemployed, with an odds ratio (OR) of 8.04, suggesting that age – perhaps as a proxy for experience in the labour market – is a positive factor for employment within the DHH community.

Disability severity at the highest level was another significant predictor. Unexpectedly, DHH individuals experiencing the most severe disabilities were more likely to be employed. This contrasts with the typically lower employment outcomes experienced by those with more severe disability-related barriers. The odds of being employed were approximately 3.5 times higher for those with more severe disability-related barriers (OR = 3.49). Mobility disability was also associated with increased employment likelihood (OR = 2.49).

Table 1. Logistic regression of DLFSTAT (Employment Outcome)

Predictor	b	SE	Z ratio	Probability	Odds ratio
(Intercept)	-1.37	0.78	-1.76	0.079	0.25
Age Group (25 – 34)	-0.225	0.84	-0.27	0.790	0.80
Age Group (35 – 44)	-0.14	0.81	-0.18	0.861	0.87
Age Group (45 – 54)	-0.12	0.84	-0.14	0.890	0.89
Age Group (55+)	**2.08**	**0.74**	**2.81**	**0.005**	**8.04**
Visible Minority	-0.12	0.50	-0.25	0.805	0.88
Disability Severity (Moderate)	0.17	0.40	0.43	0.669	1.19

Disability Severity (Severe)	0.11	0.47	0.23	0.817	1.11
Disability Severity (Very Severe)	**1.25**	**0.62**	**2.01**	**0.044**	**3.49**
Gender	-0.07	0.27	-0.26	0.798	0.93
LGBTQ	-0.13	0.51	-0.25	0.801	0.88
Immigrant Status	0.19	0.39	0.48	0.632	1.21
Indigeneity	0.63	0.77	0.82	0.413	1.88
Visual Disability	-0.41	0.30	-1.37	0.171	0.67
Mobility Disability	**0.91**	**0.34**	**2.65**	**0.008**	**2.49**
Flexibility Disability	-0.10	0.36	-0.28	0.783	0.90
Memory Disability	0.19	0.37	0.50	0.617	1.20
Mental Health Disability	-0.36	0.34	-1.07	0.283	0.70

Model X^2	= 126.73
Pseudo R^2	= 0.2562

Notes: significant predictors ($p < 0.05$) are bolded.

Employment Quality

LGBTQ+ status was a significant predictor of obtaining full- versus part-time work. The odds of full-time employment for DHH individuals identifying with the LGBTQ+ community were reduced by 84%.

DHH individuals with the highest level of educational attainment (i.e., at the graduate or professional degree level) were less likely to work full-time, although this effect approached, but did not reach, significance, and must therefore be interpreted with caution.

Table 2. Logistic regression of DFTPTE (Full-Time / Part-Time Employment)

Predictor	b	SE	Z ratio	Probability	Odds ratio
(Intercept)	2.96	1.85	1.60	0.110	19.31
Gender	0.58	0.52	1.10	0.271	1.78
Age Group (25 - 34)	1.97	1.32	1.49	0.137	7.15
Age Group (35 - 44)	0.53	1.21	0.44	0.662	1.70
Age Group (45 - 54)	0.32	1.30	0.24	0.808	1.37
Age Group (55 +)	-1.06	1.15	-0.92	0.358	0.35
Educational Attainment (High School Diploma/Certificate)	-1.85	1.45	-1.27	0.204	0.16

Educational Attainment (Trade Certificate/Diploma)	-1.57	1.43	-1.10	0.271	0.21
Educational Attainment (College, CEGEP or other Certificate/Diploma)	-2.55	1.47	-1.73	0.083	0.08
Educational Attainment (University Certificate/Diploma)	-1.62	1.66	-0.98	0.330	0.20
Educational Attainment (Bachelor's Degree)	-1.51	1.54	-0.98	0.325	0.22
Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	-2.88	1.56	-1.85	0.064	0.06
LGBTQ	**-1.82**	**0.84**	**-2.15**	**0.032**	**0.16**
Visible Minority	-0.28	0.73	-0.38	0.706	0.76
Immigrant Status	1.50	0.98	1.52	0.128	4.47
Visual Disability	0.43	0.58	0.75	0.452	1.54
Mobility Disability	-0.70	0.60	-1.16	0.245	0.50
Flexibility Disability	0.29	0.64	0.45	0.650	1.34
Pain Disability	-1.12	0.72	-1.56	0.119	0.32
Learning Disability	-0.42	0.82	-0.51	0.608	0.66
Developmental Disability	-21.33	1284.86	-0.02	0.987	0.00
Memory Disability	-0.48	0.79	-0.60	0.546	0.62
Mental Health Disability	0.44	0.66	0.67	0.504	1.55
Disability Severity (Moderate)	1.63	0.94	1.74	0.082	5.11
Disability Severity (Severe)	0.53	0.99	0.54	0.591	1.70
Disability Severity (Very Severe)	1.11	1.52	0.73	0.465	3.03
Model X^2 = 37.262					
Pseudo R^2 = 0.2413					

Notes: significant predictors ($p < 0.05$) are bolded.

Permanent or Temporary Work

The pseudo R^2 value for this variable suggests a relatively strong model fit, with about 35% of the variance in permanent versus temporary employment explained by the sociodemographic predictors. However, co-occurrence of flexibility-related disability was the sole significant predictor for permanent

versus temporary work, with the odds of permanent employment for these respondents reduced by approximately 95% compared to DHH individuals without a co-occurring flexibility disability.

Gender approached marginal significance (p = 0.092), with men being 4.7 times more likely to hold permanent positions compared to women.

Table 3. Logistic regression of PW_05 (Permanent / Temporary Employment)

Predictor	b	SE	Z ratio	Probability	Odds ratio
(Intercept)	19.88	3113.50	0.01	0.995	432019130.7
Gender	1.56	0.92	1.69	0.092	4.7376
Age Group (25 - 34)	-0.92	1.52	-0.60	0.545	0.3992
Age Group (35 - 44)	-1.05	1.43	-0.74	0.461	0.3498
Age Group (45 - 54)	-0.92	1.75	-0.53	0.599	0.3994
Age Group (55 +)	0.88	1.57	0.56	0.576	2.4048
Educational Attainment (High School Diploma/Certificate)*	-18.39	3113.50	-0.01	0.995	0
Educational Attainment (Trade Certificate/Diploma)*	-15.53	3113.50	-0.01	0.996	0
Educational Attainment (College, CEGEP or other Certificate/Diploma)*	-15.17	3113.50	0.00	0.996	0
Educational Attainment (University Certificate/Diploma)*	2.84	4423.66	0.00	1.000	17.1691
Educational Attainment (Bachelor's Degree)*	-18.54	3113.50	-0.01	0.995	0
*Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)**	*-17.63*	*3113.50*	*-0.01*	*0.996*	*0*
LGBTQ	-1.65	1.20	-1.38	0.168	0.1917
Visible Minority	-1.15	1.09	-1.06	0.291	0.3158
Immigrant Status	1.36	1.50	0.91	0.363	3.8991
Visual Disability	1.19	0.97	1.22	0.221	3.2902
Mobility Disability	-0.87	1.02	-0.86	0.392	0.4186
Flexibility Disability	**-2.92**	**1.29**	**-2.26**	**0.024**	**0.0538**
Learning Disability	0.31	1.08	0.29	0.775	1.362

Mental Health Disability	-0.57	1.03	-0.56	0.579	0.5651
Disability Severity (Moderate)	-0.03	1.40	-0.02	0.985	0.9745
Disability Severity (Severe)	1.43	1.33	1.07	0.282	4.1899
Disability Severity (Very Severe)	0.71	1.84	0.39	0.699	2.0338
Model X^2	= 30.941				
Pseudo R^2	= 0.3496				

Note: significant predictors ($p < 0.05$) are bolded.

**Predictors with extreme coefficients, excessively large standard errors, or zero-valued odds ratios are not interpreted due to insufficient data or instability in the model estimates, despite conducting collinearity and goodness-of-fit tests prior to analysis.*

Occupation

Notable trends were identified regarding overrepresentation and underrepresentation across occupation types. The included predictors explained about 42.7% of the variability in occupational outcomes.

Men were significantly more likely than women to work in Management, Business, Science, Arts-related occupations, with the odds being about 21.7 times higher for men in this occupational category. Men were also significantly more likely than women to work in occupations related to trades, service, and manual labour (categories 7, 8, and 9), with the odds about 22.3 times higher compared to women in the DHH community.

DHH individuals aged 25-34 were overwhelmingly more likely to work in all the occupational categories, compared to the reference group (under 25). These effects were not found for the older age brackets. Educational attainment levels above the reference group category (lowest educational attainment) were also significant across all occupational categories, except for Sales and Service occupations (category 6), and occupations related to trades, service, and manual labour (categories 7, 8, and 9). These findings emphasize the critical role of education in career advancement.

DHH respondents that identified with the LGBTQ+ community were overwhelmingly less likely to work in Management, Business, Science, and Arts-related occupations compared to their peers.

DHH individuals with co-occurring developmental disabilities were more likely to work in Sales and Service occupations and were significantly less likely to work in occupations related to Natural Resources, Construction, and Maintenance.

Table 4. Significant Predictors – Logistic regression of DOCC21_1 (Occupation – Broad categories)

Predictor	Outcome Level	b	SE	Z ratio	Probability	Odds ratio
(Intercept)	Category 2	-10.18	2.48	-4.10	0.000	0.00
(Intercept)	Categories 3, 4, 5	-11.82	1.81	-6.52	0.000	0.00
Gender	Category 2	3.08	1.23	2.49	0.013	21.71
Gender	Categories 7, 8, 9	3.11	1.08	2.86	0.004	22.31
Age Group (25 - 34)	Category 2	13.23	1.99	6.65	0.000	554151.20
Age Group (25 - 34)	6	14.05	1.12	12.59	0.000	1267083.38
Age Group (25 - 34)	Categories 3, 4, 5	15.75	1.18	13.32	0.000	6925837.79
Age Group (25 - 34)	Categories 7, 8, 9	15.91	1.35	11.82	0.000	8149124.97
Educational Attainment (High School Diploma/Certificate)	Category 2	11.43	1.22	9.40	0.000	91793.92
Educational Attainment (High School Diploma/Certificate)	Categories 3, 4, 5	13.39	0.69	19.53	0.000	654260.01
Educational Attainment (Trade Certificate/Diploma)	Category 2	-10.62	0.00	-82718945.73	0.000	0.00
Educational Attainment (Trade Certificate/Diploma)	Categories 3, 4, 5	12.98	0.76	17.11	0.000	433202.07
Educational Attainment (College, CEGEP or other Certificate/Diploma)	Category 2	14.88	1.12	13.29	0.000	2903747.17
Educational Attainment (College, CEGEP or other Certificate/Diploma)	Categories 3, 4, 5	14.12	0.81	17.51	0.000	1355576.07
Educational Attainment (University Certificate/Diploma)	Category 2	12.42	1.60	7.75	0.000	247993.16
Educational Attainment (University Certificate/Diploma)	Categories 3, 4, 5	15.64	1.36	11.51	0.000	6187221.34
Educational Attainment (Bachelor's Degree)	Category 2	12.36	1.22	10.09	0.000	232857.61
Educational Attainment (Bachelor's Degree)	Categories 3, 4, 5	13.26	0.81	16.36	0.000	574912.37
Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	Category 2	13.53	1.23	11.00	0.000	755355.63

Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	Categories 3, 4, 5	15.59	0.88	17.68	0.000	5914474.28
Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	Categories 7, 8, 9	-26.81	0.00	-1458133014.41	0.000	0.00
Developmental Disability	Category 2	-1.03	0.00	-8224439.52	0.000	0.36
Developmental Disability	Category 6	15.53	0.00	2173410.95	0.000	5529412.75
Developmental Disability	Categories 3, 4, 5	-2.69	0.00	-28090394.46	0.000	0.07
Developmental Disability	Categories 7, 8, 9	-4.82	0.00	-66696935.89	0.000	0.01
Memory Disability	Categories 3, 4, 5	-3.40	1.46	-2.33	0.020	0.03
Model X^2 = 198.33						
Pseudo R^2 = 0.4274						

Notes: The complete table containing the logistic regression results for occupations can be found under Appendix A.

Industry/Sector

The industry analysis revealed significant differences in DHH representation across collapsed categories. The pseudo R^2 of this model indicates a strong fit, explaining approximately 44.5% of the variance in industry outcomes.

Across all age groups (25-55+), DHH respondents were significantly more likely to work in Trade, Transport, and Utilities compared to the baseline age group (youngest age bracket). DHH individuals with higher educational attainment were consistently less likely to work in Retail, Hospitality, and Food Services industries. Educational attainment at the trade certificate or diploma level, and at the bachelor's degree level were significant predictors of lower likelihood of being employed in these industries, though other educational attainment levels approached significance.

Men were significantly more likely to work in Manufacturing, Construction, and Natural Resources, with the odds being 20 times higher than for women.

Respondents with pain disability were significantly less likely to work in Retail, Hospitality, and Food Services.

Table 5. Significant Predictors – Logistic regression of DIND22_1 (Industry – Sectors)

Predictor	Outcome Level	b	SE	Z ratio	Probability	Odds ratio

(Intercept)	Transportation and Warehousing	-6.98	1.98	-3.53	0.000	0.00
Age Group (25 - 34)	Transportation and Warehousing	9.65	1.25	7.71	0.000	15573.12
Age Group (35 - 44)	Transportation and Warehousing	8.30	1.53	5.42	0.000	4005.62
Age Group (45 - 54)	Transportation and Warehousing	8.16	1.27	6.43	0.000	3505.50
Age Group (55 +)	Transportation and Warehousing	9.17	0.92	10.00	0.000	9641.43
Educational Attainment (Trade Certificate/Diploma)	Retail, Hospitality, and Food Services	-5.52	2.56	-2.16	0.031	0.00
Educational Attainment (Bachelor's Degree)	*Retail, Hospitality, and Food Services*	*-39.00*	*0.00*	*-2111286360.74*	*0.000*	*0.00*
Immigrant Status	Resource Extraction, Construction, and Manufacturing	-4.96	2.29	-2.17	0.030	0.01
Flexibility Disability	Retail, Hospitality, and Food Services	3.93	1.68	2.34	0.019	50.84
Pain Disability	Retail, Hospitality, and Food Services	-5.27	1.98	-2.66	0.008	0.01
Pain Disability	Finance, Real Estate, and Administrative Services	-4.40	1.65	-2.67	0.008	0.01
Developmental Disability	Other Services	-8.47	0.65	-12.93	0.000	0.00
Developmental Disability	Information, Arts, Education, and Healthcare	-7.15	1.29	-5.56	0.000	0.00
Disability Severity (Moderate)	Public Administration	4.28	1.85	2.31	0.021	72.05
Disability Severity (Moderate)	Finance, Real Estate, and Administrative Services	5.53	2.02	2.74	0.006	253.07
Disability Severity (Very Severe)	Public Administration	7.88	3.12	2.53	0.012	2642.30

Model X^2 = 266.7

Pseudo R^2 = 0.4448

Notes: The complete table containing the logistic regression results for occupations can be found under Appendix B.

Income

Income analysis indicated significant disparities by age and identity. This model explains around 26% of the variance in income outcomes.

Older respondents (55+) were significantly more likely to be in the $40,000 to $50,000, and $50,000 to $60,000 income brackets, with their odds of being in these income brackets increasing by approximately 44 times and 41 times, relative to the reference age bracket (youngest). DHH respondents that also identified as visible minorities were significantly less likely to earn between $50,000 to $60,000 compared to their peers, with their odds reduced by more than 94%. Men were significantly more likely to earn $80,000 to $90,000, and $90,000-$100,000, compared to women, with the odds of men's incomes falling within these brackets 7 to 9 times greater than women's.

Table 6. Significant Predictors – Logistic regression of Income_Cat (Income Brackets)

Predictor	Outcome Level	b	SE	Z ratio	Probability	Odds ratio
Gender	80k - 90k	1.98	1.00	1.98	0.048	7.27
Gender	90k - 100k	2.22	1.12	1.98	0.048	9.24
Age Group (25 - 34)	90k - 100k	-4.50	0.00	-8460.02	0.000	0.01
Age Group (25 - 34)	100k+	-6.64	0.00	-209191.74	0.000	0.00
Age Group (35 - 44)	10k - 20k	-6.27	0.05	-127.36	0.000	0.00
Age Group (35 - 44)	20k - 30k	-7.17	0.03	-241.25	0.000	0.00
Age Group (35 - 44)	70k - 80k	-2.67	0.01	-507.38	0.000	0.07
Age Group (45 - 54)	80k - 90k	-9.02	0.00	-3107.36	0.000	0.00
Age Group (55 +)	40k - 50k	3.79	1.69	2.24	0.025	44.44
Age Group (55 +)	50k - 60k	3.73	1.64	2.28	0.023	41.54
LGBTQ	*100k+*	*-14.57*	*0.00*	*-7129.59*	*0.000*	*0.00*
Visible Minority	50k - 60k	-2.85	1.41	-2.02	0.044	0.06
Visual Disability	80k - 90k	2.31	1.02	2.27	0.023	10.09

Model X^2	= 402.13
Pseudo R^2	= 0.2587

Notes: The complete table containing the logistic regression results for occupations can be found under Appendix C.

Analysis of Interaction Terms

An interaction term between age and disability severity was created to investigate the significant predictors, as the findings for the effects of disability severity were counterintuitive. This interaction term was created using the original continuous age variable (INTAGE) and the 4-level disability severity variable (DCLASS). The product of these two predictors was computed and included as a predictor in the regression models to assess whether age and scores on the disability severity indicator interact to influence employment outcomes.

Importantly, the interpretation of disability severity scores for the DHH population has unique considerations. Disability severity as measured by the Disability Screening Questionnaire (DSQ) is derived from respondents' self-reported frequency and degree of limitations carrying out daily activities; in this context, activities related to hearing. As such, respondents who are d/Deaf are likely to report higher scores on this indicator, and respondents who are hard-of-hearing are likely to report comparatively lower scores.

To further understand the influence of age and disability severity scores, an interaction term was computed and included in the regression models for all outcome variables. The interaction term between age and disability severity had a small but statistically significant effect on labour force status, employment quality (permanent versus temporary), and income. In other words, the influence of disability severity on employment outcomes varied depending on age. However, the odds ratios in all cases were small (close to 1), indicating the influence on these employment outcomes was weak.

Labour Force Status

For the labour market outcome variable (DLFSTAT), the interaction term was significant, suggesting that the likelihood of being employed increases slightly as the product of age and disability severity increase. With the introduction of the interaction term between age and disability severity, the main effects of age were no longer significant, but disability severity remained significant, and the direction of the effects of disability severity were reversed.

In the main effects only model, significant predictors included Age Group (55 and older), disability severity at the Very Severe level, and the presence of mobility-flexibility disability. However, when the interaction term was included, age was no longer significant. This suggests that the original positive effect of age may have been capturing an underlying interaction between age and disability severity. Further, in the interaction model, disability severity at the Moderate, Severe, and Very Severe levels were statistically significant negative predictors of employment. This suggests that when the interaction between age and severity is considered, disability severity predicts barriers to employment, with the effects stronger as severity scores increase.

Table 7. Logistic regression of DLFSTAT (Employment Outcome) – Main Effects Only

Predictor	b	SE	Z ratio	Probability	Odds ratio
Age Group (55 and older)	2.08	0.74	2.81	0.005	8.04
Disability Severity (Very Severe)	1.25	0.62	2.01	0.044	3.49
Mobility Flexibility (Co-occurrence)	0.91	0.34	2.65	0.008	2.49

Model X^2	= 126.73
Pseudo R^2	= 0.2562

Employment Quality

The interaction term was statistically significant for the permanent/temporary employment variable (PW_05), with a positive estimate of 0.06 indicating the likelihood of holding a permanent job rather than a temporary one increases by about 6% as the product of age and disability severity increase.

Table 8. Logistic regression of PW_05 (Permanent / Temporary Employment)

Predictor	b	SE	Z ratio	Probability	Odds ratio
Interaction (Age and Disability Severity)	0.06	0.029	1.97	0.05	1.06
Model X^2 = 35.389					
Pseudo R^2 = 0.3999					

Income

The age by severity interaction was also found to be a significant predictor for the likelihood of occupying specific income brackets; specifically, all income deciles from 20k-30k to 70k-80k. The positive estimates indicate that as age and disability severity increase together, individuals are more likely to be in these income brackets compared to other income groups (i.e., those below 20k and above 80k), though the effects are weak (between 2-4% increased odds of earning within these brackets, with the strongest effect seen in the $20k - $30k and the 70k-80k income brackets).

Table 9. Significant Predictors – Logistic regression of Income_Cat (Income Brackets)

Predictor	Outcome Level	b	SE	Z ratio	Probability	Odds ratio
Interaction (Age and Disability Severity)	20k – 30k	0.04	0.01	3.37	< .001	1.04
Interaction (Age and Disability Severity)	30k – 40k	0.02	0.01	2.35	0.02	1.02
Interaction (Age and Disability Severity)	40k – 50k	0.04	0.01	3.20	< .001	1.04
Interaction (Age and Disability Severity)	50k – 60k	0.03	0.01	2.73	0.01	1.03
Interaction (Age and Disability Severity)	60k – 70k	0.03	0.01	2.28	0.02	1.03
Interaction (Age and Disability Severity)	70k – 80k	0.03	0.01	2.72	0.01	1.04
Model X^2 = 413.35						

Pseudo R^2 = 0.2659

Descriptive Statistics

To identify sociodemographic patterns in employment outcomes among the DHH population in B.C., descriptive statistical analysis was conducted using the R statistical software through RStudio. This report presents descriptive statistics on employment outcomes, focusing on significant predictors identified in the inferential analysis from Interim Report 1.

Following the regression modeling of our variables, we extracted the predictor variables that yielded significant p-values and created cross-tabulations of the respective outcome variables and significant predictor variables for the groups that met Statistics Canada's and the RDC's vetting requirements. To ensure the representativeness of the findings, the frequencies obtained were weighted using Statistics Canada's population weight variable. To protect confidentiality, these are reported as proportions.

To comply with RDC's confidentiality requirements, modifications were made to the categorization of certain variables. These adjustments were necessary to ensure the descriptive statistics adhered to the RDC's reporting policies, and as a result, some groupings differ from how they were presented in the regression models in Interim Report 1. Specifically:

- The income brackets were originally categorized in deciles up to $100,000, with an additional category for those earning $100,000+. For the descriptive analysis, adjustments were required when cross-tabulating income with other variables. Specifically, for crosstabulations with age groups, income brackets were adjusted to those earning less than $30,000, and those earning more than $30,000, while for other significant predictor variables, income brackets were adjusted to those earning less than $30,000, those earning between $30,000 and $70,000, and those earning more than $70,000.
- Age groups were initially categorized into the groups (1) Under 25; (2) 25 – 34; (3) 35 – 44; (4) 45 – 54; (5) 55 and older. However, to meet RDC vetting requirements, the revised groupings used for the descriptive analysis were (1) Under 44; (2) 45 – 54; (3) 55 and older.
- Originally, industries were classified as such: sectors 41 (wholesale trade), 48 (transportation), and 49 (warehousing) were combined; sectors 44 (retail trade), 45 (retail), and 72 (accommodation and food services) were combined; sectors 52 (finance and insurance), 53 (real estate and rental), and 56 (administrative and support services) were combined; sectors 51 (information and cultural industries), 71 (arts, entertainment, and recreation), 61 (educational services), and 62 (health care and social assistance) were combined; and sectors 11 (agriculture, forestry, fishing, and hunting, 21 (mining, quarrying, and oil and gas extraction), 23 (construction), and 33 (manufacturing) were combined. For the descriptive analysis, these groupings were further refined so that sectors 54 (professional, scientific, and technical services) and 81 (other services) were combined; sectors 44, 45, and 72 were combined; sectors 51, 71, 61, and 62 remained grouped together; sector 91 (public administration) was combined with the 52, 53, and 56 grouping; and the 41, 48, and 49 grouping was merged with the 11, 21, 23, 31, 32, and 33 grouping.

Labour Force Status

Among DHH individuals younger than 44 years old, 32% were not employed, and 68% were employed. Only 22% of those aged 55 and older were employed. The age group most likely to report employment was the 45 to 55 age group.

Employment rates decrease as severity scores increase. Among individuals with the lowest severity level, 52% were employed. This dropped to 35% for severity level 2, 41% for severity level 3, and 13% for severity level 4.

Additionally, employment rates were particularly low for DHH individuals with co-occurring mobility disabilities, with only 16% being employed, while 50% of DHH individuals without co-occurring mobility disabilities were employed.

Table 10. Descriptive Statistics for DLFSTAT (Employment Outcome)

Predictor	Not Employed	Employed
Age Group (44 and younger)	32%	68%
Age Group (45 – 55)	27%	73%
Age Group (55 and older)	78%	22%
Disability Severity (Mild)	45%	52%
Disability Severity (Moderate)	65%	35%
Disability Severity (Severe)	59%	41%
Disability Severity (Very Severe)	87%	13%
Mobility Disability (Co-occurrence)	84%	16%
No Mobility Disability (Co-occurrence)	50%	50%

Employment Quality

The only demographic variable that was a statistically significant predictor of full-time/part-time employment status (DFTPTE) was LGBTQIA+ identity. Among those who identified as part of the LGBTQIA+ community, 53% had full-time employment, compared to 69% of those who did not identify with the community.

Table 11. Descriptive Statistics for DFTPTE (Full-Time/Part-Time Employment)

Predictor	Not Employed	Employed
LGBTQIA+	47%	53%
Not LGBTQIA+	31%	69%

Industry

We created cross-tabulations for industry of employment among individuals with flexibility and pain-related disabilities, the variables which significantly predicted industry.

Among employed DHH individuals with flexibility disabilities, 14% worked in professional, scientific, technical, and other services, 19% worked in retail trade and accommodation and food services, 17% worked in information and cultural industries, arts, entertainment, recreation, educational services, and healthcare and social assistance, 13% worked in public administration, finance, real estate, and administrative support services, and 37% worked in wholesale trade, transportation, warehousing, agriculture, mining, construction, and manufacturing. For DHH respondents who were employed and reported pain-related disabilities, 17% were employed in professional and technical services, 14% in retail and service industries, 22% in education, healthcare, arts, and cultural industries, 14% in public administration and financial services, and 33% in trade, transportation, and resource-based industries.

Table 12. Descriptive Statistics for Industry

Predictor	Industry Group 1	Industry Group 2	Industry Group 3	Industry Group 4	Industry Group 5
Flexibility Disability (Co-occurrence)	14%	19%	17%	13%	37%
Pain-related Disability (Co-occurrence)	17%	14%	22%	14%	33%

Industry Group 1: Professional, scientific, technical, and other services.

Industry Group 2: Retail trade and accommodation and food services

Industry Group 3: Information and cultural industries, arts, entertainment, recreation, educational services, and healthcare and social assistance

Industry Group 4: Public administration, finance, real estate, and administrative support services

Industry Group 5: Wholesale trade, transportation, warehousing, agriculture, mining, construction, and manufacturing

** A more detailed breakdown of these groupings can be found in the Analytic Plan.*

Income

Income was significantly influenced by multiple sociodemographic factors. For this cross-tabulation, age was collapsed into three groups and income into two groups to meet vetting requirements.

The majority of individuals across all age groups earned more than $30,000, but the proportion of those earning less than $30,000 increases as age increases. Those aged 55 and over were most likely to earn less than $30,000, and those aged 44 and younger were the most likely to earn more than $30,000.

Table 12. Descriptive Statistics for Income Groups – Age Group

Predictor	Less than $30k	More than $30k
Age Group (44 and younger)	36%	64%
Age Group (45 – 55)	38%	62%
Age Group (55 and older)	42%	58%

For other significant predictors of income, including the co-occurrence of seeing disability, visible minority status, and gender, income was categorized into three groups: below $30,000, between $30,000 and $70,000, and above $70,000.

DHH individuals with co-occurring seeing disabilities were less likely to be in the highest income group, with 45% earning below $30,000, 37% earning between $30,000 and $70,000, and 19% earning above $70,000.

DHH individuals that identified as visible minorities were also less likely to be in the highest income group, with 48% earning below $30,000, 40% earning between $30,000 and $70,000, and only 12% earning above $70,000.

Men+ were more likely to report higher incomes. 35% of Men+ earned below $30,000, 43% earned between $30,000 and $70,000, and 21% earned above $70,000. In contrast, 46% of women earned below $30,000, 42% earned between $30,000 and $70,000, and only 12% earned above $70,000.

Table 13. Descriptive Statistics for Income Groups – Other Predictors

Predictor	Less than $30k	$30k to $70k	More than $70k
Seeing Disability (Co-occurrence)	45%	37%	19%
Visible Minority	48%	40%	12%
Gender (Men+)	35%	43%	21%
Gender (Women+)	46%	42%	12%

CCRW Employment Services

Employment outcomes

Of N = 107 records of DHH jobseekers using CCRW Employment Services, 53 (49.5%) found employment. This is slightly lower than the average employment rate for CCRW Employment Services clients with all other disability types over the same period (~53%).

Below are crosstabulations showing success outcomes for DHH clients across Canada for whom we have service outcome data, by sociodemographic indicators. Here, “successful outcome” refers to clients who

secured employment during or at the conclusion of service. Conversely, “not successful outcome” refers to clients for whom we do not have a record of employment. This table is updated from the results presented in the Literature Review, containing client records from the intervening period.

Because clients may decline to respond to sociodemographic questions, sample sizes vary slightly across these categories, between n = 70 to n = 80. Accordingly, the percentages are calculated as a proportion of the available data. Exact sample sizes per category are withheld to protect client confidentiality.

