

**Ontario's Long-Term Affordable Housing Strategy
Consultation Questionnaire**
Submitted by Bloorview Kids Rehab
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Introduction and Context

Affordable housing is a major concern for families with children with disabilities. Bloorview Kids Rehab, Canada's largest pediatric rehab teaching hospital, has become increasingly aware that many of our lower-income families have significant challenges finding affordable and accessible housing. The stories of many of our families reflect international research showing that people living with disabilities have fewer housing options than the general population. Their main obstacles are a lack of appropriate housing, financial exclusion and social attitudes.¹

In Canada, there are approximately 4.4 million people with disabilities. About 1.85 million live in Ontario, making up 15.5 per cent of Ontario's population. Among children aged 14 and younger in Ontario, 3.8 per cent have a disability.²

When you consider these numbers, and recognize that research shows that having a child with a disability is inextricably linked with family poverty, it is no surprise that families with children with disabilities are over represented in their need for social housing.

As part of Ontario's investment towards creating new affordable housing for persons with disabilities, it is necessary to recognize families with children with disabilities as a group within this population with unique needs. Clearly this would be in keeping with the spirit of the Accessibility for Ontarians with Disabilities Act (AODA), and the imminent release of its Built Environment Standard.

From a health-care perspective, the lack of affordable housing that meets the needs of our families is particularly alarming. Research shows a clear link between appropriate and accessible housing and positive health and social outcomes. Good quality housing is essential for the healthy development of children because the home is the environment in which pre-adolescent children spend most of their time.³⁻⁶ Canadian surveys suggest that 63 per cent of the homes of children with disabilities lack the necessary ramps, elevators, automatic doors and accessible doorways.⁷

Given the irrefutable links between appropriate housing and health and social outcomes, Bloorview was particularly interested in participating in Ontario's Long-Term Affordable Housing Strategy Consultation, to ensure their needs are given due consideration.

On behalf of Bloorview Kids Rehab, thank you for this opportunity to give a voice to families of children with disabilities.

Summary of Recommendations:

- Adopt a principle of accessibility for any new renovations or new buildings which is in line with the AODA.
- Expand the definition of *Priority Access* within the Social Housing Reform Act to include families with children with disabilities.
- In order to reduce waitlists, adequately fund the building of new, flexible, accessible housing that can accommodate families with children with disabilities.
- Create a central registry of accessible properties to match supply with demand.
- Conduct comprehensive surveys of current social-housing stock to assess the possibility for adaptation, including the surrounding environment.
- Establish tenancy-succession rules that ensure that families with children with disabilities are given priority for accessible properties.
- Identify affordable and accessible housing that can accommodate the needs of families with children with disabilities and designate it as being for the use of those families only.
- Establish a permanent annual commitment from the Government of Canada to support social housing infrastructure.
- Engage the private sector in social housing strategy discussions.⁸

Background Research

To help us better understand the issues related to housing for families of children with disabilities, Bloorview worked with the Ontario Association of Children's Rehabilitation Services (OACRS) to undertake a review of the literature and other jurisdictions. This review found factual information and a number of research findings that provide an important and compelling backdrop to this response.

As part of this review, we did a survey of Children's Treatment Centres (CTC) across Ontario to ask what their families' experiences have been in finding affordable and accessible housing. The results of that survey showed that the lack of available and suitable housing for families of children with disabilities is consistent across the province. Generally, the waits for accessible units are extremely long (multiple years), and there's a general lack of supply of larger units for larger families. Where larger units exist, they are typically multi-level units making them inaccessible.

Here is a summary of the relevant statistics and facts:

- Suboptimal built environments deprive children of developmentally essential opportunities for play and physical activities and contribute to high rates of obesity, cardiovascular and respiratory problems and decreased functional capacities.⁹⁻¹⁵
- Low participation* rates have been linked to inaccessible housing, public buildings, and parks and playgrounds.^{7, 16-18}
- Children living in lower-quality housing have greater psychological distress, poorer school performance and fewer play opportunities.^{4,19}
- Accessibility in the household allows children with disabilities to have independence and also promotes social inclusion within the family unit.²⁰
- Most children with disabilities live in smaller homes with fewer amenities and resources than other Canadians because their extraordinary care requirements restrict parental employment and increase expenditures.^{7,21}
- Housing that is unsuitable in size and configuration, and impossible or too costly to modify makes mobility, playing, accomplishing domestic chores and self care difficult for children with disabilities and may exacerbate impairments.²²⁻²⁵
- Families of children with disabilities often face enormous financial burdens while raising their child(ren):
 - Households with children with disabilities are likely to have a lower household income than households with children without disabilities.⁸
 - 80-90 per cent of the care provided in the community is provided by family or friend caregivers and not formal or paid caregivers.⁸
 - In ethnic minority households with mobility-impaired children, 60 per cent had unsuitable housing and of these, only 25 per cent could afford necessary adaptations.²⁶

A survey in the UK found that children with disabilities are often stranded in one area of the house due to poor accessibility.^{21,27} This holds true for the children in affordable housing in Ontario. We have heard from a number of families that their child is living in unacceptable circumstances due to the lack of accessibility in their units.

* Participation is defined as the nature and extent of involvement in life situations. It is critical to the quality of life for each of Bloorview's clients and their families. Participation includes the activities of personal maintenance, mobility, social relationships, education, employment, leisure, spirituality, and community life.

Clearly, for families with children with disabilities, the unique needs of the children and the family dynamic, only exacerbates the challenges in finding housing that is affordable, accessible and large enough to accommodate a family.

Our Families

Bloorview Kids Rehab serves over 7000 children with disabilities each year, from across Ontario.

