

In the Stream

Fall 2006

Seasonal Influenza vs. Pandemic Influenza: What You Need To Know and How to Protect Yourself

By John Mossa, Independent Living Skills Trainer

This article is meant as starting point to answer any concerns, worries, and questions by people with disabilities regarding seasonal and pandemic flu. It is also meant for you to begin discussions with your family and your network of supports about being prepared and adding to your emergency preparedness plans. It will give strategies on how to try to prevent and/or prepare for both types of flu.

This article is not intended to create fear or anxiety but to inform you with important information so that you can take control, examine your options, and make informed choices. It will be divided into four sections: A) Important Update, B) Information: Seasonal Influenza vs. Pandemic Influenza, C) Roles and Responsibilities: General Public, All Levels of Governments, and D) Resources.

A) Important Update:

The arrival of this year's seasonal flu vaccine has been delayed until November 13th. According to Toronto Public Health's website, flu shot clinics for the 2006-07 influenza season will open on Monday November 13. i Please visit their web page at http://www.toronto.ca/health/flu_facts.htm at the beginning of November for a list of flu vaccination clinics. These pages are currently being updated.

Vaccine manufacturers usually receive small amounts of the three most common flu strains recommended by the World Health Organization, and then grow the virus in eggs, which takes about six months. ii This delay occurred because, this year, one of the flu strains, A/Wisconsin, was difficult to grow.

It would have been better if the vaccine was available by mid-October because it takes about two weeks for the immune system to respond to the flu shot and build up immunity. However, some medical experts believe there may be a benefit to delaying the vaccine, until early November. iii Vaccine effects will last into the spring when the flu season is still active. As well, flu cases don't usually peak until around Christmas time.

Let's dispel some common myths about getting a flu shot:

Myth #1:

I didn't get a flu shot last year and I didn't get sick. Obviously I don't need flu vaccinations.

Fact:

Every flu season brings a new and different strain of the disease. While some flu seasons turn out to be "lighter" than others, no one can predict when a really bad flu season will occur.

Myth #2:

I'm young and healthy. I don't need a flu shot.

Fact:

Influenza is much worse than a cold. Even healthy young adults can become seriously ill. On average, people who become sick from the flu are bed-ridden for up to five days, causing them to lose time from work or vacation.

Besides, if you develop the flu, there's a chance you might infect others who are at much higher risk than you: young children, elderly people, or someone with a medical condition who could end up with serious complications from the flu and end up in the hospital.

Myth #3:

Getting a flu shot will give me the flu.

Fact:

This is simply not true. The vaccine does not contain any live virus so you cannot get the flu from the vaccine. Many people confuse the flu with a cold or other respiratory infections. The vaccine will not protect you against these.

Myth #4:

The flu is just a bad cold.

Fact:

A cold is not the flu. The flu is much worse. The flu is caused by the influenza virus. A cold is caused by several different viruses.

Myth #5:

Flu shots aren't worth getting because they're not very effective anyway.

Fact:

A flu shot is about 70% to 90% effective in preventing illness in healthy adults. In children, it's about 62% to 73% effective in preventing illness with fever. Among the elderly, the vaccine can prevent pneumonia and hospitalization in about six out of 10 people.

Protection from the vaccine develops about one to two weeks after the shot, and may last for up to one year. Vaccine effectiveness varies from one person to another, depending on their general state of health. Some individuals who get a flu shot can still get the flu. But if they do, it is usually a milder case than it would have been without the flu shot.

Myth #6:

I don't need another shot. I've already been vaccinated.

Fact:

A flu shot is needed every year. There are many different strains of the flu virus with slightly different characteristics. The strains change yearly and each year a new vaccine is produced that provides protection against the three most common strains predicted for the coming season.

Protect yourself and the people around you by getting a free flu shot. And this year, it's never been easier. See your doctor or pharmacist, or call to find a clinic near you.

B) Information: Seasonal Influenza vs. Pandemic Influenza

The following excerpts are from the Ontario Ministry of Health website or where otherwise noted:

What is seasonal flu? Influenza or “the flu” is a common and highly contagious respiratory illness caused by a virus. It is transmitted from person to person through coughing, sneezing or direct contact.v The flu is called “seasonal influenza” because it usually occurs from October to April of every year. The influenza virus is divided into three groups: A, B, and C. Type C rarely causes human illness. Only influenza A is known for pandemics.vi

What is a pandemic? A pandemic is a disease which spreads easily and rapidly through many countries of the world and affects a large percentage of the population. It becomes a worldwide epidemic.

What is a pandemic flu and how does it start? The viruses that cause flu are constantly changing. A pandemic may start when four conditions are met:

1. A completely new influenza A virus emerges that is different from common strains of flu that have been circulating;
2. The virus spreads easily from person to person;
3. The virus has the ability to cause serious illness and death in people;vii
4. The population has little or no immunity to the virus.viii

Because people have no immunity to the new virus, it can spread quickly and infect hundreds of thousands of people. Pandemic flu strains often develop when an animal or bird virus mixes with a human virus to form a new virus.