	Gender (52.5% Women, 46.3% Men, 1.3% Non-binary or other gender identity*)	
Women	**Successful**	44.6%
	Not successful	55.4%
Men	**Successful**	55.3%
	Not successful	44.7%
	2SLGBTQIA+ (5.7%)	
2SLGBTQIA+ identity	**Successful**	100%
	Not successful	0.0%
Not 2SLGBTQIA+	**Successful**	45.6%
	Not successful	54.4%
	Member of Visible Minority Group (18.0%)	
Member of visible minority group	**Successful**	55.6%
	Not successful	44.4%
Not member of visible minority group	**Successful**	49.4%
	Not successful	50.6%
	Black Canadian (6.3%)	
Black Canadian	**Successful**	60.0%
	Not successful	40.0%
Not Black Canadian	**Successful**	50.5%
	Not successful	49.5%
	New Immigrant (4.9%)	
New Immigrant	**Successful**	75.0%
	Not successful	25.0%
Not New Immigrant	**Successful**	49.0%
	Not successful	51.0%
	Indigenous (9.0%)**	
Indigenous	**Successful**	44.4%
	Not successful	55.6%

Not Indigenous	**Successful**	51.1%
	Not successful	48.9%
	Completed High School (80.3%)	
Completed high school	**Successful**	56.6%
	Not successful	43.4%
Did not complete high school	**Successful**	25.0%
	Not successful	75.0%
	Low Income Household (51.4%)	
Low-income household	**Successful**	42.9%
	Not successful	57.1%
Not low-income household	**Successful**	55.3%
	Not successful	44.7%
	Member of Language Minority Community (13.0%)	
Language minority community member	**Successful**	25.0%
	Not successful	75.0%
Not member of language minority community	**Successful**	51.1%
	Not successful	48.9%
	Living in Rural or Remote Setting (16.3%)	
Rural/remote setting	**Successful**	52.9%
	Not successful	47.1%
Not in rural/remote setting	**Successful**	50.0%
	Not successful	50.0%
	Involuntarily NEET (23.0%)	
Involuntarily NEET	**Successful**	39.1%
	Not successful	60.9%
Not involuntarily NEET	**Successful**	51.3%
	Not successful	48.7%
	Low Literacy & Numeracy (19.5%)	
Low Literacy/Numeracy	**Successful**	50.0%

	Not successful	50.0%
No Low Literacy/Numeracy	**Successful**	50.6%
	Not successful	49.4%
	Prolonged Workforce Detachment (40.8%)	
Prolonged workforce detachment	**Successful**	42.5%
	Not successful	57.5%
No prolonged workforce detachment	**Successful**	55.7%
	Not successful	44.3%

Notes:
**Outcome data for non-binary DHH clients is withheld due to the small cell size in order to protect client confidentiality.*
***Indigeneity has been simplified for the purposes of this analysis to "yes" and "no", allowing for an inclusive analysis while acknowledging the diversity within the Indigenous community. Those represented under the "yes" figures belong to Indigenous groups including but not limited to Métis, Non-Status, Registered Off-Reserve, and Registered On-Reserve.*

Occupation & Industry

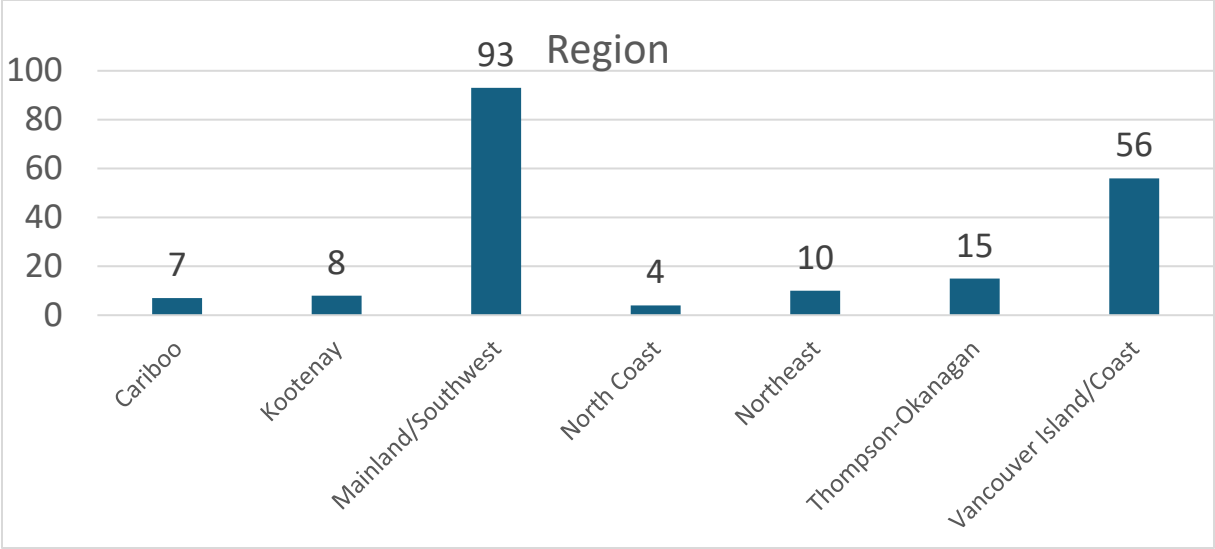
Disaggregated data (i.e., by sociodemographic indicators) on occupation and industry of employment for DHH clients with successful service outcomes is not available to report due to small sample size of the data set available.

The most frequent occupational categories reported were *Sales and service occupations*, *Business, finance and administration occupations*, *Occupations in education, law and social, community and government services,* and *Trades, transport and equipment operators and related occupations*. The most frequent industries reported were *Retail trade, Administrative and support*, *Accommodation and food services,* and *Healthcare and social assistance.*

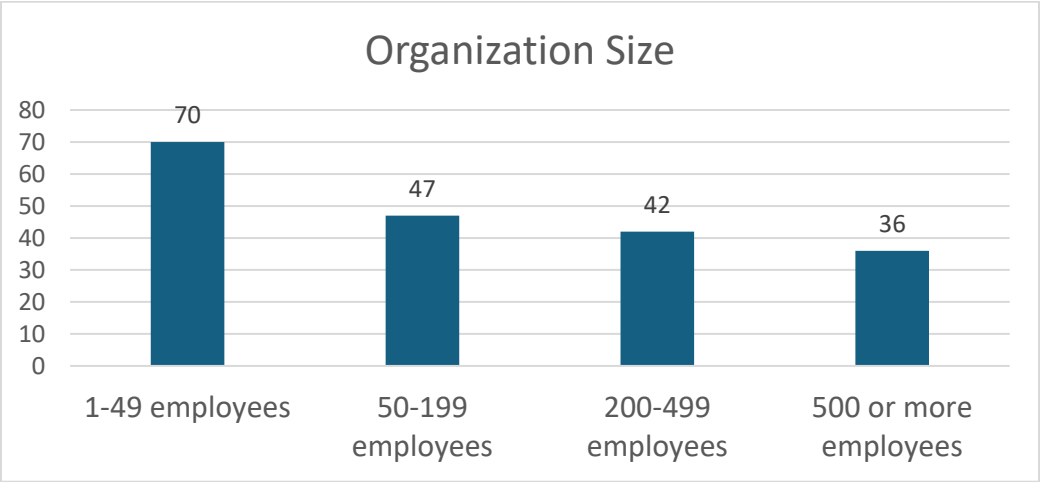
Employer Survey (Phase 2)

Organization Characteristics

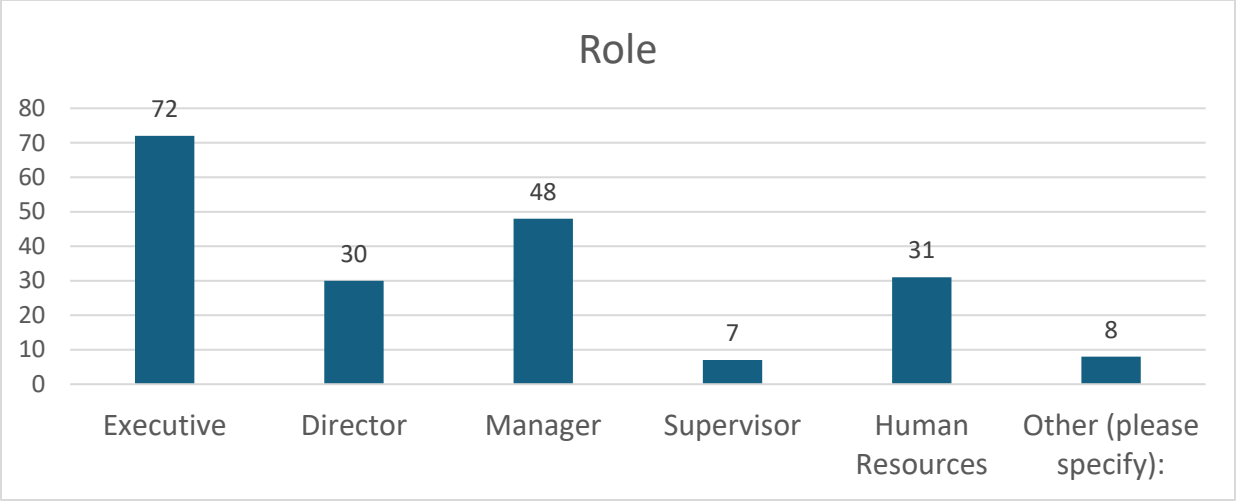
The majority (approximately 48%) of employers were based in the Mainland/Southwest region of B.C., followed by the Vancouver Island/Coast region (29%). Northern and central regions, as well as Kootenay, were comparatively underrepresented, with no employers selecting Nechako, North Coast comprising about 2% of the sample, Kootenay approximately 4%, Cariboo approximately 4%, and Northeast approximately 5%.



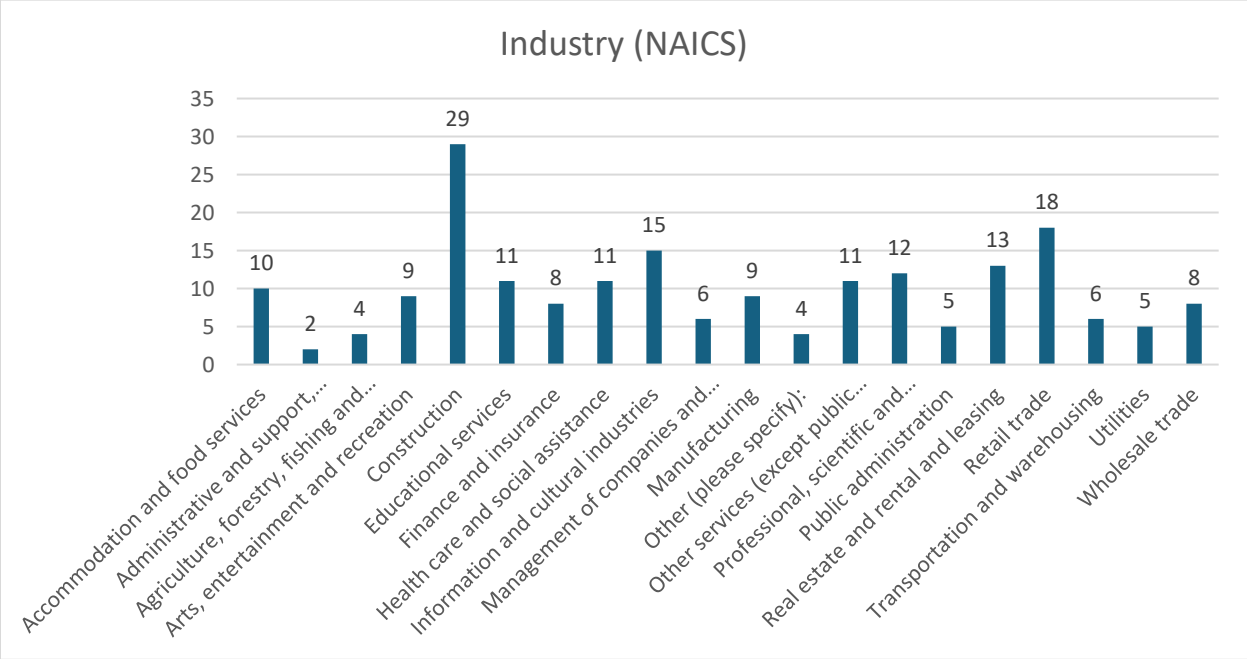
A diverse array of organization sizes were represented, from small (1-49 employees) to large enterprises (500+ employees). About 36% of the sample were small businesses, 24% had between 50 and 199 employees, 22% had between 200 and 499 employees, and 18% had 500 or more employees. As about 99% of businesses in Canada are considered SMEs, large enterprises were overrepresented in the sample relative to their prevalence in the labour market.



Many participants were in Executive-level roles (about 37%). Among those who selected the 'other' option, several described themselves as Owner-Operators; another was a faculty department chair, and another was a technician.

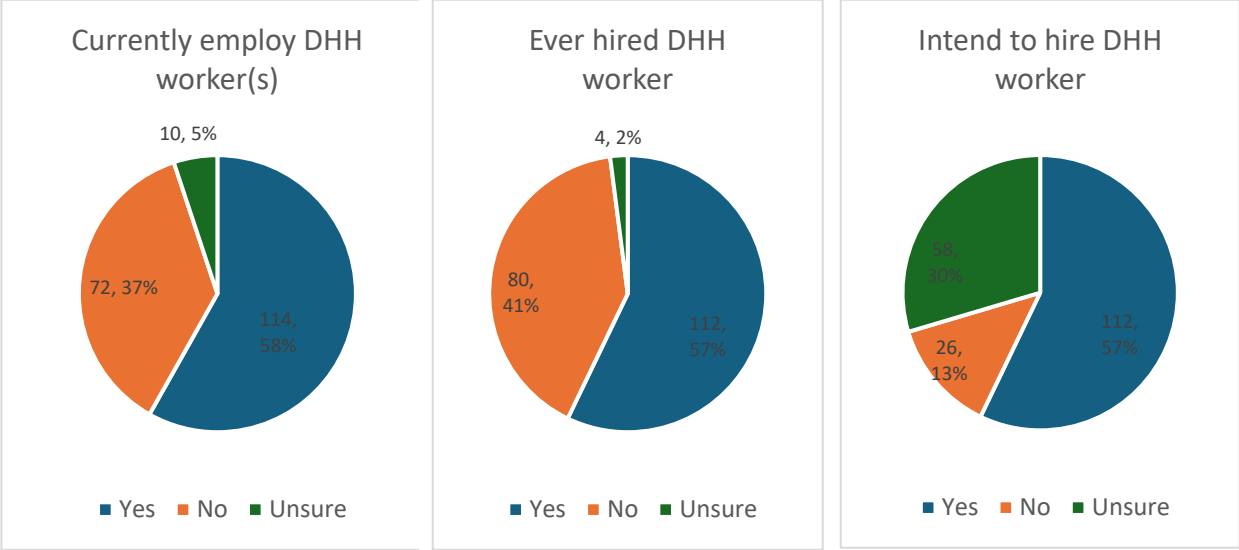


A diverse array of industries were represented. Interestingly, about 15% of the sample said their organization was in the construction industry. Other well-represented industries included retail trade; information and cultural industries; real estate and leasing; professional, scientific and technical; educational services, and healthcare and social assistance. Fourteen respondents selected "other." The majority (seven) of these were manually recoded to the category "Other services (except public administration)"; two responses of "Information Technology" were recoded to "Information and cultural industries"; and the remainder were responses of "Non-profit", which were left in the "Other" category due to a lack of information on their primary activities.



Hiring Behaviour and Intentions

Over half of employers said their organizations currently employed at least one DHH worker. About half indicated they had personally been responsible for the decision to hire a DHH worker. Finally, about 57% said they intended to hire a DHH worker in the future; 30% were unsure. This means that over one in ten employers (or about 13%) had no intentions of hiring a DHH worker in future.



Although most participants who answered 'yes' to one question also answered 'yes' to the other two, this was not the case for all participants. Specifically, 85 participants said 'yes' to all three items: that they currently employed a DHH worker, were responsible for hiring a DHH worker in the past, and intended to hire a DHH worker in the future.

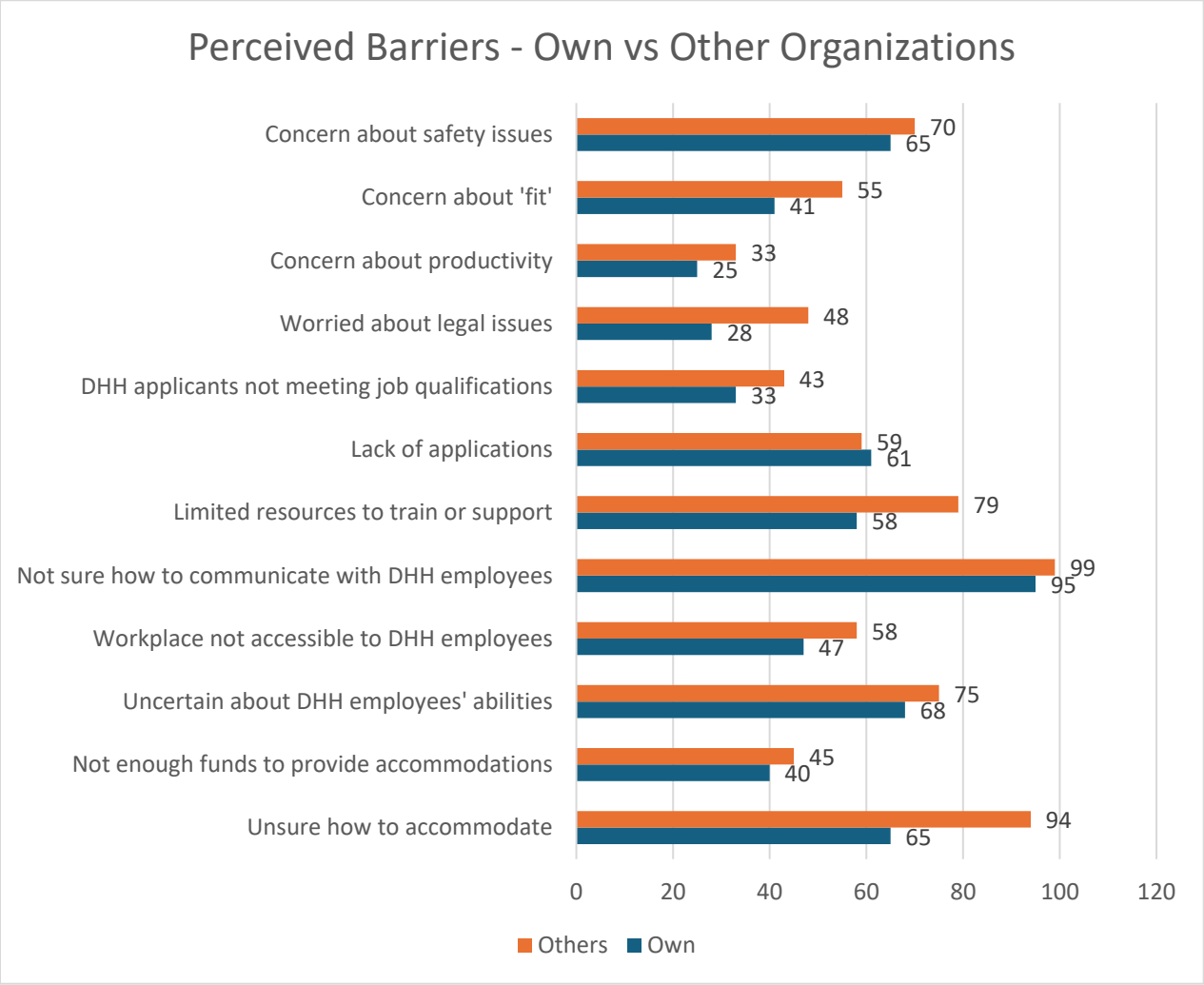
Conversely, only two respondents said their organizations currently employed a DHH worker, but they did not intend to hire a DHH worker in the future (20 were unsure), and only one who had previously hired a DHH worker said they did not intend to do so again (17 were unsure). This suggests that most employers with experience employing DHH workers had a positive experience.

Perceived Barriers

Employers were asked to indicate what they believed were the primary barriers to hiring DHH workers at their own and at other organizations. Employers were asked about both their own and others' barriers to mitigate social desirability bias; that is, the tendency for research participants to present themselves in a positive light. Previous research on employers' hiring behaviours has found that asking employers to reflect on the attitudes and behaviours of employers *in general* – rather than their own – is more effective in engaging participants, generating responses, and minimizing defensive or inauthentic responses.[35] Interestingly, except for 'lack of applications', there were no barriers that employers were more likely to say their *own* organization struggled with compared to others, suggesting that the social desirability effect was likely at play.

Employers selected from a list of 12 barriers, and could select as many as they wished. They were also provided the option to describe barriers that were not listed using an open-text comment box. In this

box, employers listed barriers including employees' challenges communicating with customers, clients, or users; loud workplace environments; employers' ableism; and Hard of Hearing employees not disclosing their needs to their employer.



The list of barriers reflects a variety of perceived environmental, institutional, and attitudinal accessible barriers. The most prevalent barrier – with about half the sample indicating it was a challenge both for them and for other organizations – was perceived difficulties communicating with DHH employees. This barrier represents a knowledge gap on the part of employers as well as, in some cases, a possible resource gap. This finding suggests there is a need for better education and training on the communication supports available, and how these can be accessed, in order to integrate DHH workers in workplaces.

For a few types of barriers, employers were much more likely to report that they were challenges faced by other organizations, but not their own: concerns about whether DHH employees would "fit in" at the workplace (a workplace culture and social inclusion barrier); worries about legal issues and complaints related to hiring DHH employees (likely reflecting misconceptions about accommodations or a lack of preparedness); lacking resources to train or support DHH employees (reflecting lack of capacity); and being unsure how to accommodate DHH employees (reflecting a knowledge gap). For the latter barrier –

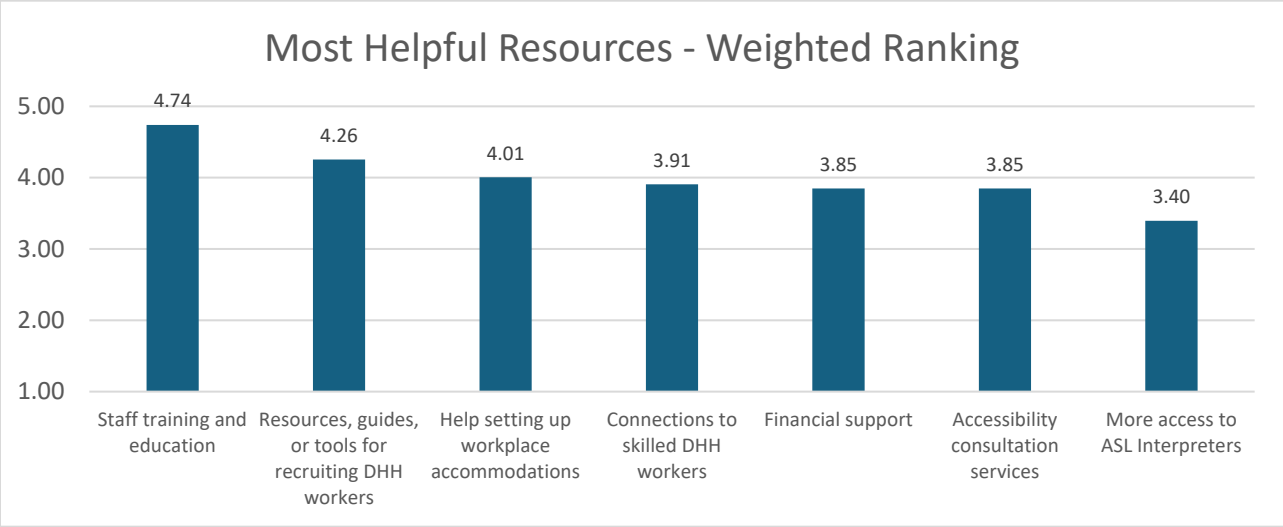
which had the largest gap between 'own' and 'other' – about half of employers said this was a likely barrier faced by other employers, but only a third said it was a problem at their own organizations. This could reflect either social desirability bias (i.e., employers did not want to admit a lack of knowledge on the topic), or it could reflect that participants in the sample believed they were more knowledgeable than the average employer (but that they do perceive the knowledge gap as a genuine barrier for many other employers).

Resources and Supports

Employers were asked to rank, from most helpful to least helpful, what resources or supports would help them to hire DHH workers. The scores shown below represent the weighted average of these rankings, reverse-coded such that a higher number reflects greater importance, and a lower number reflects less importance.

Employers rated 'Staff training and education' as most important overall, followed by 'resources, guides, or tools for recruiting DHH workers'.

Interestingly, increased access to ASL interpreters received the lowest average rating. This may be due to a number of factors, such as the fact that not all DHH workers require the support of an ASL interpreter; employers' lack of awareness of the role and value of ASL interpreters; or employers' lack of knowledge about the ASL interpreting profession and challenges to accessing ASL interpreters, potentially due to a lack of experience working with ASL interpreting services. It may also relate to who is responsible for paying for ASL interpreting services, and how often the service is needed. Because an employee who requires an ASL interpreter would likely require this service on an ongoing basis, employers may be more reluctant to hire employees who use ASL (due to the associated time commitment and expense); thus, they may rate this resource as less important.



Taken together, the findings about perceived barriers and helpful resources suggest that education and training around communication supports and accommodations for DHH workers are primary areas to address in the knowledge mobilization resources.

Organizational Factors Influencing Hiring Patterns

We investigated whether employers' hiring experiences, intentions, and behaviours differed based on organization size and region, as well as their past experiences hiring DHH workers. The goal in conducting this analysis was to determine whether recommendations and resources could be tailored to employer characteristics and needs (e.g., producing recommendations relevant to smaller versus larger enterprises, to employers in rural and northern regions, and/or to employers who are highly reluctant to hire DHH workers).

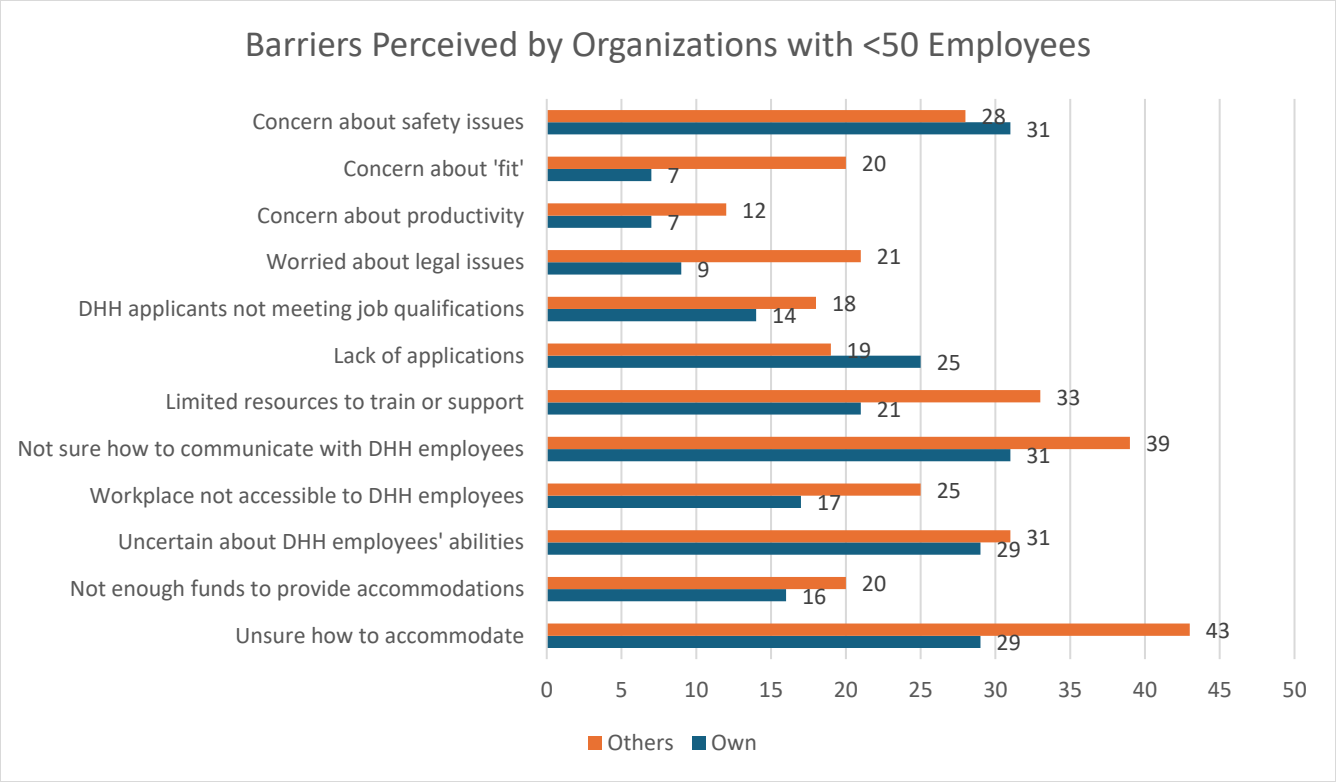
Organization Size

We compared the responses from 'micro' (<50 employees), small (50-199), medium (200-499), and large employers (500+) on intentions to hire workers with disabilities in the future.

Chi square tests of independence were calculated to determine whether organization size was related to the likelihood of responding 'yes', 'unsure', or 'no' to the question asking about future hiring intentions. The test was significant for all four size categories.