In July 2008, Bloorview hosted two focus groups as part of the Housing Opportunities Toronto Community Consultations. A total of 15 families attended, each sharing very compelling and shocking stories of their individual challenges in finding affordable and accessible housing in Toronto. Although our focus group was for families in Toronto, we know from our discussions with CTCs across the province that their issues and concerns are not unique to Toronto.

Families with children with disabilities face challenges daily as they struggle to cope, waiting up to 10 years and longer to get into affordable housing that meets their needs. While waiting, families are living in inaccessible housing that is unsafe and paying market rate rents that, in some cases, consume up to 75 per cent of their income, leaving fewer resources to support the family's nutrition, health and well-being.

Families needing transfers to accessible or larger units within the system are often waiting indefinite amounts of time. In many cases, families are living in overcrowded one or two-bedroom units that are inaccessible and often require children with disabilities to live in a limited area of the unit due to inaccessibility.

All participants agreed that families with children with disabilities were often overlooked within the social housing system. They felt that their needs could be addressed by creating **new accessible affordable housing, geared to families of children with disabilities**. Current accessible affordable housing is not large enough for families, especially larger families.

The health and social outcomes for children with disabilities and their families are affected by the homes they live in. They are more likely to face housing problems and are less likely to achieve solutions, in comparison with other families.²⁸

Issues with current affordable housing:

- **Size:** Units are too small – typically, there are not enough bedrooms to accommodate families, especially larger families or extended families
- **Inaccessibility:** Units are not large enough for children with special needs to actively participate in home life, or for families to be able to take advantage of specialized equipment to meet the child's needs
- **Wait lists:** Families are waiting unacceptable amounts of time for affordable housing, or to be transferred in the system to an accessible unit

Having accessible and affordable housing is essential for:

- **Promoting independence for children with disabilities** – Having the appropriate equipment and enough space to be able to manoeuvre allows children to learn independence
- **The health of the family** – Having a home that meets the needs of the family is crucial for the health of each family member, as noise and overcrowding negatively affect mental health^{19,29,30}

- **A healthy family dynamic** - Having enough bedrooms to accommodate each family member's privacy needs is important to maintaining strong relationships, and appropriate development of all children, including the child with special needs
- **The safety of the parents and children** – Inaccessibility and not having access to appropriate equipment poses serious safety risks for both the parents and children
- **Social Inclusion** – Giving children the opportunity to move around their homes and be included in family activities is beneficial for self-esteem and is essential for the healthy development of children

Families of children with disabilities must be given consideration within the funding of \$183 million allocated to create new affordable housing for low-income seniors and persons with disabilities.

The long-term affordable housing strategy for Ontario should reflect the Accessibility for Ontarians with Disabilities Act (AODA) and other accessibility standards. These standards and guidelines should apply to all new buildings and renovations undertaken.

Families with children with disabilities need:

- More and larger bedrooms – Wait lists for larger accessible units are far too long
- More accessible units – Many families are living in two-storey units with stairs and the bathroom is typically on the top level
- Larger units – Washrooms, halls, bedrooms and doorways are too narrow and families face safety concerns due to lack of accessibility

Question 1

What specific roles should each of the housing partners play in the delivery of affordable housing?

The delivery of social housing is currently a concern for many of Bloorview's lower-income families. There should be a continued commitment to funding by all levels of government – federal, provincial and municipal – in order to remedy this issue. There should be better integration and collaboration between different levels of government and jurisdictions. Instead of working in silos, and doing separate research and planning, all jurisdictions should build on the work that other jurisdictions are doing. For example, the provincial and federal governments should take into account the work that Housing Opportunities Toronto has done in regarding housing consultations in Toronto. Many stakeholders provided thoughtful and thorough feedback to the City that is relevant to other jurisdictions as well. It's important that jurisdictional issues not get in the way of providing affordable housing. In addition, at the provincial level, all Ministries should work together to ensure adequate funding for social housing in Ontario.

In addressing the current social housing issues in Ontario, it is essential that thoughtful and creative solutions be sought. Within this process, the private sector should be included in discussions. For example, incenting private developers to build a minimum number of accessible units in their buildings that can be rented out at below market rents. This type of approach would make a huge difference in the availability of units in a short amount of time.

At all levels, it is important to engage families with children disabilities in developing and assessing solutions to the challenges they face in accessing housing. Bloorview can act as a bridge to help facilitate consultations with families with children with disabilities. In addition, Bloorview has one the world's leading experts on accessible spaces, who is available as a resource in planning for new buildings.

Question 2

What changes are needed to our housing programs to better use resources and improve access to affordable housing? Changes could include modifications to the Affordable Housing Program or the simplification of housing and homelessness programs.

Process Changes

Of the \$183 million to create new affordable housing for low-income seniors and persons with disabilities, families with children with disabilities should also be considered a priority. This would mean ensuring there are larger units with more bedrooms to allow for families in accessible units.

The development of a central registry of accessible properties along with a centralized waitlist of families who require accessible units to match supply with demand is essential to inform planning for the housing needs of Ontarians. Comprehensive surveys of the current social housing stock to assess capacity for adaptability, including the surrounding environment should be conducted. Processes should be developed for joint working and information sharing between relevant departments and jurisdictions to share client-specific need, longer-term projections, and to inform new housing development and existing housing refurbishment requirements.⁸

Physical Changes

Consideration within social housing for families with children with disabilities is remarkably absent. Housing units that are accessible and large enough to accommodate a family need to be created to address the needs of this unique population.

Families with children with disabilities living in units that are inadequate in size and space can have disastrous consequences for not only the health and well-being of the child, but of the entire family.