What is avian influenza (bird flu)? Avian influenza or “bird flu” is a contagious disease that normally infects birds and sometimes pigs. There are a few bird flu viruses which have, on rare occasions, mutated to infect humans.ix

The H5N1 virus, which is category Influenza A virus, that is currently circulating in Asia and parts of Europe, has infected a small number of people who have been in close contact with infected birds. x Although it can cause serious illness in people, at this time it does not transmit easily between people. Governments and international organizations worldwide are monitoring the situation.xi

What are the similarities between seasonal flu and pandemic flu? A pandemic flu can appear very similar to seasonal flu. The symptoms are the same: fever, headache, aches and pains, tiredness, stuffy nose, sneezing, sore throat and cough. However, they can be much more severe with a pandemic flu and affect people who do not normally suffer as much from seasonal flu – such as younger, healthy adults. For example, in the 1918 and 1919 flu pandemic, the death rate was highest among healthy adults.

Both seasonal flu and a pandemic flu are spread in the same way. The flu virus is spread when someone with the flu coughs or sneezes, and droplets containing the virus come in contact with another person’s nose, mouth or eyes. It can also be spread when people with the flu cough or sneeze into their hands and contaminate things they touch, such as a door handle. Other people can become infected if they touch the same object and then touch their face.

What is the contagious period? Flu can be contagious for 24 to 48 hours before any symptoms arise and for five days after the onset of symptoms. This means you could spread the virus without knowing you are infected.

What is the difference between seasonal flu and pandemic flu? Because people have little or no immunity to a pandemic flu virus, the spread of the disease can occur more quickly than with seasonal flu:

SEASONAL FLU	PANDEMIC FLU
Seasonal flu happens every year.	Pandemic flu happens only two or three times a century.
Seasonal flu is usually around from November to April – and then stops.	Pandemic flu usually comes in two or three waves several months apart. Each wave lasts about two to three months.

About 10% of Ontarians get seasonal flu each year.	About 35% of Ontarians may get pandemic flu over the course of an outbreak.
Most people who get seasonal flu will get sick, but they usually recover within a couple of weeks.	About half of the people who get pandemic flu will become ill. Most will recover, but it may take a long time. And some people will die.
Seasonal flu is hardest on people who don't have a strong immune system: the very young, the very old, and people with certain chronic illnesses.	People of any age may become seriously ill with pandemic flu, depending on the virus.
In a normal flu season, up to 2,000 Ontarians die of complications from the flu, such as pneumonia.	During a flu pandemic, Ontario would see many more people infected and possibly many more deaths.
There are annual flu shots that will protect people from seasonal flu.	There is no existing vaccine for pandemic flu. It will take four to five months after the pandemic starts to develop a vaccine.
There are drugs that people can take to treat seasonal flu.	These same drugs may also help people with pandemic flu but we may not have a large enough supply for everyone and we will not know their effectiveness until the virus is identified.

Will Ontario be affected by flu pandemic? Yes. With all the air travel between countries, a flu pandemic is likely to spread into all parts of the world, including Ontario.

What will happen if a flu pandemic hits Ontario? Once a pandemic flu virus arrives in Ontario, it will likely spread quickly. Many people will become ill, and there will be a lot of pressure on our health care services.

Depending on how widespread the flu pandemic is, our daily routines may be disrupted. For example, companies may have to close down some of their operations; cities may decide to provide essential services only; public health officials may cancel public gatherings, such as concerts and sporting events, where the flu virus can spread easily. They may close schools.

Public health officials cannot predict just how Ontario will be affected until they know how strong the virus is.

Who is most at risk? We are all at risk of getting a pandemic flu virus. Pandemic flu will spread more quickly than seasonal flu because very few Ontarians will be immune. Some groups of people – such as the very young or

the very old – may be more at risk than others of getting seriously ill or dying. But everyone must be careful and aware. The 1918 and 1919 flu pandemic infected and killed mainly healthy young adults in their 20s and 30s. We won't know for sure who will be at the greatest risk until we know more about the virus.

How many people will fall ill? What kind of care will they need? Of the 35% estimated to get pandemic flu, roughly half will require a visit with their family doctor or nurse practitioner. The other half will need information and advice to help them take care of themselves at home. Depending on the severity of the symptoms, others may need to be admitted to hospital for care.

When will there be a treatment for pandemic flu? There are drugs known as antivirals that can treat flu, but for them to be effective people have to start taking them very soon after they start to get sick – in some cases before the symptoms start. Right now, Ontario has a stockpile of antiviral drugs for the province.

In the case of a flu pandemic, the Ministry of Health and Long Term Care will only know if Ontario's supply of antiviral drugs works when we know more about the specific strain. The number of people we'll be able to treat will depend on our supply of drugs at that time.

Who will get priority for antiviral drugs in treatment and prevention of the pandemic flu? The Ministry of Health and Long Term Care (MOHLTC) has identified priority groups for use of antiviral medications for both 1) treatment and 2) prevention of the pandemic flu.xii

1) Treatment Priority Groups

- Group 1 – persons hospitalized for pandemic flu
- Group 2 – ill health care workers and first responders/ emergency service providers
- Group 3 – ill high risk persons in the community
- Group 4 – ill high risk persons in institutions

2) Prevention Priority Groups

- Group 1 – front line health workers and key decision makers
- Group 2 – remaining health care workers
- Group 3 – emergency/essential service workers
- Group 4 – high risk residents in institutions
- Group 5 – persons at high risk of being hospitalized for illness other than flu
- Group 6 – persons at high risk in the community

When will there be a vaccine for pandemic flu? Once scientists analyze the pandemic flu virus they can begin to produce a vaccine that can treat Ontarians. The faster they learn about a specific strain of the flu virus, the faster they can

produce a vaccine that can help to prevent the spread of the flu. It's important to remember that it will take time to do this, but our best defense is being prepared for a pandemic in the first place.

