



# PARENTING WITH A DISABILITY BULLETIN

Volume 12 Issue 2

March 2010

## PDN UPDATE



### Parenting With a Disability: A Community Round- table Discussion

By Melanie Moore, Sandra  
Carpenter and Nancy Barry

On February 3, 2010 the Ethno Racial People with Disabilities Coalition of Ontario (ERDCO) held a parents' with a disability symposium funded by the Law Society Foundation and co-sponsored by ARCH (A Legal Resource for People with Disabilities). Because of that initiative, the next day, CILT hosted a round table discussion with staff from Through the Looking Glass and community members.

The purpose of this round table discussion was to hear and see in detail what Through the Looking Glass (TLG) is currently doing for parents in the U.S. TLG is an American organization that assists parents with

disabilities in finding adaptive ways to care for their children. As a result, parents are at less risk of losing their children.



TLG showed a video that demonstrated several parenting techniques, such as one-handed diapering and changing a child using techniques for conserving energy.

Also discussed were the gaps that currently exist for parents with disabilities in Toronto, and possible ways to overcome them. One idea that came out of that discussion was to enlist other agencies to work together to assist parents with disabilities.

Further discussion will take place because there is a lot of common interest in the community and among those at the table. TLG expressed interest in continuing to support PDN and any possible collaborations that may have emerged from this round table. Sometimes it's all about putting practical solutions in place to solve big problems. For instance, if a parent that has a disability involving personal energy or fatigue issues, giving the

baby a toy to play with while you are changing them can be a calming distraction and helps lessen the frustration of changing an active baby.

Another example that was shown includes using a “butt up” technique. The baby sometimes can help out with a changing routine by lifting up their bottom to conserve energy for the parent. It is important to remember that some of these strategies are taught by an occupational therapist, and every person’s situation is different. Further collaborating efforts are in the works.

## Spring Forward Through Empowerment

On Thursday May 6, 2010 the Parenting With a Disability Network (PDN) is planning to hold a one day conference/workshop for service providers in the child health and welfare sector, including CAS workers, social workers, midwives, nurses, etc. on “parenting with a disability”. It is high time that we begin to put an end to the existing myths and misconceptions that people with disabilities cannot be good parents.

We are currently in the planning stages. A big part of the day will include a panel discussion of the positive and negative experiences of parents with various types of disabilities. We also intend on putting an end



to the confusion around the concept of Nurturing Assistance, through a special presentation.

We want to end the day on a positive note, in a discussion around how we can all work together to empower parents with disabilities and end society’s misconceptions. A large part of the afternoon will be spent discussing the myths and misconceptions that exist among society at large and how we can work together to bring those misconceptions to an end. Stay tuned for more up-to-date information on this monumental event.

## Mid Winter Gathering 2010

On February 27th, the PDN held its annual Mid Winter Gathering. This year, we had a few new faces join us for the afternoon. It’s always great to see new members join the PDN!

Instead of our usual afternoon of bingo and other board



games, the group engaged in an interesting dialogue around the future of the PDN. We talked about when or if Kimberly McKennitt will be returning to her

role as PDN coordinator. Currently, we are not certain as to the answer to that question. In May, it will be two years since Kimberly went on medical leave, and our executive director has only spoken to her on a couple of occasions. If she chooses not to return, then her position as PDN coordinator will be posted, and whom-ever wishes to apply for the position, may do so.



## Does Your Child Feel Understood?

*This article was written by Dr. Karyn Gordon; found at [www.cityparent.com/article/13985](http://www.cityparent.com/article/13985)*

### Tip #1: Talk for Yourself

When communicating, it's important that people talk for themselves and not for the other person. I will often hear teens and parents say, "You think that..." or "You feel angry because..." If you talk for another person, two things are likely to happen: First, the other person will immediately become angry because no one knows how another person feels and thinks. Second, because this person is now angry, the conflict doesn't get resolved. The more effective way is to ask them how they think and feel. Let them be the expert on their feelings.