The size of affordable housing units presents a problem for many families. The size of units can inhibit other caregivers from being able to assist the family. One family stated that they are eligible to have a caregiver come and help them out during the night, but because they live in a one-bedroom apartment, it was impossible to have someone else in the room, when it is already overcrowded. Therefore, they must provide care unassisted.

Special equipment that is available to ensure the safety and participation of the children cannot be used or installed in small living areas. For example, one family is not able to purchase a special bed for their child because it would not fit in their one-bedroom apartment. Other families are not able to install a lift in their home because of lack of space. As a result, in one situation, a single mother must lift her teenage son in and out of bed and also in and out of the shower, posing a safety risk for both mother and son.

The size of many of the units inhibits the independence of the children. Units are too small for the use of walkers or standers by older children and the inability to use lifts makes toilet-training impossible in some cases, especially because bathrooms are so small and narrow. Some families must leave wheelchairs outside the apartment because they do not fit in the doorway, and the child must then be carried around the apartment, creating unnecessary dependence and physical strain on the parents.

When doing repairs, it is necessary to look beyond the immediate repairs and look at accessibility as well. For example, if a door has to be replaced, consideration should be given to putting in a slightly larger investment at that point and making it an accessible door by creating a larger doorframe or installing an automatic door-opener.

Most wheelchair-accessible apartments are in high-rise apartment buildings. From the families' perspective, it is best to have apartments on, or as close as possible to the ground floor for safety reasons. Having to use stairs in the event of a fire or fire drill is very dangerous. It becomes a judgment call as to whether to evacuate the building when the fire alarm rings, because it's also dangerous to carry a child (of varying ages and weights) down several flights of stairs. This poses major safety risks to both the parent and the child.

Families are concerned that as their children grow, it will become more and more difficult to carry them up and down stairs, until it eventually becomes impossible. One family, living on the 13th floor of an apartment high-rise indicated that fire alarms occurred almost weekly. Each time, the father had to make the decision about whether to evacuate the building and carry his daughter down 13 flights of stairs, or risk staying in the apartment in the event it wasn't a drill or a false alarm. The father has to weigh the safety risks on both sides – for himself and for his child, creating an unsafe situation and a great deal of stress for the family.

The following items were key areas identified to improve accessibility when building new accessible and affordable housing.

Units should have:

- Larger and more bedrooms
- Accessible washrooms
 - Washrooms on the main level
 - Wheel-in showers or bathtubs with lower sides
 - Bigger/wider washrooms with room for lifts
 - Non-slip tubs
 - Lower sinks in the washroom
- More room, area for movement
- Wider bedrooms, wider doorways.
- Lower light switches
- Lighter doors
- Doors that open the proper way for someone in a wheelchair or mobility device, so they do not get caught behind doors
- Ramps to the front door to allow easy entry to the home
- Ramps to and from parking garages
- Cards for entry instead of keys (for people with less fine motor skills)
- Access from garages – elevators or ramps (not stairs only)
- Room in garages to easily get in and out of the car (i.e. bigger parking spaces)
- Level balconies
- Central air-conditioning
- Elevators that actually work and are checked regularly

Philosophical Changes

Currently, the limited number of accessible social housing units are primarily designed for adults with disabilities, which means they tend to address different needs than those of families with children with disabilities. Focus group participants often expressed frustration

that their units were too small in size to accommodate their families. In some cases, families need to choose between an accessible apartment or an apartment with more space. Families shouldn't be forced to choose between two inadequate housing options.

While the Residential Rehabilitation Assistance Program for Persons with Disabilities is designed to help families finance accessibility adaptations – due to the small size of units, this is often impossible. Also adaptations are often hindered because of the apartment building's management. Several focus group participants remarked that they were not permitted to install a lift because of the perceived 'damage' it would cause to the unit. Other families are not able to install a lift because they would be forced to pay to remove the lift and repair the ceiling to its original condition when they move out. Families simply cannot afford to do this. Others commented that they have been charged fees for making units more accessible, like adding grab bars in the shower. Most families stated that they do not have the option to make modifications, especially those living in privately-owned buildings while awaiting affordable housing.

When doing routine repairs or renovations, it is necessary to look beyond the immediate changes and focus on creating accessible spaces to save on costs in the long term. Within the current social housing system, renovations are often impossible, or very costly due to the small size and narrow nature of the units, therefore it is best to construct new housing with accessibility in mind.

Bloorview Kids Rehab and the Ontario Association of Children's Rehabilitation Services (OACRS) commissioned a literature review and report regarding the housing situation of children with disabilities and their families. Among other things, the report highlights approaches by other jurisdictions in addressing the accessibility needs of their residents.

Detailed below are valuable findings that can be applied successfully in Ontario.

Lifetime Homes (UK) The Joseph Rowntree Foundation in the United Kingdom, a leader in social policy research and development in the UK, conducted extensive research on the quality of housing there. Housing experts developed design and accessibility features that would ensure a house or apartment would have the flexibility to accommodate the needs of the majority of households, including everything from daily activities like carrying groceries in and out of the house to meeting the needs of someone with a serious, chronic illness. Research indicated that by building housing and public buildings that allowed for flexibility, taxpayers could save more than \$10 billion over a 60-year period by reducing the need for expenditures on adaptations and a reduced need to move people into residential care.³¹

Lifetime Homes Standards:³²

1. Sufficiently wide parking space for a wheelchair user
2. Distance from the car parking area to the house should be kept to a minimum and should be level with the house, or have a gentle slope
3. A level or gently sloping approach to the house
4. An accessible threshold that is covered and well lit
5. Elevators should be fully wheelchair accessible and those with stairs should provide easy access
6. The width of doors and hallways should allow for wheelchair access
7. Wheelchairs should be able to turn in a circle in the living or family room
8. Living or family rooms should be at ground level
9. An identified space for a temporary bed at entrance level
10. A washroom located on the entrance level, with the possibility of adding a shower at the later time if required