C) Roles & Responsibilities: General Public, All Level of Governments, & CILT

Pandemic planning and preparedness activities are important for everyone. In fact, all three levels of government in Canada and many agencies have already developed their plans. The following outlines roles and responsibilities for (1) the general public; (2) all levels of government; and (3) CILT.

(1) General Public Roles and Responsibilities

How can I protect myself and my family from a seasonal and flu pandemic?

If a pandemic flu spreads to Ontario, you can reduce your risk by doing the same things you do to protect yourself and your family from seasonal flu and other infections:

- **Get your flu shot every year** – the flu shot will not protect you from a pandemic flu virus, but it will protect you from getting seasonal flu, which could weaken your immune system or resistance to pandemic flu. Toronto Public Health's flu vaccination clinics for the 2006-07 influenza season will open on Monday, November 13. Please visit this webpage http://www.toronto.ca/health/flu_facts.htm in November for a list of flu vaccination clinics. These pages are currently being updated.
- **Hand Washing**: Wash your hands with soap thoroughly and often – good hand hygiene is the best way to prevent the spread of all viruses (more details in next section).
- **60% Alcohol-Based Sanitizers**: Gels, rubs, rinses or wipes should be kept handy at work, home and in the car (more details in next section).
- **Respiratory Etiquette**: Cover your mouth and nose with a tissue when you cough or sneeze; put used tissues in the garbage, NEVER on any surfaces, and wash your hands well and often whenever you or someone you are close to is sick.
- **Stay home when you are sick**
- **Create your own Emergency Preparedness Plan**: Make important contact lists of phone numbers and six week emergency supplies checklists, to get more information see below.

D) Resources: Emergency Planning Information Websites

- During a pandemic flu, **avoid large crowds of people** and other close contact with strangers (while traveling for example).

- During a pandemic flu, **follow any instructions given by public health officials.**

The following information details proper (1) hand washing, and (2) 60% alcohol-based sanitizers use.

(1) Hand Washing

Why is hand washing important? Hand washing, when done correctly, is the single most effective way to prevent the spread of communicable diseases. A good hand washing technique is easy to learn and can significantly reduce the spread of infectious diseases among both children and adults.

Follow these five simple steps to keeping hands clean:

1. Wet your hands with warm running water.
2. Add soap, and then rub your hands together, making a soapy lather. Do this away from the running water for at least 15 seconds, being careful not to wash the lather away. Wash the front and back of your hands, as well as between your fingers and under your nails.
3. Rinse your hands well under warm running water.
4. Wipe and dry hands well with paper towel.
5. Turn off the tap using a paper towel.

What is good hand washing technique? There is more to hand washing than you think! By rubbing your hands vigorously with soapy water, you pull the dirt and the oily soils free from your skin. The soap lather suspends both the dirt and germs trapped inside and are then quickly washed away.

What type of soap should be used? Any type of plain soap may be used. However, bar soap should be kept in a self draining holder that is cleaned thoroughly before new bars are put out. Liquid soap containers should be used until empty and then disposed of.

To prevent chapping, wet your hands before applying soap and use mild lotion soap with warm water; pat rather than rub hands dry; and apply lotion liberally and frequently.

What are some mistakes I should avoid regarding hand washing?

- DON'T use a single damp cloth to wash a group of children's hands.
- DON'T use a standing basin of water to rinse hands.
- DON'T use a common hand towel. Always use disposable towels in day care or food preparation settings.

- DON'T use sponges or non-disposable cleaning cloths. Remember that germs thrive on moist surfaces.

What are some ways to help children with good hand washing technique? It is important to encourage and help children to wash their hands before eating, after playing outdoors or playing with pets, after using the bathroom, and after blowing their noses.

Even though their hands may appear to be clean, they may carry germs or microorganisms that are capable of causing disease. Don't assume that children know how to wash their hands properly. Supervision, especially in a day care setting, is an essential element in forming good hand washing habits in children.

Children learn by example! Let them observe good hand washing techniques from the adults who care for them.

(2) 60% Alcohol-Based Sanitizers

What are alcohol-based rubs/gels/rinses/wipes sanitizers? Alcohol-based rubs/gels/rinses/wipes sanitizers are excellent hand antiseptics, provided they contain more than 60% alcohol. They are widely used in the health care settings, or in situations where running water is not available.

How do I use alcohol based hand rubs? Alcohol-based hand rubs should only be used if no visible dirt is present on the hands. Apply enough antiseptic to make about the size of a quarter onto your hands, enough when you rub your hands together to cover all areas of your hands, including under your nails. Use a rubbing motion to evenly distribute the antiseptic product until your hands feel dry.

How safe are alcohol based hand antiseptics? The alcohol content of the antiseptic product completely evaporates as it dries and is very safe.

Is it safe to use alcohol-based antiseptics for the hands of children? Yes, it is safe. It should not be swallowed; therefore, young children should be supervised when using it. Store it safely. After application of the antiseptic to hands, the alcohol content evaporates.

Governmental Roles and Responsibilities^{xiii}

International – World Health Organization: The World Health Organization (WHO) is the United Nations specialized agency for health. The WHO conducts world-wide monitoring and reporting of diseases. The WHO will declare the beginning of a pandemic, coordinate global response based on the various

stages of a pandemic and provides recommendations on the management of a pandemic.