Among micro-sized organizations, a significantly higher number of employers said they were 'unsure' about hiring a DHH worker in the future, and a statistically lower than expected number said they did not intend to. Among small organizations, a statistically higher than expected number said yes, they intended to hire a DHH worker. Among medium organizations, a higher than expected number said yes, they intended to hire a DHH worker, and a statistically lower than expected number said they did not intend to. Among larger organizations, higher than expected number said yes, they intended to hire a DHH worker, and lower than expected numbers said they were unsure or did not intend to. In summary, the smallest organizations (with fewer than 50 employees) had greater uncertainty about their intentions (perhaps, in part, due to a reluctance to indicate 'no' outright), while organizations with more than 50 employees were comparatively more likely to affirm their intentions to hire a DHH worker. **This suggests that the smallest organizations may need the most support.**

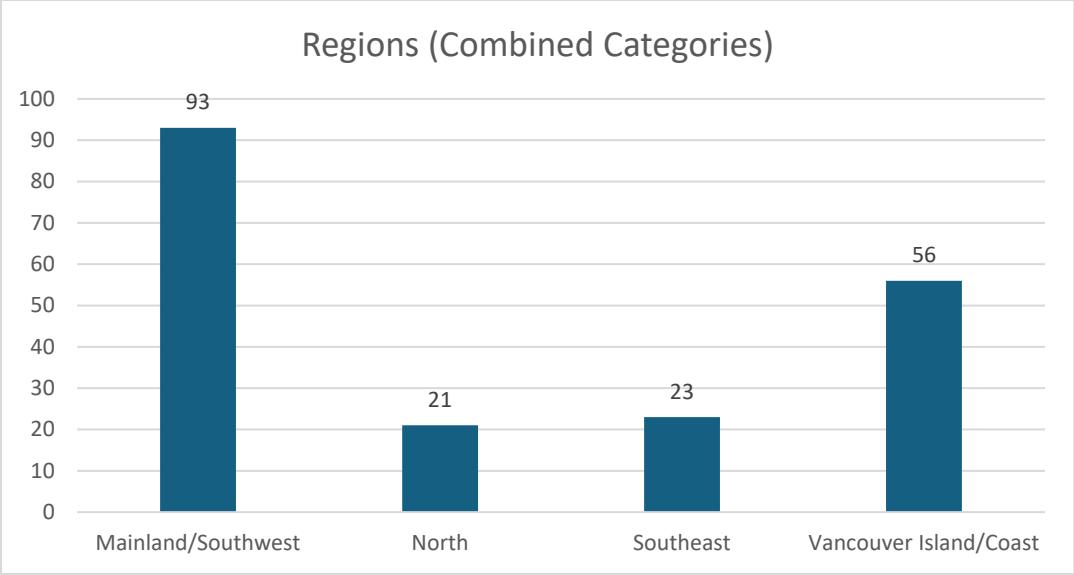
To further investigate the specific barriers that very small and micro-sized organizations may face, we calculated the descriptive statistics for perceived barriers among this group.



Interestingly, organizations of this size were likely to perceive safety issues as a major challenge, as well as a lack of applications; more participants indicated these were struggles for their organization than they perceived them being for other organizations. These challenges suggest that capacity constraints are a larger hurdle for the smallest organizations. Interventions aimed at capacity-building may be most helpful for this group. However, many of these employers also indicated that lack of knowledge was a major barrier (as it was for employers of all sizes); as well as being unsure how to accommodate, difficulty communicating, and being uncertain about DHH employees' abilities.

Region

Because several regions were underrepresented, regions were combined into larger groups to facilitate a comparative analysis. Specifically, the following categories were created: 1) Mainland/Southwest; 2) Vancouver Island/Coast; 3) Southeast: Kootenay and Thompson-Okanagan; and 4) North: North Coast, Northeast, Nechako, Cariboo.



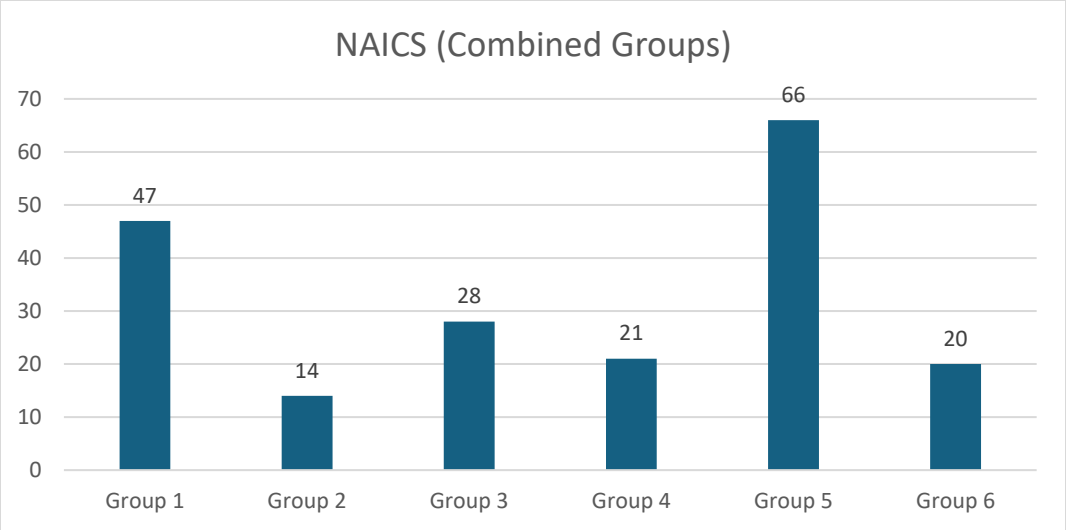
Chi square tests of independence were calculated to determine whether region was related to the likelihood of responding 'yes', 'unsure', or 'no' to the question asking about future hiring intentions. The test was significant for all groups.

Specifically, among organizations in Mainland/Southwest, as well as Vancouver Island/Coast, a significantly higher proportion of employers reported that they intended to hire a DHH worker, and fewer than statistically expected indicated 'no'. Among employers in the Southeast group, fewer than statistically expected indicated they were 'unsure', with most respondents indicating either 'yes' or 'no'. In the North group, a statistically lower proportion of employers indicated that they did not intend to hire a DHH worker. In summary, employers in more densely populated areas of B.C. appear more likely to answer affirmatively about their intentions to hire DHH workers. However, the pattern of responses from employers in other regions does not necessarily indicate that they are more unwilling than employers in general; it is thus difficult to draw conclusions about region-level differences in employers' behavioural intentions.

Industry

NAICS categories were combined into larger groups in order to facilitate a comparative analysis. Specifically, the following categories were created: 1) Agriculture, forestry, fishing, and hunting; Mining, quarrying, and oil and gas extraction; Utilities; Construction; and Manufacturing; 2) Wholesale trade; Transportation; and Warehousing; 3) Retail trade; Accommodations and food services; 4) Finance and insurance; Real estate and rental; Administrative and support; 5) Management of companies and enterprises; Information and cultural industries; Arts, entertainment, and recreation; Educational services; Professional and scientific services; and Other services; and 6) Public administration; Health care and social assistance; and Other (which contained employers who described their industry as 'non-profit'.

This categorization process closely followed process used in the secondary analysis phase with Statistics Canada data, with the exception of the categorization of healthcare and social assistance and non-profit employers into one category separate from group 5.

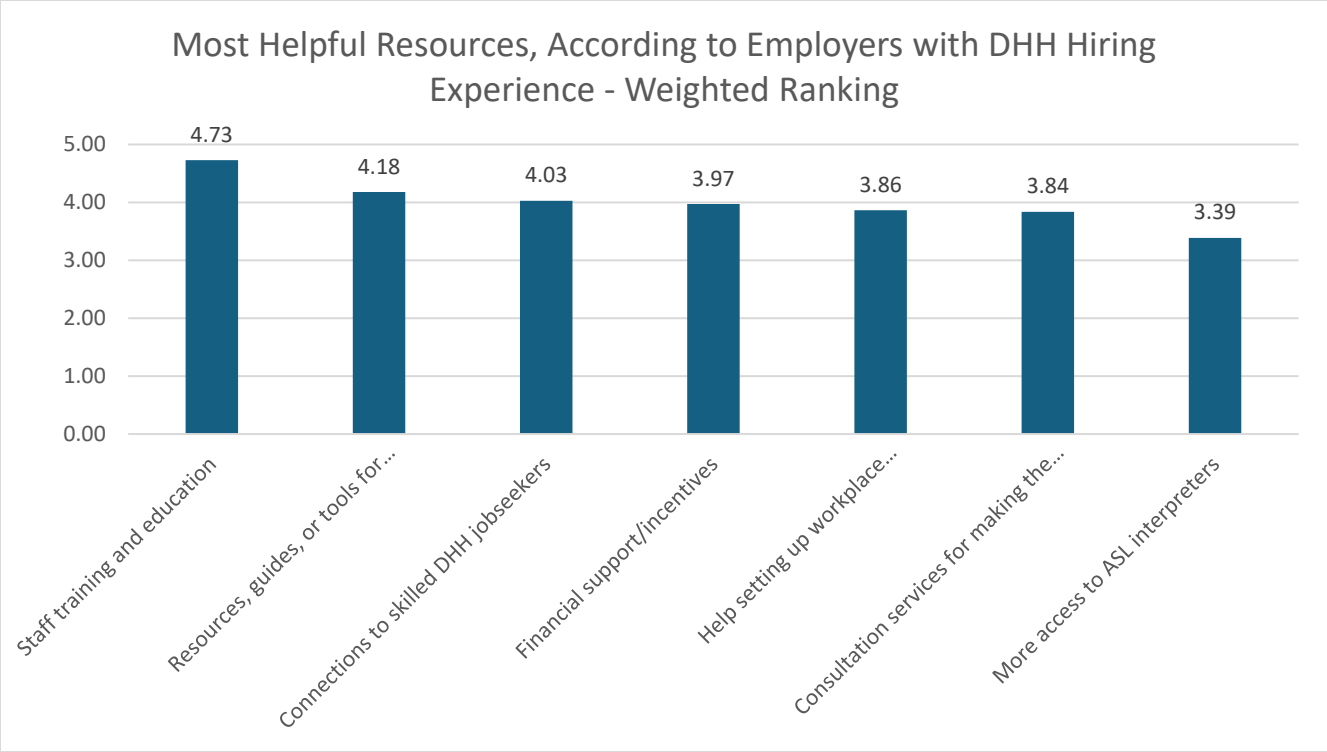


Chi square tests of independence were calculated to determine whether region was related to the likelihood of responding ‘yes’, ‘unsure’, or ‘no’ to the question asking about future hiring intentions. The test was significant for groups 1, 2, 3, and 5.

Specifically, among employers in each of these industries, a statistically higher than expected proportion indicated that they intended to hire a worker with a disability, and a lower proportion than expected said 'no’. It is possible that employers in financial, real estate, and administrative industries, as well as those in healthcare and social assistance and in the nonprofit sector, may require more support; however, the reason for this trend is not immediately apparent. Due to the need to collapse several industry groupings to conduct the analysis, it is difficult to draw firm conclusions.

Past Experience

We examined responses from employers who had personally hired a DHH employee on what they felt were the most helpful resources for employers.



We were interested to find that having personal experience hiring DHH workers did not substantively change what resources employers felt were most helpful. Staff training and education, followed by resources, guides, or tools, were the highest ranked resources, as was the case for the total sample. However, connections to skilled DHH workers were more highly ranked by this group (4.03) compared to the total sample (3.91), coming in third place instead of fourth. Financial support was also ranked as more important (3.97 versus 3.95), in fourth instead of fifth place. Help setting up workplace accommodations was ranked comparatively lower (3.86 versus 4.01), in fifth instead of third.

We suggest that for employers with previous hiring experience, workplace accommodations and processes may already be in place to support DHH workers, making this support comparatively less important. These findings also emphasize the vital importance of training and resources, even for employers who have already hired a DHH employee.

Qualitative Findings

Participant Characteristics

ASL Interpreter participants were mainly those with 10 or more years of experience, who worked full-time, who were self-employed, and who were straight White women.

DHH Jobseeker participants varied in their identity as d/Deaf or Hard of Hearing, their gender identity, and their level of education. Many used assistive devices and had disabilities, excluding hearing loss or Deafness. Although participants were primarily White, they did vary somewhat in their race and/or ethnicity, and many were newcomers to Canada. A few identified as LGBTQIAA+. Given this, we can report that we have successfully recruited a diverse group of DHH jobseekers/workers, which will contribute to the richness and relevance of our data.

Due to the small number of Employers who took part in the interviews, patterns in their characteristics cannot be commented on.

Appendix D, Tables 1, 2, and 3, show the demographic characteristics of all ASL Interpreter, DHH Jobseeker, and Employer study participants. Note that we were unable to access the demographic details for the fourth Employer.

Additional ASL Interpreter Details

In addition to these characteristics, ASL Interpreters shared further details about themselves during the focus groups, including their educational backgrounds and work locations.

Educational Background

ASL Interpreters in this study had a variety of educational backgrounds, both related and unrelated to the work they do (e.g., child psychology, languages, sciences). A few shared that they had attended a formal interpreting program.

Work Locations

ASL Interpreters described a variety of work settings and locations, including working from home, working in-person at post-secondary institutions, working virtually across Canada, or working primarily within the province.

Additional DHH Jobseeker Details

DHH jobseekers also shared further details about themselves during the focus groups, including their fields of interest and work history.

Field of Interest

Participants shared the types of fields they were currently looking for work in or were currently employed in, which included the non-profit sector, web design, graphic design, the postal service, construction, computers and technology, engineering, education, Sign Language Interpreting and other support for the DHH community (e.g., Deaf-Blind support), and grant-writing and research.

A few also shared career paths they aspired to, including wanting to be a psychologist, team manager, business owner, Deaf Interpreter, accountant, and lawyer.

Work History

Many participants shared a rich work history with numerous employment experiences and/or volunteer experiences, both in and outside their fields of interest. A few had worked at the same organization for many years and were now looking for work post-retirement.

Additional Employer Details

B.C. Employers shared some additional information including demographic information, workplace descriptions, and their affiliation to CCRW.

Demographics

One employer identified as a DHH person.

Workplace Description

Participants worked in a variety of settings, including a healthcare setting that provides services primarily to older adults, hiring a variety of workers; a non-profit organization that also runs a thrift store; a post-secondary education setting with specific programming for students with disabilities; finance; and wholesale trade.

Affiliation with CCRW

One participant was familiar with CCRW and had used CCRW's services to find candidates and help a colleague receive support.

ASL Interpreter Findings

Pathway into ASL Interpreting

Participants shared their journeys into the ASL Interpreting profession, including what initially drew them to the profession, challenges to entering the profession, and their impressions about the profession at the time of the focus groups.

Early Impressions

Most participants were not initially interested in going into the profession. Instead, participants:

- Were interested in ASL as a language.
- Wanted to work with Deaf or Deaf-Blind individuals and learned ASL.
- Had exposure to ASL Interpreters or Deaf people previously.
- Had an affinity for languages.

These interests eventually brought them into the field of interpreting.

One participant described their lack of interest in interpreting to be due to the precarity and competitiveness of the profession.

Challenges to Entering the Professions

Participants described key challenges to becoming an ASL Interpreter:

- Lack of access to and availability of interpreting programs and ASL classes.
    - Programs frequently closing and reopening, or being dissolved: *"There's a real shortage across Canada and with some programs having been closed"* (ASL04-01)
- High demands within interpreting programs.
- Inconsistencies in the curriculum across interpreting programs.
- Cost of interpreting programs.
- Poor advertising of interpreting programs.
- Lack of public awareness about the role of ASL Interpreters.

To address educational challenges, one participant shared that there is a program being developed that would provide new graduates with more specialized training and better preparation for the work:

> "[City] Community College [is trying to develop a] three-year program […] they're trying to make it a more (pause) sort of fulsome program so that interpreters maybe have more specialized

> training once they get out into the job market […] because when you get out there, there are certain things that recent grads can take as jobs and then certain things that require additional screenings [like legal or medical]. And so, if we can build those into the program, then that hopefully will help." (ASL04-01)

Current Impressions

Despite initial reluctance to pursue ASL Interpreting as a profession, many participants expressed their current enjoyment and fulfilment in their work:

- "I love my job." (ASL02-02)
- Enjoyment of working with the Deaf community and new people
- Enjoyment of watching Deaf children grow and develop confidence and self-advocacy skills.
- Enjoyment of vicarious learning and variety

However, ASL Interpreting can also be challenging, especially in medical settings and "be[ing] the voice […] of emotional toil." (ASL03-01)

> "Some things that are said or signed, sort of hearing that come out of you or off of your hands can be kind of jarring, but knowing that you need to stick to like a faithful interpretation of the message can be challenging and definitely take some sort of debriefing after with colleagues to get past. I would say also working in (pause) medical interpreting and different sectors […] you kind of have to take the good with the bad in terms of being a part of those intimate moments of people's lives." (ASL04-01)

Labour Market Conditions

The interpreter labour market is characterized by both flexibility and instability. Most ASL interpreters work as freelancers, giving them the freedom to choose assignments and set their own schedules, with some working as little as 10 hours or as much as 60 per week. However, this flexibility comes with challenges, including inconsistent income and a "feast or famine" cycle of work availability. While technology has expanded opportunities, especially through remote interpreting, the field still faces a shortage of skilled professionals due to retirements, early career attrition, and a lack of sustainable mentorship pathways for new interpreters. Many new graduates are not yet equipped for the complexity of current demands, and long, unpaid commutes further strain the workforce. Although school-based, contract roles offer more stability, the broader freelance market remains unpredictable and difficult to navigate.

Decentralized system

Participants described the decentralized nature of ASL Interpreting in British Columbia and the associated challenges.

Most interpreters operate as freelancers and receive assignments through a network of agencies. In British Columbia, five main agencies coordinate interpreting services; one national agency in Ottawa also distributes work across Canada. Interpreters have the autonomy to accept or decline assignments and set their own schedules. However, the decentralized system involves multiple funding sources and agencies, making coordination complex and sometimes inefficient. New interpreters may struggle to

access work due to a lack of established relationships with agencies. A centralized system could streamline service delivery, reduce administrative burden, and improve strategic interpreter placement.

Participants also shared that Deaf clients and employers often need guidance to understand how the current system works to avoid barriers in accessing services. Additionally, Interpreters in fixed assignments (e.g., schools) are not considered staff, which can create role confusion and ethical challenges in managing group communication.

Model disparities

Participants also described disparities in different models of work – freelance versus contract-based employment. Participants described freelance work as work offered through agencies, while more secure work can come through educational contracts and video relay.

	Challenges	Rewards
Freelance	• Interpreters frequently negotiate travel and accommodation costs and rates. • Screening requirements for specialized interpreting (e.g., medical, legal) are inconsistent across provinces, with some processes seen as ineffective or financially burdensome. • Hiring decisions are sometimes based on cost rather than interpreter qualifications, which can negatively impact service quality in sensitive contexts like trauma or mental health.	• Flexibility, variety, autonomy over schedule. • Ability to specialize in niche work like interpreting in the performing arts. • Can make connections and be called back for recurring jobs.
Contract-based work	• In-person and school district work often offering lower compensation, especially during peak daytime hours. • Video relay work offers flexibility and remote access.	• Stable contracts (e.g., university or video relay work) offer interpreters a reliable income base, which they often supplement with freelance assignments for variety. • Video relay lacks job assignment guarantees, leading to unpredictability in workload.

Remote Interpreting

Participants described the use of technology in ASL Interpreting, such as VRS (video relay service) and VRI (video remote interpreting). In VRS, a DHH caller communicates with an ASL Interpreter through video, while the ASL Interpreter connects with a hearing person via telephone to facilitate a conversation

between the DHH person and the hearing person who are in different places. VRI involves using video to connect a DHH person to an off-site interpreter while they are in the same room with a hearing person they want to communicate with.

Participants described benefits and drawbacks of VRS and VRI.

Benefits:	Drawbacks:
• VRS allowed interpreters to work from home. • VRS work offers stability and flexibility. • VRS offers supports like professional practice staff for debriefing. • VRS is funded by the government.* **VRI funding derives from a combination of sources including organizational budgets, private insurance, and government healthcare programs such as Provincial Health Services Authority (PLS).*	• VRS cannot be used by a Deaf person if they are in the same room as the hearing person they want to communicate with. • Interpreters often get little preparatory information before VRS calls. • Clients may not understand the functionality of VRS (e.g., request it for Zoom calls rather than phone calls). • Interpreters can work VRS from anywhere, limiting in-person availability in high demand areas. • Difficult to work in teams of interpreters through VRI. • Use of VRI and VRS means less in-person practice for new interpreters. • Some settings like banks will hang up on the interpreter because they do not understand VRS calls and think it is fraudulent.

"Golden handcuffs" of freelance work

Freelancers often face a trade-off between flexibility and unpredictability, with no control over whether they are selected for jobs they apply for. Participants described this as the "golden handcuffs" of freelance work, sharing additional challenges and rewards.

Despite flexibility, freelance interpreters may struggle with lack of preparation for technical or specialized assignments especially in remote settings. Competitive bidding systems can prioritize cost over interpreter consistency or subject-matter familiarity, impacting service quality. Freelancers without prior knowledge of an organization or its terminology many find it challenging to interpret effectively in fast-paced or technical environments.

Some interpreters prefer a hybrid model – maintaining a stable base (e.g., university or relay work) while supplementing with freelance for variety and learning. Video relay work offers interpreters the ability to live remotely and pursue personal passions due to its flexibility and remote nature.

Scheduling conflicts

Participants described how there are often scheduling conflicts when it comes to requests for ASL Interpreting. A high volume of interpreting requests often cluster at the same times, creating scheduling bottlenecks. Many of these requests go unfilled due to limited interpreter availability during peak periods.

Geographic barriers

Participants also discussed geographic barriers when it comes to accepting requests to provide ASL Interpreting. Interpreters often decline distant assignments due to high travel time, fuel costs, and parking expenses for short-duration jobs. Video relay services have improved access, but also contributed to interpreters relocating away from areas with high in-person demand.

Interpreter availability often doesn't align geographically with where services are most needed, leaving rural communities underserved. Larger cities offer more staff interpreter positions, while smaller or rural communities lack such infrastructure. Remote and northern regions face severe interpreter shortages due to travel distance and lack of local professionals.

Attrition and Retention

Participants described labour market challenges for ASL Interpreters when it comes to attrition and retention of interpreters.

Interpreter shortages persist due to high attrition, especially within the first five years of practice. Long commutes and uncompensated travel time contribute to burnout and early exit from the field. The high demand for interpreting services can also contribute to burnout:

> *"You're really tightly intertwined with a very small community and a marginalized community […] it kind of tugs on your heartstrings and can definitely lead to burnout when you're wanting to take jobs […] you don't want to let anybody down and you want there to be access."* (ASL04-01)

There is a lack of experienced interpreters qualified for specialized settings like mental health, corrections, and medical environments. Pay rates often do not reflect the complexity or emotional demands of specialized interpreting work.

New graduates face difficulty entering the field and are often underpaid compared to seasoned professionals. Additionally, increasing the number of interpreters alone is insufficient. There is a critical need for higher skill levels and better preparation among new entrants.

Lack of systemic supports for graduates or early career professionals

Many participants expressed concern about the challenges facing new ASL Interpreters. New graduates must be highly proactive, flexible, and self-motivated to find work and build networks.

The transition from graduation to full-time interpreting lacks structured support or formal pathways. Early-career interpreters face emotional and physical strain, including compassion fatigue, with little institutional support. Available mentorship or support programs are often volunteer-based and limited in capacity. Limited in-person interpreting opportunities and reliance on virtual platforms hinder skill development, especially for voicing and team interpreting.

Additionally, building community within the Deaf and interpreting fields is essential but is currently done independently.

"Professionalizing" of Interpreting

ASL Interpreters also described the shift in the profession that has occurred over time. The field is transitioning from community-based interpreting (e.g., by friends or family of Deaf individuals) to a recognized, professionalized career. One participant felt that this could be a draw to the profession. Interpreting is becoming more regulated, but the profession is still relatively new and not widely promoted.

Certain interpreting contexts (e.g., medical, legal, mental health) ethically require specialized knowledge to ensure accurate and responsible interpretation. Professional interpreters are expected to take accountability for their errors and avoid shifting blame onto Deaf clients. Acknowledging limitations and being transparent about mistakes is considered a key part of professional conduct.

Demand for ASL Interpreting

The demand for ASL interpreting is high and continues to grow, particularly in educational settings and rural/remote communities. School districts, especially K-12, are experiencing a surge in interpreter needs, often unable to fill positions due to geographic isolation or lack of available professionals. Although employment opportunities are increasing, newer graduates face challenges securing full-time hours due to limited networks and ineligibility for certain requests. Many interpreting requests require long commutes for short assignments, making them economically unfeasible. Additionally, there's a significant need for specialized interpreters in fields like mental health, medical, legal, and academia, where only few qualified professionals are available, especially in remote or rural regions. Despite the convenience of video relay services (VRS), the shift away from urban centres has made in-person interpreting even hard to access. Overall, the field is marked by a mismatch between high demand and the availability of qualified, accessible interpreters.

Meeting the demand

Participants described challenges with meeting the demand for ASL Interpreting.

First and foremost, there are not enough ASL Interpreters across Canada. One participant estimated that Canada needs a ratio of 1 ASL Interpreter to every 4 or 5 Deaf or Hard of Hearing person. The current system structure that interpretation services operate under may be preventing the supply of interpreters from meeting demand.

Some interpreting assignments require multiple interpreters or context-specific expertise, which complicates scheduling and fulfillment. There is no standard ratio or allocation between VRS and in-person interpretation, making it challenging to ensure coverage across different service types. Additionally, new graduates are entering the field with less in-person experience due to the dominance of virtual interpreting, limiting their skill development in real-world settings.

Interpreter-client match

Participants also described considerations for matching client needs with a suitable ASL Interpreter:

- For employees who require interpretation accommodations, employers must understand their responsibility in booking interpreters with the appropriate qualifications and contextual knowledge to meet both employee and workplace needs.

- Effective interpreting often requires familiarity with specific vocabulary, jargon, or background knowledge, especially in specialized fields like academia or government.
- Deaf professionals may prefer to work with specific interpreters who understand their communication style and can accurately represent them, particularly in high-stakes or technical settings.
- Newer interpreters may lack the experience to recognize instances where their interpretations do not fully reflect the Deaf client's intent, especially in nuanced or expressive communication.
- Some interpreters, regardless of experience, are less confident in voicing (translating from ASL to spoken English), which can impact the quality of interpretation.
- Consistency in interpreter-client pairing helps build rapport and improves communication accuracy, especially when interpreters can learn and adapt to the client's terminology over time.
- Deaf individuals should have agency in choosing interpreters they are comfortable with, rather than being limited by agency contacts or availability.

Advice for New ASL Interpreters

Becoming an ASL interpreter is a rewarding yet demanding career path. Those entering the field should be prepared for a steep learning curve, both professionally and personally. Below are some key challenges and rewards, as shared by experienced interpreters.

Challenges

- Make sure this is truly the path you want to pursue. The work can be demanding — emotionally, physically, and financially.
- Interpreters reported that compassion fatigue is real, especially when balancing the needs of both Deaf and hearing clients.
- Needing to pay attention to potential conflicts of interest when it comes to accepting work with people you are friends with or connected to in the Deaf community.
- The work can be financially unpredictable, especially for freelancers.
- New interpreters noted a lack of systematic support for post-graduation and often feel under-resourced after completing their training.
- Much of the early career journey involves independent work, building confidence, and seeking community support.
- Requires a business perspective—tasks like invoicing, bookkeeping, and self-promotion are part of the job.
- Don't expect a typical 9–5 schedule.
- It can be difficult to set and maintain boundaries when it comes to work/life balance.
- The role of interpreters is often misunderstood (e.g., sometimes asked to take on roles beyond interpreting, such as filling in for educational assistants in school settings).
- Seeing lack of adequate support for Deaf students in the school system.

Rewards

- This is a deeply rewarding career for those who are truly passionate. Excitement and commitment will carry you through the challenges.

- There is growth through community and connection. Building relationships within the Deaf community and among fellow interpreters is one fulfilling aspect of the profession.
- Finding mentors, shadowing experienced interpreters, and working in different settings can provide invaluable insights and support.
- Over time, interpreters grow in skill and confidence.
- Find and lean on your community.

Employment Barriers for DHH Jobseekers

Participants were asked to share employment barriers DHH jobseekers and workers face. Participants shared numerous barriers, including lack of early work experiences; lack of employment training (e.g., lacking awareness of the STAR interviewing method, lack of interview experience); poor transferability of interview questions (i.e., ASL Interpreters must do a lot of cultural mediation to ensure questions and answers come across in a culturally relevant way); and lack of access to supports (e.g., ASL Interpreters). Specifically, there is:

- Not given enough time to book ASL Interpreters for interviews.
- Low access in rural or remote locations.
- Cost of ASL Interpreters.
- Access to quality interpreters or trusted interpreters (e.g., those knowledgeable of field of work).

Interpreters also indicated that DHH employees may lack knowledge of their employment rights, and that there is low enforcement of Canadian accommodation law:

> "Canadians [are] sort of just left with this nebulous, like, 'I'd really like [an ASL Interpreter] if you could, I really need one.' And then they would just get turned down every time, so, it made it really impossible to do any training when you can't communicate with the trainer." (ASL04-01)

And a lack of language rights in Canada that would protect DHH persons:

> "We were so far behind the US in terms of accessibility and communication, language rights. We're still fighting to get interpreters provided for training and everything." (ASL04-01)

Other barriers identified included:

- Low literacy, barriers to education, and school-related trauma.
- Audism and related burnout.
    - Coworkers don't try to communicate through written means, apps, or ASL.
    - Exclusion from social activities.
    - Assumption that ASL Interpreters are for the Deaf person, not the hearing person.
- Not wanting to "rock the boat" (ASL02-01, ASL04-01) or self-advocate for fear or losing their job
- Job insecurity (e.g., may be laid off due to cost of accommodations)
- Lack of co-worker awareness (e.g., not wanting their conversation to be picked up through VRI even though a hearing person in the room would be able to listen in)

Employer Attitudes

Employer attitudes play a critical role in shaping the employment experiences of DHH individuals. These attitudes often reflect broader societal perceptions of disability, communication, and accommodation. Whether conscious or unconscious, they can shape hiring practices, workplace culture, and opportunities for advancement. Understanding how these attitudes manifest and the impact they have on access and equity is essential for identifying meaningful solutions and promoting inclusive employment practices. Participants identified several persistent barriers and mixed experiences in the workplace, sharing a range of concerns about employers' attitudes toward Deaf employees and accessibility in the workplace.

Negative

Lack of Understanding and Accommodation

There is a lack of workplace modifications that go beyond interpretation, such as visual alerts or accessible communication tools, which are often not considered. Employers often lack awareness of what interpreters do, what types of interpreters are appropriate for different settings, and the limits of their role. Additionally, there is a general closed-mindedness around communication needs, and employers may show disinterest or surprise when asked to fulfill their legal duty to accommodate.