11. Walls that are easily able to accommodate adaptations
12. Provision for a future stair lift if needed
13. An easy route for a lift from bedroom to bathroom
14. Bathroom planning to give side-access to the bathtub and toilette
15. Low window sills
16. Sockets, controls etc, located at a convenient height

Lifetime Homes can be used by everyone – older people, the majority of people with disabilities, as well as those without disabilities. By adopting Lifetime Homes' standards, housing options for families with children with disabilities are increased, giving private and public agencies greater flexibility and ability to meet the needs of their clients.³¹ The concept of Lifetime Homes has been recommended to be incorporated into national building codes of all European Union countries.³³

The Rowntree Foundation conducted research which identified the main issues faced by families with children with disabilities in the UK. The results were very similar to issues faced by the families who attended the Bloorview housing focus groups:³¹

1. A lack of suitable housing
2. A lack of supply of accessible affordable housing resulted in a failure to meet the needs of families
3. Inadequate funding for housing adaptation
4. Limitations on grants for facilities for people with disabilities
5. An unmet need to provide financing to families needing to adapt their homes or buy more suitable properties
6. A lack of communication and coordination among agencies responsible for children's health and welfare

In order to address these concerns, the Rowntree Foundation suggested the following solutions:³¹

1. Housing application criteria should give greater priority to families with children with disabilities and take a more flexible approach to recognizing the family's needs
2. Change rules regarding tenancy succession to favour children with disabilities and their families, so accessible housing is made more readily available to them
3. Consider registries that improve the fit between supply and demand of accessible housing, by creating a database listing all accessible properties and a register of people needing accessible properties. In addition to a service that matches the family with the property
4. Ensure there are funds specifically allocated to housing adaptations/renovations for children with disabilities and their families – based on need
5. Make health and social services accountable for meeting housing needs – a budget review must be conducted and multi-agency meetings must be held of all budget holders to harmonize policies and procedures to improve access
6. Provide public financing for families to make adaptations/renovations to their homes, or provide interest-free loans so families can buy more suitable properties.
7. Take a multi-disciplinary approach that takes into account all of the family's needs with a clear input on housing. Assessments need to identify and act upon housing needs clearly and rigorously. At a strategic level, housing departments need to be represented

The European Union Committee for Social Housing found that: ³¹

- Many families with children with disabilities face serious housing challenges. Far too often, these families live in housing units that are too small and are not designed to meet their needs.
- The Habinteg Housing Association found that Lifetime Homes can help people with disabilities sustain their independence. In a Joseph Rowntree Foundation survey, 90 per cent of Lifetime Home owners indicated they believed their homes would be flexible enough to meet their needs at every stage of their lives.
- Joseph Rowntree Foundation found that the additional costs in attaining Lifetime Homes' standards are between 0.5 and 1 per cent of the total building costs, making it much less expensive than renovating once the home is already constructed.
- One of the biggest challenges currently is that there is a shortage of affordable housing units that are large enough to be adapted for a family with a child with a disability.
- Grants and loans for adaptations to homes should be available to home-owners with disabilities as well as people with disabilities living in private rented housing. Advice, information and support services should be set up to help them gain access to grants and loans, employ builders and ensure the work is carried out properly.

Special attention should be paid to the situation of families with children with disabilities, many of whom live in inadequate and overcrowded conditions. More specifically designed, larger homes should be built to satisfy their needs.

Question 3

What changes are required to the Social Housing Reform Act, 2000 to reduce the regulatory burden and improve the management of social housing?

The definition of groups with *Priority Access* designated by the Social Housing Reform Act should be expanded to include families with children with disabilities.

Due to the unique needs of families with children with disabilities, and the importance of appropriate housing for these families, reducing the wait times for this group is essential for:

- **Promoting independence for children with disabilities** – Having the appropriate equipment and enough space to be able to manoeuvre allows children to learn independence
- **The health of the family** – Having a home that meets the needs of the family is crucial for the health of each family member, as noise and overcrowding negatively affect mental health^{19,29,30}
- **A healthy family dynamic** - Having enough bedrooms to accommodate each family member's privacy needs is important to maintaining strong relationships, and appropriate development of all children, including the child with special needs
- **The safety of the parents and children** – Inaccessibility and not having access to appropriate equipment poses serious safety risks for both the parents and children
- **Social Inclusion** – Giving children the opportunity to move around their homes and be included in family activities is beneficial for self-esteem and is essential for the healthy development of children

Given the consequences to these families' health and well-being, these families should be given *Priority Access* within the Social Housing Reform Act.

Question 4

What creative new ideas could improve the current housing system? This could include new planning tools, innovative financial options and new green technologies.

In Bloorview's review of the literature and other jurisdictions, we found an effective and innovative approach to affordable housing from the UK. The concept of Lifetimes homes creates living spaces that can be used over the course of all stages of life. In order to save on resources, affordable housing should have a broader application than one stage at a time.

The design concepts of flex housing and universal design should be implemented on a broad scale for new constructions in affordable housing, taking into account families as well.

These concepts improve sustainability in the broader sense. There is no downside to creating units under the principle of universal design – it makes the units more useful and saves money. It also makes future changes easier for tenants, lessens the need to move from one place to another, ultimately creating less strain on the system.