Federal – Public Health Agency of Canada: The Public Health Agency of Canada (PHAC) is responsible for coordinating the nation-wide health response to pandemic flu, and works with international organizations such as WHO to support surveillance, coordination and investigation activities. The Canadian Pandemic Influenza Plan (CPIP) details the federal government actions and expectations for the provinces and territories. PHAC will declare the beginning of a pandemic in Canada.

Provincial – Ontario Ministry of Health and Long Term Care: The Ministry of Health and Long Term Care (MOHLTC) is responsible for coordinating the province-wide health response to pandemic flu, including the declaration of a provincial emergency. The MOHLTC will declare the beginning of a pandemic in Ontario.

What is the health system doing to protect us from a pandemic?^{xiv} The Chief Medical Officer of Health and the MOHLTC are working with local public health units, primary care providers, hospitals, long-term care homes, and home care providers – all parts of the health care system – to prepare for a flu pandemic. Their goal is to limit the spread of pandemic flu and provide the health services Ontarians will need.

MOHLTC currently are:

- Monitoring flu in Ontario and in the rest of the world
- Stockpiling antiviral drugs and equipment
- Setting up distribution systems so we can get drugs and protective equipment to where they are needed quickly
- Developing emergency plans to maximize the number of health care providers and facilities able to provide care
- Developing information for the public and health care providers
- Ensuring they can supply a lot of vaccine quickly as soon as one has been developed.

They have set up communications systems that are focused, timely and accurate so they can provide regular updates to tell Ontarians how to protect and care for yourself and your families.

Municipal –Toronto Public Health^{xv}: Toronto Public Health (TPH) takes the lead in pandemic influenza preparedness for the City of Toronto. Specific TPH roles during a pandemic influenza emergency response include:

- Disease surveillance and reporting

- Investigating cases and follow-up of close contacts
- Health risk assessment and communications, including infection control advice
- Liaison with hospitals and other agencies
- Community-based disease control strategies
- Vaccine and antiviral medication distribution and administration

The Mayor, in consultation with the Medical Officer of Health, is responsible for declaring an emergency in the City of Toronto.

3) Centre for Independent Living in Toronto Roles and Responsibilities

The Centre for Independent Living In Toronto is developing a Pandemic Influenza Plan. We are looking at the following roles/responsibilities/ issues/questions:

- What services we provide are considered “essential” and what services could be reduced or postponed during a pandemic?
- We are looking at measures to minimize the spread of illness within our agency during a pandemic (i.e. flexible working arrangements such as staggered hours or working from home.
- Communications: keeping staff, volunteers, members, and consumers informed of any service changes or urgent information.
- Identifying and contacting consumers who use our essential services and provide support.
- Having adequate supplies to promote good hygiene, such as soap, tissues, paper towels, hand sanitizer.
- Encouraging our staff/volunteers/members/consumers to get an annual flu shot.

E) Resources

Important Pandemic Influenza Phone Numbers

For more information about pandemic influenza, please contact:

Toronto Public Health

Tel: 416-338-7600, TTY and translation services are available.

Hours of operation: Monday to Friday 8:30 a.m. to 4:30 p.m.

Ontario Ministry of Health

INFO line at 1-800-268-1154 (Toll-free in Ontario only)

In Toronto, call 416-314-5518 TTY 1-800-387-5559

Hours of operation: 8:30am - 5:00pm

Pandemic Influenza Useful Websitesxvi

For more information on pandemic influenza, please visit the following websites:

City of Toronto Pandemic Influenza Plan

<http://www.toronto.ca/health/pandemicflu/index.htm>

Ontario Ministry of Health and Long-Term Care Pandemic Influenza Plan

http://www.health.gov.on.ca/english/public/program/pubhealth/flu/panflu/panflu_mn.html

Canadian Pandemic Influenza Plan

<http://www.phac-aspc.gc.ca/cpip-pclcpi/>

World Health Organization

<http://www.who.int/csr/disease/influenza/pandemic/en/>

Emergency Planning Information Websites

Your Personal Preparedness Guide

http://www.toronto.ca/health/pandemicflu/pdf/appx_22.pdf

Be Prepared- Your 6 Week Emergency Supplies Checklist

http://www.toronto.ca/health/pandemicflu/pdf/appx_23.pdf

¹ “Let’s Beat the Flu”, City of Toronto, http://www.toronto.ca/health/flu_facts.htm

¹ “No need to worry about flu shot delay: influenza experts”, Tuesday, September 26, 2006 | 11:23 PM ET, CBC News, <http://www.cbc.ca/health/story/2006/09/26/flu-shots.html>

¹ Ibid.

¹ “Influenza Pandemic: Planning Information”, The Ontario Ministry of Health, http://www.health.gov.on.ca/english/public/program/pubhealth/flu/panflu/panflu_mn.htm

¹ “Toronto Pandemic Influenza Plan: Appendix 1.13 Information for Community Agencies” Toronto Public Health, June 2006. p.1.

¹ “Facts about an Influenza Pandemic” The Ontario Ministry of Health, June 2005.

¹ “Toronto Pandemic Influenza Plan: Appendix 1.13 Information for Community Agencies” Toronto Public Health, June 2006. p.1.

