

# CILT's Peer Links

**Volume 7 Issue 4**  
**July 2006**

## **The easy way to get your 5 to 10 a day**

*News Canada; July 2006*

**C**anada's Food Guide to Healthy Eating recommends Canadians consume 5 to 10 servings of vegetables and fruit everyday. With busy schedules and not a lot of time to prepare meals, some people struggle to fit the required amount into their daily diets. Here are some tips to make eating the required servings of vegetables and fruits easier:

- Take 30 minutes, once a week to chop and wash your favourite vegetables, such as carrots, celery or green peppers. Store in plastic containers filled with water in your fridge. These vegetables can be used all week as snacks to munch on during the day or to include in salads or side dishes.
- Buy your favourite fruits and make a fruit salad. It can be stored in the fridge for several days. Use fruits such as melons, apples, grapes and orange slices. Fruit salad is enjoyable with breakfast or as a dessert after dinner.
- At lunch or dinner drink a vegetable cocktail with your meal. Cocktails like Tropicana Veggies help to fill you up and are a tasty, nutritious way to include more vegetables in your diet. One 250 mL serving of Tropicana Veggies cocktail contains two of the 5-10 daily servings of vegetables and fruits recommended by Canada's Food Guide to Healthy Eating and is only 60 calories per serving.
- Add vegetables such as cucumber, tomatoes or lettuce to your sandwiches. The vegetables not only add some crunch and flavor to your sandwich, but also a serving of vegetables to your diet.
- Pick up a new fruit or veggie every time you visit the grocery store. Variety will decrease boredom.
- Toss fruit into your green salad for extra flavor, variety, colour and crunch.
- Think frozen. Frozen fruits and vegetables are just as healthy as fresh,

and they're ready when you need them.

- Save time with pre-cut vegetables and salad mixes.
- Keep an easy-to-grab, pre-washed bowl of fruit on the counter.

### **Eateries pledge to boost disabled access: Restaurant chains take steps to meet rights obligations Ontario report cautions more change needed**

© Kelly Gillespie, *Toronto Star*, July 2006

**T**wenty-six restaurant chains across the province will make their eateries more accessible to people with disabilities, says a report to be released today. The report outlines the commitments and progress chains as large as Starbucks, Tim Hortons, McDonald's and Subway have made to ensure everyone, regardless of disability, can get in and around their restaurants.

It's the culmination of five years of work by the Ontario Human Rights Commission to get the restaurant industry to voluntarily take steps to accommodate the needs of customers with disabilities in order to meet their obligations under the Ontario Human Rights Code. Under the code, people with disabilities have a legal right to access premises and services with dignity and without impediment.

"Despite this right, persons with disabilities continue to face daily obstacles in going about their lives, including when they are accessing restaurant services," the report states.

Positive changes highlighted in the report include:

- McDonald's has a five-year plan to deal with barriers in all of its restaurants.
- Great Canadian Bagel has sloped its condiment counters to make it easier for those using wheelchairs.
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- Timothy's World Coffee has a staff-training program for assisting persons with disabilities.
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- Many restaurants have taken steps to offer Braille menus, and Braille or tactile signs on washroom doors to assist the blind.

Ontario Human Rights Commissioner Barbara Hall is releasing the report, 'Moving Towards Barrier-Free Service', this morning.

"The (commission) believes that these initiatives can, over time, make a significant impact on the accessibility of the restaurant industry and hopes that other restaurant chains ... will follow the leadership of these restaurants," the report states.

But it also cautions they need to do much more. Some of the restaurants involved in this initiative are relying heavily on staff training, education and improved customer service to achieve accessibility ... (These) will not by themselves remove barriers, ensure equal access, and bring organizations into compliance with the (Ontario Human Rights) Code," the report states.

There's still a long way to go in improving the design of restaurants to make sure disabled Ontarians can easily get a slice at Pizza Pizza or a coffee at Tim Hortons. The report doesn't provide a dollar figure of how much money it would take to make restaurants accessible.

When a restaurant fails to provide someone with a disability equal access to a facility, such as not having wheelchair ramps or automatic doors, it constitutes discrimination under the Ontario Human Rights Code. But to do anything about it, someone has to make a complaint to the Ontario Human Rights Commission, a process that can take years to complete.