Engaging the private sector in social housing strategy discussions could help bring about innovative ideas for addressing the issues. Consider forming agreements with private property owners and developers, offering them incentives to have buildings with a set number of accessible units rented at below market rates, especially with owners of multiple properties. Also, all new buildings being constructed should be required to build a minimum number of accessible units. Participants also felt it is important to assist people on fixed incomes paying rent at market rates. Some single-parent families have a great deal of difficulty paying rent because they take care of their children full time and are not able to be employed. A lack of access to affordable housing is the cause of many of the problems these families face.

Question 5

What should be used as the housing indicator for Ontario's Poverty Reduction Strategy? In this context, what do terms like affordable, adequate and suitable housing mean to you?

The **affordability** of housing should be reviewed within context – not just taking into account the household salary. Families with children with disabilities have more of a strain on their finances, as they have additional expenses (e.g. extra costs for equipment, medication, time spent not in the workforce in order to care for their children).

Many participants in our focus groups felt that there is a need to gear rents toward income levels, as it is not possible to pay a high percentage of income toward rent. Fluctuations in income due to seasonal work, employment instability or having to stay home from work to take care of children when they are especially ill makes affording rent very difficult.

Many families experience a great deal of stress because the amount of money families receive from social assistance is not sufficient to cover expenses because there are extra expenses necessary for children with disabilities that are not covered, for example: medication, catheters, special clothing, special food, entertainment (transportation, additional costs), diaper expenses (allowance not nearly enough), syringes, summer camps, gauze, tape, anti-septic, wheelchair maintenance and repairs, bath equipment, and tools for going to school.

Suitability for our families would mean that units are accessible with enough space for a family to live and thrive in neighbourhoods where families feel safe and comfortable.

When constructing new housing, location must be considered. Currently, there is not a great deal of affordable housing in downtown Toronto, however, families need to be near the hospitals where their children receive treatment. They also need accessibility to public transit and to be close to their employment and schools.

Families are often hesitant to move into new areas due to cultural, language and religious factors. By providing different models of support, some families would be comfortable to move to a new area. In other situations, like if a child is enrolled in school and the family is near their doctors, offering a building on the other side of town can be very disruptive. In certain cases, offering a rent subsidy to landlords in the family's community or funding to make a unit more accessible would enable families with a child with a disability the option of remaining closer to their home and community.

In addition, cultural, language and religious factors may also be a consideration where a family would prefer to be near local shops, church, mosque or temple – where people speak their language and observe similar practices.

Adequate housing would mean there is enough living space to accommodate the family to ensure the health and safety of each member.

Creating new housing is essential for families with children with disabilities because current housing is not large enough to accommodate their needs. In addition, current housing is often old and narrow and it would cost more to renovate it than to build new housing with accessibility in mind. With current housing, in many cases, too many changes are necessary to make it truly accessible.

Several families are living in extremely overcrowded conditions. For example, a family of five living in a one-bedroom and a family of seven living in a three-bedroom. In both cases, the child with the disability was a growing male in his teens, creating huge space and mobility issues. Parents expressed concern over the extreme difficulty in helping their child around the apartment, and safety concerns about having to lift and carry them in and out of bed and the shower, and on and off the toilet.

Families stated that it is very difficult to obtain wheelchair-accessible apartments – with even longer wait times for three or more bedroom apartments. The majority of current housing units are either one or two bedroom units which are not practical for larger families.

Having several family members living in one bedroom is very difficult because the child with the disability often wakes up several times during the night, and they wake up the rest of the family, including younger siblings.

Children with disabilities need their own bedrooms to be able to move around, to increase independence and reduce strain on parents. More room is also needed for specialized equipment that can aid in the care of the child – for example a hospital bed, lift, or even just room to be able to manoeuvre their wheelchair in the room. In many cases, families had to choose only one piece of equipment they wanted for their child because, due to space limitations, there was no room for all the necessary equipment.

New housing is necessary in order to construct wider rooms to allow for independence and mobility. More new housing is also needed to reduce the wait lists. Accessible units that have three to four bedrooms need to be constructed because they are currently not common and it takes far too long to get them. Many of the families present at the focus groups indicated that they had been waiting for a larger unit for an unacceptable amount of time. It appears that there is a growing demand for larger units with more bedrooms to accommodate larger families, including those living with extended family.

The AODA identifies mandatory accessibility standards that remove and prevent barriers for people with disabilities in key areas of daily living. It is vital that the Ontario's Long-Term Affordable Housing Strategy comply with these accessibility standards.

New housing must be designed for different needs. All new buildings should have at least one accessible unit by law. When building new units it is important to ensure that the units are adaptable for renovations if needed for future, in order to accommodate children and adults with disabilities, and also to take into account the aging population.

Appendices

Appendix 1 – About Bloorview

Bloorview Kids Rehab is Canada's largest children's rehabilitation hospital.

Our vision is to create a world of possibility for kids with disability.

We pioneer treatments, technologies, therapies and real-world programs that give children with disabilities the tools to participate fully in life.

Bloorview serves about 7,000 children each year, with about 600 inpatient admissions and 52,000 outpatient visits. Bloorview is a world-class teaching hospital fully affiliated with the University of Toronto. We train future health-care specialists in the field of childhood disability. The Bloorview Research Institute is located onsite, allowing us to integrate cutting-edge research and teaching with frontline care to improve children's quality of life.

We see children with cerebral palsy, acquired brain injury, muscular dystrophy, amputation, epilepsy, spina bifida, arthritis, cleft-lip and palate, autism and other developmental disabilities. A small number of our clients have complex chronic diseases that require round-the-clock medical care.