¹ “Facts about an Influenza Pandemic” The Ontario Ministry of Health, June 2005.

¹ “Toronto Pandemic Influenza Plan: Appendix 1.13 Information for Community Agencies” Toronto Public Health, June 2006. p.1.

¹ Ibid.

¹ Ibid.

¹ “Toronto Pandemic Influenza Plan November 2005: Chapter 9 Vaccine and Antiviral Medications” Toronto Public Health, March 1, 2006. p.132.

¹ Toronto Pandemic Influenza Plan: Appendix 1.13 Information for Community Agencies” Toronto Public Health, June 2006. p. 2.

¹ “Influenza Pandemic: Planning Information”, The Ontario Ministry of Health, http://www.health.gov.on.ca/english/public/program/pubhealth/flu/panflu/panflu_mn.htm

¹ “Toronto Pandemic Influenza Plan: Appendix 1.13 Information for Community Agencies” Toronto Public Health, June 2006. p 2.

¹ Ibid.

CILT’S 2006 Founders Award Recipient: Catherine Frazee

By John Mossa, Independent Living Skills Trainer

“As I grew up and into myself and my place of belonging, participation and contribution, my choices and opportunities have been shaped by the Disability Rights and Independent Living Movement.” -- Dr. Catherine Frazee

On September 20, 2006, at CILT’s Annual General Meeting, I had the honour of presenting CILT’s 2006 Founders Award to Dr Catherine Frazee. The Founders Award was established in 1995 in celebration of CILT’s 10th anniversary. This annual award is given in recognition of individuals who, in the spirit of the Founders of CILT, have made outstanding contributions to the advancement of Independent Living for persons with disabilities.

Previous recipients of the Founders Award were Sandra Carpenter, Karen Yoshida, Ron McInnes, Frank Wagner, Traci Walters, Gary Woodill, Judith Snow, Harry Beatty, Audrey King, Warner Clarke, and David Lepofsky. Dr. Catherine Frazee now joins this distinguished group of Independent Living leaders.

Catherine is a writer, educator, and researcher who draws on her own experience of disablement in entering ethical and cultural dialogues about citizenship, dignity and what it means to be a person. Her work is informed by many years of involvement in the equality struggles of marginalized groups, most notably during her term as Chief Commissioner of the Ontario Human Rights Commission from 1989 to 1992.

Catherine is a former member of the Board of Directors for The Centre for Independent Living in Toronto (CILT), The Canadian Association of Community Living, The Canadian Abilities Foundation, and the Former Co-chair of the National Legal Committee of the Women's Legal Education and Action Fund (LEAF).

In 1995, she was awarded a Honourary Lifetime Membership in ARCH, Ontario's legal resource centre for persons with disabilities. In October 2002, Catherine was awarded an honorary Doctor of Letters from the University of New Brunswick.

Currently, Dr. Frazee is a Professor of Distinction in the Disability Studies program at Ryerson University and Co-director of Ryerson's Institute for Disability Studies. She is a committed activist who has lectured and published extensively in Canada and abroad on issues related to disability rights, identity, culture, and the disability experience.

In addition, Catherine is a Member of DisAbled Women's Network (DAWN) Canada's Equality Rights Committee, and chairs the Task Force on Values and Ethics of the Canadian Association for Community Living.

Due to work commitments, Catherine was in Nova Scotia and joined us by teleconference to accept CILT's 2006 Founders Award. She gave an excellent Power Point presentation called "Independent Living: An Autobiographical Travelogue". She shared a few photos, lessons, and reflections. Catherine stated that she learned three lessons from the Independent Living Movement: (1) the meaning of 'Community'; 2) the meaning of 'Activism'; and, 3) the meaning of 'Independence'.

Catherine demonstrated how she felt about community through photos from her life. The first photo was circa 1981, her first job. The black and white picture showed 29 able bodied men and Catherine, the only woman and disabled person. The second photo showed Catherine in her current work. By contrast, the colourful picture showed Catherine, two women and two men, all with disabilities.

Catherine stated that "... by two simple words, 'I belong', invokes the strength and spirit of those who have battled and laboured and dreamt to make our way clear. To claim 'I belong', situates us in an endless landscape of IL history,

politics and philosophy. It is a claim of defiance and embrace, choice and hope, yearning and satisfaction.”

Catherine believes “Disability Activism is found in politics, advocacy, scholarship, artistic work and every single act of speaking out. It is a project which involves both celebration and struggle, solidarity and subversion, the reclaiming of histories and the shaping of radically new futures. Disability activism is strongest, as in IL, when the experiences, identities and voices of disabled people are central and uncompromised.”

Catherine reflected on the meaning of Independence. She presented two different questions. Does Independent Living demand that we be self-directing captains of our own individual ships? Or does Independent Living presume and acknowledge webs of recognition, support and “invisible labour”?

In her concluding remarks, Catherine believes the answer lies in “embracing a nuanced account of independence that builds on ‘social capital’ in common cause with supporters.”

CILT’s Board of Directors 2006-2007

It is CILT’s pleasure to introduce this year’s newest Board members: please welcome Sheila Keogh, Treasurer, Nancy Christie and Alessia Di Virgilio; and congratulations to Ron McInnes on his new position as President of the Board.

At the same time we must bid farewell to Steve Kean, former President, Kevin Humphrey and Heather Willis and thank them all for their dedication and hard work they have contributed towards CILT’s interests. We wish them both good fortune in their future endeavors.