### Tip #2: Understand What "I Don't Know" Really Means

Three common words are, "I don't know." There are two main reasons why people say, "I don't know." Either they don't want to answer the question, or they can't seem to explain their



Thank you to all those who attended the Mid Winter Gathering. We look forward to seeing you at our next event.

Stay tuned for details!



answer. In my experience, many teens say, “I don’t know,” because they can’t explain their answer or formulate their thoughts. When I ask a child a question, they start answering it and before finishing say, “I don’t know.” They get embarrassed because it’s not coming out right. In these cases, affirm their process and say, “Take some time – it’s in there – try it again.” When children are given permission to have silence, it allows them to start processing their thoughts. Try it and you’ll hear the “I don’t knows” less.



### **Tip #3: Avoid Talking about Yourself**

When people share experiences with us, it’s tempting to start sharing our similar experiences. But in the parent/child relationship this is not helpful. One of the pet peeves many teens have shared with me is that they’ll be spilling their guts to their parents only for their parent to cut them off and start talking about their similar story as a child. I’m not saying that sharing is not good but choosing good timing is essential. If your child needs to talk, stay focused on what they are sharing. What a wonderful moment it is when kids feel safe enough to let their parents into their world. If you think your personal story is applicable to what your child is experiencing, wait until they have finished sharing and then ask if they’d like to hear a personal story of yours.

## **Child Coughs and Colds**

*This information developed in collaboration with: Canadian Paediatric Society, Sick Kids for Shoppers Drug Mart 2003.*

You may wonder if your child will ever stop getting colds. You are not alone. Most children get colds. Babies and preschool children often have as many as six to ten colds a year. Children have many more colds than adults because their immunity has not yet developed.

The most common signs of a cold are coughing, sneezing and a runny nose. Sometimes, a child with a cold may appear very sick with a fever, lack of energy and loss of appetite. These symptoms usually last for about a week but may stay longer.

Sometimes, a cold can lead to complications, such as ear infections and pneumonia. A fever that comes at the beginning of a cold is normal. If your child develops a fever several days later, it may mean that your child has an infection.

Your child may still go to a day care or school if he or she is feeling well enough to take part in the activities.

Your child does not have to stay indoors because of a cold.



**How can I help my child feel better?**

To help your child feel better, try the following:

- Give your child **extra fluids** to drink.
- Make sure your child gets as much rest as possible.
- Use a **cold mist humidifier** to ease coughing and a stuffy nose. Be sure to clean it every day to keep germs from growing in the equipment.

**Will antibiotics cure my child's cold?**

NO. Colds are caused by germs called viruses. Antibiotics are useful only to fight germs called bacteria. Antibiotics will not cure colds.

**How are colds transmitted?**

Colds are easily spread from person to person in the following ways:

- Through the air, whenever a person with a cold coughs or sneezes;
- Through direct contact, whenever a person with a cold touches his or her mouth or runny nose and then touches another person;
- Through indirect contact, whenever a person with a cold touches his or her mouth or runny nose and then touches an object such as a toy or furniture. Another person may then catch the cold by

touching the same object. Cold germs can live on objects for hours.

**How can I avoid spreading colds?**

Hand washing is the most important way to avoid spreading cold. Try to wash your own hands and your child's hands after wiping his or her nose. Always wash hands before you prepare or eat food.

**When should I call the doctor?**

Contact your doctor if your child has any of the following:

- Earache
- Fever higher than 40°C (104°F)
- Severe sore throat
- Sleepiness more than usual
- Skin rash
- Rapid breathing or trouble breathing
- Constant Coughing

**Important information about giving your child cough and cold medicine**

In general, it is best to avoid giving your child medicine for colds and coughs, except for acetaminophen or ibuprofen, and medicine prescribed by your doctor. Before using non-prescription medicine for relief of symptoms, check with your doctor or HEALTHWATCH® Pharmacist. Some cough and cold medicines can cause unwanted effects, especially in young

children. It is best to use a product that only contains one active ingredient to lessen the chance of side effects.