Appendix 2

Sheltering Vulnerable Families Jurisdictional Summaries

Prepared by:

BRUNSWICK Strategic Consulting Ltd.
DRAFT v. 1
1 June 2008

Progress is being made insofar as jurisdictions abroad and within Canada are recognizing the distinctive needs of these families, establishing frameworks and making public policy decisions to provide for accessible, flexible and affordable housing for families with children with disabilities. Currently, the City of Toronto is conducting an extensive consultation process to develop an affordable housing framework to guide the city over the next ten years. The city has both identified disabled persons as a constituency to be supported within the framework and made special provisions to include engage persons with disabilities in the consultation process.

Ontario

- Ontario has faced a significant challenge in decreasing waitlists for affordable housing in the province. This failure is due in large part to the transfer of responsibility for housing to the municipal tax base in 2000 and the reality that municipalities have not treated housing as a high priority for scarce municipal resources. There has been tremendous pressure on the provincial government by municipalities and tenants groups to take back responsibility for funding for social housing from the municipalities. In August 2006, the Government committed to conduct a fiscal review of the relationship and responsibilities between the provincial and municipal governments. The results of that review are pending and are expected to be released before the end of June 2008.
- Ontario has had the benefit of a housing agreement with the federal government. The Government of Canada and the Government of Ontario signed an Affordable Housing Agreement (AHP) in April 2005¹ (although the agreement was not actually signed until December 2006 by a new federal government) that committed \$602M over four years (ending in 2010) to increase the supply of affordable housing in Ontario for a total investment from all three levels of government of \$734M over the life of the program. The agreement is providing financing across the province for:
 - rent supplement for low-income households
 - rental units targeted to people on or eligible to be on a social housing waiting list
 - supportive housing for persons with mental illness
 - housing for victims of domestic violence
 - homeownership housing for families with low to moderate incomes; and
 - the provision or renovation of affordable housing for low-income persons in Northern Ontario.
- In the 2008 Ontario Budget, the government committed \$100M against the 2007-08 Budget (i.e. year-end money) for the capital repair of social housing, including energy efficiency improvements. Although some allocations have been made to municipalities (e.g. Parry Sound), criteria for the funding have not yet been announced.

Poverty Reduction Strategy

- The provincial government is developing principles and a white paper for a policy framework for long term, sustainable affordable housing.
- Premier McGuinty struck a new Cabinet Committee on Poverty Reduction to develop poverty indicators and targets together with a focused strategy for reducing child poverty and lifting more families out of poverty. The Committee is Chaired by Deb Matthews and George Smitherman is Vice-Chair. Members included: Bas Balkissoon, Bruce Crozier, Carol Mitchell, Chris Bentley, David Orazieltie, Dwight Duncan, Jim Watson, John Milloy, Kathleen Wynne, Lou Rinaldi, Madeleine Meilleur, Margaret Best and Michael Chan.

AODA Standards

- The Government is also in the process of consulting with standards subcommittees to develop recommendations for regulations under the *Accessibility for Ontarians with Disabilities Act, 2007*

¹ CMHC Press Release, 29 April, 2005. www.cmhc-schl.gc.ca.

- Consultations tables with representative stakeholder groups have been established to consider and make recommendations on regulations to implement provisions under the Act. These consultation tables are meeting on an on-going basis.

Canada

- See Ontario above. The AHP Funding will end in 2010.
- The Government of Canada has not made any new funding allocations for social housing in Ontario.

Toronto & other Municipalities

City of Toronto:

- Earlier this year, the City of Toronto launched Housing Opportunities Toronto (“HOT”) together with “An Affordable Housing Framework 2008-2018”, a document to provide a platform for public review, consultation and engagement.
- Stakeholder consultations have been held throughout the spring and further consultations are to occur at the Monday, June 16th meeting of the Affordable Housing Committee.
- Further, on a limited basis, the City of Toronto is offering up to \$500 per consultation during June and July for vulnerable populations who experience housing challenges and are often under-represented in public consultations. These are the Aboriginal community, immigrants, women, victims of domestic violence, persons with disabilities, youth, seniors, people with mental health issues and homeless individuals.
- The City has been an advocate for the “uploading” of social housing back to the province.

European Union

The UK Experience

Lifetime Homes

- The Joseph Rowntree Foundation² has become a leader in social policy research and development in the United Kingdom and has been particularly successful in driving policy solutions to address housing issues. In the 1980’s, the Foundation conducted extensive research into the quality of British housing and in particular “how inaccessible and inconvenient many houses were for large segments of the population from those with young children through to frail older people and those with temporary or permanent disabilities.”³ Housing experts were brought together to develop accessibility and design features that would ensure that a home or apartment would be flexible enough to accommodate the needs of most households – from someone carrying in groceries, to someone with a broken leg or in a wheelchair to someone with a serious, chronic illness. The research demonstrated that by building in flexibility into public buildings and houses, taxpayers would save more than \$10 billion CDN⁴ over a 60-year period through reduced expenditures on adaptations and a reduced need to move people into residential care.

² The Joseph Rowntree Foundation is a social policy research and development charity in the United Kingdom, seeking to better understand the causes of social difficulties such as poverty and housing and explore ways of overcoming them across the UK.

³ The Joseph Rowntree Foundation. *An Introduction to Lifetime Homes*.
<http://www.jrf.org.uk/housingandcare/lifetimehomes/>

⁴ £5.5 billion in savings over 60 years.