Some employers are unwilling to pay for interpreters and may avoid hiring Deaf individuals altogether to sidestep accommodation costs. In some cases, employers immediately question the need for an interpreter, express concern about the cost, or make assumptions — such as asking about the interpreter's relationship to the Deaf individual.

> *"We're still fighting to get interpreters provided for training and everything […] it's not even the employers who are paying for it, usually, it's WorkBC. And you still get push back. If it were all on the employers, I think it would be virtually impossible."* (ASL04-01)

In general, Interpreters felt employers lack an understanding of their role in supporting DHH workers and lack knowledge on how to provide communications. Some employers fail to implement simple, low-cost accommodations such as modifying tasks or workflows and show limited awareness of alternative communication methods. For example, using email instead of phone calls is a straightforward adjustment that can significantly improve accessibility for DHH employees. Employers may assume Deaf workers cannot do the work, and lack curiosity:

> "It's just the lack of curiosity in our culture that people are very dismissive right off the bat in saying, you know, (dismissive tone) "Well, how would that work? If they can't speak to their employees, how are they going to communicate, how is this going to be possible?" Rather than thinking, (curious tone) "OK, we can't use spoken words, so well, how could we make this work for the employee?" If it's Starbucks or Tim Horton's or wherever. And I think also dismissing a lot of the possible jobs within that organization that a deaf person could do just fine." (ASL04-01)

Audism and Inclusion

DHH employees frequently experience feelings of being undervalued or overlooked due to persistent audism in the workplace. While some employers make genuine efforts to ensure staff meetings are

accessible and inclusive, others fail to include Deaf employees in discussions. Unconscious audism often surfaces in the form of passive exclusion, where employers or coworkers default to assumptions like, “They can’t hear me, so I won’t bother telling them,” (ASL01-01) resulting in missed information that would typically be shared with hearing colleagues. Deaf individuals are sometimes unfairly judged based on mistakes made by interpreters.

In general, stigma remains a significant barrier, with some employers assuming that accommodating Deaf employees is too costly, that they are unable to perform the required tasks, or that hiring them will create added burden.

Work opportunities

Employers often use 'lack of experience' as a justification for not hiring DHH candidates, without recognizing that this may stem from systemic barriers — such as limited access to informal learning or early job opportunities. Deaf individuals are often advised not to disclose their hearing status prior to interviews, due to concerns that early disclosure may lead to bias, reduced chances of being hired, or the employer opting not to proceed with the application at all.

Positive

Some employers make genuine efforts to ensure staff meetings are accessible and inclusive. Positive employers demonstrated an understanding, showed flexibility around job interviews and task modifications, and were willing to bring in interpreters.

> “One employer that stands out is a recycling plant in [city]… they always bring in interpreters for safety meetings and do whatever they can to communicate effectively.” (ASL03-01).

Large companies like Amazon and Costco were cited as examples of employers with well-established systems for Deaf inclusion. Amazon, for instance, uses in-house technology and contracted ASL interpreters for daily briefings, safety tips, and meetings.

> "Some of those bigger businesses who are really dedicated, like I only shop Costco now pretty much because they've just been so amazing with their Deaf staff. Yeah. So there's people doing good things out there and I wish that they could teach everyone else how to do it right." (ASL03-01).

Advertising Supports

Participants described the challenges with awareness of available supports, suggesting the need for improved advertising of offerings:

- ASL Interpreters may struggle to locate agencies to sign up for
- Employers may not know how to find ASL Interpreters for DHH workers
- Employers may not know the role of ASL Interpreters
- DHH jobseekers may not be aware of job readiness programs available to them

Interpreter Role in Advocacy

Participants varied in their perception of their role in advocacy. Some described ways advocacy is part of their role as ASL Interpreters:

- Advocating for the right of the Deaf person to have an interpreter present
- Rejecting requests to interpret when they did not feel comfortable (e.g., at union meetings where errors can cause harm)
- Educating employers on the role of ASL Interpreters and services available (e.g., WorkBC)
- Correcting mistakes of other interpreters
- Advocating for hiring DHH workers
- Suggesting event planners hire interpreters
- Advocating about lighting, placement, etc.
- Owning errors and ensuring DHH individuals understand what is being communicated, and if language was correct
- Cultural mediation
    - "Sometimes there is sort of a little bit of wiggle room for some cultural mediation or little bit more emphasis on interpreting what they're saying in a way that is more empowering or that is a little bit more assertive […] for a medical situation they might say like, "Oh, and do you mind calling for an interpreter for the appointment?" […] for better or for worse, [I might decide] an interpreter to say, "Oh, and you'll need to call the agency to book an interpreter for my appointment." (ASL04-01)
- Offering to give up breaks so DHH workers can network and socialize
- During interviews, asking the DHH person if they want to speak to a manager if the employer is discriminated against

Some also contributed to advocacy in their personal lives, like participating in rallies or "put[ting] in a little teachable moment to hearing people" (ASL03-01).

For others, advocacy was not something they considered part of their role; they saw themselves as neutral parties.

> "I see us as a bit more neutral […] we're also there for the hearing people as much as the [DHH] individuals, because hearing people don't know sign language, so I'm interpreting for them. And sometimes that gets lost […] it's easy to get wrapped up in like, "Oh, I'm helping the Deaf person." No, I'm not altruistic." (ASL03-01)

Ethical Considerations

Within their role, ASL Interpreters described ethical considerations they come up against. These included the importance of having the skills needed when accepting a position, and refusing work if your skills are not up to par and errors will be harmful for the DHH person; recognizing and not misusing the power you hold as an ASL Interpreter; the importance of admitting interpreter mistakes; and the importance of providing a faithful interpretation.

Additionally, interpreters emphasized the importance of letting the DHH worker decide what information they do or do not want (it is not the role of the ASL Interpreter to alter the workplace based on their own feelings of whether the DHH worker is missing important information). It is important to ensure that they, as the interpreters, are doing cultural mediation during interviews, but not giving the DHH jobseeker hints – DHH jobseekers should be accurately represented. Interpreters also indicated it was good practice to offer to convey incidental information to DHH workers.

Interpreters also indicated it was important to empower workers to know their rights.

Recommendations

Participants shared a range of ideas aimed at improving access and equity within interpreting services and DHH employment. These recommendations reflect both lived experience and professional insight, addressing systemic gaps across education, workplace practices, interpreter employment models, and public policy. The suggestions emphasize the need for structural change, greater awareness, and more consistent support to foster inclusive environments for DHH individuals and interpreters.

Interpreter Employment Models

One participant felt that it would be beneficial for ASL Interpreters to be employed by a central company rather than working freelance, as this could help address the lack of pension and stable pay, as well as out-of-pocket expenses associated with travel.

Increased Public and Employer Awareness

Awareness of accommodations, communication needs, and daily challenges of DHH individuals remains limited. Some participants called for employers to fulfill their duty to accommodate Deaf employees, including understanding how to access and appropriately book qualified interpreters. One participant noted that interpreters and at times, Deaf professionals are often overlooked in meetings, which can affect inclusion. To address these gaps, a participant suggested hosting Deaf Culture Days to help reduce stigma and promote greater understanding. Another recommended sensitivity training. Others emphasized the value of ASL training delivered by Deaf instructors as a professional development tool to improve awareness and cultural competency in the workplace.

Centralized ASL Interpreter System

One participant suggested creating a somewhat more centralized system which would address the lack of pension, consistent pay, and out of pocket expenses:

> “It would be lovely to see at least one place in our province where interpreters were employees, not freelance business for self. Where that place staffed, I don't know, let's say 6 interpreters for 3 eight hour shifts a day. And then those interpreters were available for whatever comes up and could be scheduled accordingly." (ASL01-01)

Policy Recommendations

Participants spoke of the importance of including Deaf and Deaf-Blind individuals in the development, implementation, and evaluation of workplace policies. While accessibility initiatives can involve financial costs, these costs should not be used to justify inaction.

Employer Recommendations

Participants shared a range of ideas on how employers can better support DHH employees and create more inclusive workplaces. Many emphasized the importance of proactive communication, staff training, and collaboration with Deaf individuals. Recommendations included:

- Improve awareness for employers and other workers – do Deaf awareness training.
- Invite organizations to do an accessibility audit of the workplace.
- Post job openings in ASL.

- Give Deaf candidates time to book interpreters for interviews.
- Ask employees about accessibility needs.
- Be flexible about training DHH workers.

Governmental Policies

Participants identified several system-level barriers that affect the accessibility and consistency of interpreting services across provinces. These included:

- Increase enforcement of the Accessibility Canada Act (ACA)
    - "I was hoping, I think naively, (laugh) with the Accessibility Act in Canada that there would be more barriers removed." (ASL02-02)
    - Require employers to remove barriers.
- Provide financial support for employers for removing barriers, providing ASL Interpreters, translating training materials into ASL
- Mandate the availability of ASL courses—not just for interpreters but also for families and communities.
- Introduce ASL as a language offering alongside French in schools to promote inclusion from an early age.

DHH Jobseeker Findings

Employment-related Barriers

Participants shared numerous barriers to employment.

Discrimination

Discrimination against DHH jobseekers, including those who are Deaf-Blind, was a consistent and multifaceted theme across the focus group. Participants described both explicit and subtle forms of bias in hiring, advancement, workplace treatment, and access to accommodations. These experiences were shaped by audism, ableist assumptions, and systemic inaccessibility, often compounded by intersectional factors such as age, communication style, and Deaf-Blind identity. Discrimination was frequently reported at the hiring stage of the employment life cycle, but many participants also described ways it had prevented career advancement; for example, being told that they had to learn to 'communicate better' if they wanted to become a manager.

Overt audism and misconceptions about safety were some ways discrimination manifested:

- "They'd always be like, 'Oh, but you can't hear. So how are you gonna stay safe?' […] I can see you out of my eyes, so that works fine." (DHH06-01)
- "The world is very hearing-centric […] it comes down to communication […] That comes up over and over and over again. That is a common theme. And people go, "How are we going to communicate? How can we communicate with you?" That is always the number one thing that comes up. And it just feels like it's an excuse for hearing people not to hire Deaf and Hard of Hearing people." (DHH10-02 via ASL-L2)

- “It's not safe for a Deaf person to work here. What if an alarm goes off? What if something falls? How are you gonna know? You can't hear.” (DHH10-05 via ASL-S1)

Employers frequently held specific misconceptions about things like hearing aids and speech:

- “People assuming that I can hear because I have hearing aids in, people assuming that I can hear because I'm young […] People assuming that I can hear because I can speak well.” (DHH06-01)
- “You have hearing aids, so why can't you hear our instruction?” (DHH05-03)
- “I noticed one job, they tried to tell me, ‘Can you hear us?’ Like, they tried to do tests to me, when they see the hearing aid. Because I'm Hard of Hearing, I don't hear the high frequency, I only hear the bass, okay. And I told them, ‘I can hear you perfectly.’” (DHH07-02)
- “People, when they see you, you have hearing aid, they think […] you're not going to be capable to do the job you're supposed to do.” (DHH07-02)

However, discrimination was also frequently covert and indirect. Some employers would not outright express their concerns, but jobseekers reported that they would stop hearing back from employers who found out about their hearing status or saw them using assistive technology, like a transcription app. Some received ‘silent rejections’ and unexpected replies, like being told another candidate was hired right before they were scheduled for an interview. Participants were also frequently rejected from jobs based on vague notions of “fit”:

- “I think the code word is that ‘you're not a good fit for our team’. I think that's how it's couched.” (DHH01-03 via ASL-L1)
- “Oh, this person is going to need accommodations. This person like doesn't react to your interview questions in the way that you expect them to do like, they don't have the same facial expressions as hearing people do, like they have to like look at the transcript, which sort of stills the conversation a little bit.” (DHH06-01)

Participants also experienced **intersectional discrimination** based on other aspects of their identity, including disability status, age, race, gender identity, geography, socioeconomic status, immigration status, and religion. The below illustrative quotes highlight these intersecting experiences of discrimination:

- **Ableism based on additional disability**
    - “Yes, and also I do use a wheelchair on a full time basis. That's additional disability. I have a service dog with me as well. So sometimes when I'm hired for a position, it sounds perfect. We have the interpretation part sorted out, everything looks good. And then I can't even get in the building because I'm in a wheelchair. So I’m thinking OK, So that's an expensive problem to fix and now what? And it's just frustrating because, you know, I, I got 1 barrier out of the way and then I didn't even realize there was more barriers waiting for me, you know, and then so again, now I gotta start all over from the beginning.” (DHH01-01 via ASL-S1)
- **Transphobia**

    - “Sometimes when I go into workplace, I can't talk about my partner because I'm queer and my partner is queer and they're non binary. And so I feel like I can't talk about that. And so that I feel like that we're sort of kept apart from everybody else because of that identity. And I think that that can be hard. And right now, with everything that's happening politically, it makes it even harder. And some parents have really strong opinions about what kind of people they should allow to work with their children. And that's difficult for me. I am a proud queer person. That's about part of my identity, but I can't be that because of the environment.” (DHH01-01 via ASL-L1)
- **Ageism**
    - “Yes, the age does a does a lot, plus your disability. The age creates a big issue. Even, like, most of the time when I was applying for a job, I have to remove 10 to 15 years from my experience. And people that were calling me only to tell me: ‘Oh, your resume, you're missing 15 years,’ that’s the only time they called me for this. I said, ‘Do you need anything else I can answer you?’” (DHH07-02)
- **Racism and discrimination based on geography**
    - “I think as an older woman, I feel that that's an additional identity for me and as well as being queer and I'm Indigenous as well.” (DHH01-03 via ASL-L1)
    - “I was born and grew up in Sri Lanka. I moved here at age of 19. Until I moved to B.C. About 5 years ago I had very limited to no exposure to the Deaf and Hard of Hearing people and community so the identity of Deaf is new for me after a good identity crisis. But given my body size, skinny and short, and being a minority, I do think they were additional challenges, especially in some fields such as fashion and multimedia.” (DHH02-03 in chat)
    - “They were kind of taken aback during the interview, and surprised at who I am and my identity. They just knew my name. And then my last name, [DHH02-03’s last name]. So, a lot of people thought that I am Caucasian person, or something. I mean they didn't say it, but I could see it. I could tell. One time, there was a few interviewers there, and they asked for [DHH02-03’s last name] and they looked at the other interviewees who were there present, even though I had my hand up because they were looking for someone who it made sense to have the name [DHH02-03’s last name].” (DHH02-03 via ASL-L2)
- **Classism**
    - “That this is a barrier against me because I don't have the education. I have experience, but no higher education. And there, there could be, um, classism barrier there too.” (DHH01-03 via ASL-L1)
- **Discrimination based on Immigration status**
    - “I'm here on a work permit, which has not been going well. And that's definitely been a barrier because I can't access most job help because a lot of it is funded by the Government of Canada's like, whatever the job help program is, and I can't participate in any program that's funded by the Government of Canada.” (DHH06-01)
- **Religious discrimination**

- "There's also religious discrimination. And we have a lot of discrimination going in our country, in Canada, right?" (DHH03-02 via ASL-L5)

Access to Accommodations or Supports

Participants described barriers related to a **lack of access** to accommodations or accessibility supports. One major challenge was the perceived cost to employers.

- "It's very expensive to get that captioning." (DHH02-03 via ASL-S2) [v]
- "They are more willing to provide accommodations if I will volunteer to pay the tab for something." (DHH01-04 via ASL-L1)

The cost for jobseekers themselves was also a barrier, and this barrier perpetuated difficulties accessing employment:

- "I also have vision issues and vision's not covered. The prescriptions change. And sleep apnea is not covered. They don't cover it. It's ridiculous. And hearing aids aren't covered by the health program. How do you stay employed if you're not getting your needs met?" (DHH08-01)

Pre-existing policies, or ignoring accommodation requests, created barriers for participants. For example, one participant shared that "Workers are not allowed to have their cell phone with them for whatever reason. So, distractions, things like that [...] I feel like it's an excuse too, 'Oh, well, we can't actually use the Convo service because you can't have your phone with you.'" (DHH01-02 via ASL-S1). Some employers chose to assign workers different jobs (e.g., sweeping) so they did not have to provide reasonable accommodations (e.g., accommodations for phone use). Other requests were outright denied.

Some employers did not take responsibility for providing an accessible environment. Other employers did not understand accommodation needs: "The thing that's frustrating for me is that people don't react and accommodate me in the ways that they should, you know, like raising their voice, making sure they look directly at me." (DHH06-01) In some cases, jobseekers shared that they were uncomfortable making accommodation requests. Participants also described barriers to accessing or utilizing ASL Interpreters and Intervenors. Sometimes, these services were not provided at all, either due to cost, poor planning and lack of timeliness, or a lack of interpreter availability:

- "When the interview time was set up […] they called me in at last minute, and I didn't have opportunity to get an interpreter in time […] I had to decline it because I needed the interpreter, and there were like 2 or 3 attempts, and I never got an interpreter." (DHH02-02 via ASL-L2)
- "Part of it is just interpreter availability and schedules. You're not going to find someone last minute. You need a couple of weeks' notice just to book one." (DHH01-02 via ASL-S1)
- "An interpreter will not always be available […] sometimes there's not enough interpreters." (DHH03-01 via ASL-L5)

For jobseekers who needed access to ASL interpreters, the interpretation process and relationship with the interpreter were important considerations. Some jobseekers were not comfortable yet with their

[v] For context, at this time of writing, the cost of captioning can range from about $150 to $300 CAD per hour.

own ASL fluency. Additionally, access to familiar and qualified interpreters was important to jobseekers. Jobseekers explained how communication would flow more smoothly when working with an interpreter with whom they had a good relationship. They also emphasized how others perceived them was via the interpreter's voice. However, there were also barriers to finding familiar, qualified interpreters, and sometimes interpreters did not communicate things with the nuance that jobseekers would have preferred:

- "Most interpreters will say autism or person with autism rather than Autistic […] that nuance […] that's really important for my job." (DHH01-01 via ASL-L1)
- "I get different interpreters all the time […] the interpreter feels this need to explain it all, it's like, no, I just need this word because I know exactly what they're talking about […] I would sometimes rather just write back and forth with my supervisor because the interpreter is not getting it." (DHH01-02 via ASL-L1)
- "Both Deaf and hearing interpreters don't understand my signing style. And so, then I end up having to resort to typing during an interview to give my responses to the committee." (DHH01-04 via ASL-L1)

Finally, although accommodations may have been accessible, participants described additional challenges to utilizing these accommodations. These challenges sometimes centered on technological issues and digital inaccessibility, such as poor-quality captions, or issues with Artificial Intelligence (AI) powered tools; sometimes, less-ideal accommodations were provided, such as a speech-to-text app, instead of a preferred accommodation such as an interpreter. In other cases, other parties were put off by the use of accommodations; for example, VRS:

- "We have video relay services, which makes it a lot easier to call an employer [but] often people don't understand [...] or they're not comfortable speaking through a third party [...] so sometimes they'll just hang up." (DHH01-02)

Technological Barriers

Participants described a range of challenges in accessing and using technology, particularly in job search, workplace communication, and digital platforms. These barriers were especially pronounced for Deaf-Blind individuals and older adults, and often involved inaccessible software, complex systems, and phone-based services. These included:

- **Inaccessible software and platforms**
    - Deaf-Blind participants reported that mainstream tools like Zoom, Microsoft Teams, and Outlook were not designed with their needs in mind, making participation in meetings and digital communication difficult. "Zoom was not accessible to me […] Microsoft Teams is not very accessible as a Deaf-Blind person. And then Outlook calendar […] you got email on one side, and then you have the calendar on the other side. But in order to access it, you have to hit the icon at the bottom, and I constantly try to, and but it's working for me, and I don't know how to access that." (DHH03-01 via ASL-L3)
- **Lack of braille-compatible technology and support**
    - Participants highlighted the absence of accessible braille software and the need for technical specialists to help set up and use braille devices.

    - “I am quite frustrated, you know, on that learning journey because it's a challenge for me to catch things on the computer, or I'm missing different words or sentences as I'm reading anything on a computer, or as I'm using my vision.” (DHH03-01 via ASL-L5)
- **Visual design barriers**
    - Poor visual design such as white backgrounds, harsh lighting, and inaccessible fonts created usability issues for Deaf-Blind users. “With the colouring of things it's really hard to see. And you really need to make those adjustments with the colouring like, for example, making it in a dark mode or something, and that requires the skill to make those changes on the computer to make it accessible for you. So that's where a lot of our struggles are like just trying to figure out how to navigate the systems.” (DHH03-01 via ASL-L4)
- **Difficult evaluating and accessing technology**
    - Participants expressed frustration with the lack of trial options for assistive technology and the difficult of researching suitable tools online.
- **Phone-based systems and customer service barriers**
    - Automated phone systems and inaccessible customer service processes created major obstacles, especially for those who rely on relay services or cannot use phones easily.
- **Digital literacy and generational gaps**
    - Older participants expressed difficult navigating platforms like LinkedIn and understanding how to use AI tools effectively.

Communication Barriers

Participants shared several communication barriers they experienced. Language barriers were a frequently reported challenge. Some Hard of Hearing jobseekers expressed that they had difficulties understanding others with accents. Other DHH jobseekers were told that they needed strong English skills, despite ASL being their first language. Others who were newcomers to Canada found ASL easier to learn as a second language, and experienced difficulties learning English, creating barriers.

- “English is our second language, as Deaf and Hard of Hearing individuals. We all use sign language, and that's our first language. I mean, even for hearing people who have moved, they don't have English, right? So, hearing immigrants. But they get by in different ways […] I see a lot of Deaf people who have the ability to work, they have the skills, but the barrier is there just because of the English.” (DHH10-01 via ASL-L2)

Others shared barriers getting team members and employers to understand the fundamentals of communicating with them as DHH workers. Frequently, coworkers had to be reminded of DHH communication etiquette. Some covered their mouths, blocking speech-reading. Some would speak over each other or interrupt. Some jobseekers needed to constantly remind team members and employers to face them and speak up. Others had coworkers who expected them to be able to hear.

Acoustic Environments

A lack of accessible infrastructure, such as buildings designed without consideration for D/deafness or low hearing, were problems reported by several participants.

- “The building wasn't really designed with Deafness in mind. The alarms were sound based [...] there was no flashing lights to tell me that something might be wrong in the building because I can't hear it.” (DHH01-02 via ASL-S1)

Participants reported that acoustic conditions in the workplace can significantly influence their ability to communicate effectively and perform their duties. Certain job settings are inherently loud, making it difficult for DHH individuals to hear or lip-read. Locations such as warehouses, airport hangars, and open-concept offices often have persistent background noise from machinery, vehicles, or large spaces that amplify sound. One participant described how, in very loud work environments, their hearing aid automatically shuts off when exposed to certain high-pitched machinery sounds – a built-in safety feature. This created situations where they could not hear instructions, resulting in major communication barriers. Although they attempted to use written messages with coworkers, the absence of effective workplace accommodations ultimately led to loss of two jobs. Food service settings, in particular, are often cramped and chaotic, with little patience shown by others for communication challenges. As one participant noted, “people don’t really give you a lot of grace for not being able to hear them” (DHH06-01) and for another who dealt with 70-80 people as a waitress in a restaurant: “when I worked as a server, there was lots of times where I would mishear an order” (DHH11-01).

Structural features of buildings can unintentionally create barriers to communication. For example, physical separation, such as glass panes (e.g., pharmacies) and distant seating arrangements, can hinder clear communication. One participant described, “People are sitting so far away from you, with the pane of glass… and they’re also sitting like further down” (DHH06-01). Heritage and high-ceiling buildings often lack sound insulation, causing sound to bounce and echo. “You’ve got all of this noise bouncing around… heritage buildings are absolutely terrible for hearing, and so are places that have like open ceilings, like open pipes” (DHH06-01).

Background noise was a barrier. Even seemingly minor sounds can be disruptive when constant and/or amplified by hearing aids. As one participant shared, “if someone has… the heating on, I can hear that. And it sort of drowns out everything.” (DHH06-01)**.** In one participant’s counselling practice, a policy was proposed to place white noise machines in every room, intended to create a calming atmosphere for clients. This would have introduced constant background noise, making speech perception and communication significantly harder, for the participant.

Interactive events involving multiple speakers, such as shared offices, classroom activities, and question and answer sessions at conferences, were barriers as well:

- “That would be really difficult for me to have a shared office […] because having that background noise, or chatter, or you know, all of that while trying to focus would make it very distracting for me and really hard to hear” (DHH07-01)

Availability of Jobs

Participants described significant challenges in finding jobs that are accessible, appropriate to their qualifications, and compatible with their communication needs. The availability of suitable roles was limited by factors such as age, disability, remote work options, and job market conditions.

Participants described limited job options that match qualifications and needs. Participants seeking entry-level office jobs found that many required phone-based communication, which was a barrier for DHH individuals. They also expressed frustration with being overqualified or unable to find jobs that meet their salary expectation or accessibility requirements.

Remote work was seen as essential for some participants due to transportation barriers or additional disabilities, but many job postings did not offer this option:

- “I've noticed that a lot of the job postings don't have the option for employment at home because I'm considered to be somebody who is Deaf plus an additional disability. And so, then I have dual barriers because of not being able to access bus services and not having a car.” (DHH01-04 via ASL-L1)

The overall job market was also a challenge. Even with professional networks, participants noted that many companies simply weren’t hiring, reflecting broader economic challenges.

Limited Networks

Participants described how limited professional networks and lack of meaningful support from employment organizations created barriers to finding work. Even those with strong networks struggled due to poor job market conditions or gatekeeping within communities. Some participants relied on friends and family for job leads, but these networks were small and sometimes exclusionary.

Formal employment services were described as minimally helpful, often limited to basic resume assistance without deeper support for job placement. In particular, newcomers to Canada often lacked the network necessary to secure work:

- “If you know the right people, you can get hired into certain workplaces. But if you don't know anyone on the inside, good luck trying to get in. In terms of British Columbia and immigration here for Deaf people who are moving in, it's not easy when you're looking for work.” (DHH10-05 via ASL-S1)

Qualifications

Participants identified several barriers to employment related to qualifications, such as language skills, job-related requirements, mismatches in education and/or experience, limited access to training and professional development, and perceived lack of enthusiasm.

High-level spoken/written English was often required, even for roles not needing verbal communication. One participant shared that application processes are “so complicated it requires a higher level of literacy” (DHH10-01 via ASL-L2) even for positions at McDonald’s or Burger King. DHH applicants were disqualified due to perceived insufficient English skills, including for short-term contracts, promotion, and advancement opportunities. Employers do not recognize ASL fluency or history of signing as sufficient for teaching ASL. In general, language requirements pose significant employment barriers, particularly for individuals in the Deaf-Blind community.

Other job-related requirements also posed barriers. Driver’s licenses and vehicle use were required as part of job description and/or work policy, even when not essential to the role. Employers frequently

refused alternative transportation options (e.g., taxis) suggested by candidates as accommodations. Unnecessary physical requirements (e.g., lifting 50 lbs) were sometimes used as blanket criteria that's "...not really even relevant to what the job position does..." (DHH01-04 via ASL-L1).

Credentialism was also a barrier. Even when experience is strong, a lack of formal education (e.g., university degree) was often a barrier. Additionally, specific certifications or degrees were often required for entry-level computer technology roles, despite tasks being trainable and equivalent experience available. Employers or professional practice norms required continuous acquisition of certifications, specialized modalities, or advanced training beyond a completed degree to remain competitive, eligible, or promotable: "when you get your Master's degree, you're not done with education. Then you need to be able to compete and stay competitive […] and that requires advanced training […] outside of a degree" (DHH08-01) and need to update skills in new software or technology
Work permits may have criteria that block opportunities (e.g., restrictions such as permit holders not being allowed to work with children or duration of status). Additionally, a lack of proper references, from country of origin, despite efforts to obtain them, disqualified many participants from jobs.

Participants described a work experience "loop" in which employers don't give people opportunities to gain experience:

- "Sometimes when you're seeking employment […] they want work experience. However, how are you supposed to get work experience if people don't want to hire you for a job in the first place?" (DHH10-01 via ASL-S1)

Over-qualification can also be a barrier: "I could be qualified for jobs that are slightly higher up. But I'm not qualified for jobs that are slightly lower" (DHH06-01), or used as a reason to "brush [candidates] off" (DHH07-02).

Access to ongoing training and professional development opportunities were limited. Funding programs do not necessarily assist with obtaining non-degree specialized training: "Many programs don't provide assistance unless it's a degreed program by a Canadian institution […] many of these [specialized] trainings are done by independent people that have created modalities" (DHH08-01).

Wrap-around Considerations

Participants highlighted systemic and logistical barriers that affect employment access and participation.

Economic precarity was a prominent theme across the jobseekers who participated. Participants experienced multiple barriers with regards to social assistance benefits (e.g., denial of applications, need for general physician, psychiatrist, and social worker to fill out form, waiting 6 months or more for approval). They also described **the loss of social assistance benefits when working:** "If I got a job, would they cut me off on [social assistance program]. Because I haven't been working. There must be a ratio when you don't have enough money to live on, and so when you work and collect [benefits] like you've got your monthly bills to pay […] in Vancouver, things are very, very expensive […] it's not enough for me to be able to live."

Cycles of low income and the cost of searching for work trapped participants in economic precarity, including housing precarity:

- "So, I've been living with the stress and the pressure and insecurity that I will not be able to pay my rent" (DHH08-01)

Transportation barriers were commonly reported. Employment service organizations tended to only cover vehicle-related costs after probationary periods are completed. One participant described trains as overwhelming and difficult to navigate due to noise, poor audio announcements, and inaccessible apps. Designated accessible transit is often unavailable or limited in hours, requiring advance booking and restricting flexibility. Inflexible transportation also prevented involvement in social activities outside work. Participants with multiple disabilities (e.g., DeafPlus) face challenges finding jobs that don't require a car, especially when public transit is inaccessible.