Many believe working with restaurants to get them to voluntarily comply is a faster route to increasing accessibility.

"This is a classic example where accessibility is good for us but it's also good for business. They want to sell more food, it doesn't help anybody to keep customers out," David Lepofsky, a disability rights activist, said.

Right now, people with disabilities find many restaurants very difficult to access or they are totally off limits. Some restaurants have doors that people using wheelchairs can get in, but then have counters that are too high. Others have bathrooms that are accessible but have a step at the front door.

"It's good they're doing work in this area, but we need a commission able to back it with punch, not with a water pistol," Lepofsky said.

He fears that a controversial bill before the Legislature will take away the commission's teeth - its ability to force businesses to comply with the Ontario Human Rights Code if they don't voluntarily choose to do so. The province says its legislation will streamline and speed up the human rights complaints process, but activists such as Lepofsky point out it also removes the commission's role as public investigator and prosecutor in most cases.

The report states the commission was "impressed by the commitment" of the 26

restaurant chains to addressing restaurant accessibility.

While the restaurants have taken different steps in addressing accessibility, in general, they have made five commitments:

- Develop an accessibility policy and customer complaints procedure.
- Identify barriers to access.
- Develop a standardized accessibility plan for future locations based on the Ontario Human Rights Code, the Ontario Building Code and guidelines set by the Canadian Standards Association.
- Develop a plan and remove barriers to access in existing facilities, such as immediately fixing problems that can be easily addressed and/or are relatively inexpensive, and to phase in any remaining changes needed to provide full access.
- Monitor progress toward achieving accessibility by reporting back to the commission.

The following 26 food chains have committed to improving access to their restaurants for people with disabilities:

- |                                   |                                     |
|-----------------------------------|-------------------------------------|
| -Burger King                      | -Coffee Time Donuts                 |
| -Country Style Food Services Inc. | -Cultures Fresh Food Restaurants    |
| -Darden Restaurants (Red Lobster) | -Druxy's                            |
| -Great Canadian Bagel             | -Harvey's                           |
| -Java Joe's                       | -Kelsey's                           |
| -Kentucky Fried Chicken           | -Montana's Cookhouse and Milestones |
| -McDonald's Restaurants           | -Mr. Submarine                      |
| -Pizza Hut                        | -Pizza Pizza                        |
| -Pizzaville                       | -Second Cup                         |
| -Select Sandwich                  | -Starbucks Coffee Canada            |
| -Subway Franchise Systems         | -Swiss Chalet                       |
| -Taco Bell                        | -Tim Hortons (TDL Group)            |
| -Timothy's World Coffee           | -Wendy's Restaurants of Canada.     |

### **Call for Participants!**

**Participants are requested for a study being conducted on attitudes encountered by individuals with speech impairments who are engaged in the hiring process and work environment.**

**Brief Description of Study:** The study is being conducted by a graduate student in the Master of Arts in Critical Disability Studies program at York University as part of her major research paper, which she is required to complete in order to receive her degree. The study is focused on people who have speech

impairments and the attitudes that they have faced in the hiring process and work environment. The researcher is looking for people who wish to share their experiences in regards to this issue. Her main objective is to examine attitudes from co-workers and employers towards individuals who have this specific type of impairment both in the hiring process and in the everyday working environment.

**Participant Profile and Requirements:** The researcher is looking for people who identify as having slight to profound speech impairments. Males and females are being asked to volunteer their participation for the study. Individuals who are currently employed or are actively seeking employment are invited to participate. The individual will be required to participate in an electronic interview process which they will be asked to answer three sets of predetermined questions. Access to a computer is a must in order to participate in this study. There are no financial supplements or other incentives for participants in this project. If the participant profile and the objective of the study is something you are interested in, or you know somebody who would be interested please contact the researcher by e-mail at [jen2005@yorku.ca](mailto:jen2005@yorku.ca) or by phone at 905-884-8995. To maintain anonymity, interested parties can create e-mail addresses that exclude personal information.