The current members of the Board of Directors for 2006-2007 are:

Ron McInnes, President
Audrey King, Vice President
Sheila Keogh, Treasurer
Shannon Hill, Secretary
Nancy Christie
Alessia Di Virgilio
Mary Louise Dickson
Beverley Elliott
Kevin Rogers
Jane Staub
John Suchon
David Wallace

Anne Brown....Whatever Will We Do Without Her?

By Nancy Barry

This article is one of the most difficult that I have ever had to write because it has taken me some time to find the words to convey how much Anne has meant to all of us at the Centre, and to me as a friend. One of our dearest and most cherished volunteers, Anne Brown, passed away on September 12, 2006 at Sunnybrook Hospital. She was 91 years old and up until a month or so ago, came in every Thursday, for the past nine years to help us out in our resource library.

I have been working at the Centre for Independent Living in Toronto for about nine and a half years, originally hired as the Peer Support Coordinator, and then shortly after I had been asked to start up a formal Volunteer Program for the Centre. Anne was my first recruit, and she made my job enormously easy. Over the years we became very good friends, sharing memories and stories about the past. At times, I found myself talking to Anne about things that I was unable to talk about with anyone else.

CILT will not be the same without Anne's smile, warmth and true dedication. Winter cold, snow, sleet or rain, Anne rarely missed a day at the salt mines. Every Thursday afternoon, without fail, Anne would come in ready to dive in to her work. She was the walking definition of the words "volunteer", and "friend", a woman who took pride in everything that she did. Aside from her contribution to CILT, Anne also volunteered for many other groups and organizations. She read to children, she spoke at librarians' conferences and shared her experiences and her wisdom with many. I will always remember Anne as an independent woman who was never afraid to speak her mind. If there was a book missing from the library, she would make a special visit to every staff member's office until she found it and placed it back in its rightful place.

At our last annual Volunteer Appreciation event, I had the privilege of presenting Anne with the City of Toronto's "Volunteer of the Year" Award, signed by Mayor David Miller, and I am so grateful that I was able to do that. I can think of no one else more deserving of that award than Anne. She will be missed beyond our imaginations, but will live on in our hearts forever.

Accessibility Directorate of Ontario

In June 2005, the Accessibility for Ontarians with Disabilities Act was made law. The purpose of the legislation is to develop, implement, and enforce accessibility standards in order to achieve accessibility for Ontarians with disabilities with respect to goods, services, facilities, accommodation, employment, buildings, structures and premises on or before January 1, 2025.

In January 2006, two standards development committees were established – one committee to develop a proposed standard for Customer Service, and one committee to develop a proposed standard for Transportation. On June, 2006, the Minister of Community and Social Services announced plans for the development of three additional standards in the areas of information and communications, the built environment, and employment. The next steps in the process are as follows:

(1) The Customer Service Standards Development Committee has developed an initial proposed standard that is available as of October 23, 2006 for public review and comment.

The public will have 60 days to review the proposed standard and submit feedback. Once the public review period is complete, the standards development committee will reconvene to consider the feedback prior to submitting the proposed standard to the Minister. To review the proposed standard and to provide feedback, visit the Ministry of Community and Social Services website at: www.mcsc.gov.on.ca/accessibility/index.html For additional information, or to find out about alternate methods of providing feedback, please call 1-888-789-4199 or toll-free TTY 1-888-335-6611.

(2) A process for recruiting members for a new Standards Development Committee to develop a proposed information and communications standard is being launched. Application forms and committee terms of reference are available on the Ministry of Community and Social Services website as of October 23, 2006 at www.mcsc.gov.on.ca/accessibility/index.html

For additional information, or for application packages in alternate formats, such as large print, audio formats (cassettes or cd's), or Braille please call 1-888-520-5828 or toll-free TTY 1-888-335-6611. The final deadline for applications is November 30, 2006.

Consistent with the AODA, members of this, Standards Development Committee must include people with disabilities or their representatives, representatives from industries, sectors of the economy or organizations that will be affected by an Information and Communications standard and representatives from government ministries.

Information and communications refers to information and communications provided to the consumer or end-users through print, telephone, electronically and in person. The identification, removal and prevention of barriers with respect to information and communications for persons with disabilities can include organizational policies, processes and practices related to information and communications, including staff training.

If you require any assistance to participate in these two important activities, please do not hesitate to let us know. For ongoing information on the public review of the Customer Service proposed standard and the establishment of the information and communications Standards Development Committee please visit www.mcass.gov.on.ca/accessibility/index.html or call us at the phone numbers listed above.

International Day of People with Disabilities: Access – Togetherness – Strength

The City of Toronto, in partnership with community and business organizations, invites you to celebrate the International Day of People with Disabilities on Monday, December 4, 2006 10:00 a.m. to 2:00 p.m. at the CNIB Centre, 1929 Bayview Avenue (North of Eglinton Ave. W.).

- Celebrating achievements of unsung heroes
- Showcasing City's success stories
- Information sharing
- Displays and Demonstrations
- CNIB Tree of Independence Lighting
- Refreshments

Please note: CNIB Tour is also available at 9:00am. RSVP as space is limited. Tel: 416-338-4756, TTY: 416-338-0889, E-mail: cwong5@toronto.ca. More information is on the City's website at www.toronto.ca/diversity. Attendant service and captioning provided.