"[Bus service for people with disabilities] isn't available every time you need them…So you have to book a few days in advance or there might only be certain hours that they're able to give you a trip. So if you have to have a meeting or it has to be in person, I'm really dependent on what [bus service] can offer me" (DHH01-04 via ASL-S1) and "I had also the bus schedule I had to adhere to, and that wasn't going to work" (DHH10-02 via ASL-L2)

Physical and mental health disabilities compounded support needs. Some jobseekers had no primary care provider, and shared that this hinders their ability to be eligible for disability supports: "I don't have a family doctor because of the doctoring shortage which prevented me getting persons with disability status […] urgent cares turned me away from doing that paperwork" (DHH08-01)

Participants described the trauma of searching for work and asking for help, which negatively affected their mental health:

- "So when I made an application over the summer, many times the trauma kept coming back, and I had to relive that trauma […people with disabilities] have to keep going for interviews […] sometimes […] you just break down, and you want to disengage" (DHH02-03 via ASL-S2)
- "Where you're going around all the different social service agencies sort of like a merry-go-round, a potpourri, a fabric of different things (move finger and body in circular motion). You're going around, each time, telling your story, being vulnerable, asking for help […] then finding, you know, we're going to invest in someone, but then stop investing in someone, and risk it all is nonsensical and traumatic" (DHH08-01)

And access to mental health supports were limited: "So, not being able to get the continued wraparound supports for emotional and psychological support puts me more at risk of not being able to continue the work that I'm doing […] individual counseling was not offered under the [provincial health insurance]" (DHH08-01)

Psychological Effects

A barrier to employment reported by participants is the psychological effects of hearing loss, such as **overwhelm, exhaustion, stress, anxiety, self-blame, spiralling, isolation**, **and trauma** to the point where it influences employment services sessions and jobs. Being Deaf or Hard of Hearing, according to one participant, is a:

"difficult situation…because it's too much work…It's really causing me stress and trying to figure out, did I hear it right? And sometimes, if I don't understand what the person is saying, because there's a lot of

trainings, a lot of different meetings throughout the day, so even if I try to be good at it, it's still hard work, and causes my anxiety, because I'm afraid that I didn't get it right. I didn't get it right, and if I made a mistake, I blame myself: 'You should have told them that you didn't understand." (DHH05-03)

Some described the effort of hearing as significant and exhausting. Others described psychological impacts such as isolation, depression, and low self-esteem. Self-esteem can be negatively impacted by discriminatory actions such as judgmental looks and denial of accommodations. As one participant expressed: "My self-esteem just sunk at that point" (DHH10-04 via ASL-L2)."

Relationships

Participants described feeling excluded from workplace social interactions and events.

Balancing social effort and the effort involved in communicating was a challenge. One participant noted that limiting conversation helps them stay focused and connected to their work, but it also means fewer opportunities to build relationships: "I mean the pros for me, if I'm not having too much socialization or conversation, then I'm more connected to my work. I'm just sort of quietly getting my job done, and I do like that, but at the same time, it'd be kind of nice to have the opportunity to mix it up and chat with coworkers" (DHH04-02 via ASL-L6)

Many participants had been socially excluded in daily interactions:

- "[Co-workers will] go without tapping me on the shoulder and saying 'hey, we are going to lunch.'" (DHH01-03)
- "There has been lots of times where two co-workers will be talking in hushed tones and then go quiet when I approach" (DHH11-01)

Transportation limitations (e.g., bus service ends early) and lack of wheelchair-accessible venues could also prevent attendance at after-work activities.

Some participants experienced overt discrimination from coworkers, including being ignored in team settings; being the target of gossip or teasing; and the deliberate creation of a hostile work environment: "…someone trying to sabotage my job, like, not teach me much to do that job […] they might find ways to make it harder […] there was some mistreatment between managers and coworkers towards me, so I'm not being treated fairly" (DHH09-01).

Employment-related Facilitators

Community Organizations

Participants shared the ways they were supported by organizations that support DHH jobseekers. Specific organizations mentioned, and the supports they provided, are listed below.

- WorkBC
    - Provided funding for ASL Interpreters
    - Provided funding for hearing aids
    - Provided funding to adapt a personal vehicle to fit a wheelchair
    - Provided access to technology and support devices
    - Provided resume and cover letter support

- CNIB
    - Partnered with Wavefront
    - Provided work training experience
    - Provided resume and cover letter support
    - Helped participant to find an Intervenor
    - Provided job search support
    - Provided job application support
    - Connected jobseeker with employers
- Wavefront
    - Provided resume support
    - Provided job search support
    - Provided access to upskilling
    - Provided interview referrals
    - Negotiated accommodations with an employer
- Canadian Hard of Hearing Association
    - Connected jobseeker with a mentor
- Queer ASL
    - Access to ASL Interpreters on a sliding scale

A few noted that there is sometimes limited success or effectiveness of these supports. A few participants described discrimination or negative interactions, like being pressured to use an ASL Interpreter when they prefer written English. A couple Deaf participants were also critical of some employment services, saying that they are often led by hearing people and do not account for the needs of Deaf jobseekers. One participant felt that employment services were not equipped to support self-employed individuals or entrepreneurs.

Accommodations

Participants shared the accommodations they used that facilitated their labour market participation. As one participant noted, “the things that I specifically need as accommodations aren't things that the employer has to provide themselves for the most part.” (DHH06-01) Although some accommodations were provided by the employer, many accommodations are the result of the personal initiative of the jobseeker.

Personal accommodations included:

- Mobility aids
- Service animals
- Video Relay Service
- Written communication (e.g., email)
- Lip reading and gesturing
- Hearing aids
- Noise-cancelling headphones
- Magnifying glasses
- FM system

- Alarms that light up and vibrate
- Tablets
- Tools like Otter AI and Grammarly

Workplace accommodations included:

- Buddy systems
- ASL Interpreters
- Text-to-speech apps
- Visual aids (e.g., maps) and written communication
- Offering Zoom meetings instead of phone calls
- Employers who know ASL
- Headsets & speakers
- Ergonomic chairs & desks
- Keyboard adaptations (e.g., added Velcro)
- Access to counselling through work
- Tailoring job tasks (e.g., reassigning phone work to other employees)
- Instant messaging systems

Peer Support

According to many participants, supportive co-workers play a crucial role in fostering accessible and inclusive work environments for DHH employees. Their assistance can take many forms, including:

- Gesturing when customers are present for DHH folks to attend to
- Stepping in to provide help when requested
- Filling in communication gaps using Sign language, scripts, visuals, written notes, maps, repetition of missed content, or by taking phone calls
- Providing appropriate technology and accommodations
- Vouching for DHH employees' work ethic and teamwork skills to supervisors
- Supporting accommodation needs of DHH colleagues (e.g., accepting request not to use white noise machines; following gentle reminders about communication needs)

Personal Strategies

DHH workers employ a range of proactive strategies to improve communication, accessibility, and inclusion in the workplace. These personal approaches often supplement organizational supports and help foster more equitable work environments.

Many participants who used ASL interpreters did a great deal of coordination and planning work. Having a pre-established list of preferred interpreter contractors can ease the burden on employers and shift attitudes toward accessibility. As one participant noted, "'I have [an interpreter] available.' So that really helps to…take that workload off my employer and they also go, 'oh, actually…maybe it's not that bad to have an interpreter' and it makes them think" (DHH01-01 via ASL-S1). Preparing interpreters with relevant vocabulary and identifying who needs specific interpretation helps streamline communication.

Some participants were engaged in workplace or community advocacy efforts. Participation in accessibility, union, and human rights groups helps shape inclusive policies and standards, improving experiences for all DHH workers. As well, collaborating with other DHH colleagues fosters shared learning and accessibility solutions.

In the workplace, participants often expressed their needs by gently reminding others of their hearing loss or disability, explaining strategies that support optimal hearing, and requesting accommodations (e.g., quiet spaces for work, communication in writing, ability to see faces to lipread). One participant described how this process was for them: “I had so many examples of discrimination, and having to fight for like phones that could connect to my hearing aids and (pause) it was never easy. I feel like I’m a lawyer.” (DHH08-01)

Many participants made their own adjustments to the workplace environment and/or technology, such as:

- **Optimizing technology**: Setting up devices to enhance hearing, reduce background noise, or eliminate distractions helps maintain focus
- **Quiet spaces**: Using private rooms for phone calls or serious conversations ensures better auditory clarity
- **Note-taking and written communication**: Requesting colleagues to take notes during meetings or relying on text or email correspondence helps fill in communication gaps

Participants also used social strategies to enhance communication accessibility, including:

- **Strategic positioning**: Sitting at the front during meetings or checking in with colleagues afterward helps compensate for missed information
- **Mentorship and support**: One-on-one mentorships with colleagues aid in learning and adapting to job responsibilities
- **Leveraging relationships**: Friends and colleagues can vouch for work ethic and teamwork skills, reinforcing credibility with supervisors
- **Selective communication**: Engaging with colleagues who speak clearly or have louder voices can improve understanding
- **Bluffing and adaptation**: Some participants described “filling in the blanks” or pretending to understand in order to keep pace with conversations, highlighting the need for more inclusive practices
- **Proving oneself**: One participant described working harder to demonstrate their capability and prove themselves in the workplace, while another advocated for themselves by showing they could perform tasks effectively when faced with judgment about their abilities
- **Making oneself vulnerable**: One participant mentioned a story in which their request for closed captioning accommodations had to be passed through different government channels and this required “a level of vulnerability in this process of identifying yourself as a person with a disability” (DHH08-01)

Many took on the responsibility of researching and learning for themselves, such as by:

- **Personal research**: Exploring strategies for managing Deafness and hearing loss in the workplace helps supplement formal resources
- Using and bringing own tools or researching and seeking out new technology: Some participants used tools available (e.g., Grammarly, ChatGPT), brought their own assistive technology (e.g., vibrating alarms, speech-to-text applications) with them to work, and researched or sought out new devices to meet their needs

Strategies for Finding Work

Participants shared their strategies for finding work, such as through their network or by responding to job advertisements.

While many participants also applied to job ads, participants generally felt that they had more success finding work through their network, such as at family events, through friends, and through family. However, one participant found that people can sometimes be protective of job openings:

> "There's other people who are like, "Oh, no, these are my jobs. I don't want to tell you about those, because I want to keep them for myself, or, you know, this is for my family. I want my son or my daughter to take this job."" (DHH03-01 via ASL-L3)

Decisions about Disclosure

Participants shared their thoughts about whether and when to disclose their identity as a d/Deaf or Hard of Hearing person. In general, participants felt that there was more benefit to disclosing right away than avoiding disclosure:

- "At the end of the day [..] I decided just to be transparent about it and hope that would lead to success because I'm going to be on a Zoom call with you or I'm going to be sitting in your office. You're going to find out anyway." (DHH01-04 via ASL-S1)
- "My advice to people with hearing loss is disclose it as early as possible." (DHH05-03)

However, some did not think disclosure was always advisable:

- "I don't identify as Deaf or Hard of Hearing on my resume because I did put it in there once, and I didn't even get a single bite whatsoever, even though I was quite qualified for that position, they weren't interested once they saw that." (DHH10-01 via ASL-S1)
- "I remember one employer told me in an interview if I identify myself in application that I am Deaf or Hard of Hearing, there's a chance that I might get screened out […] I remember I went to an interview and I mentioned that I'm Hard of Hearing or Deaf and they told me, "Don't mention it. If you mention it, then it looks like you will not get that job."" (DHH09-01)

Importantly, disclosure is dynamic. Jobseekers and workers may choose to disclose to some parties (e.g., HR) but not others (e.g., coworkers), and they may opt to disclose at different stages in the employment life cycle. Participants indicated that they sometimes chose to disclose selectively, only sharing what they felt was necessary. For example, if they had an additional disability (such as ADHD), they may opt to share their hearing status, but not their disability.

One participant highlighted the double-bind of disclosure, suggesting that both disclosing and not disclosing can create problems. Many shared the uncertainty and fear they felt around disclosure:

- “I was a bit scared to say that I have some sort of a disability, because I don't want to highlight, like, oh, now they're gonna have this duty to accommodate, and they're maybe not going to want to hire me.” (DHH07-01)
- “There's a level of vulnerability in this process of identifying yourself as a person with a disability.” (DHH08-01)
- “How much fighting do I want to do? […] It also goes to the identity question: how do you want to be perceived in the workplace?” (DHH08-01)

Success Stories

When asked about successes in their career, participants shared numerous success stories, including successes in finding inclusive work, gaining skills, and contributing to the success of their workplace.

Success in finding inclusive work:

- **Finding work where they are valued**
  - “It was positive because they recognized the value of my experiences and make me feel like I was a valuable member of the team.” (DHH01-03)
  - “I said, “Why were you interested in hiring me? Why did you choose me?” And they said they viewed me as a good leader. For many years, they've seen my work throughout the community. And so that felt really good to see […] that appreciation.” (DHH03-02 via ASL-L5)
  - “They understand my hearing loss very well. They treated me with very respect […] They trusted to train the new person to the job. They trusted my skill, my ability.” (DHH05-04)
- **Finding work where others learn ASL**
  - “People have learned sign language for my benefits.” (DHH01-04 via ASL-S1)
  - “I had a placement in a school district […] we had an ASL club that got up and running […] I actually didn't need interpreters for lunchtime anymore […] all of the kids […] knew how to communicate with me.” (DHH01-01 via ASL-S1)
- **Finding work where they are accommodated**
  - “My supervisor [will] just grab the phone app to translate it to text everything they're saying. And then they'll just show it to me and be like, “Hey, does that make sense?”” (DHH01-02 via ASL-S1)
- **Finding accessible work**
  - “My volunteer job in grant writing was good because it was virtual like this. And captions in like Zoom and Teams and Google meet are good. So and we would primarily communicate over Slack, which was nice. And email.” (DHH06-01)
- **Finding meaningful work**
  - “I love helping people […] I'm a counselor […] I'm doing the thing that my clinical supervisor and Professor, said. He said, “You're a therapist.” Like, I'm doing therapy.” (DHH08-01)
- **Transitioning to self-employment**
  - “[I] shifted my search to self-employment [...] my experience with that was empowering in some ways.” (DHH08-01)

Successes in the workplace:

- **Helping clients succeed**
    - “I think I measure my success with my clients, because I feel successful already if I see my clients find work.” (DHH05-03)
- **Contributing to successful projects**
    - “I've worked on some interesting projects that have been, I mean, from a business perspective successful for the company […] that was kind of like a one year of intense work and then went live. So that was successful from a technological point of view.” (DHH05-01)
    - “When I worked for [technology company] they released [a] specific […] contact content pack […] in this game. When the game is finished, at the very end, there's all the credits. And then it felt really good to see my own name be on there.” (DHH04-02 via ASL-L7)
    - “We're producing the largest dam […] in the world […] I was so happy because I can tell people […] I work on it.” (DHH07-02)
- **Streamlining processes**
    - “I was able to streamline quite a few things with a quite a bit of time savings.” (DHH05-02)

Career Advancement

Career advancement meant many things to participants. For some, it meant moving to a new role (e.g., from counselor to psychologist, into management/leadership positions, into different departments in the workplace), becoming more involved with their Union. For others, it meant gaining experience, new skills or having more input on processes. Some considered pay increases, more hours, and more responsibilities to be part of career advancement:

> “When I did work for the warehouse I had the starting wage […] and my boss was very impressed with my work at that time, he said, “You're a very good worker,” and he decided to give me a salary, which was better than the hourly wage, and that was really cool […] And then [after] one year the boss decided to give me another raise. I think it was a dollar increase there, and I accepted that; that was great.” (DHH03-02 via ASL-L5)

A few participants were not prioritizing advancement at the time of the focus group, saying they were happy where they are or were not competitive by nature. A recent graduate felt unsure about what career progression looks like for them because of the current labour market:

> "If I was actually going to be a writer or a researcher, which I have volunteered at, then it’s difficult to figure out what the actual career progression is, because entry level jobs have been declining so much." (DHH06-01)

Barriers to Advancement

Participants identified a range of systemic and situational barriers that hinder career progression for DHH individuals. These challenges span from structural inequities to interpersonal dynamics in the workplace. Limited access to qualifications and experience were another recurring theme in the context of career advancement as well.

Job loss can interrupt career progression and reduce chances for promotion or skill development. Shifts in the labor market, including the decline of entry-level jobs and automation of roles like data entry, have also made it harder to identify clear paths for advancement. As one participant noted, “It’s difficult to figure out what the actual career progression is… entry level jobs have been declining so much… even stuff like AI, like data entry isn’t a job anymore” (DHH06-01)

Discrimination and bias were also major themes in barriers to career advancement. Participants reported being denied roles or overlooked for hearing people due to perceived communication barriers. One participant was discouraged from becoming a server or manager because people didn’t understand them and vice versa. Other participants described lack of visibility for promotions and advancement due to communication barriers related to personalities, co-worker and manager interactions, presentations, and workplaces. Many participants were placed as lower priority for advancement: “I’m basically the on-call person for when people get sick. And I’m the last one that gets that phone call” (DHH11-01).

Employers have assumptions about communication that impact decisions for promotion and advancement: “And I’m looking for advancement and always, always, always the issue of the phone comes up. Or, ‘How are you going to interact with hearing people in person?” (DHH10-01 via ASL-L2)

Working in small teams can limit opportunities for advancement into management roles due to fewer available positions. One participant described how it’s difficult to get promoted within Deaf organizations specifically: “There’s limited opportunities for promotion within the Deaf organizations, because, again, they’re just so small and the income’s not stable. So, there’s not a lot of opportunities for promotion compared to larger hearing organizations […] and have maybe more offices and more opportunities” (DHH10-01 via ASL-L2)

In some cases, employees who did not disclose their disability but had more qualifications, seniority, and experience were passed over in favour of more sociable employees. One participant reported favouritism within their union: “I feel like they think the people with more seniority are more important than me, because I’m at the bottom of the list and I just don’t have those opportunities to progress” (DHH02 via ASL-L2)

Participants reported how hostile work environments and discrimination lead to blocking promotion and advancement. One participant reported retaliatory action: being demoted to a lower level of seniority by their union for reporting abuse.

Self-employed workers experienced unique challenges, including financial barriers to operating their businesses, as well as strict restrictions for community supports. Community organizations have strict criteria for supporting underemployed or self-employed people (e.g., person must be working under a certain amount of hours or have zero income) and block participants from getting start-up supports: “Now I made one cent – I could not get into their self-employment program. So, they partnered with the [community organization] and they had like a stipend. So, they were paying people that were in the [self-employment program] to help them support their business in the first year […] and it included a monthly payment. So, like that program would have been great for me, because then I would have been independent (frustrated tone)” (DHH08-01)

Recommendations

Participants offered practical and thoughtful recommendations to improve accessibility, inclusion, and retention for Deaf, Hard of Hearing and Deaf-Blind jobseekers. Some of these were specific to workplaces, some were for community organizations or employment services providers, and others were for broader, societal-level change.

In the workplace

- **Use of visual aids and step-by-step screenshots**
  - "And in the workplace, I think they have to practice visuals. Like hearing loss people tend to be more visual. So, for example, the lights were to switch off and on. So, there should be a very good marking that this is the light, or this is where you're gonna push. Something like that, so be visual in instructions as well. So, we don't want to belittle them, like children, like a flashcard, but sometimes it helps to be more clear in special instruction, especially in operations." (DHH05-03)
- **Universal Design**
  - "Let's get back to universal design, that's my other recommendation. Let's make the phones accessible." (DHH08-01)
- **Impartial mediators**
  - "You shouldn't be taking these issues to your manager. They should be going to an independent person. Why is the manager involved in this? Because the manager has their own budgets? No, we need offices of accommodations." (DHH08-01)

For community organizations

- **Incentives for inclusive hiring**
  - "They could at least figure out like a small incentive or something for hiring someone that has those experience that has a lot of potential." (DHH06-01)
- **Support for job retention, not just job search**
  - "Employee retention is also important for job help to do. Like I've gotten jobs before, but I haven't kept them and I think that it should also be in the like job help realm to help educate people."

For policymakers

- **Greater access to ASL learning opportunities**
  - "[If] ASL was offered in schools, you know, and offered, maybe there's some sort of incentive to everyone else." (DHH06-01)
- **Language rights**
  - "The Government has to accept that There's lots of different languages, and they have to start with making sign language, an official language.'" (DHH02-03 via ASL-L2)
- **Expand self-employment opportunities**
  - "My recommendation is, we have to have more self-employment opportunities because it's so empowering." (DHH08-01)
- **Enforcement of policy**

    - “We really need to help the government or have the government help to keep it simple and to enforce the legislation they already have.” (DHH02-03 via ASL-L2)
    - “The laws have to have ‘teeth’.” (DHH08-01)
- **Education, awareness, and societal change**
    - “We need change, societal change. We need to build a culture of acceptance.” (DHH08-01)

Employer Awareness

Recognizing that employers’ attitudes and knowledge about DHH workers were significant barriers, participants also made recommendations for improving employer awareness, including:

- **Understanding DHH identities and how to work with DHH workers**
    - "What to expect with hiring a Deaf worker, etc., would be a huge benefit" (DHH01-01 via chat)
    - “I think we really need more education. Education about the Deaf-Blind experience and disabilities in general. I think people lack an awareness related to people with disabilities, and how to work and engage with them.” (DHH03-01 via ASL-L4)
    - “I think that's one thing that employers should be aware and educated about hard of hearing, and so that they know what kind of accommodation the candidates and potentially an employee or employees in their company.” (DHH05-03)
    - “I think employers should be aware that hearing loss varies. It's not one size fits all, and also hearing aids doesn't mean that the person can hear […] What's the right etiquette? The proper way of, you know, taking their attention, not talking at their back, they should be facing them face to face, especially people who are lip reading.” (DHH05-03)
- **Educating to reduce discrimination**
    - “We need to work on changing attitudes. I think that's a big thing is changing attitudes. Again, people are very unaware, and we need to raise that awareness because once we raise awareness, then that can help reduce discrimination.” (DHH03-01 via ASL-L4)
    - “The employer needs to find ways to improve the work culture, the work environment. The employer should see all employees with different diversities or ability or disability. They should treat all the employees as an important worker in the company, so no one should be looked down upon. So, all these employees should be treated as important in company.” (DHH09-01)
- **Knowledge of capabilities and strengths**
    - “We need to make sure that employers know Deaf people can do all these things. We're capable […] There [are] people who are hearing that are distracted by things going on around them, but we want to emphasize the things that we are exceptional at […] we're very focused […] we are able to accomplish our work quite quickly […] we are very hands on […] We're very, very visual. And so if we see something being done, we can copy that and pick up those skills quite quickly. If you show us once, we'll be able to do it.” (DHH10-02 via ASL-L2)
- **Knowledge of accommodations**
    - “Accessibility isn't only about the interview process. Accessibility is an ongoing process from the beginning to the end. I've come across this several times where employers are

like, “Okay, yeah, I’ll provide you an interpreter for the interview,” and everything's great, but it actually stems much further than that, and accessibility is from the minute you walk into the door, and everything afterwards: staff meetings, orientation. Everything needs to have an accessible lens put on it.” (DHH10-01 via ASL-S1)

- **How to hire ASL Interpreters**
    - "I think ultimately businesses need to have an outline of how hiring interpreters/captioners works, standard rates” (DHH01-01 via chat)
- **Awareness of and compliance with policies**
    - “B.C. needs to add law requiring certain accommodations, forcing businesses to have more fair hiring, especially for interview processes. When there's no legal language there, there's no teeth, so it's easy for employers to just discriminate and not bring people in for interviews.” (DHH10-03 via ASL-L2)

One participant shared promising strategies for education employers, such as 30-minute seminars, and videos showing what it is like to be DHH:

- “Only once have I ever experienced someone in management at a job going out of their way to find a video that had audio that mimicked what a Deaf or Hard of Hearing person can hear. And played that video for the owner of the business, so he would understand. That was huge.” (DHH11-01)
- “Maybe a short 30-minute seminar with information on hearing loss. The different types, like a little info session surrounding the disability. And then giving tips, tricks, and advice on how to communicate with those individuals.” (DHH11-01)

Hiring Practices

Participants made recommendations for how employers can adapt their hiring practices to be more inclusive for DHH workers:

- **Show you are open to hiring DHH workers**
    - “Employer should put in their ad that they provide accommodation, like CART or ASL interpreters, so that the person who has qualification and will have the motivation to apply, and will not be timid in disclosing their disability.” (DHH05-03)
- **Simplify the job application and job description**
- **Show flexibility in the job description**
    - “For the hearing loss people, only certain tasks is the limited, but they can give different what they can do. Assign those job like scanning or filing job for those people. Now, no more stocking everything, but now a lot of computer things. Everybody knows lot of other stuff, they can work like that. They can diverse the job classification or description.” (DHH05-04)
- **Hire based on skills**
    - “Really important to focus on the skills on a resume. For Deaf people and Deaf-Blind people, a lot of them struggle with English. The English language is not their first language, and so that can be a big barrier when they're searching for work, especially

even the process of creating a resume, applying for the job, making a cover letter. Sometimes a boss might review that resume or cover letter and think, “Hmm, something's wrong here. This English is not proficient,” and they might pass on that resume and go on to the next one.” (DHH03-01 via ASL-L4)

- **Establish and document accommodations during onboarding**
- **Implement incentives**
- **Ensure inclusive practices extend past hiring**

Training and Advancement

One participant discussed how Deaf and Hard of Hearing workers should be trained so they can advance in the workplace, and given enough time to learn and show their skills:

- “I feel the employer need to have a fair career advancement. Like when they're trying to employ employees, they might need to train them for that job. They need more than one day or two days, need to take like more than one week just to see if the employee can do the job. So, I feel that a fair evaluation to continue the advancement of that job, I need to continue to do it more than one week, and to tell them I can do the job. And increasing pay is not enough. You need to do proper training, you need to try a job long-term.” (DHH09-01)

Access to Supports

Participants recommended several things that would help them access supports or accommodations:

- **Make an effort to secure the same ASL Interpreter**
  - “Having a consistent interpreter versus just whomever might have been available makes it easier not just for me, but for everyone involved […] the interpretation is just smooth versus having to reorient a new interpreter every time.” (DHH01-02 via S1)
- **Hire ASL Interpreters for informal work social events**
  - “Socializing and being able to be in that environment with other coworkers. I think it might be good to occasionally even have those interpreters there, so that way, it doesn't feel overwhelming or heavy on their coworkers.” (DHH04-02 via ASL-L8)
- **Train ASL Interpreters to use specialized language**
  - “For [DHH01-01’s] sign for neurotypical, for example, I think we need specific training for interpreters so that they are aware of this specialized vocabulary in sign language.” (DHH01-04 via ASL-L1)
- **Ensure job supports help find people who are hiring**
  - “It would be more useful if places that were actually helping people get jobs knew who is hiring, what they're hiring for, when they're hiring.” (DHH06-01)
- **Ensure DHH jobseekers know what they can ask for**
  - “Employees or job seekers should ask for accommodation, but the problem is, they don't know what to ask for, what's out there.” (DHH05-02)
- **Involve DHH workers in policy development**
  - “In a company, hard of hearing employees should be involved in policy development to make it more inclusive and because they have the different perspective.” (DHH05-03)

- **Be proactive**
    - “I get that it is expensive, but […] If you do stuff with accessibility in mind first, as opposed to trying to put it in place after it's much easier. […] if you're asking for interpreters, be prepared […] Have the big picture in mind when you're planning. Because it's hard to put it in place late, it can be more confusing. It can be more complicated, expensive.” (DHH02-03 via ASL-L2)
- **Establish formal peer support**
    - “[Give] recognition to a person who is willing to share, to be a hearing buddy […] a peer support in the company so that this hearing loss person or candidate is not isolated.” (DHH05-03)
- **Need for funding**
    - “Here we get nine hours week of funding for an intervenor? (Incredulous tone) That is not enough! You know, in Ontario they get 24 hours, right? To 32 hours. They are so lucky.” (DHH03-02 via ASL-L5)
    - “Free hearing aids for everyone who needs them (chuckles around the table). Or devices, or whatever people can use.” (DHH05-01)
    - “I think to create a new program, or something that the employer will be able to accept funding from government, or this will train these people with new job placement or internship, or anything that we need to get that first job or first work experience.” (DHH09-01)
    - “There should be a special budget for supporting people who have accessibility needs.” (DHH10-03 via ASL-L2)
- **Address eligibility for employment services**
    - “WorkBC, I had to do an intake. And I actually had to get laid off for a little bit in order to access it. And it was a financial strain, and mental-emotional strain, as well, to be going through that. It took a couple of months to get approved […] it was accessible, but I had to be unemployed or irregularly employed, so not steady hours.” (DHH11-01)
- **Streamline access to devices**
    - “We need to streamline the processes for people to access technologies if they decide they want cochlear or hearing aids.” (DHH08-01)

Technology

Participants emphasized the importance of accessible, customizable, and affordable technology to support their communication and participation in work and daily life. Key findings focused on visual accessibility, assistive software, phone alternatives, and the need for government support.

- **Visual accessibility and customization**
    - “And I also think it would be really nice if we had, you know, like a computer or something that can, you know, more easily change the background of pictures or screens. We really would like things to be more visually accessible. Colours can be a real big barrier. You know, like, if there was an app or website or something that's not accessible, it can really make our work and navigation a lot harder” (DHH03-01 via ASL-L4)

- **Ability to test and evaluate technology before purchase**
- **Access to and affordability of assistive software**
    - “I think there should be some sort of cap on the cost, or it's like, you know, if we have healthcare in our country that we all pay into provincial, municipal, like, programs, there should be something within that that covers some of the costs. It shouldn't all be the onus on the employer. The government needs to step up.” (DHH07-01)
- **Captioning and CART for meetings**
    - “I think by making the workplace better for hard of hearing people, that make it better for everyone. So just sort of setting up meetings, the automatic captioning, regardless of whether or not people are hard of hearing or not to sort of have that available. I know that in Zoom Meetings I tend to ask for it even when people don't. I think there was a talk a week or two ago - when you advocate for yourself, you're actually advocating for other people who may not want to speak up. So making the environment quiet where people can concentrate, having meetings that are accessible, which means CART, closed captioning.” (DHH05-01)
- **Alternative for phone-based communication**

Modalities of Work

Finally, many participants emphasized the importance of diversifying work modalities to enhance inclusion of DHH individuals in the workforce. They recommended:

- Increasing opportunities for hands-on, in-person roles that rely less on technology or machinery, which can pose communication barriers
- Shifting away from customer-facing entry-level positions toward roles that allow for more autonomy and reduced auditory demands
- Facilitating more remote work options

Employer Findings

In this section, we will share preliminary findings from the employer interviews, including their hiring practices and approaches, their experiences hiring and working with DHH workers, and their recommendations for enabling more employers to hire DHH workers.