## **Making their Lives Count: Innovative Community Action Helps Protect Women Facing Domestic Violence**

*Press Release: Woman Abuse Council of Toronto*

### *Background*

Toronto, May 17, 2006 – Since January 2006, five women have been murdered by their intimate partners in Toronto. This is an alarming number! For every woman who is killed there are countless others who experience physical, emotional, sexual, spiritual, and financial abuse in their intimate relationships every day. Notwithstanding the services and resources available to women, our experience this year indicates that we will see an increase in the number of women murdered by their intimate partners. In 2005, seven women were murdered and in 2004, the total number of women murdered was 7 as well. We are only five months into 2006 and we are already about to match the numbers of the two previous years.

### *High Risk Consult Team*

As the coordinating body for woman abuse in Toronto, the Woman Abuse Council of Toronto has worked with violence against women services and community agencies to develop this response to potentially lethal situations. The work of the Woman Abuse Council in the area of high risk was initiated when the staff of three community agencies contacted the Council office immediately after a woman was murdered by her partner in Scarborough. In all three phone calls,

the workers each identified how they felt that 'this was a murder waiting to happen' and yet felt helpless.

The Woman Abuse Council of Toronto has launched an innovative initiative in Toronto, the High Risk Consult Team, funded for three years through the Ontario Trillium Foundation. This Team is the result of five years of work and provides two components: free training to organizations on assessing risks faced by women experiencing domestic violence, and anonymous case consultations for high-risk situations.

"An important concern to the DVDRC [Domestic Violence Death Review Committee] as a result of our review is the extent to which these homicides appear both predictable and preventable, based on an analysis of well-known risk factors." (Annual DVDRC Report 2004, p.1)

The High Risk Consult Team is composed of experienced practitioners from a variety of critical sectors that typically impact an abusive situation, including health, justice, child protection, women's services, housing, and counselling. The Team meets monthly to consult with frontline practitioners regarding high risk/potentially lethal cases to provide information and identify creative intervention strategies to increase the woman's safety and constrain the abuser.

"We encourage frontline staff working in a variety of community based agencies to find out more about the Team and take advantage of the expertise and support offered," says Vivien Green, Executive Director of the Woman Abuse Council.

### *Community Action*

"Domestic abuse is NOT just an issue for professionals but community members, family, friends and neighbours must be more involved as well," says Green.

More often than not, friends, family and neighbours of women experiencing violence have some awareness of abusive dynamics or have seen indications of abuse. In two of the recent murders, friends and neighbours had expressed an awareness of "problems" in the family and further that they feared for the woman's safety. The tragedy of a murder is easily compounded by the feeling that you, a friend or neighbour, could have done something to intervene or support the woman and, thereby, possibly have prevented her death.

Women survivors have identified three key phrases that can help individuals break the silence around the subject of domestic abuse.

"You are not alone."

“I am afraid for your safety.”  
“There are resources and services to help you.”

As simple as it sounds, these words may provide the first validation and support that that woman receives. The basic sentiment of empathy and affirmation can help to break her isolation and encourage her to reach out.

“In many of the tragedies, it has been noted that friends, family members and neighbours knew that something was wrong and even feared for the woman’s life, but didn’t know what to do. These deaths could possibly have been prevented if people were better informed and had the tools to support women living with abuse.” (Annual DVDRRC Report 2004, p.27)

The Woman Abuse Council of Toronto is challenging our community to work together and take action to stop violence against women. We encourage you to TALK ABOUT WOMAN ABUSE.

## **Employment Opportunity!**

### **Community Crisis Worker Trainee**

24 hour mental health crisis intervention service is offering a **training position** for a consumer/survivor who has demonstrated an interest in the mental health field, but due to his/her own mental health issues has experienced barriers to employment in the field. Applicants must have at least 6 months of full-time employment, volunteer work or educational experience in any area within the past year, and be able to work shift-work including nights, weekends and holidays. Salary for this full-time one-year contract position is \$36,236 plus benefits.

#### **Please send resumes to:**

Gerstein Crisis Centre  
100 Charles St. East Toronto, Ontario M4Y 1V3  
Fax:416- 929-1080 Email: admin@gersteincentre.org  
**Closing date:** Friday, August 18th, 2006

*We regret that only those selected for an interview will be contacted.*

## **New Resources on Peer Support Section of Website**

**C**heck out the Peer Support section of CILT’s website for a listing of peer support resources in the GTA. This list will be updated on a regular basis. The

resources are listed in alphabetical order, ranging from other community peer support programs, to woman abuse service providers, to social and networking opportunities.