- Lifetime Homes are suitable for older people, most persons with disabilities, and non-disabled people. Adopting Lifetime Homes standards increases housing options for families needing to accommodate special needs and provides private and public housing agencies greater flexibility and ability in meeting the needs of their clients.
- Lifetime Homes standards have become synonymous with “barrier free” across the European Union and the European Liaison Committee for Social Housing has recommended that:
 - all new homes and homes in refurbishment programs should be designed to the standards; and
 - Lifetime Home standards be incorporated into the national building codes if all EU countries.⁵

Lifetime Homes Standards

1.	Sufficiently wide parking space for a wheelchair user
2.	Distance between the house and the car-parking space kept to a minimum
3.	Level or gently sloping approach to the house
4.	Accessible threshold that is covered and well lit
5.	Lifts should be fully wheelchair accessible in flats, stairs in flats should provide easy access
6.	Width of door and hall should allow wheelchair access
7.	Turning circle for wheelchair in ground floor living room
8.	Living room or family room at entrance level
9.	Identified space for temporary bed at entrance level
10.	Accessible entrance-level WC, plus opportunity for the installation of a shower later
11.	Walls able to take adaptations
12.	Provision for a future stair lift
13.	Easy route for a hoist from bedroom to bathroom
14.	Bathroom planned to give side access to bath and WC
15.	Low window sills
16.	Sockets, controls, etc. at a convenient height.

- The Rowntree Foundation has also conducted significant research identifying difficulties and inadequacies in meeting the housing needs of disabled children and their families and documenting the impact of unsuitable housing on lives of disabled children, their siblings and parents. Among its findings, the Foundation has found that those who design, construct and provide housing in the United Kingdom have little or no understanding of the disability issues, especially as they relate to the needs of disabled children and young people and needs related to learning and behavioural difficulties.

Housing Families with Children with Disabilities:

<p>The Rowntree Foundation’s research identified the following problems:</p> <ul style="list-style-type: none"> • Lack of suitable housing • Failure to supply with need • Inadequate funding for housing adaptation • Limitations on grants for disabled facilities • Need to provide financing for families to adapt their homes or buy more suitable properties • Lack of communication and coordination among agencies responsible for children’s health and welfare
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⁵ Randall, Bill. *Breaking Down the Barriers: Social housing for people with disabilities in Europe*. The European Liaison Committee for Social Housing. 2003. At 33.

Rowntree Proposed Solutions:

The Rowntree Foundation suggested the following solutions:

- Housing allocation criteria should give greater priority to families with a disabled child and take a more flexible approach that recognizes the families' needs
- Adapt rules regarding tenancy succession to favour disabled children and their families so that adapted properties are made useful to families with disabled children.
- Consider disability registers as a mechanism for improving the fit between demand and supply. Registers would consist of a data base of accessible property, a register of people requiring such housing and a service to match people with properties.
- Ring-fenced money for housing adaptations for disabled children – based on need
- Make health and social services accountable for meeting housing needs – do a budget review and hold multi-agency meetings of all budget holders to harmonize policies and procedures and improve access
- Provide public financing for families to adapt their homes or provide interest-free loans to families to enable them to buy more suitable properties
- Consider a multi-disciplinary approach that takes account of all of a family's likely needs with a clear input on housing. Assessments need to identify and act upon housing needs clearly and rigorously. At a strategic level, housing departments need to be represented

Wales

- Accessibility to housing for families with children with disabilities has been an explicit priority since 1999.
- Government created a Welsh Housing Quality Standard to address accessibility issues.
- Under standard, all necessary aids and adaptations should be provided to meet the specific requirements of any household members, including those with disability. In addition, they should reflect the changing needs of the household.
- The plans incorporate Lifetime Homes standards to create more flexible housing stock by providing homes that are adaptable to the changing needs faced by most families over time.

Scotland

- Commissioned a study to review the housing system as it relates to disabled people and their families, identify barriers that may affect them, and then develop practical proposals for a demonstration project to deliver housing more effectively for disabled people.⁶
- Government recognized that disabled people and their families are not a homogenous group and includes people with physical disabilities, sensory impairments and learning disabilities.
- Project was funded by the Scottish Executive, Communities Scotland and Lothian Health.
- **Findings:**
 - Disabled people have fewer housing options than the general household population. Caused by: supply, financial exclusion and social attitudes
 - Supply
 - Overall shortfall in volume of housing suitably adapted or adaptable across housing tenure
 - Access to suitable existing or new private sector properties restricted due to sales and marketing information
 - Building regulations improving accessibility, but only for visitors
 - Planning system is not being used to its full potential to increase supply across tenures
 - Opportunities for adaptation not being taken in comprehensive refurbishment of existing housing
 - Financial exclusion
 - Disabled people generally have lower incomes
 - Specific housing requirements meant that disabled people may have not enjoyed the subsidies to home ownership that other households have enjoyed

⁶ Ownership Options and Margaret Blackwood Housing Association. Housing for Disabled People and their Families. Practical Proposals for the Lothians. April, 2004.

- Access to mortgages has improved, but not as readily available to disabled families as it is to other households
 - Attitudinal
 - Prejudice still presumes in favour of separating disabled people from other parts of society, including housing tenure and location
 - Institutions and funding bodies apply systems and targets that cater for homogenous groups and volume provision, which work against individual needs and specific housing requirements
- **Recommendations:**
 - Establish a policy framework and identify opportunities to increase access to housing for disabled people (e.g. through master plans, renovation, new build, planning etc.)
 - Develop a central registry and profiles of house types and sizes for households that include someone with a disability and has support needs – use this to inform planning
 - Develop processes for joint working and information pooling between relevant department to share client specific need, longer term projections, and inform new housing development and existing stock refurbishment requirements.
 - Improve accessibility in the social rented sector by:
 - Grasping renovation opportunities to take bigger leaps forward in improving accessibility in both the local authority and RSL stock
 - Conducting comprehensive surveys of social housing stock to assess capacity for adaptability, including the surrounding environment.
 - Establish early discharge warning and systems with health and social work departments to identify cases where unsuitable housing is a factor in delayed discharge. Then develop systems to allow health board funding transfer for capital contribution to speed up delivery of housing solutions whether in private or social rented sectors.
 - Develop a strategy for use of private rented sector to increase provision and flexibility of suitable housing
 - Increase new supply by using the planning system to deliver accessible housing not as a subset of affordable housing, but to improve accessibility across tenure and using opportunities in large land release areas
 - Monitor systematically all policy outcomes to show how housing options for disabled people are broadening and increasing. Monitoring should show outcome by exact type of accessibility achieved, tenure and refurbishment in existing stock.

