



## The Let-Them-Eat-Cake Law

High-income Canadians will not bat an eyelash over Ottawa's plan to dismantle the Canada Assistance Plan.

The well-off don't need help paying for the many social services supported under the Act. They simply purchase these services on their own – nannies for their children, private caregivers for their elderly parents and counselling for marital or family problems. The Canada Assistance Plan (CAP) offset the cost of these services for low- and modest-income Canadians.

On Budget night 1995, Ottawa announced its intention to withdraw CAP and to replace it with a new Canada Health and Social Transfer (CHST) in 1996-97. This proposal effectively removes the legislative base for the federal support of social services and thereby places them at risk. It also spells a sizable cut to federal cash transfers to the provinces; these transfers which will fall steadily over time and finally disappear early in the next century.

The new arrangement will end up hurting the people who most need help. It is a 'let-them-eat-cake' law.

Unfortunately, the current battle of the acronyms – 'CHST eclipses CAP' – holds little mean-

ing for the majority of Canadians. While millions have benefited at some point in their lives from the wide range of social services supported under CAP, many – if not most – are unaware that this source of support will soon be lost. There is a lot at stake.

The various forms of assistance and services funded under the Canada Assistance Plan provided essential supports to help people with disabilities and seniors live independently in communities. The services delivered under CAP helped people get off welfare by offsetting child care costs and other work-related expenses. CAP represented an investment in children through both child care and child welfare services. CAP services afforded support to families and protection to children who might otherwise end up on the street – involved in drugs, prostitution or violent crime.

CAP shared the cost of a range of services that allow the elderly to live at home by assisting them with their shopping, cooking, cleaning and other household tasks. These are known as 'homemaker services.' The Act also offset the cost of 'meals-on-wheels' – programs which deliver nutritious, hot meals directly to seniors' homes.

CAP shared the cost of many services that help people with disabilities live outside institutions and in the community by assisting them with the

activities of everyday living – eating, bathing, dressing and grooming. These are referred to as ‘attendant services.’

CAP shared the cost of many services that assist families in caring for young children while these parents complete their education, participate in a training program, seek employment or go to work. ‘Child care services’ assume a variety of forms including centre-based care and family day care homes in which a caregiver looks after a few children in her or his own home. Child care also incorporates an important developmental component by helping children learn social skills and by providing learning and play opportunities.

CAP shared certain costs of assisting the unemployed enter or re-enter the labour market. These costs included, for example, start-up expenses for self-employment – such as the purchase of tools – or small allowances to pay for job searches (e.g., transportation or clothing).

CAP shared the cost of services that provided protection to children who have been neglected or abused. In the case of family abuse, the abuser may be removed from the household. Often, however, it is the child who is removed from the home and placed with foster parents (a temporary arrangement) or adoptive parents (a permanent arrangement). ‘Child welfare services’ provide ongoing supervision and emotional support to both children and parents.

CAP shared the cost of services for women fleeing family violence and abusive relationships. It supported shelters and transition homes for battered women and their children.

CAP shared the cost of counselling for individuals, couples or families experiencing personal, health-related or employment problems. It assisted parents having a difficult time with children and adolescents; it helped young people having trouble at home with their parents. These are referred to as ‘counselling services.’

CAP shared the cost of services that provided direction as to where to obtain a wide range of community services – e.g., care for elderly parents, counselling for problems with adolescents, suitable training programs or housing for persons with disabilities, or emergency financial support in the event of a crisis such as a fire or sudden death of a family member. These are known as ‘information and referral services.’

CAP shared the cost of occasional relief for parents caring at home for children with severe disabilities. These are called ‘respite services.’

CAP shared the cost of medically-prescribed diets and medical supplies for certain households unable to afford these health-related costs. It also paid for wheelchairs, special eyeglasses and prosthetic appliances for people unable to purchase this disability-related equipment on their own.

After the CHST is in place, provinces will continue to provide some of these services. But it is likely that many social services will be cut back substantially or withdrawn entirely because CAP no longer will be in place to share any of the costs.

Low- and modest-income Canadians will directly bear the cost of losing CAP. But all Canadians will bear the incalculable social and economic costs of losing a compassionate society.

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