To access this list, go to [www.cilt.ca](http://www.cilt.ca) and click on “Peer Support”, then click on “Support Resources.”

If you have any questions regarding any of the supports listed, please contact the service providers.

### **Gateway to Screening: Assessing the Needs of Women with Mobility Disabilities**

*By Catherine Girard and Nancy Barry*

**M**y name is Catherine Girard. I am a second year Social Service Worker student at George Brown College, and am currently completing a volunteer placement at the Centre for Independent Living in Toronto. It is my pleasure to introduce to you, on behalf of CILT, the Gateway to Screening project.

I am glad to have been given the opportunity to be a part of the planning stages for this project. Considering the fact that I am a young woman living with a mobility disability, and have lost my mother to a battle against breast cancer, I am confident that I will be able to contribute some valuable information and personal experience to this wonderful and much needed project.

The goal of this project is to determine the cancer screening needs of women with mobility disabilities, particularly screening for breast, colorectal and cervical cancers, and determine the gaps and barriers associated with accessing these services. As we all know, cancer takes the lives of more people in Canada than strokes, respiratory disease, pneumonia, diabetes, liver diseases and HIV/AIDS combined.

Prevention and early detection and screening are seen as ideal areas of intervention in the cancer control continuum. For example, a high quality organized cervical screening program with high rates of participation can reduce new cases of cervical cancer, and deaths from it by 80-90% compared with no screening; breast screening can find cancers when they are still small and can respond better to treatment and screening for colorectal cancer is an effective way of reducing colorectal cancer. Ontario’s rate of new colorectal cancer cases is among the highest in the world.

For women with disabilities access to screening and support has been a challenge:

- Women with disabilities have the same biological risks as other women for developing all cancers. Unfortunately, barriers to effective cancer screening for disabled women include lack of knowledge among these women, neglect on the part of health-care providers, and physical access barriers (Welner, 1998). Together, these factors may delay diagnosis and treatment of many common malignancies. Women with disabilities, in particular those who are older, are less likely to receive regular Pap tests and mammograms (Nosek & Howland, 1997).
- Although some of the barriers to cancer screening are structural, such as inaccessible examination tables, stirrups, and lack of appropriate examining instruments for impaired women, studies show that physicians sometimes fail to recommend any screening for women with disabilities (Nosek, Young, & Rintala, 1995).
- Some disabled women describe health-care providers as insensitive to and unaware of disability issues and the way they affect reproductive health (Nosek, Young, & Rintala, 1995).

The Centre for Independent Living along with its partners, the Canadian Cancer Society, the Marvella Koffler Breast Centre and the Faculty of Nursing, University of Toronto will conduct a qualitative needs assessment to identify the barriers faced by women with disabilities to access screening, existing services and identify specific gaps in service. The needs assessment will take place in two stages. In Phase I, researchers will interview representatives from the disabled women's community including ethno-racial women, lesbian and bi-sexual women, aboriginal women as well as women living on fixed incomes. Phase II will involve a key informant survey among service providers at specific cancer centers in the GTA to identify barriers are present when working with disability issues.

The intent of the assessment is to develop a series of recommendations to be shared with the key stakeholders involved in the delivery of screening services and to focus on implementing these recommendations. A working group on screening has been set up at CILT to act on and monitor the implementation of the recommendations, consisting of the partners of the project, as well other key contributors including the Anne Johnston Health Station and Education Wife Assault. It is our intent that the assessment will produce some new areas of knowledge which we can effectively transfer to key cancer control professionals that will benefit people with disabilities.

We are very excited about this project, and are currently in the process of creating the needs assessment and setting up some focus groups which will take

place over the next six months. We will continue to provide you with project updates as they arise.

## **VOLUNTEERS WANTED**

**I**f you live in Toronto, Ontario, the Self-Help Resource Centre is looking for Telephone Information and Referral Volunteers to provide phone reception and information to callers seeking information about self-help groups. There are openings for Wednesday and Thursday afternoons, 12-4pm and Thursday and Friday mornings, 9-12. Training is provided, as is a letter of reference upon successful collaboration. This is a good opportunity for persons with telephone and basic computer skills who enjoy working in a low-paced environment in a small office. Apply online at [www.selfhelp.on.ca](http://www.selfhelp.on.ca) or call Natasha at 416-487-4355.