- Decongestant nose drops or nose sprays may give temporary relief. If used too often, they can actually make a stuffy nose worse. If your baby has a stuffy nose, use saline nose drops before feedings.
- Coughing is one way for the body to remove irritating substances from the lungs. It is best to leave a cough alone unless it interferes with your child's sleep. If it does, you may want to speak to your doctor or HEALTHWATCH® Pharmacist about using a mild cough medicine.
- Antihistamines do not help relieve the symptoms of the common cold in most children
- To relieve aches and fevers, give your child acetaminophen or ibuprofen.

Always use an accurate measuring device to measure the correct amount of medicine for your child. Do not use a household teaspoon because it is not an exact teaspoon.



**Need more information?**

Talk to your doctor or pharmacist.

## PARENTS MAKING EDUCATED CHOICES

### The Doula Experience

*Canadian Federation for Sexual Health  
[http://www.cfsh.ca/Your\\_Sexual\\_Health/Pregnancy/PrenatalCare/doula.aspx](http://www.cfsh.ca/Your_Sexual_Health/Pregnancy/PrenatalCare/doula.aspx)*

A doula (sometimes referred to as a birth assistant) is someone who provides practical and emotional support to a woman or couple before, during and after their baby is born. Doulas are not the same as [midwives](#). They are knowledgeable about female physiology; however, the services they provide are non-medical. Doulas often inform their clients about alternatives to mainstream prenatal care and options regarding childbirth, so that they can make informed decisions. If you are not comfortable with your doula, you have the right to look for another one.

**The following is a list of common tasks a doula may perform:**

- Doulas often meet with the woman (or the couple) a few times before childbirth.
- During labour, the Doula is there to support and care for the woman/

couple, and may make suggestions regarding breathing techniques, relaxation, and/or positioning.

- When working with a couple, a doula may help the partner who is not pregnant to care for and support the pregnant woman by giving suggestions, providing encouragement, and ensuring that the partner is taking care of his/her self. A doula can help the partner to be more involved and more effective as a birthing partner or coach.
- A doula usually acts as an educator about labour and delivery, an advocate for the woman or the couple while in hospital, and they may also act as a liaison with medical staff.
- After childbirth the doula may work with the woman or couple to help her/them adjust to having a new baby.

### **Why is there a need for doulas?**

Before childbirth, some women find it helpful to have a doula so that they can learn more about pregnancy and the birthing process and ask questions where necessary. If the woman gives birth in a hospital, there are a few things to consider. The nurses are often very supportive during childbirth; however, it is likely that they will have other patients. They may be focused on the physical aspects of the birthing process as opposed to being an emotional support. They may change

shifts throughout the course of the labour. As such, many women find that having a doula is helpful because the doula remains with them throughout the entire process. Having a doula available after the baby is born can also be helpful when the woman or couple has questions.



### **Questions to ask when interviewing a doula**

*The following questions will help you decide if a particular doula is right for you:*

- What training have you had? (If a doula is certified, you can check with the certifying organization)
- Do you have one or more backup doulas for times when you are not available? Can I meet them?
- What is your fee, what does it include, what are your refund policies?
- Can you provide references?
- How many clients have you had?
- What is the range of situations that you've worked with?

### ***When interviewing a birth doula:***

- Tell me about your philosophy about childbirth and supporting women and their partners through labor.

- May we meet to discuss our birth plan and the role you will play in supporting me through child birth?
- May I call you with questions or concerns before and after the birth?
- When do you try to join women in labor? Do you come to our home or meet us at the place of birth?
- Will we meet after the birth to review the labor and answer questions?



***When interviewing a postpartum doula:***

- Tell me about your experience as a postpartum doula.
- What is your philosophy about parenting and supporting women and their families postpartum?
- May we meet to discuss our needs and the role you will play?
- What types of services do you offer?
- When do your services begin postpartum?
- What is your experience in breast feeding support?
- Have you had a recent TB test?
- Do you have current CPR certification?

You may want to interview more than one doula to find the right one for you.

**Where to find a doula?**

To find a doula near you, use the [DONA International](http://www.dona.org/) doula listing at <http://www.dona.org/>. DONA is the world's premier doula organization.