Hiring Practices and Approach

All employers in this study to date described having a willingness to hire diverse candidates:

- “We want to be inclusive. That’s one of our aims, our goals […] why limit who we hire?” (EMP01-01)
- “We have a general statement that we’re […] open to diverse candidates and encourage them to apply.” (EMP02-01)
- “When we do our postings, we always are trying to hire from diverse populations.” (EMP03-01)

However, most employers acknowledged that they have not specifically targeted DHH workers in their calls for diverse candidates:

- “We’ve just never gone out of our way to target that group.” (EMP01-01)
- “We have a general statement […] it didn’t name specifically d/Deaf or Hard of Hearing.” (EMP02-01)
- “We don’t target one accessibility group, but we do encourage more representation.” (EMP04-01)

Most employers had considered ways to make their hiring practices accessible:

- “It’s one of those things where I always have in the back of my head […] let’s get the resources and the tools.” (EMP02-01)
- “One thing I’m always doing is making sure that we have a space that is quiet […] I’m doing that for myself too […] I always print out copies of the interview questions […] for the candidate to use.” (EMP03-01, DHH)

Experiences Hiring DHH Workers

Despite the willingness to hire diverse candidates, most were not successful at hiring DHH workers:

- “Not that I’m aware of.” (EMP01-01)
- “I cannot think of one single person that identified as d/Deaf or Hard of Hearing.” (EMP03-01)

A couple of employers had hired a worker and a volunteer who identified as DHH:

- “We did have one that I know of that said that she was Hard of Hearing […] we do have a volunteer who was doing remote work.” (EMP02-01)
- “We had a woman […] she's been a long-time employee, so, she's having more problems with her hearing. So, what happened was she went on a leave for about two years. And then she came back, and we rehired her for a different position.” (EMP05-01)
- Both employers felt the nature of the position for these DHH workers was accessible, which facilitated hiring:“I think it was the nature of the job itself. It really spoke to them, and it was something that they were maybe interested in. I would say for the volunteer, because it was remote, it was probably a little bit easier to do that and have more e-mail communication and doing writing and things like that as opposed to an in-person type of situation.” (EMP02-01)
- “We rehired her for a different position, which was compatible for what she could do because it was inside the office […] there's a lot of work outside where it's very noisy, so it wouldn't be safe. And so the environment was good. She was very experienced.” (EMP05-01)

Barriers to Hiring

Employers described several potential barriers to hiring DHH workers:

- **Not specifically targeting DHH workers -** “We're not going out of our way to attract people who are [DHH].” (EMP01-01)
- **Disclosure and discrimination** – “I think people might be reluctant or apprehensive to maybe share something that they feel might not get them the job." (EMP01-01)
- **Lack of knowledge**

    - “How to work with people who are [DHH] […] I know just because you're [DHH] doesn't mean that you can't communicate. But what would that communication look like and what level? […] understanding better how we could support people and what we might need to do in order to support them. I'm not clear on that.” (EMP01-01)
    - "Even though I'm a member of both of those [DHH organizations] is that somewhere I can advertise postings? I don't know and I haven't looked into that, so that's one way that I could open it up right and get those opportunities to go to a broader community." (EMP03-01)
    - “Because I never got an applicant, so I never pursued that path of knowledge (about resources available in their workplace).” (EMP04-01)
- **Difficulty finding information** – “I'm adjacent to it, and I kind of know some things. So, I imagine for someone who's nowhere close to it, it feels like “What are all these organizations? What do they do? What's this? What's that? How do we go about these things?” It can feel really daunting.” (EMP02-01)
- **Making mistakes**
    - “I think they're going to be concerned about making a mistake, like saying or doing something wrong, getting in trouble.” (EMP02-01)
    - “Sometimes I talk fast, so […] sometimes even with my own coworker and my team, they would be like, “Could you repeat that again?” Right? So, I think with somebody with accessibility needs, I will need to slow down even more. And then just given the context, I’m worried I might actually offend people unknowingly, so that would be kind of my concern.” (EMP04-01)
- **Hiring people like themselves** – “Say an employer wants to just hire the same kind of people, and there's that tendency […] to be like, “Oh, you're like me, so I'm going to hire you” and then you keep doing that over and over again.” (EMP02-01)
- **Small population of DHH jobseekers** - "I think part of it is just the area I live in is like remote. Maybe we don't have as big a population of [DHH] people up here." (EMP03-01)
- **Poor access to ASL Interpreters**
    - "If it's someone who is Deaf, we would need to have an interpreter present […] can we find someone that can provide the supports that that person needs and are they gonna be willing to move here? And if so, can they find affordable housing?” (EMP03-01)
    - “If they could have a person with them that could help them out [like an interpreter], that would be ideal. Because for us it'd be harder maybe to bring somebody in like that, and they might have more areas of access to find someone like that.” (EMP05-01)
- **Educational/socio-economic barriers & qualifications**
    - "Most of the jobs that I hire for require a minimum of bachelor['s] degree, master's […] You have to invest time and money to get an education […] about half our student body is First Nations, so I think that could be part of that as well." (EMP03-01)
    - “I don’t know if it’s our specific industry and the qualification we need, say certain job require a designation. So if you don’t have one, you wouldn’t qualify for the role.” (EMP04-01)
- **Not being accommodated in school**

- **Costs of accommodations** - "I think maybe the organization might be concerned with the costs if you have to like, hire, say, an interpreter, or maybe buy new software to provide accessibility and things like that." (EMP03-01)
- **Labour market shortages in general –** "I really think like labour market shortage is real." (EMP04-01)
- **Communication challenges between hearing and Deaf people**
    - "If you don't know sign language and stuff, it's very difficult, right?" (EMP05-01)
    - "And difficult to write everything down too. Makes it a little bit more difficult, the whole process." (EMP05-01)

Hiring Supports

Participants identified a few supports that can help employers hire DHH candidates:

- **Organizations –** e.g., WorkBC, Neil Squire Society
- **Internal supports –** e.g., managers
- **ASL Interpreters –** "She brought an interpreter with her, so that really helped a lot." (EMP05-01)

Qualifications

Qualifications were also identified as barriers to hiring DHH workers, who may not have the required knowledge or skills, such as:

- Communication skills
- Educational requirements
- Role-specific technical or job-related skills

Working with DHH Workers

Two employers had hired DHH workers or volunteers, and they shared some considerations they needed to make in order to be able to fully support those who might need additional support, particularly around ensuring they had the capacity to support these volunteers:

> "We always had a handful of volunteers who either had a support worker or just needed more one-on-one support to volunteer with us and couldn't really be left alone or what have you. And then over time, our store has gotten busier and busier, which is great, which is so great, but it means our staff don't have that capacity for one-on-one support with our volunteers. So […] I have to say something like, "Do you need more one-on-one support?" And "We can't provide it right now." That feels not so great, but needed. Because **if they come in and volunteer with us and we can't provide the support, that's not a good experience for them either.** So that's been a big learning." (EMP02-01)

Although the other employers had not worked with a DHH hire, they all shared experiences with other DHH individuals in their current or past workplace, such as a colleague and student, and shared some reflections:

- **“It didn't seem to affect anything” –** “The person […] who just joined our team. I had no idea. He's totally Deaf in one ear. I really had no idea whatsoever, but he disclosed that one day. So, it didn't seem to affect anything.” (EMP01-01)
- **“They don’t want to draw attention to themselves” -** “I was hiring support people for [DHH] students […] if you have an interpreter at the front of the class, then it's very obvious someone in the classroom is Deaf, you know, and lots of times people who are Deaf or hard of hearing […] they don't want to draw attention to themselves.” (EMP03-01)
- **“I would face him” -** “Back to my school day when I was doing my retail, one of the staff […] I would either face him so he can read my lips or he has a little white board that he will write to me.” (EMP04-01)

One employer had worked with someone who had a vision-related disability, but had to let them go because of liability concerns:

- “It became too dangerous to have him at work. So, we had to let him go. So, it was unfortunate, but it was too risky […] [Workers’ Compensation Board] found out, and they said, “No, this is very, very dangerous. If something happens to him, you're in big trouble. You're gonna get sued.”” (EMP05-01)

Employment Supports

Employers who had hired a DHH worker or volunteer described how they supported these workers:

- **Talking louder and repositioning:** “I know for me if I wasn’t directly facing her and I’d say something while I was doing something, and I’d look over, and then I’d think “Ok, she didn’t hear me,” and then I just know, “Oh yeah, of course, let me go over or talk louder or go to the other side” or what have you. So not a huge adjustment, I would say, for anyone.” (EMP02-01)
- **Enunciating, speaking slowly and clearly:** “I think I became a little more aware of how I speak and knowing that they're using something to transcribe or to do what have you, thinking like, OK, I need to enunciate, or I need to speak clearly and maybe slow a little bit so I'm not just going super-fast like I can sometimes. So that awareness comes up.” (EMP02-01)
- Giving written instructions: “We had to write a lot of stuff down. But, you know, instructions were easy to give.” (EMP05-01)
- Work-from-home options: “We give her work to do at home […] before […] QuickBooks and stuff, we could drop off a lot of material at her residence, right? Or even get it taxied there, right? Or couriered. So, for example, she could work from home for one week, two weeks, whatever, right?” (EMP05-01)

They also shared the strategies the worker used:

- **Tools –** “She had a device as well. And I think for her, it was not a huge barrier at all because she had the tools.” (EMP02-01)
- **Self-advocacy –** “When she was working with us, it was really just her being like, “Oh, I can't quite hear you, let me turn this way,” or “Let's talk a little bit louder,” or go to her better ear or what have you.” (EMP02-01)

- **Written communication -** “She had to write a lot of stuff down sometimes.” (EMP05-01)

Barriers in the Workplace

An employer noted that they do not “structurally have anything to support [Deaf or hard of hearing workers]” (EMP02-01) and would need to seek out supports and tools in order to support a DHH worker.

Another employer noted safety/liability concerns when they employed a worker who had a vision-related disability:

> “It became too dangerous to have him at work. So, we had to let him go. So, it was unfortunate, but it was too risky […] [Workers’ Compensation Board] found out, and they said, “No, this is very, very dangerous. If something happens to him, you're in big trouble. You're gonna get sued.”” (EMP05-01)

Recommendations

Employers provided several recommendations that would support the hiring of DHH workers.

Training & Information

The need for training and information was the top recommendation made by employers as a strategy to promote labour market inclusion for DHH individuals. Employers identified several key gaps, including:

- **General awareness & education –** employers emphasized the need for basic education to build understanding, reduce uncertainty, and normalize conversations about hiring DHH workers.
    - “Education, training, support in the form of deeper knowledge.” (EMP01-01)
- **Practical, actionable guidance –** employers stressed that inclusion feels more achievable when guidance focuses on concrete, everyday practices.
    - “Make sure you face the person,” or “do more in writing if something’s formal instead of just do it verbally.” (EMP04-01)
- **Ensure training is provided for those involved in hiring –** employers also noted that many staff participate in hiring without formal HR training and require employer-support learning.
    - “I’ve never taken an HR course on hiring.” (EMP03-01)
- **Improve information on how to reach the DHH communities during recruitment –** employers reported uncertainty about where and how to connect with DHH communities beyond mainstream job platforms.
    - “I am not really aware of how to reach that community.” (EMP03-01)

Training Methods or Approaches

Employers described the ways they would like to receive information or training:

- **Shareable –** “Information that I can share with the team” (EMP01-01)
- **Bite-sized**
    - “Something straightforward, direct, maybe even bite-sized, right? […] Just like, “Here it is,” and then you can go further, here's more information.” (EMP02-01)
    - “One-pager […] you kind of have to pack everything in one page [then] hope people read.” (EMP04-01)

- **Myth-busting –** “Maybe some examples, maybe some definitions. [DHH], what does that really mean? Because people might just say, oh, well, someone maybe needs a hearing aid or is someone totally Deaf and they can't hear a thing at all, right? I think just proper definitions and understanding. Cause I know it's not that black and white.” (EMP01-01)
- **Case studies or success stories**
- **Interactive –** “Offering workshops or seminars […] interactive is always good […] it allows for questions and […] clarification” (EMP01-01)
- **Experiential –** “You're not gonna do anything that you can't see yourself. I think if they had the experience of interacting with a worker, whether it's their own business or company or external, just having that interaction, seeing how it can go well and seeing the benefits of that, I think that’ll stick in their heads and go “OK, yes, it is possible, I see it in action.”” (EMP02-01)
- **Relatable –** “Tying it into something they can relate to. Right? So, bringing in that human aspect to it […] it's like “OK, well, what if an employer was just like it's a boy's club, and there's no women?” Or, “What if it's just Caucasian folks, and what does that look like?” So, it's like (pause) getting them to relate to it in something that they connect to, I think would make some sense so they can see that parallel.” (EMP02-01)
- **Simplified –** “Even for me as an employer, I have looked into resources and I have just been like, what? (laugh) (shakes head) What is all this? Where do I go? And I asked one person, and they send me here and there's a bunch of resources, but it's not quite what I'm looking for. So, I think really simplifying the information because I think it can seem really daunting and overwhelming to just go out there and find everything.” (EMP02-01)
- **Make the business case –** “There's a business case for it. You have diverse perspectives, you have different talents. If you have a bunch of different people on the team with these different perspectives and backgrounds and abilities, then you as a business owner or organization […] we have this breadth of knowledge and experiences that can really contribute to what you're doing.” (EMP02-01)
- **Tailorable and tailored**
    - “I think the guide should be like a general guide for all employers with like, sort of back to that universal design sort of idea like well, I think it should be like general enough that all employers could use the guide and then if they want to add to it for things specific to their institution or their workplace, then they could." (EMP03-01)
    - “So, really depends [on] that person’s need […] if this person prefers […] reading […] [or] somebody go through them and showing them, more kinetic workers […] it really depends on the personal preference of that person and their learning style rather than saying like these are all the available resource I want right? So, I’m more towards like customized approach.” (EMP04-01)
- **Convenient**
    - “[Tie it into] something they're just going to be at anyway, or a conference or what have you. So, it's presented alongside information that they're already looking for, I think that's another good way to get in front of them.” (EMP02-01)

- "If HR has a […] convention or similar setting, that's somewhere I would start." (EMP04-01)

One participant also recommended to **"start with HR":** "Start with HR […] 'cause if we have any question that's the source we will go to, "Can we do this?" "What's available [or possible]?" So, I think if they have that additional knowledge and awareness, they're more likely to include that or even promote it." (EMP04-01)

Incentives or Financial Supports

Employers felt that incentives and financial supports can be helpful for increasing labour market participation for DHH jobseekers:

- **Funding for wrap-around supports are beneficial**
  - Organizations that can help with the purchase of bus passes, scrubs, and work shoes "[allow] them to […] just have what they need and not have to worry […] that's what we like to see." (EMP01-01)
- **Wage subsidies help jobseekers get a "foot in the door" (EMP02-01)**
  - "We've used those wage subsidies occasionally to hire a summer student. So I see that as a positive because it's allowing that person to enter the job market even if the employer maybe doesn't have the additional funds […] I think they could lead to permanent opportunities for those job seekers." (EMP03-01)
  - "Puts a foot in the door for potential employee." (EMP05-01)
- Incentives help build awareness
  - "I think those incentives, like that helps bring awareness as well." (EMP03-01)
- Pathways to longer-term or permanent employment
  - "Once you've gone through all the onboarding, like you wanna keep your staff." (EMP03-01)
  - "I think they could lead to permanent opportunities for those jobseekers." (EMP03-01)
- Encouraging employers to try new practices
  - "Encourage HR and hiring managers to do new things." (EMP04-01)

Other Recommendations

One employer participant shared other recommendations:

- **Their organization should provide guidance –** "When I think about the accommodation side of it, I feel like we always are open to being an equitable employer […] but I don't know if that's actually something that's like in writing of how to do that […] that would be really valuable." (EMP03-01)
- **Keep Universal Design in mind -** "I'm a huge advocate of like when things are built or being renovated and things like that, they should be thinking of universal design, always […] our buildings should all have an audio loop in them, for instance […] when they're creating the classrooms or the offices or the spaces, it's like, keep that in the forefront and then it's not like such a big deal. Like it shouldn't be that much harder to hire someone, I think, because they can't hear or they can't hear as well." (EMP03-01)

- **Use AI and technological tools –** "Having [an] AI feature might really help if they have [a] hard time hearing. If there's like feature[s] that could turn […] our application in[to] Braille […] I wouldn't really know how that work[s]. I'm totally guessing." (EMP04-01)
- **Connect with community organizations**
    - "Maybe instead [of] just post it on our own company website, we could do more targeted posting if they have a community that we could share a link to our company website and then posting." (EMP04-01)
    - "It's also a good bridge for us to connect with the community, see where we're lacking, because I think it's difficult for HR to say "Yes, we'll do everything we can to accommodate." But the reality is […] if we never experience going through the hiring process with [a DHH individual], there's probably some gap between reality and what we think we could do. So, I think having that connection will be really helpful." (EMP04-01)

Knowledge Mobilization and Next Steps

The research team will focus on implementation of knowledge for employers, including formal educational interventions (e.g., small group learning activities, guided workshops) and linkage and exchange interventions (e.g., partnering with opinion leaders, collaborating with knowledge brokers, fostering learning networks) to support awareness, agreement, and adoption of knowledge among the target audiences (B.C. employers, and organizations serving the DHH community).

We additionally anticipate publishing and disseminating our findings through scholarly channels including peer-reviewed journals and through conference proceedings so that the results can inform researchers in the domains of disability and Deaf studies as well as socioeconomic and labour market research.

Below is a summary of the proposed resources:

1. **Digital guide** for employers which will:
    a) Share information about how to support DHH employees and create an accessible and inclusive workplace
    b) Unpack misconceptions or identify solutions to common barriers revealed in the primary research activities
2. **Training webinar** for employers which will:
    a) Share information about how to support DHH employees and create an accessible and inclusive workplace
    b) Unpack misconceptions or identify solutions to common barriers revealed in the primary research activities

3. **Brief recommendations report** aimed at organizations including ASL interpreter professional associations, service providers, certifying bodies, ASL interpreting programs, and organizations serving the DHH community, which will:

    a) Summarize the barriers and facilitators to promoting ASL interpreting as an occupation

    b) Make recommendations for encouraging and promoting job growth in the ASL interpreting occupation

4. Scholarly outputs

    a) Minimum of 1 scholarly manuscript submitted to peer-reviewed journal (e.g., the *Journal of Deaf Studies and Deaf Education*)

    b) Conference proceeding(s), including:

        i. A presentation at the C2U Expo on May 12-15 summarizing the project objectives and findings as of May 2025 (*accepted submission*)

        ii. Additional conference channels may be identified, if applicable

Per the feedback received from the Governance Committee, we are additionally developing:

5. **Webinars** for community members to share findings relevant to the community of DHH jobseekers in British Columbia, which will be available in ASL and captioned formats and shared on CCRW's website.

In the section that follows are outlines of the information to be presented in each resource, as well as a proposed format and delivery mode for the resources.

Employer Digital Resource Guide

Content

The digital resource will begin with an overview of the value of inclusive hiring and talent management practices in relation to DHH workers, and the value to employers of fostering an inclusive, accessible workplace for DHH workers. Per the recommendations we received from employers in our research, we intend to make the resource brief, concise, and plain language, with actionable steps employers can take to support inclusive workplaces.

To distinguish the digital resource from the webinar, the digital resource will focus on information and myth-busting, as well as concrete, actionable steps employers can take; while the webinar will focus on belonging and inclusivity, and provide a platform for employers to ask questions.

The resource content will be delivered in plain language for employer audiences and focused on concrete, actionable strategies.

We propose organizing the digital guide as follows:

Education and Awareness

- Overview of DHH terminology, emphasizing inclusive language

- Common barriers faced by DHH community to securing and retaining employment
- 'Myth-busting' common misconceptions employers may have about DHH individuals to build education, awareness, and confidence, such as:
    - Myths about capability – DHH workers are as competent, productive, and creative as hearing workers, but face persistent stigma and bias
    - Myths about 'fit' – social exclusion in the workplace is not inevitable, it is a product of inaccessible practices
    - Myths about workplace safety – adjustments to job requirements and appropriate accommodations ensure DHH workers can thrive without posing a risk to workplace safety

Best Practices for Employers Across the Employment Lifecycle

- Strategies for creating inclusive job postings and accessible application processes
- Physical and digital accessibility considerations in the workplace
- Information about assistive technologies (e.g., visual alert systems, captioned phones)
- How to procure common communication supports, including ASL interpreters or captioning services
- How to begin fostering an inclusive workplace culture for DHH workers (social belonging and psychological safety)
    - This topic will be explored in greater detail in the webinar
- Importance of ongoing support and feedback mechanisms (e.g., engaging DHH employees to determine what works/doesn't work)

Community Engagement and Resources

- Links to B.C.-based and national community organizations and other organizations supporting DHH employment
- Links to additional resources and ongoing learning opportunities
- Link to employer training webinar

Delivery

We will create a permanent digital resource in the form of a PDF guide which will be housed on CCRW's website. The resource will be promoted to CCRW's engaged employers via our listservs, Untapped Talent platform, and communications from our Employment Services staff. Project partners will also be engaged to disseminate the resource amongst their networks.

Employer Training Webinar

The employer training webinar will be an interactive 60-minute webinar.

The webinar content will be delivered in plain language for employer audiences and focused on concrete, actionable strategies.

Content

In the first half, we will share information and strategies for fostering inclusive, accessible, and psychologically safe workplaces for DHH employees, based on the findings from our research. In the

second half, employer attendees will be invited to ask questions about workplace inclusivity and best practices for supporting DHH workers. Specifically, we will organize the workshop content as follows:

Defining Inclusive Workplaces (10 minutes)

- Provide an overview of what accessibility and inclusion for DHH employees is and why it is vital
    - Define core concepts like belonging, psychological safety, social inclusion etc.
- Overview of barriers to inclusion and belonging experienced by DHH workers (e.g., being excluded from conversations, collaborative activities, etc. due to communication barriers in the workplace)

Strategies to Foster Inclusion and Belonging (15 minutes)

- Strategies employers can use to foster inclusion for DHH employees (e.g., ensuring all staff are given information and training about best practices for communicating with DHH employees)
- Common 'pitfalls' and solutions to avoid them (e.g., common mistakes, such as speaking over others, that can create barriers to communicating, and how these can be avoided)

Q&A (25 minutes)

- Webinar hosts will answer questions from employers about how to support belonging and inclusion for DHH employees

Delivery

The webinar will be recorded and permanently hosted on CCRW's website as an additional resource for employers. We may also conduct future webinar sessions following the same outline.

ASL Interpreting Profession Recommendations Report

Content

The ASL Interpreting Profession recommendations report will aim to inform stakeholders including ASL interpreter professional associations, service providers, certifying bodies, ASL interpreting programs, and organizations serving the DHH community about the current context of the interpreting profession, as well as guide coordinated efforts to strengthen the profession and support job growth for this vital occupation.

We plan to organize the recommendations report as follows:

Current Context

- Overview of the current state of the ASL Interpreting profession as viewed by ASL interpreters in our research, as well as findings from the initial literature review regarding job outlook for the occupation
- Explain the need for coordinated efforts to promote job growth for the ASL Interpreting profession
    - Vital role ASL interpreters have in the workplace supporting DHH employees
    - How lack of access to ASL interpreters creates barriers for DHH workers and challenges for employers

Challenges

- Share ASL Interpreter's perspectives on the challenges to entering and remaining in the profession (e.g., lack of widespread information about career pathways and opportunities)

Proposed Solutions

- Highlight facilitators (e.g., ASL Interpreters' motivating factors for entering the profession)
- Recommendations for promoting ASL Interpreting as a profession (e.g., campaigns to share information about training and certification programs; highlight success stories)
- Recommendations for strengthening the profession (e.g., professional interpreter organizations; professional development and mentorship initiatives; strengthening partnerships among interpreter education programs, employers, DHH organizations)

Implementation Considerations

- Identify potential challenges in proposed solutions and recommendations for addressing them
- Suggest metrics to evaluation progress and impact

Delivery

The recommendations report will be a brief (e.g., 10-15 page) report which will be permanently hosted on CCRW's website. CCRW will promote and disseminate the report through and its networks, and we will enlist the support of our governance committee and project partners to distribute the resource to stakeholders.

Scholarly Manuscript(s)

Content

We propose developing multiple scholarly manuscripts to disseminate the findings through academic channels, owing to the richness of the findings from multiple stakeholder groups. Specifically, we plan to organize the research findings into the following topics, each of which will form the basis of a manuscript:

1. Mixed-methods research manuscript exploring the experiences of DHH workers navigating the labour market throughout the employment life cycle, utilizing the findings from the secondary data analysis of Statistics Canada data and the qualitative analysis with DHH participants and ASL interpreter participants
2. Mixed-methods research manuscript investigating employers' perceptions, attitudes, and behavioural intentions regarding DHH workers, utilizing the findings from the employer survey and the qualitative analysis with employer participants
3. Qualitative research manuscript exploring the ASL interpreting profession, including ASL interpreter's motivating factors, perceptions of the profession, and recommendations for strengthening the profession

Delivery

Manuscripts may be submitted to journals in the fields of Deaf Studies such as The Journal of Deaf Studies and Deaf Education, Deafness & Education International, American Annals of the Deaf, or the Deaf Studies Digital Journal; journals related to employment and/or disability studies that have a record

of published research on topics related to d/Deafness and the DHH community, such as Disability and Rehabilitation, Disability & Society, Disabilities, Canadian Journal of Disability Studies, OJTR: Occupation, Participation, and Health, or Work: A Journal of Prevention, Assessment & Rehabilitation; journals related to sign languages and/or interpreting profession, such as the Journal of Interpretation, Translation and Interpreting Studies, or Sign Language Studies; or other journals as recommended by our governance committee, if applicable.

Conference proceedings to mobilize any or all of the three manuscript narratives may be identified in future.

Manuscripts will be developed throughout the remainder of the funded project period. Owing to the time required for peer review and the availability of conference opportunities, manuscripts and conference proceedings may be published following the conclusion of the funding timeline.

DHH Community Webinar

Content

The DHH community webinar will be a 60-minute interactive webinar in which community members are invited to attend and ask questions about the research. The aim of the webinar is to share the findings from the research that are most useful and relevant to DHH workers in B.C.

The content will be delivered in plain language for non-academic, non-expert audiences. ASL interpretation and captioning will be provided.

The workshop content will be organized as follows:

Introduction (5 minutes)

- Briefly explain the project, its objectives, and our methodology

What We Learned (20 minutes)

- Share what DHH participants told us about common barriers and shared experiences in the employment lifecycle
- Discuss practical strategies, self-advocacy techniques, and resources/supports DHH workers used in the job search and in the workplace
- Next steps for the research and where to learn more about the project (e.g., other outputs available and where to find them)

Q&A (25 minutes)

- Webinar hosts will answer questions from community members about the project

Delivery

The webinar will be recorded and permanently hosted on CCRW's website as an additional resource for employers. We may also conduct future webinar sessions following the same outline.