Driving Over Barriers: Toronto's First Wheelchair Accessible On-Demand Taxicab Service © Taken from a media release written by Brown & Cohen Communications.

Living in Toronto, a city where taxicabs rule the streets, finding public transportation to accommodate wheelchairs isn't an easy task. Restricted to WheelTrans' set schedules and day-before reservations, wheelchair bound citizens are getting frustrated with the lack of flexible and accessible taxicab transportation.

On Thursday, October 5th, at 9:00am at their head office located at 560 King St. W., Co-op Cabs hosted a ceremony to launch its 'Driving Accessibility Campaign', Toronto's first On-Demand Wheelchair Accessible Taxicab Service. "Wheelchair users will now be able to flag an accessible taxi-van at the same rate whenever needed and have the freedom to come and go as they please," said Peter Zahakos, CEO and General Manager of Co-op Cabs. "This is

the first time a cab company will provide true accessibility and equality to individuals with disabilities.”

Committed to ‘driving over barriers’ that prevent people in wheelchairs from accessing the same transportation opportunities as others, Co-op Cabs will provide this on-demand service at the regular taxi meter rates. Other wheelchair accessible vehicles are more expensive and run on restricted timetables, but the new multipurpose on-demand taxi-vans will carry both able-bodied as well as customers in wheelchairs on a more flexible schedule. Co-op Cabs is looking to expand this on-demand taxi-van service to the greater community as well.

Helping launch this unique initiative was Honourable Madeleine Meilleur, MPP, Minister of Community and Social Services, Responsible for Ontarians with Disabilities, and Warren Rupnarain of Warren’s World, an advocacy group of Ontario March of Dimes.

“Our goal is to make Ontario an accessible province by 2025. We need the kind of leadership demonstrated by companies like Co-Op Cabs,” said Minister Meilleur. “Forward thinking is needed to open doors for those with differing abilities. Accessible cabs contribute to accessible cities where everyone is better able to participate in the community.”

“Co-op Cabs is taking a great step towards equality that others haven’t and this is important,” said Rupnarain. “Implementing a policy such as this demonstrates their conscious effort to provide equal opportunities for the disabled community. This new service shows Co-op Cabs’ real leadership as advocates of change, paving the way to provide all citizens of Toronto the freedom to travel and we encourage all cab companies to follow their example.”

Following the ceremony, Minister Meilleur and Rupnarain participated in an inaugural drive in the new taxi-vans. The Ford Freestar Vans converted by Liberty Motors will form the core of Co-op’s multipurpose taxicabs. Media are invited to attend the ceremony and procession.

Celebrating its 50th year as one of Toronto’s most successful cab companies, Co-op Cabs has over 700 drivers with more than 400 cars on call. For more information contact Brown & Cohen Communications & Public Affairs Inc., Charlene Lunau at 416-484-1132 extension 4 or by email at charlene@brown-cohen.com OR Wendy Kauffman 416 484-1132 extension 3 or by email at wendy@brown-cohen.com.

Final Restaurant Accessibility Report Released

by Michelle Kushnir, Law Student, First Appeared in ARCH Alert, October 17, 2006. Reprinted with permission.

In July 2006, the Ontario Human Rights Commission (“the OHRC”) released its final report on its initiative to improve accessibility of restaurants, “Moving Towards Barrier-Free Services: Final Report on the Restaurant Accessibility Initiative”. This report is a follow-up to a previous report that surveyed several major restaurant chains and highlights improvements in accessibility since the time of that report as well as further steps that need to be taken. The restaurants surveyed include coffee shops, fast food restaurants and other chain restaurants.

The recommended changes are intended to bring the restaurant industry in line with the requirements of the Ontario Human Rights Code (“the Code”), the OHRC’s Policy and Guidelines on Disability and the Duty to Accommodate, the Accessibility for Ontarians with Disabilities Act (“the AODA”), and the Ontario Building Code (“the OBC”).

In the early stages of this initiative, the OHRC found that restaurants established accessibility standards based only on the requirements of the OBC. A 2002 OHRC audit revealed a range of accessibility issues including inadequate accessible parking, inaccessible entrances, interior spaces, and washrooms and high counters.

The OHRC reports that 26 restaurant chains have committed to taking these five steps towards greater accessibility:

- 1) Develop an accessibility policy and customer complaints procedure
- 2) Review and identify accessibility barriers
- 3) Develop a standardized accessibility plan for future locations
- 4) For existing facilities, develop a plan and remove barriers
- 5) Monitor progress toward achieving accessibility and report back

The report also highlights best practices demonstrated in a number of areas. These include inclusion of accessibility policies in the franchise agreements, changes to leases for restaurant property, disability and accessibility training and education and monitoring of progress through reviews and accessibility audits.

In the report, the OHRC emphasizes the need for cooperation between restaurant owners and franchisees, landlords, architects, the construction industry and government. The report is available online at <http://www.ohrc.on.ca/english/publications/restaurant-report-English.pdf>.

CILT News

United Way Fundraising Campaign 2006

Every year CILT participates in the United Way of Greater Toronto's annual fundraising campaign. CILT tries its best to play a role in helping United Way fulfill its mission to attain an achievement of \$100 million.