European Union Committee for Social Housing (CECODHAS)

- Formed in 1988, CECODHAS key objectives are promoting the work of social housing organizations in the EU and fostering continuous exchange of ideas and experience among its members
- 2003 report, *Breaking Down the Barriers: Social housing for people with disabilities in Europe*⁷
 - Identifies significant trends in the causes of disability that are increasing pressures on housing and other services, e.g. people with Multiple Sclerosis live longer; more people survive serious brain injuries, the most common cause of physical disability in young people in EU countries; and death rates from strokes have reduced significantly since the 1960s (e.g. by 80 per cent in the UK)
 - Further, an ageing population means that more people are afflicted by dementia.
 - Also, the incidence of cerebral palsy has increased sharply as more babies with low or very low birth weights survive.
 - Many families with disabled children face serious housing problems. Too often they live in houses and flats that are too small and not designed to meet their needs.

⁷ Randall, Bill. *Breaking down the Barriers: Social housing for people with disabilities in Europe*. CECODHAS (European Liaison Committee for Social Housing). 2003.

- Many disabled men and women are able to stay in their homes if the homes are built to Lifetime Homes standards or are adapted to meet their needs. More financial help is required from government to produce purpose-built houses, flats and bungalows that can help severely disabled people and their families make the most of their abilities.
- Most EU countries are moving towards the wider introduction of barrier-free housing. Amendments to national Building Regulations in several EU countries specify for example, wider doors for wheelchair access and level thresholds.
- In the UK, many housing associations are adopting the Lifetime Homes standards developed by the Joseph Rowntree Foundation (JRF) in the early 1990s. (Lifetime Homes have 16 design features that ensure a new house or flat will meet the needs of most households and disabled people.)
- JRF calculated that additional costs of achieving the standard are between 0.5 and 1 per cent of total building costs; much cheaper than making adaptations after a house or flat is completed
- The Habinteg Housing Association has found that Lifetime Homes can make an enormous contribution to helping people living with disabilities sustain their independence. 90% of people interviewed for a JRF survey indicated they thought their homes would be sufficiently flexible to meet their needs at every stage of their lives.
- One of the biggest issues for children is that there is a shortage of large flats and houses that can be adapted for a family with a disabled child
- At a demonstration project in Copenhagen, Denmark, a cooperative housing company for disabled people has built 4 three-storey blocks of flats, linked by common areas that also contain the lifts and stairs. The basic scheme has two flats on all floors; but demountable walls make it possible to adjust the number and size of flats to meet changing needs, e.g. walls can be adjusted to accommodate families with disabled children. The scheme is designed for wheelchair users who operate doors, lifts, lighting etc. with remote controls. The heights of sinks, work surfaces and cupboards are adjustable. All flats have IT connections for those who work or study at home. The government funded construction costs while private finance paid for the extra disabled facilities. The local authority pays the care costs.
- Under Danish building regulations, all new housing in the public and private sectors must be built to Lifetime Homes standards. Grants are available for adaptations to older home. All disabled people in Denmark are entitled to free assistance to help them maintain their independence through a health visitor scheme that obliges local authorities to employ nurses to care for people in their own homes.
- Sweden has led Europe in breaking down housing barriers for disabled people
- Since 1977, builders and housing providers have been required to make all new homes accessible to disabled people through the introduction of adjustable homes standards
- The integration of housing for disabled people has long been a central feature of housing policy in Sweden where 850,000 people (10% of the population) are disabled, about 85,000 of them severely.
- Since 1974, Portugal has set up 50 cooperatives across the country to provide care, education and training from the cradle to adulthood. The cooperatives work with 1000's of children and young people with disabilities and their families.

CECODHAS RECOMMENDATIONS

- Disabled people must be involved where possible in the planning, design and management of their homes.
- Social housing providers should promote and sustain the independence of disabled people through their work.
- Housing for disabled people should always be integrated into the community. Disabled people should be able, where possible, to move seamlessly from housing with high care to mainstream housing with lighter support.
- All new homes in refurbishment programmes should be designed to barrier-free or Lifetime Home standards. This requirement should apply to all housing, public and private, and be incorporated into the national building codes of all EU countries.
- Homes for severely disabled people should be tailor-made to meet their needs. Tenants should be identified before new schemes are designed to make this possible.
- Housing providers must work closely with social services and health organizations, identifying people in need and ensuring that adequate care and support are provided.
- Local authorities and housing providers should match the need for wheelchair and other specialist housing with the local supply to make the best possible use of limited resources.
- Housing providers should use SMART technology more widely in housing for disabled people.
- Grants and loans for aids and adaptations to their homes should be available to disabled home owners and disabled people living in private rented housing. Advice, information, and support services should be set up to help them gain access to the grants and loans, employ builders and ensure the work is carried out properly.
- **Special attention should be paid to the situation of families with disabled children, many of whom live in adequate and overcrowded conditions. More specially designed larger houses should be built to satisfy their needs.**

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