Appendices

Appendix A. Logistic regression of DOCC21_1 (Occupation – Broad categories)

Predictor	Outcome Level	b	SE	Z ratio	Probability	Odds ratio
(Intercept)	**Category 2**	**-10.18**	**2.48**	**-4.10**	**0.000**	**0.00**
(Intercept)	Category 6	4.03	2.51	1.61	0.108	56.51
(Intercept)	**Categories 3, 4, 5**	**-11.82**	**1.81**	**-6.52**	**0.000**	**0.00**
(Intercept)	Categories 7, 8, 9	1.86	2.80	0.66	0.506	6.45
Gender	**Category 2**	**3.08**	**1.23**	**2.49**	**0.013**	**21.71**
Gender	Category 6	-0.33	0.83	-0.40	0.688	0.72
Gender	Categories 3, 4, 5	-0.97	0.78	-1.24	0.214	0.38
Gender	**Categories 7, 8, 9**	**3.11**	**1.08**	**2.86**	**0.004**	**22.31**
Age Group (25 - 34)	**Category 2**	**13.23**	**1.99**	**6.65**	**0.000**	**554151.20**
Age Group (25 - 34)	**Category 6**	**14.05**	**1.12**	**12.59**	**0.000**	**1267083.38**
Age Group (25 - 34)	**Categories 3, 4, 5**	**15.75**	**1.18**	**13.32**	**0.000**	**6925837.79**
Age Group (25 - 34)	**Categories 7, 8, 9**	**15.91**	**1.35**	**11.82**	**0.000**	**8149124.97**
Age Group (35 - 44)	Category 2	-6.70	4.13	-1.62	0.105	0.00
Age Group (35 - 44)	Category 6	-3.38	1.97	-1.71	0.087	0.03
Age Group (35 - 44)	Categories 3, 4, 5	-1.90	1.99	-0.96	0.340	0.15
Age Group (35 - 44)	Categories 7, 8, 9	-2.65	2.46	-1.08	0.281	0.07
Age Group (45 - 54)	Category 2	-4.10	3.10	-1.32	0.186	0.02
Age Group (45 - 54)	Category 6	-4.13	2.11	-1.96	0.050	0.02
Age Group (45 - 54)	Categories 3, 4, 5	-1.56	2.07	-0.75	0.450	0.21
Age Group (45 - 54)	Categories 7, 8, 9	-1.67	2.35	-0.71	0.475	0.19
Age Group (55 +)	Category 2	-4.90	2.97	-1.65	0.099	0.01
Age Group (55 +)	Category 6	-2.89	1.98	-1.46	0.145	0.06
Age Group (55 +)	Categories 3, 4, 5	-2.37	2.04	-1.16	0.244	0.09
Age Group (55 +)	Categories 7, 8, 9	-1.67	2.25	-0.74	0.459	0.19
Educational Attainment (High School Diploma/Certificate)	**Category 2**	**11.43**	**1.22**	**9.40**	**0.000**	**91793.92**
Educational Attainment (High School Diploma/Certificate)	Category 6	-1.05	1.71	-0.61	0.542	0.35
Educational Attainment (High School Diploma/Certificate)	**Categories 3, 4, 5**	**13.39**	**0.69**	**19.53**	**0.000**	**654260.01**

Educational Attainment (High School Diploma/Certificate)	Categories 7, 8, 9	-1.31	1.71	-0.77	0.443	0.27
Educational Attainment (Trade Certificate/Diploma)	**Category 2**	**-10.62**	**0.00**	**-82718945.73**	**0.000**	**0.00**
Educational Attainment (Trade Certificate/Diploma)	Category 6	-2.46	1.71	-1.43	0.152	0.09
Educational Attainment (Trade Certificate/Diploma)	**Categories 3, 4, 5**	**12.98**	**0.76**	**17.11**	**0.000**	**433202.07**
Educational Attainment (Trade Certificate/Diploma)	Categories 7, 8, 9	-2.14	1.62	-1.33	0.185	0.12
Educational Attainment (College, CEGEP or other Certificate/Diploma)	**Category 2**	**14.88**	**1.12**	**13.29**	**0.000**	**2903747.17**
Educational Attainment (College, CEGEP or other Certificate/Diploma)	Category 6	0.01	1.72	0.00	0.998	1.01
Educational Attainment (College, CEGEP or other Certificate/Diploma)	**Categories 3, 4, 5**	**14.12**	**0.81**	**17.51**	**0.000**	**1355576.07**
Educational Attainment (College, CEGEP or other Certificate/Diploma)	Categories 7, 8, 9	-1.16	1.81	-0.64	0.520	0.31
Educational Attainment (University Certificate/Diploma)	**Category 2**	**12.42**	**1.60**	**7.75**	**0.000**	**247993.16**
Educational Attainment (University Certificate/Diploma)	Category 6	0.00	2.11	0.00	1.000	1.00
Educational Attainment (University Certificate/Diploma)	**Categories 3, 4, 5**	**15.64**	**1.36**	**11.51**	**0.000**	**6187221.34**
Educational Attainment (University Certificate/Diploma)	Categories 7, 8, 9	-3.22	2.39	-1.34	0.179	0.04
Educational Attainment (Bachelor's Degree)	**Category 2**	**12.36**	**1.22**	**10.09**	**0.000**	**232857.61**
Educational Attainment (Bachelor's Degree)	Category 6	-3.91	2.31	-1.69	0.090	0.02
Educational Attainment (Bachelor's Degree)	**Categories 3, 4, 5**	**13.26**	**0.81**	**16.36**	**0.000**	**574912.37**
Educational Attainment (Bachelor's Degree)	Categories 7, 8, 9	-3.48	1.94	-1.80	0.072	0.03
Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	**Category 2**	**13.53**	**1.23**	**11.00**	**0.000**	**755355.63**

Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	Category 6	-1.49	1.96	-0.76	0.448	0.23
Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	**Categories 3, 4, 5**	**15.59**	**0.88**	**17.68**	**0.000**	**5914474.28**
Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	**Categories 7, 8, 9**	**-26.81**	**0.00**	**-145813301 4.41**	**0.000**	**0.00**
LGBTQ	**Category 2**	**-24.60**	**0.00**	**-185604994 .16**	**0.000**	**0.00**
LGBTQ	Category 6	-1.18	1.44	-0.82	0.411	0.31
LGBTQ	Categories 3, 4, 5	-2.04	1.31	-1.56	0.119	0.13
LGBTQ	Categories 7, 8, 9	-1.79	1.89	-0.95	0.344	0.17
Visual Disability	Category 2	-0.70	2.53	-0.28	0.782	0.50
Visual Disability	Category 6	1.52	1.52	1.00	0.318	4.58
Visual Disability	Categories 3, 4, 5	-0.07	1.74	-0.04	0.970	0.94
Visual Disability	Categories 7, 8, 9	0.41	1.79	0.23	0.818	1.51
Immigrant Status	Category 2	2.52	1.92	1.31	0.189	12.46
Immigrant Status	Category 6	1.02	1.51	0.67	0.500	2.77
Immigrant Status	Categories 3, 4, 5	0.18	1.70	0.11	0.914	1.20
Immigrant Status	Categories 7, 8, 9	-0.27	1.60	-0.17	0.869	0.77
Indigeneity	Category 2	2.29	3.89	0.59	0.555	9.90
Indigeneity	Category 6	-0.14	2.23	-0.06	0.948	0.87
Indigeneity	Categories 3, 4, 5	-1.14	2.46	-0.46	0.644	0.32
Indigeneity	Categories 7, 8, 9	-1.01	2.54	-0.40	0.692	0.37
Visual Disability	Category 2	-1.10	1.44	-0.76	0.448	0.33
Visual Disability	Category 6	-0.40	0.91	-0.45	0.656	0.67
Visual Disability	Categories 3, 4, 5	-0.04	0.83	-0.05	0.961	0.96
Visual Disability	Categories 7, 8, 9	-1.69	1.00	-1.68	0.093	0.19
Mobility Disability	Category 2	0.55	1.58	0.35	0.726	1.74
Mobility Disability	Category 6	0.51	0.91	0.56	0.575	1.66
Mobility Disability	Categories 3, 4, 5	-0.53	0.86	-0.62	0.537	0.59
Mobility Disability	Categories 7, 8, 9	0.75	0.94	0.80	0.426	2.12
Flexibility Disability	Category 2	0.41	1.64	0.25	0.804	1.50

Flexibility Disability	Category 6	1.67	0.95	1.75	0.080	5.31
Flexibility Disability	Categories 3, 4, 5	-0.66	0.94	-0.71	0.481	0.52
Flexibility Disability	Categories 7, 8, 9	1.00	1.07	0.93	0.352	2.71
Pain Disability	Category 2	-0.54	1.35	-0.40	0.687	0.58
Pain Disability	Category 6	-0.21	1.04	-0.20	0.842	0.81
Pain Disability	Categories 3, 4, 5	1.26	0.87	1.45	0.148	3.54
Pain Disability	Categories 7, 8, 9	-0.46	1.07	-0.43	0.668	0.63
Learning Disability	Category 2	-0.06	1.84	-0.03	0.974	0.94
Learning Disability	Category 6	1.15	1.36	0.85	0.397	3.17
Learning Disability	Categories 3, 4, 5	1.15	1.28	0.90	0.367	3.16
Learning Disability	Categories 7, 8, 9	-0.40	1.54	-0.26	0.795	0.67
Developmental Disability	**Category 2**	**-1.03**	**0.00**	**-8224439.52**	**0.000**	**0.36**
Developmental Disability	**Category 6**	**15.53**	**0.00**	**2173410.95**	**0.000**	**5529412.75**
Developmental Disability	**Categories 3, 4, 5**	**-2.69**	**0.00**	**-28090394.46**	**0.000**	**0.07**
Developmental Disability	**Categories 7, 8, 9**	**-4.82**	**0.00**	**-66696935.89**	**0.000**	**0.01**
Memory Disability	Category 2	-0.32	2.22	-0.14	0.885	0.73
Memory Disability	Category 6	-1.36	1.52	-0.90	0.370	0.26
Memory Disability	**Categories 3, 4, 5**	**-3.40**	**1.46**	**-2.33**	**0.020**	**0.03**
Memory Disability	Categories 7, 8, 9	-0.13	1.53	-0.09	0.932	0.88
Mental Health Disability	Category 2	2.07	1.39	1.48	0.138	7.89
Mental Health Disability	Category 6	0.57	0.94	0.61	0.544	1.77
Mental Health Disability	Categories 3, 4, 5	-0.01	0.87	-0.01	0.993	0.99
Mental Health Disability	Categories 7, 8, 9	1.05	1.08	0.97	0.332	2.86
Disability Severity (Moderate)	Category 2	-2.19	1.98	-1.11	0.269	0.11
Disability Severity (Moderate)	Category 6	-1.25	1.20	-1.05	0.294	0.29
Disability Severity (Moderate)	Categories 3, 4, 5	0.15	1.04	0.14	0.887	1.16
Disability Severity (Moderate)	Categories 7, 8, 9	-1.09	1.17	-0.93	0.354	0.34
Disability Severity (Severe)	Category 2	-0.80	2.36	-0.34	0.734	0.45
Disability Severity (Severe)	Category 6	-0.28	1.49	-0.19	0.850	0.75
Disability Severity (Severe)	Categories 3, 4, 5	1.11	1.36	0.81	0.415	3.03

Disability Severity (Severe)	Categories 7, 8, 9	-0.56	1.57	-0.36	0.718	0.57
Disability Severity (Very Severe)	Category 2	-0.65	3.14	-0.21	0.837	0.52
Disability Severity (Very Severe)	Category 6	-0.67	2.21	-0.30	0.761	0.51
Disability Severity (Very Severe)	Categories 3, 4, 5	2.51	2.14	1.17	0.241	12.30
Disability Severity (Very Severe)	Categories 7, 8, 9	1.77	2.21	0.80	0.423	5.85

Model X^2	= 198.33
Pseudo R^2	= 0.4274
n	=

Appendix B. Logistic regression of DIND22_1 (Occupation – Broad categories)

Predictor	Outcome Level	b	SE	Z ratio	Probability	Odds ratio
(Intercept)	Other Services	-2.52	199.47	-0.01	0.990	0.08
(Intercept)	Public Administration	-9.72	38.91	-0.25	0.803	0.00
(Intercept)	**Transportation and Warehousing**	**-6.98**	**1.98**	**-3.53**	**0.000**	**0.00**
(Intercept)	Retail, Hospitality, and Food Services	15.54	48.22	0.32	0.747	5581530.88
(Intercept)	Finance, Real Estate, and Administrative Services	11.01	48.23	0.23	0.819	60511.32
(Intercept)	Information, Arts, Education, and Healthcare	-1.25	151.18	-0.01	0.993	0.29
(Intercept)	Resource Extraction, Construction, and Manufacturing	7.44	48.20	0.15	0.877	1701.30
Gender	Other Services	-1.36	1.10	-1.24	0.214	0.26
Gender	Public Administration	0.21	1.27	0.17	0.868	1.23
Gender	Transportation and Warehousing	-0.07	1.11	-0.06	0.950	0.93
Gender	Retail, Hospitality, and Food Services	-2.30	1.30	-1.76	0.078	0.10
Gender	Finance, Real Estate, and Administrative Services	-1.40	1.42	-0.99	0.324	0.25

Gender	Information, Arts, Education, and Healthcare	-1.71	0.89	-1.92	0.055	0.18
Gender	Resource Extraction, Construction, and Manufacturing	3.01	1.55	1.94	0.052	20.19
Age Group (25 - 34)	Other Services	-9.21	48.13	-0.19	0.848	0.00
Age Group (25 - 34)	Public Administration	3.60	10.06	0.36	0.721	36.63
Age Group (25 - 34)	**Transportation and Warehousing**	**9.65**	**1.25**	**7.71**	**0.000**	**15573.12**
Age Group (25 - 34)	Retail, Hospitality, and Food Services	-9.37	48.13	-0.19	0.846	0.00
Age Group (25 - 34)	Finance, Real Estate, and Administrative Services	-11.48	48.16	-0.24	0.812	0.00
Age Group (25 - 34)	Information, Arts, Education, and Healthcare	-7.26	48.12	-0.15	0.880	0.00
Age Group (25 - 34)	Resource Extraction, Construction, and Manufacturing	-7.33	48.13	-0.15	0.879	0.00
Age Group (35 - 44)	Other Services	-8.34	48.15	-0.17	0.862	0.00
Age Group (35 - 44)	Public Administration	4.79	10.07	0.48	0.634	120.57
Age Group (35 - 44)	**Transportation and Warehousing**	**8.30**	**1.53**	**5.42**	**0.000**	**4005.62**
Age Group (35 - 44)	Retail, Hospitality, and Food Services	-13.34	48.16	-0.28	0.782	0.00
Age Group (35 - 44)	Finance, Real Estate, and Administrative Services	-7.86	48.15	-0.16	0.870	0.00
Age Group (35 - 44)	Information, Arts, Education, and Healthcare	-7.10	48.13	-0.15	0.883	0.00
Age Group (35 - 44)	Resource Extraction, Construction, and Manufacturing	-11.10	48.17	-0.23	0.818	0.00
Age Group (45 - 54)	Other Services	-10.27	48.16	-0.21	0.831	0.00
Age Group (45 - 54)	Public Administration	3.43	10.02	0.34	0.732	30.76
Age Group (45 - 54)	**Transportation and Warehousing**	**8.16**	**1.27**	**6.43**	**0.000**	**3505.50**
Age Group (45 - 54)	Retail, Hospitality, and Food Services	-17.61	48.21	-0.37	0.715	0.00
Age Group (45 - 54)	Finance, Real Estate, and Administrative Services	-9.65	48.15	-0.20	0.841	0.00
Age Group (45 - 54)	Information, Arts, Education, and Healthcare	-7.92	48.13	-0.16	0.869	0.00
Age Group (45 - 54)	Resource Extraction, Construction, and Manufacturing	-9.61	48.15	-0.20	0.842	0.00

Age Group (55 +)	Other Services	-9.51	48.14	-0.20	0.844	0.00
Age Group (55 +)	Public Administration	1.43	10.03	0.14	0.887	4.17
Age Group (55 +)	**Transportation and Warehousing**	**9.17**	**0.92**	**10.00**	**0.000**	**9641.43**
Age Group (55 +)	Retail, Hospitality, and Food Services	-11.30	48.13	-0.23	0.814	0.00
Age Group (55 +)	Finance, Real Estate, and Administrative Services	-8.14	48.14	-0.17	0.866	0.00
Age Group (55 +)	Information, Arts, Education, and Healthcare	-7.89	48.12	-0.16	0.870	0.00
Age Group (55 +)	Resource Extraction, Construction, and Manufacturing	-9.74	48.14	-0.20	0.840	0.00
Educational Attainment (High School Diploma/Certificate)	**Other Services**	**-6.67**	**1.37**	**-4.89**	**0.000**	**0.00**
Educational Attainment (High School Diploma/Certificate)	Public Administration	6.04	48.71	0.12	0.901	418.64
Educational Attainment (High School Diploma/Certificate)	Transportation and Warehousing	-1.00	2.25	-0.44	0.658	0.37
Educational Attainment (High School Diploma/Certificate)	Retail, Hospitality, and Food Services	-2.47	2.39	-1.03	0.302	0.08
Educational Attainment (High School Diploma/Certificate)	Finance, Real Estate, and Administrative Services	-3.07	3.11	-0.99	0.324	0.05
Educational Attainment (High School Diploma/Certificate)	Information, Arts, Education, and Healthcare	11.21	143.32	0.08	0.938	73900.30
Educational Attainment (High School Diploma/Certificate)	Resource Extraction, Construction, and Manufacturing	0.60	2.24	0.27	0.790	1.81
Educational Attainment (Trade Certificate/Diploma)	Other Services	13.04	193.58	0.07	0.946	462587.89
Educational Attainment (Trade Certificate/Diploma)	Public Administration	4.62	48.71	0.09	0.924	101.92
Educational Attainment (Trade Certificate/Diploma)	Transportation and Warehousing	-1.69	2.36	-0.71	0.475	0.19
Educational Attainment (Trade Certificate/Diploma)	**Retail, Hospitality, and Food Services**	**-5.52**	**2.56**	**-2.16**	**0.031**	**0.00**
Educational Attainment (Trade Certificate/Diploma)	Finance, Real Estate, and Administrative Services	-1.23	3.00	-0.41	0.683	0.29
Educational Attainment (Trade Certificate/Diploma)	Information, Arts, Education, and Healthcare	10.70	143.32	0.07	0.941	44249.38
Educational Attainment (Trade Certificate/Diploma)	Resource Extraction, Construction, and Manufacturing	-1.64	2.18	-0.75	0.450	0.19

Educational Attainment (College, CEGEP or other Certificate/Diploma)	Other Services	12.45	193.58	0.06	0.949	255607.40
Educational Attainment (College, CEGEP or other Certificate/Diploma)	Public Administration	5.37	48.70	0.11	0.912	214.50
Educational Attainment (College, CEGEP or other Certificate/Diploma)	Transportation and Warehousing	-3.67	2.39	-1.54	0.124	0.03
Educational Attainment (College, CEGEP or other Certificate/Diploma)	Retail, Hospitality, and Food Services	-2.71	2.37	-1.15	0.252	0.07
Educational Attainment (College, CEGEP or other Certificate/Diploma)	Finance, Real Estate, and Administrative Services	-2.56	2.97	-0.86	0.390	0.08
Educational Attainment (College, CEGEP or other Certificate/Diploma)	Information, Arts, Education, and Healthcare	9.85	143.32	0.07	0.945	18905.94
Educational Attainment (College, CEGEP or other Certificate/Diploma)	Resource Extraction, Construction, and Manufacturing	-2.25	2.18	-1.03	0.301	0.10
Educational Attainment (University Certificate/Diploma)	Other Services	12.84	193.59	0.07	0.947	377192.80
Educational Attainment (University Certificate/Diploma)	Public Administration	6.84	48.76	0.14	0.889	932.93
Educational Attainment (University Certificate/Diploma)	Transportation and Warehousing	-1.70	2.75	-0.62	0.537	0.18
Educational Attainment (University Certificate/Diploma)	Retail, Hospitality, and Food Services	-4.28	3.00	-1.43	0.154	0.01
Educational Attainment (University Certificate/Diploma)	Finance, Real Estate, and Administrative Services	-1.28	3.09	-0.42	0.678	0.28
Educational Attainment (University Certificate/Diploma)	Information, Arts, Education, and Healthcare	11.29	143.33	0.08	0.937	79844.81
Educational Attainment (University Certificate/Diploma)	Resource Extraction, Construction, and Manufacturing	-0.93	2.75	-0.34	0.735	0.39
Educational Attainment (Bachelor's Degree)	Other Services	14.54	193.59	0.08	0.940	2067230.58
Educational Attainment (Bachelor's Degree)	Public Administration	7.58	48.72	0.16	0.876	1954.69
Educational Attainment (Bachelor's Degree)	Transportation and Warehousing	-1.58	2.42	-0.65	0.513	0.21
Educational Attainment (Bachelor's Degree)	**Retail, Hospitality, and Food Services**	**-39.00**	**0.00**	**-21112863 60.74**	**0.000**	**0.00**
Educational Attainment (Bachelor's Degree)	Finance, Real Estate, and Administrative Services	-2.47	3.69	-0.67	0.503	0.08

Educational Attainment (Bachelor's Degree)	Information, Arts, Education, and Healthcare	11.86	143.32	0.08	0.934	141844.47
Educational Attainment (Bachelor's Degree)	Resource Extraction, Construction, and Manufacturing	-1.26	2.89	-0.44	0.663	0.28
Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	Other Services	12.84	193.59	0.07	0.947	375627.57
Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	Public Administration	7.02	48.70	0.14	0.885	1122.85
Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	Transportation and Warehousing	-15.07	405.80	-0.04	0.970	0.00
Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	Retail, Hospitality, and Food Services	-2.96	2.53	-1.17	0.242	0.05
Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	Finance, Real Estate, and Administrative Services	-2.95	3.05	-0.97	0.334	0.05
Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	Information, Arts, Education, and Healthcare	11.09	143.32	0.08	0.938	65314.79
Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	Resource Extraction, Construction, and Manufacturing	-16.09	654.25	-0.02	0.980	0.00
LGBTQ	Other Services	-1.17	1.80	-0.65	0.515	0.31
LGBTQ	Public Administration	-14.40	457.03	-0.03	0.975	0.00
LGBTQ	Transportation and Warehousing	-14.81	358.75	-0.04	0.967	0.00
LGBTQ	Retail, Hospitality, and Food Services	-1.31	1.93	-0.68	0.497	0.27
LGBTQ	Finance, Real Estate, and Administrative Services	1.06	2.21	0.48	0.631	2.89
LGBTQ	Information, Arts, Education, and Healthcare	-1.75	1.63	-1.07	0.284	0.17
LGBTQ	Resource Extraction, Construction, and Manufacturing	-1.10	2.49	-0.44	0.658	0.33
Visual Disability	Other Services	12.12	77.33	0.16	0.875	183855.14

Visual Disability	Public Administration	8.29	77.39	0.11	0.915	4002.02
Visual Disability	Transportation and Warehousing	-9.30	234.25	-0.04	0.968	0.00
Visual Disability	Retail, Hospitality, and Food Services	12.32	77.31	0.16	0.873	224928.82
Visual Disability	Finance, Real Estate, and Administrative Services	10.39	77.32	0.13	0.893	32605.88
Visual Disability	Information, Arts, Education, and Healthcare	10.45	77.30	0.14	0.893	34465.63
Visual Disability	Resource Extraction, Construction, and Manufacturing	12.46	77.32	0.16	0.872	257248.41
Immigrant Status	Other Services	-3.63	2.49	-1.46	0.145	0.03
Immigrant Status	Public Administration	-4.59	4.03	-1.14	0.255	0.01
Immigrant Status	Transportation and Warehousing	-0.95	1.63	-0.58	0.561	0.39
Immigrant Status	Retail, Hospitality, and Food Services	2.11	1.87	1.13	0.260	8.22
Immigrant Status	Finance, Real Estate, and Administrative Services	-0.63	1.85	-0.34	0.733	0.53
Immigrant Status	Information, Arts, Education, and Healthcare	-1.79	1.56	-1.15	0.251	0.17
Immigrant Status	**Resource Extraction, Construction, and Manufacturing**	**-4.96**	**2.29**	**-2.17**	**0.030**	**0.01**
Indigeneity	Other Services	-12.87	77.36	-0.17	0.868	0.00
Indigeneity	Public Administration	-7.70	77.42	-0.10	0.921	0.00
Indigeneity	Transportation and Warehousing	-5.32	234.22	-0.02	0.982	0.00
Indigeneity	Retail, Hospitality, and Food Services	-7.70	77.33	-0.10	0.921	0.00
Indigeneity	Finance, Real Estate, and Administrative Services	-19.59	172.86	-0.11	0.910	0.00
Indigeneity	Information, Arts, Education, and Healthcare	-22.03	122.77	-0.18	0.858	0.00
Indigeneity	Resource Extraction, Construction, and Manufacturing	-11.25	77.35	-0.15	0.884	0.00
Visual Disability	Other Services	-0.33	1.33	-0.25	0.803	0.72
Visual Disability	Public Administration	0.35	1.41	0.25	0.805	1.42
Visual Disability	Transportation and Warehousing	-0.97	1.34	-0.73	0.466	0.38

Visual Disability	Retail, Hospitality, and Food Services	1.79	1.27	1.41	0.159	5.99
Visual Disability	Finance, Real Estate, and Administrative Services	-0.71	1.49	-0.48	0.634	0.49
Visual Disability	Information, Arts, Education, and Healthcare	0.51	1.11	0.46	0.645	1.66
Visual Disability	Resource Extraction, Construction, and Manufacturing	1.10	1.28	0.85	0.393	3.00
Mobility Disability	Other Services	1.18	1.23	0.96	0.339	3.25
Mobility Disability	Public Administration	-1.76	1.55	-1.14	0.256	0.17
Mobility Disability	Transportation and Warehousing	0.23	1.14	0.20	0.840	1.26
Mobility Disability	Retail, Hospitality, and Food Services	1.39	1.39	1.00	0.320	4.00
Mobility Disability	Finance, Real Estate, and Administrative Services	-1.68	1.80	-0.93	0.351	0.19
Mobility Disability	Information, Arts, Education, and Healthcare	-0.36	1.05	-0.34	0.734	0.70
Mobility Disability	Resource Extraction, Construction, and Manufacturing	1.04	1.26	0.83	0.408	2.84
Flexibility Disability	Other Services	-2.29	1.59	-1.44	0.149	0.10
Flexibility Disability	Public Administration	-0.63	1.61	-0.39	0.696	0.53
Flexibility Disability	Transportation and Warehousing	-1.64	1.46	-1.12	0.263	0.19
Flexibility Disability	**Retail, Hospitality, and Food Services**	**3.93**	**1.68**	**2.34**	**0.019**	**50.84**
Flexibility Disability	Finance, Real Estate, and Administrative Services	0.18	1.77	0.10	0.921	1.19
Flexibility Disability	Information, Arts, Education, and Healthcare	-1.57	1.23	-1.28	0.200	0.21
Flexibility Disability	Resource Extraction, Construction, and Manufacturing	1.73	1.53	1.13	0.258	5.65
Pain Disability	Other Services	-1.13	1.31	-0.87	0.385	0.32
Pain Disability	Public Administration	-0.73	1.56	-0.47	0.639	0.48
Pain Disability	Transportation and Warehousing	-0.77	1.42	-0.54	0.590	0.46
Pain Disability	**Retail, Hospitality, and Food Services**	**-5.27**	**1.98**	**-2.66**	**0.008**	**0.01**
Pain Disability	**Finance, Real Estate, and Administrative Services**	**-4.40**	**1.65**	**-2.67**	**0.008**	**0.01**

Pain Disability	Information, Arts, Education, and Healthcare	-1.13	1.13	-1.00	0.319	0.32
Pain Disability	Resource Extraction, Construction, and Manufacturing	-1.50	1.51	-0.99	0.323	0.22
Learning Disability	Other Services	-0.57	1.70	-0.34	0.736	0.56
Learning Disability	Public Administration	-3.57	2.80	-1.27	0.203	0.03
Learning Disability	Transportation and Warehousing	1.25	1.89	0.66	0.507	3.50
Learning Disability	Retail, Hospitality, and Food Services	2.08	1.73	1.20	0.228	8.02
Learning Disability	Finance, Real Estate, and Administrative Services	0.86	1.88	0.46	0.647	2.37
Learning Disability	Information, Arts, Education, and Healthcare	0.91	1.44	0.63	0.529	2.48
Learning Disability	Resource Extraction, Construction, and Manufacturing	-0.50	1.78	-0.28	0.777	0.60
Developmental Disability	**Other Services**	**-8.47**	**0.65**	**-12.93**	**0.000**	**0.00**
Developmental Disability	Public Administration	-3.05	12.29	-0.25	0.804	0.05
Developmental Disability	Transportation and Warehousing	13.35	439.22	0.03	0.976	630145.45
Developmental Disability	Retail, Hospitality, and Food Services	9.09	439.22	0.02	0.984	8880.48
Developmental Disability	Finance, Real Estate, and Administrative Services	-1.31	9.66	-0.14	0.892	0.27
Developmental Disability	**Information, Arts, Education, and Healthcare**	**-7.15**	**1.29**	**-5.56**	**0.000**	**0.00**
Developmental Disability	Resource Extraction, Construction, and Manufacturing	16.74	439.22	0.04	0.970	18696637.18
Memory Disability	Other Services	-0.14	1.71	-0.08	0.934	0.87
Memory Disability	Public Administration	-0.84	2.04	-0.41	0.683	0.43
Memory Disability	Transportation and Warehousing	-1.63	1.87	-0.87	0.385	0.20
Memory Disability	Retail, Hospitality, and Food Services	3.27	1.84	1.78	0.075	26.23
Memory Disability	Finance, Real Estate, and Administrative Services	0.53	2.16	0.24	0.807	1.70
Memory Disability	Information, Arts, Education, and Healthcare	-1.67	1.53	-1.09	0.275	0.19
Memory Disability	Resource Extraction, Construction, and Manufacturing	-1.75	1.74	-1.01	0.313	0.17

Mental Health Disability	Other Services	-1.44	1.26	-1.14	0.253	0.24
Mental Health Disability	Public Administration	-2.44	1.54	-1.58	0.113	0.09
Mental Health Disability	Transportation and Warehousing	-0.13	1.19	-0.11	0.916	0.88
Mental Health Disability	Retail, Hospitality, and Food Services	-0.50	1.41	-0.35	0.725	0.61
Mental Health Disability	Finance, Real Estate, and Administrative Services	-1.87	1.66	-1.13	0.258	0.15
Mental Health Disability	Information, Arts, Education, and Healthcare	-0.57	1.03	-0.56	0.578	0.56
Mental Health Disability	Resource Extraction, Construction, and Manufacturing	-1.04	1.32	-0.78	0.433	0.35
Disability Severity (Moderate)	Other Services	0.19	1.92	0.10	0.921	1.21
Disability Severity (Moderate)	**Public Administration**	**4.28**	**1.85**	**2.31**	**0.021**	**72.05**
Disability Severity (Moderate)	Transportation and Warehousing	2.50	1.66	1.51	0.132	12.13
Disability Severity (Moderate)	Retail, Hospitality, and Food Services	-2.46	2.08	-1.18	0.236	0.09
Disability Severity (Moderate)	**Finance, Real Estate, and Administrative Services**	**5.53**	**2.02**	**2.74**	**0.006**	**253.07**
Disability Severity (Moderate)	Information, Arts, Education, and Healthcare	2.43	1.45	1.67	0.094	11.41
Disability Severity (Moderate)	Resource Extraction, Construction, and Manufacturing	3.01	1.73	1.73	0.083	20.19
Disability Severity (Severe)	Other Services	3.71	1.96	1.89	0.059	40.74
Disability Severity (Severe)	Public Administration	3.27	2.40	1.36	0.174	26.19
Disability Severity (Severe)	Transportation and Warehousing	2.77	2.04	1.36	0.173	16.04
Disability Severity (Severe)	Retail, Hospitality, and Food Services	-0.23	2.12	-0.11	0.912	0.79
Disability Severity (Severe)	Finance, Real Estate, and Administrative Services	3.65	2.35	1.56	0.120	38.65
Disability Severity (Severe)	Information, Arts, Education, and Healthcare	2.31	1.70	1.36	0.173	10.12
Disability Severity (Severe)	Resource Extraction, Construction, and Manufacturing	-0.94	2.32	-0.41	0.685	0.39
Disability Severity (Very Severe)	Other Services	3.62	2.94	1.23	0.218	37.30
Disability Severity (Very Severe)	**Public Administration**	**7.88**	**3.12**	**2.53**	**0.012**	**2642.30**
Disability Severity (Very Severe)	Transportation and Warehousing	2.85	2.91	0.98	0.327	17.31