This year's campaign chair is Judy Lu, who was accompanied by her committee comprised of Nancy Barry, Leisa DeBono and John Mossa. On October 3rd, CILT raised \$387.72 from our first Bake Sale. Our second Bake Sale was held on October 26th, CILT raised a total of \$453.66. The staff's involvement was vital for the success of our campaign. The amount of \$2082.00 contributed by our staff and countless hours of hard work go towards making CILT stand out in the crowd. In total, CILT raised \$2947.88 for this year's United Way Fundraising Campaign.

Staff Changes

Please welcome Katrin Berkehake to CILT. She joins us as our Disability Accommodation/Office Support Worker.

Katrin is originally from Germany where, among other things, she worked as a supervisor/accountant in a trucking company there. She has primarily been working as an attendant since coming to Canada. She is highly competent and a quick learner with lots of computer experience on spreadsheets, data-bases etc.

Elena Petrescu will be working with us again for a while in continuing on with the Direct Funding auditing work where Blair Humphrey left off. Several years ago, Elena was a full time staff member in the DF Program as the accountant. Please join us in welcoming back Elena.

NEWS FROM THE INFORMATION & REFERRAL PROGRAM

Wheelchair Accessible Apartments and Homes *by Andrea Murray*

The Centre for Independent Living in Toronto is now posting available wheelchair accessible apartments and homes on our website. This can be found under "What's New", Housing Listing, and includes the number of bedrooms and the location. These listings are updated once a week. If you are looking for an

apartment, or if you have one you are wishing to rent that is wheelchair accessible, please contact the Inquiries Generalist at extension 28.

NEWS FROM THE PEER SUPPORT PROGRAM

by Nancy Barry

Gateway to Screening Project - Community Outreach and Research Position

Position type: Short-term: 16hrs per week for 26 weeks

Years of experience: 2yrs.

Application deadline: November 10, 2006

Reports to: research steering committee of the Gateways to Screening Project.

The Centre for Independent Living in partnership with the Canadian Cancer Society is conducting a participatory research project that will examine the barriers to cancer screening for women with mobility disabilities. The Centre for Independent Living (**CILT**) is a non-profit resource organization, consumer-controlled and community based.

Scope of Position:

Reporting to the research steering committee of the project, the research/outreach coordinator is responsible for supporting the steering committee in performing its research functions.

Key Responsibilities:

- Out reach to and development of relationships with disability focused community organizations in Toronto to arrange focus group meetings
- Identify, recruit and educate potential focus group participants on the goals and activities of the project
- Respond to inquiries about the research project
- Coordinate activities of the research steering committee
- Assist with the stewardship of the research project as required

Qualifications:

- Post secondary education in social/health sciences with some research experience
- Strong writing and communications skills with the ability to think and communicate creatively.
- Strong computer skills

- Understanding of disability issues within an intersectional framework that takes into account race, gender, sexual orientation, and economic status.
- Demonstrated ability to work collaboratively in a team environment with limited supervision.

Salary: Commensurate with experience

If you are interested in joining our project team, please submit your cover letter and resume by Mail, E-Mail or Fax on or before **November 10, 2006**.

Contact by: E-mail, Fax, Mail

Job contact Information:

Centre for Independent Living
Gateways to Screening Project
Attn: Nancy Barry
205 Richmond Street West, suite 605
Toronto, On
M5V 1V3
Fax: (416)599-3555
E-mail : peervolunteer@cilt.ca

No phone calls please.

Breast Health Workshop for Women with Disabilities

CILT is hosting a workshop for women with disabilities on Breast Health Awareness on Saturday November 18, 2006 1:00 pm to 4:00 pm at CILT 205 Richmond Street West, Suite 605 (Richmond & Duncan).

Breast Health starts with you knowing your own breasts, just like you know your face or hands. Most breast problems can be treated if they are discovered early enough. This workshop will dispel some of the common myths about breast cancer, and provide you with the information you need to take control of your health! Please welcome Linda Muraca, Breast Health Program, Mount Sinai Hospital who will be facilitating this workshop.

If you would be interested in attending, please call Nancy (extension 27) or Kimberly (extension 34). Attendant services will be provided. Childcare and other accommodations may be available upon request before November 1, 2006. Light refreshments will be served.

Volunteer Orientation Workshop

On Tuesday November 7, 2006 1:00 pm to 4:00 pm CILT will be hosting a Volunteer Orientation Workshop in order to recruit some new volunteers. CILT is currently recruiting volunteers to assist staff with clerical tasks such as mailings, photocopying, filing, assembling information packages and more. If interested, please call Nancy at CILT. Attendant services and refreshments will be provided.

NEWS FROM THE PDN

The Parenting with a Disability Network is hosting a **roundtable discussion:**

- Are you a woman with a disability?
- Are you pregnant or thinking about having children?

We want to hear from you about:

- What would make your pregnancy easier?
- What kind of supports do you want?
- What accommodations do you need during pregnancy and birthing?

Join us to discuss the needs and support requirements of women with disabilities during pregnancy and birthing. Find out more about the role of labour doulas and the pregnancy/labour supports they offer. Please welcome Virginia Collins, Labour Doula and Director of the Antepartum Program for CAPP Canada.

Date: Saturday November 4, 2006

Time: 2:30pm - 4:30pm

Place: Centre for Independent Living in Toronto (CILT), Inc.
205 Richmond St. West (at Duncan St.), Suite 605, Toronto.

To register, contact Kimberly at 416-599-2458 ext.34 or by e-mail at pdn@cilt.ca.
Attendant services and child care will be available upon request.