Disability Severity (Very Severe)	Retail, Hospitality, and Food Services	-2.95	2.89	-1.02	0.308	0.05
Disability Severity (Very Severe)	Finance, Real Estate, and Administrative Services	-5.30	75.07	-0.07	0.944	0.01
Disability Severity (Very Severe)	Information, Arts, Education, and Healthcare	2.53	2.55	0.99	0.322	12.53
Disability Severity (Very Severe)	Resource Extraction, Construction, and Manufacturing	2.60	2.74	0.95	0.343	13.45

Model X^2	= 266.7
Pseudo R^2	= 0.4448
n	=

Appendix C. Logistic regression of Income_Cat (Income Brackets)

Predictor	Outcome Level	b	SE	Z ratio	Probability	Odds ratio
(Intercept)	10k - 20k	-1.25	2.19	-0.57	0.569	0.29
(Intercept)	20k - 30k	-0.99	1.96	-0.50	0.614	0.37
(Intercept)	30k - 40k	-1.45	1.88	-0.77	0.443	0.24
(Intercept)	40k - 50k	-1.57	2.06	-0.76	0.446	0.21
(Intercept)	50k - 60k	-3.19	2.12	-1.50	0.133	0.04
(Intercept)	60k - 70k	-10.38	20.29	-0.51	0.609	0.00
(Intercept)	70k - 80k	-8.24	13.62	-0.61	0.545	0.00
(Intercept)	80k - 90k	-9.24	18.16	-0.51	0.611	0.00
(Intercept)	90k - 100k	-15.54	24.99	-0.62	0.534	0.00
(Intercept)	100k+	-9.23	18.59	-0.50	0.620	0.00
Gender	10k - 20k	-0.34	0.85	-0.40	0.689	0.71
Gender	20k - 30k	0.40	0.81	0.49	0.626	1.49
Gender	30k - 40k	0.41	0.79	0.51	0.609	1.50
Gender	40k - 50k	0.71	0.83	0.85	0.394	2.03
Gender	50k - 60k	1.22	0.82	1.48	0.138	3.39
Gender	60k - 70k	1.61	0.85	1.90	0.057	5.01
Gender	70k - 80k	0.37	0.92	0.41	0.683	1.45
Gender	**80k - 90k**	**1.98**	**1.00**	**1.98**	**0.048**	**7.27**
Gender	**90k - 100k**	**2.22**	**1.12**	**1.98**	**0.048**	**9.24**

Gender	100k+	1.62	0.93	1.74	0.081	5.03
Age Group (25 - 34)	10k - 20k	12.00	26.47	0.45	0.650	162278.66
Age Group (25 - 34)	20k - 30k	11.98	26.46	0.45	0.651	159194.44
Age Group (25 - 34)	30k - 40k	11.66	26.45	0.44	0.659	115991.35
Age Group (25 - 34)	40k - 50k	12.28	26.46	0.46	0.643	216081.95
Age Group (25 - 34)	50k - 60k	12.10	26.46	0.46	0.648	179867.42
Age Group (25 - 34)	60k - 70k	17.02	33.27	0.51	0.609	24609895.19
Age Group (25 - 34)	70k - 80k	16.14	29.66	0.54	0.586	10242617.17
Age Group (25 - 34)	80k - 90k	16.79	32.02	0.52	0.600	19490162.70
Age Group (25 - 34)	**90k - 100k**	**-4.50**	**0.00**	**-8460.02**	**0.000**	**0.01**
Age Group (25 - 34)	**100k+**	**-6.64**	**0.00**	**-209191.74**	**0.000**	**0.00**
Age Group (35 - 44)	**10k - 20k**	**-6.27**	**0.05**	**-127.36**	**0.000**	**0.00**
Age Group (35 - 44)	**20k - 30k**	**-7.17**	**0.03**	**-241.25**	**0.000**	**0.00**
Age Group (35 - 44)	30k - 40k	9.48	17.48	0.54	0.588	13095.19
Age Group (35 - 44)	40k - 50k	9.67	17.50	0.55	0.581	15787.73
Age Group (35 - 44)	50k - 60k	10.30	17.49	0.59	0.556	29691.80
Age Group (35 - 44)	60k - 70k	15.60	26.70	0.58	0.559	5933677.12
Age Group (35 - 44)	**70k - 80k**	**-2.67**	**0.01**	**-507.38**	**0.000**	**0.07**
Age Group (35 - 44)	80k - 90k	13.97	25.13	0.56	0.578	1168333.62
Age Group (35 - 44)	90k - 100k	12.62	20.97	0.60	0.547	303238.98
Age Group (35 - 44)	100k+	15.48	25.43	0.61	0.543	5257153.21
Age Group (45 - 54)	10k - 20k	2.57	1.98	1.30	0.193	13.09
Age Group (45 - 54)	20k - 30k	0.65	1.73	0.38	0.707	1.92
Age Group (45 - 54)	30k - 40k	1.41	1.65	0.86	0.391	4.10
Age Group (45 - 54)	40k - 50k	-9.21	225.51	-0.04	0.967	0.00
Age Group (45 - 54)	50k - 60k	0.36	2.17	0.17	0.866	1.44
Age Group (45 - 54)	60k - 70k	7.00	20.26	0.35	0.730	1100.30
Age Group (45 - 54)	70k - 80k	6.42	13.54	0.47	0.636	611.35
Age Group (45 - 54)	**80k - 90k**	**-9.02**	**0.00**	**-3107.36**	**0.000**	**0.00**
Age Group (45 - 54)	90k - 100k	7.01	11.65	0.60	0.547	1109.58
Age Group (45 - 54)	100k+	9.13	18.53	0.49	0.622	9185.26
Age Group (55 +)	10k - 20k	3.07	1.82	1.68	0.092	21.46
Age Group (55 +)	20k - 30k	2.73	1.55	1.76	0.078	15.33
Age Group (55 +)	30k - 40k	2.63	1.50	1.75	0.080	13.93

Age Group (55 +)	**40k - 50k**	**3.79**	**1.69**	**2.24**	**0.025**	**44.44**
Age Group (55 +)	**50k - 60k**	**3.73**	**1.64**	**2.28**	**0.023**	**41.54**
Age Group (55 +)	60k - 70k	9.20	20.22	0.45	0.649	9877.58
Age Group (55 +)	70k - 80k	7.47	13.51	0.55	0.580	1758.73
Age Group (55 +)	80k - 90k	8.05	18.07	0.45	0.656	3130.85
Age Group (55 +)	90k - 100k	6.39	11.62	0.55	0.582	598.49
Age Group (55 +)	100k+	8.08	18.52	0.44	0.663	3231.24
Educational Attainment (High School Diploma/Certificate)	10k - 20k	-0.53	1.16	-0.46	0.647	0.59
Educational Attainment (High School Diploma/Certificate)	20k - 30k	-1.29	1.13	-1.14	0.254	0.27
Educational Attainment (High School Diploma/Certificate)	30k - 40k	0.11	1.10	0.10	0.924	1.11
Educational Attainment (High School Diploma/Certificate)	40k - 50k	-1.28	1.15	-1.11	0.266	0.28
Educational Attainment (High School Diploma/Certificate)	50k - 60k	1.28	1.29	1.00	0.320	3.61
Educational Attainment (High School Diploma/Certificate)	60k - 70k	2.34	1.46	1.60	0.109	10.38
Educational Attainment (High School Diploma/Certificate)	70k - 80k	1.40	1.51	0.93	0.352	4.07
Educational Attainment (High School Diploma/Certificate)	80k - 90k	1.54	1.55	0.99	0.320	4.68
Educational Attainment (High School Diploma/Certificate)	90k - 100k	7.16	22.11	0.32	0.746	1284.34
Educational Attainment (High School Diploma/Certificate)	100k+	0.70	1.77	0.40	0.692	2.01
Educational Attainment (Trade Certificate/Diploma)	10k - 20k	0.39	1.41	0.28	0.783	1.47
Educational Attainment (Trade Certificate/Diploma)	20k - 30k	0.44	1.34	0.33	0.745	1.55
Educational Attainment (Trade Certificate/Diploma)	30k - 40k	1.79	1.32	1.35	0.176	5.98
Educational Attainment (Trade Certificate/Diploma)	40k - 50k	1.15	1.33	0.86	0.390	3.15
Educational Attainment (Trade Certificate/Diploma)	50k - 60k	2.02	1.52	1.33	0.184	7.56
Educational Attainment (Trade Certificate/Diploma)	60k - 70k	2.95	1.67	1.77	0.077	19.15
Educational Attainment (Trade Certificate/Diploma)	70k - 80k	2.33	1.76	1.32	0.187	10.27

Educational Attainment (Trade Certificate/Diploma)	80k - 90k	1.60	1.82	0.88	0.378	4.97
Educational Attainment (Trade Certificate/Diploma)	90k - 100k	8.95	22.11	0.40	0.686	7726.79
Educational Attainment (Trade Certificate/Diploma)	100k+	2.53	1.87	1.35	0.176	12.53
Educational Attainment (College, CEGEP or other Certificate/Diploma)	10k - 20k	-0.57	1.27	-0.45	0.654	0.56
Educational Attainment (College, CEGEP or other Certificate/Diploma)	20k - 30k	0.21	1.19	0.18	0.860	1.23
Educational Attainment (College, CEGEP or other Certificate/Diploma)	30k - 40k	0.50	1.20	0.41	0.679	1.64
Educational Attainment (College, CEGEP or other Certificate/Diploma)	40k - 50k	-1.18	1.28	-0.92	0.356	0.31
Educational Attainment (College, CEGEP or other Certificate/Diploma)	50k - 60k	1.63	1.38	1.18	0.240	5.08
Educational Attainment (College, CEGEP or other Certificate/Diploma)	60k - 70k	1.67	1.60	1.05	0.295	5.33
Educational Attainment (College, CEGEP or other Certificate/Diploma)	70k - 80k	1.49	1.59	0.93	0.350	4.42
Educational Attainment (College, CEGEP or other Certificate/Diploma)	80k - 90k	-0.28	1.90	-0.15	0.885	0.76
Educational Attainment (College, CEGEP or other Certificate/Diploma)	90k - 100k	7.52	22.11	0.34	0.734	1850.63
Educational Attainment (College, CEGEP or other Certificate/Diploma)	100k+	2.00	1.73	1.16	0.248	7.41
Educational Attainment (University Certificate/Diploma)	10k - 20k	4.14	8.96	0.46	0.644	62.88
Educational Attainment (University Certificate/Diploma)	20k - 30k	5.05	8.93	0.57	0.572	155.32
Educational Attainment (University Certificate/Diploma)	30k - 40k	5.05	8.94	0.57	0.572	156.40
Educational Attainment (University Certificate/Diploma)	40k - 50k	4.38	8.95	0.49	0.625	79.86
Educational Attainment (University Certificate/Diploma)	50k - 60k	7.15	8.97	0.80	0.425	1274.85
Educational Attainment (University Certificate/Diploma)	60k - 70k	8.14	9.00	0.90	0.366	3412.41
Educational Attainment (University Certificate/Diploma)	70k - 80k	6.57	9.05	0.73	0.467	716.20
Educational Attainment (University Certificate/Diploma)	80k - 90k	-3.39	232.43	-0.01	0.988	0.03
Educational Attainment (University Certificate/Diploma)	90k - 100k	14.74	23.82	0.62	0.536	2529219.43

Educational Attainment (University Certificate/Diploma)	100k+	7.75	9.04	0.86	0.392	2312.32
Educational Attainment (Bachelor's Degree)	10k - 20k	1.02	1.66	0.61	0.539	2.77
Educational Attainment (Bachelor's Degree)	20k - 30k	-12.18	256.96	-0.05	0.962	0.00
Educational Attainment (Bachelor's Degree)	30k - 40k	1.78	1.64	1.08	0.279	5.94
Educational Attainment (Bachelor's Degree)	40k - 50k	0.65	1.67	0.39	0.698	1.91
Educational Attainment (Bachelor's Degree)	50k - 60k	2.47	1.78	1.39	0.166	11.78
Educational Attainment (Bachelor's Degree)	60k - 70k	2.81	1.95	1.44	0.149	16.53
Educational Attainment (Bachelor's Degree)	70k - 80k	2.38	2.14	1.11	0.267	10.80
Educational Attainment (Bachelor's Degree)	80k - 90k	2.61	2.01	1.30	0.194	13.58
Educational Attainment (Bachelor's Degree)	90k - 100k	7.75	22.16	0.35	0.727	2312.66
Educational Attainment (Bachelor's Degree)	100k+	3.05	2.10	1.45	0.146	21.16
Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	10k - 20k	-0.39	1.60	-0.25	0.806	0.67
Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	20k - 30k	-0.34	1.50	-0.23	0.819	0.71
Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	30k - 40k	-1.41	1.76	-0.80	0.424	0.24
Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	40k - 50k	-0.59	1.54	-0.38	0.705	0.56
Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	50k - 60k	0.48	1.75	0.27	0.785	1.61
Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	60k - 70k	2.48	1.81	1.37	0.171	11.99
Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	70k - 80k	1.99	1.85	1.08	0.282	7.31
Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	80k - 90k	2.26	1.88	1.21	0.228	9.60

Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	90k - 100k	9.25	22.12	0.42	0.676	10398.14
Educational Attainment (University Certificate/Diploma/Degree above Bachelor's Level)	100k+	3.60	1.94	1.86	0.063	36.57
LGBTQ	10k - 20k	0.48	1.35	0.35	0.724	1.61
LGBTQ	20k - 30k	-0.02	1.25	-0.01	0.990	0.98
LGBTQ	30k - 40k	0.26	1.25	0.20	0.838	1.29
LGBTQ	40k - 50k	0.50	1.29	0.39	0.696	1.65
LGBTQ	50k - 60k	-0.22	1.40	-0.16	0.875	0.80
LGBTQ	60k - 70k	-13.67	421.58	-0.03	0.974	0.00
LGBTQ	70k - 80k	-0.11	1.69	-0.06	0.949	0.90
LGBTQ	80k - 90k	-12.78	420.47	-0.03	0.976	0.00
LGBTQ	90k - 100k	-0.41	2.19	-0.19	0.851	0.66
LGBTQ	**100k+**	**-14.57**	**0.00**	**-7129.59**	**0.000**	**0.00**
Visual Disability	10k - 20k	-1.38	1.28	-1.07	0.283	0.25
Visual Disability	20k - 30k	-2.08	1.36	-1.52	0.127	0.13
Visual Disability	30k - 40k	-2.13	1.24	-1.72	0.085	0.12
Visual Disability	40k - 50k	-1.08	1.29	-0.83	0.405	0.34
Visual Disability	**50k - 60k**	**-2.85**	**1.41**	**-2.02**	**0.044**	**0.06**
Visual Disability	60k - 70k	-1.33	1.31	-1.01	0.310	0.27
Visual Disability	70k - 80k	-0.91	1.55	-0.59	0.556	0.40
Visual Disability	80k - 90k	-1.61	1.46	-1.10	0.269	0.20
Visual Disability	90k - 100k	-10.94	23.31	-0.47	0.639	0.00
Visual Disability	100k+	-2.62	1.56	-1.68	0.092	0.07
Immigrant Status	10k - 20k	1.85	1.36	1.36	0.173	6.37
Immigrant Status	20k - 30k	1.52	1.34	1.13	0.258	4.56
Immigrant Status	30k - 40k	1.16	1.33	0.87	0.383	3.18
Immigrant Status	40k - 50k	0.21	1.41	0.15	0.879	1.24
Immigrant Status	50k - 60k	0.85	1.36	0.63	0.529	2.35
Immigrant Status	60k - 70k	0.76	1.37	0.55	0.579	2.14
Immigrant Status	70k - 80k	-9.34	88.17	-0.11	0.916	0.00
Immigrant Status	80k - 90k	1.26	1.46	0.86	0.388	3.52
Immigrant Status	90k - 100k	1.42	1.59	0.89	0.372	4.14
Immigrant Status	100k+	0.69	1.49	0.46	0.644	2.00

Indigeneity	10k - 20k	0.74	1.67	0.44	0.658	2.10
Indigeneity	20k - 30k	-13.32	361.34	-0.04	0.971	0.00
Indigeneity	30k - 40k	-0.66	1.63	-0.41	0.685	0.52
Indigeneity	40k - 50k	-0.27	1.64	-0.17	0.867	0.76
Indigeneity	50k - 60k	-0.38	2.00	-0.19	0.849	0.68
Indigeneity	60k - 70k	-0.90	1.90	-0.48	0.635	0.41
Indigeneity	70k - 80k	-1.33	2.01	-0.67	0.506	0.26
Indigeneity	80k - 90k	-8.64	103.38	-0.08	0.933	0.00
Indigeneity	90k - 100k	11.17	23.33	0.48	0.632	71279.93
Indigeneity	100k+	-9.88	149.73	-0.07	0.947	0.00
Visual Disability	10k - 20k	1.35	0.84	1.61	0.107	3.87
Visual Disability	20k - 30k	0.13	0.79	0.17	0.866	1.14
Visual Disability	30k - 40k	0.42	0.77	0.54	0.589	1.52
Visual Disability	40k - 50k	0.71	0.82	0.87	0.384	2.04
Visual Disability	50k - 60k	0.06	0.84	0.07	0.944	1.06
Visual Disability	60k - 70k	0.51	0.84	0.60	0.549	1.66
Visual Disability	70k - 80k	-0.47	0.97	-0.48	0.630	0.63
Visual Disability	**80k - 90k**	**2.31**	**1.02**	**2.27**	**0.023**	**10.09**
Visual Disability	90k - 100k	1.35	1.05	1.29	0.198	3.85
Visual Disability	100k+	1.31	0.90	1.45	0.146	3.69
Mobility Disability	10k - 20k	-0.15	1.04	-0.15	0.883	0.86
Mobility Disability	20k - 30k	0.82	1.04	0.79	0.429	2.27
Mobility Disability	30k - 40k	0.78	0.99	0.79	0.432	2.18
Mobility Disability	40k - 50k	0.24	1.03	0.23	0.814	1.27
Mobility Disability	50k - 60k	-0.39	1.02	-0.38	0.703	0.68
Mobility Disability	60k - 70k	-0.39	1.04	-0.38	0.706	0.67
Mobility Disability	70k - 80k	0.96	1.27	0.76	0.448	2.62
Mobility Disability	80k - 90k	-0.91	1.24	-0.74	0.462	0.40
Mobility Disability	90k - 100k	-2.28	1.33	-1.72	0.086	0.10
Mobility Disability	100k+	-0.87	1.13	-0.78	0.438	0.42
Flexibility Disability	10k - 20k	-0.81	1.00	-0.81	0.416	0.44
Flexibility Disability	20k - 30k	-0.50	0.99	-0.50	0.616	0.61
Flexibility Disability	30k - 40k	0.22	0.98	0.22	0.823	1.24
Flexibility Disability	40k - 50k	-0.12	1.02	-0.11	0.909	0.89

Flexibility Disability	50k - 60k	0.03	1.01	0.03	0.978	1.03
Flexibility Disability	60k - 70k	0.17	1.04	0.17	0.866	1.19
Flexibility Disability	70k - 80k	0.60	1.24	0.49	0.625	1.83
Flexibility Disability	80k - 90k	-0.42	1.22	-0.35	0.728	0.65
Flexibility Disability	90k - 100k	0.07	1.23	0.06	0.951	1.08
Flexibility Disability	100k+	-0.71	1.12	-0.63	0.528	0.49
Pain Disability	10k - 20k	0.25	1.19	0.21	0.835	1.28
Pain Disability	20k - 30k	-1.05	1.19	-0.88	0.380	0.35
Pain Disability	30k - 40k	-0.51	1.17	-0.44	0.662	0.60
Pain Disability	40k - 50k	0.39	1.19	0.33	0.741	1.48
Pain Disability	50k - 60k	-0.25	1.16	-0.21	0.831	0.78
Pain Disability	60k - 70k	0.48	1.20	0.40	0.691	1.61
Pain Disability	70k - 80k	0.93	1.40	0.66	0.507	2.52
Pain Disability	80k - 90k	0.58	1.28	0.46	0.649	1.79
Pain Disability	90k - 100k	-0.03	1.38	-0.02	0.984	0.97
Pain Disability	100k+	-0.06	1.22	-0.05	0.960	0.94
Learning Disability	10k - 20k	0.16	1.23	0.13	0.894	1.18
Learning Disability	20k - 30k	0.45	1.06	0.42	0.672	1.56
Learning Disability	30k - 40k	1.11	1.02	1.09	0.278	3.03
Learning Disability	40k - 50k	1.00	1.10	0.91	0.364	2.72
Learning Disability	50k - 60k	-0.27	1.20	-0.23	0.821	0.76
Learning Disability	60k - 70k	1.36	1.14	1.19	0.234	3.90
Learning Disability	70k - 80k	1.88	1.23	1.54	0.124	6.58
Learning Disability	80k - 90k	0.00	1.57	0.00	0.999	1.00
Learning Disability	90k - 100k	0.69	1.68	0.41	0.682	1.99
Learning Disability	100k+	1.54	1.20	1.28	0.200	4.66
Developmental Disability	10k - 20k	0.50	1.86	0.27	0.789	1.64
Developmental Disability	20k - 30k	0.84	1.55	0.54	0.590	2.30
Developmental Disability	30k - 40k	-1.88	1.80	-1.04	0.297	0.15
Developmental Disability	40k - 50k	-7.68	72.69	-0.11	0.916	0.00
Developmental Disability	50k - 60k	1.88	1.80	1.04	0.297	6.52
Developmental Disability	60k - 70k	0.61	1.89	0.32	0.747	1.84
Developmental Disability	70k - 80k	-10.57	154.77	-0.07	0.946	0.00
Developmental Disability	80k - 90k	-3.59	24.57	-0.15	0.884	0.03

Developmental Disability	90k - 100k	-7.49	67.67	-0.11	0.912	0.00
Developmental Disability	100k+	-10.73	171.37	-0.06	0.950	0.00
Memory Disability	10k - 20k	0.54	1.13	0.48	0.635	1.71
Memory Disability	20k - 30k	0.14	1.02	0.14	0.887	1.16
Memory Disability	30k - 40k	0.28	0.99	0.28	0.778	1.32
Memory Disability	40k - 50k	0.43	1.06	0.41	0.683	1.54
Memory Disability	50k - 60k	0.11	1.10	0.10	0.923	1.11
Memory Disability	60k - 70k	-0.09	1.10	-0.08	0.938	0.92
Memory Disability	70k - 80k	0.43	1.15	0.38	0.705	1.54
Memory Disability	80k - 90k	-0.07	1.37	-0.05	0.956	0.93
Memory Disability	90k - 100k	-1.10	1.78	-0.62	0.536	0.33
Memory Disability	100k+	0.34	1.22	0.28	0.778	1.41
Mental Health Disability	10k - 20k	-1.88	0.98	-1.92	0.054	0.15
Mental Health Disability	20k - 30k	-0.19	0.88	-0.21	0.832	0.83
Mental Health Disability	30k - 40k	-0.84	0.88	-0.96	0.339	0.43
Mental Health Disability	40k - 50k	-0.87	0.91	-0.96	0.338	0.42
Mental Health Disability	50k - 60k	-0.59	0.92	-0.65	0.518	0.55
Mental Health Disability	60k - 70k	-1.07	0.94	-1.14	0.255	0.34
Mental Health Disability	70k - 80k	-0.58	1.04	-0.55	0.579	0.56
Mental Health Disability	80k - 90k	-0.66	1.07	-0.61	0.541	0.52
Mental Health Disability	90k - 100k	-1.76	1.21	-1.45	0.146	0.17
Mental Health Disability	100k+	-1.97	1.08	-1.82	0.068	0.14
Disability Severity (Moderate)	10k - 20k	1.67	1.62	1.03	0.301	5.34
Disability Severity (Moderate)	20k - 30k	1.15	1.66	0.69	0.490	3.15
Disability Severity (Moderate)	30k - 40k	0.46	1.62	0.28	0.776	1.59
Disability Severity (Moderate)	40k - 50k	0.43	1.61	0.27	0.790	1.54
Disability Severity (Moderate)	50k - 60k	1.50	1.60	0.94	0.347	4.50
Disability Severity (Moderate)	60k - 70k	0.64	1.64	0.39	0.697	1.90
Disability Severity (Moderate)	70k - 80k	-1.78	2.11	-0.84	0.399	0.17
Disability Severity (Moderate)	80k - 90k	-0.21	1.80	-0.12	0.905	0.81
Disability Severity (Moderate)	90k - 100k	2.64	1.93	1.37	0.171	14.01
Disability Severity (Moderate)	100k+	1.39	1.69	0.82	0.413	4.01
Disability Severity (Severe)	10k - 20k	-0.32	1.50	-0.21	0.833	0.73
Disability Severity (Severe)	20k - 30k	1.09	1.48	0.74	0.461	2.98

Disability Severity (Severe)	30k - 40k	-0.46	1.45	-0.32	0.752	0.63
Disability Severity (Severe)	40k - 50k	-1.28	1.48	-0.86	0.388	0.28
Disability Severity (Severe)	50k - 60k	0.16	1.44	0.11	0.913	1.17
Disability Severity (Severe)	60k - 70k	-0.05	1.50	-0.03	0.975	0.95
Disability Severity (Severe)	70k - 80k	-1.74	1.83	-0.95	0.343	0.18
Disability Severity (Severe)	80k - 90k	-0.54	1.70	-0.32	0.751	0.58
Disability Severity (Severe)	90k - 100k	1.85	1.86	1.00	0.320	6.38
Disability Severity (Severe)	100k+	-0.57	1.62	-0.35	0.725	0.57
Disability Severity (Very Severe)	10k - 20k	-1.75	1.71	-1.02	0.307	0.17
Disability Severity (Very Severe)	20k - 30k	-0.21	1.67	-0.13	0.899	0.81
Disability Severity (Very Severe)	30k - 40k	-1.21	1.64	-0.74	0.459	0.30
Disability Severity (Very Severe)	40k - 50k	-2.98	1.72	-1.74	0.083	0.05
Disability Severity (Very Severe)	50k - 60k	-2.38	1.71	-1.39	0.163	0.09
Disability Severity (Very Severe)	60k - 70k	-2.29	1.73	-1.33	0.185	0.10
Disability Severity (Very Severe)	70k - 80k	-3.16	2.08	-1.52	0.129	0.04
Disability Severity (Very Severe)	80k - 90k	-3.81	2.21	-1.73	0.084	0.02
Disability Severity (Very Severe)	90k - 100k	-1.07	2.40	-0.45	0.656	0.34
Disability Severity (Very Severe)	100k+	-1.83	1.98	-0.92	0.356	0.16

Model X^2	= 402.13
Pseudo R^2	= 0.2587
n	=

Appendix D: Characteristics of interview and focus group participants

Table 1 Characteristics of ASL Interpreter Participants

	Total n = 6
Identity as d/Deaf or Hard of Hearing	
Hearing	6
Deaf	0
Deaf-Blind	0
DeafDisabled or DeafPlus	0
Hard of Hearing	0
Deafened or late Deafened	0
Prefer to self-identify	0

Years working as an ASL Interpreter	
Less than 1 year	1
1-5 years	0
6-10 years	1
Over 10 years	4
Full- or part-time employment	
Full-time	4
Part-time	2
Employment type	
Self-employed/freelance/gig worker	5
Employed by an organization or employer on a contract basis	1
Employed by an organization or employer on a permanent basis	0
Gender	
Man (including transgender men)	0
Woman (including transgender women)	6
Non-binary	0
Self-describe	0
Indigenous	
Yes	0
No	6
LGBTQIAA+	
Yes	2
No	4
Race and/or ethnicity	
Black	0
East Asian	0
Latino/Latina/Latinx	0
Middle Eastern/North African	0
South Asian	0
Southeast Asian	0
White	6
Other	1

Table 2 Characteristics of d/Deaf and Hard of Hearing Participants

	Total n = 26
Identity as d/Deaf or Hard of Hearing	
Deaf	10
Deaf-Blind	2
DeafDisabled or DeafPlus	2

Hard of Hearing	10
Deafened or late Deafened	0
Prefer to self-describe - Deaf	2
Use of Assistive Devices	
Yes	17
No	9
Gender	
Man (including transgender men)	13
Non-binary	2
Woman (including transgender women)	11
Self-describe	0
Indigenous	
Yes	2
No	24
Two-Spirit	
Yes	1
No	24
LGBTQIAA+	
Yes	5
No	21
Race and/or ethnicity	
Black	1
East Asian	3
Latino/Latina/Latinx	2
Middle Eastern/North African	1
South Asian	4
Southeast Asian	0
White	15
Self-describe/Race is not listed	3
Newcomer	
Yes	13
No	13
Education	
Less than high school	0
High school diploma or GED	2
Some college	8
Apprenticeship or trades certificate or diploma	2
College diploma or university degree below Bachelor’s	4
Bachelor’s degree	8
Master’s degree	2

Doctorate or professional degree	0
Disability (excluding hearing loss or Deafness)	
Yes	14
No	11
Other	1
Disability type	
Mobility/Agility	6
Motor/Dexterity	3
Developmental	3
Intellectual	0
Learning	4
Sensory (not including hearing)	3
Communication	3
Mental health and/or addictions	4
Medical (e.g., chronic illness, pain)	5
Other	2

Table 3 Characteristics of Employer Participants

	Total n = 3
Region	
Vancouver Island/Coast	0
Mainland/Southwest	2
Thompson-Okanagan	0
Kootenay	0
Cariboo	0
North Coast	1
Nechako	0
Northeast	0
Organization size	
1-49 employees	1
50-199 employees	0
200-499 employees	2
500 or more employees	0
Industry	
Agriculture, forestry, fishing and hunting	0
Mining, quarrying, and oil and gas extraction	0
Utilities	0
Construction	0
Manufacturing	0

Wholesale trade	0
Retail trade	0
Transportation and warehousing	0
Information and cultural industries	0
Finance and insurance	0
Real estate and rental and leasing	0
Professional, scientific and technical services	0
Management of companies and enterprises	0
Administrative and support, waste management and remediation services	0
Educational services	1
Health care and social assistance	1
Arts, entertainment and recreation	0
Accommodation and food services	0
Other services (except public administration)	0
Public administration	0
Other (please specify)	1
Role	
Executive	1
Director	0
Manager	0
Supervisor	0
Human Resources	1
Other (please specify)	1

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