## DISABILITY NEWS

### A Study About Successful Immigrants With Disabilities

- **Are you a person with a disability?**
- **Did you come to Canada as an immigrant?**
- **Have you been successful in Canada?**
- **Would you like to share your story with others?**

**Who is doing this study:** The lead researcher is Judith Sandys. Judith is the Interim Director of the School of Social Work, Ryerson University, and has been involved with disability rights organizations for many years. The partners in this research project are ERDCO (Ethnoracial People with Disabilities Coalition of Ontario), CCD (Council of Canadians With Disabilities), and AEBC (Alliance for



Equity of Blind Canadians. The members of the Project Advisory Committee are Delano Brown (ERDCO), John Rae (CCD, AEBC) and Sri Pathmanathan (ERDCO).

**What we hope to accomplish:**

Canadian immigration policy often excludes people with disabilities because they are presumed to be a “burden” on society. We want to challenge these negative stereotypes by telling the stories of people with disabilities who came to Canada as immigrants and who have been successful here. We also want to learn about what has helped people become successful. We hope that what we learn will contribute to the development of more inclusive and equitable policies and services.

**What we are asking you to do:** We want to talk with you for an hour or maybe more, to hear your story about your life as a disabled immigrant and how you achieved success. After we have interviewed a number of people, we will invite all of you to a focus group to share with you what we have learned and to talk about how we can use these stories to change how society views disabled immigrants.

**What we will provide:** CCD will provide an honorarium of \$75 for participating in the interview and another \$75 if you participate in the focus group. We will cover the cost of

transportation and any accommodations that are required.

**For further information, contact:**

**Judith Sandys at**

[jsandys@ryerson.ca](mailto:jsandys@ryerson.ca) or by telephone at 416-979-5000, Ext. 6227.

*Participation in this study is voluntary and will have no impact on your relationship with Ryerson University, ERDCO, CCD, or ACBE.*

## The Law and Persons With Disabilities

Given current demographics and the real-



ities of aging, most of us will at some point either experience disability ourselves, or have a loved one do so. This means that almost all of us have a personal interest in how the law affects persons with disabilities.

There have been many improvements in laws, policies and programs over the past 40 years. However, much remains to be done. Those of us with disabilities continue to experience disadvantages such as:

- **Barriers to education and employment;**
- **Disproportionately low incomes; and**
- **High rates of violent crime and domestic assault.**

In some cases, the laws themselves may create barriers for persons with disabilities. There is more that the law can do to ensure that persons with disabilities have the opportunity to be equal participants in our society. And it must do so in a principled way.

**This is why the Law Commission of Ontario has undertaken a principled approach to the law as it affects persons with disabilities.**

We will examine the various ways that law relates to persons with disabilities, including:

- **Laws, such as the Ontario Human Rights Code and the Accessibility for Ontarians Act, that are intended to promote equality, dignity and participation for persons with disabilities;**
- **Laws that restrict the participation of persons with disabilities, such as those that govern decision-making for persons lacking legal capacity; and**
- **Laws that provide persons with disabilities with supports and benefits, such as those dealing with special education, social assistance, disabled parking permits, services for persons with developmental disabilities and tax reductions for assistive devices.**



Our project on the law and persons with disabilities is not about any one specific issue. It aims to develop a framework that can be used as a tool in reforming current laws or shaping new laws that affect persons with disabilities. You can help us ensure that the framework is workable and responsive to the experiences of persons with disabilities:

- **See our paper on Approaches to Defining Disability available on our website at [www.lco-cdo.org](http://www.lco-cdo.org).**
- **Look on our website beginning in winter 2010 for news about the next phase of this project.**

For more information about this project, contact the Project Head, Lauren Bates, Staff Lawyer, at [lbates@lco-cdo.org](mailto:lbates@lco-cdo.org) or call toll free at 1-866-950-8406 or check our website at [www.lco-cdo.org/en/disabilities/html](http://www.lco-cdo.org/en/disabilities/html).

## Customer Service Standards for Persons With Disabilities

Imagine being treated disrespectfully in a store by a clerk. Or not getting served at a coffee shop because staff didn't take the time to understand you. For a customer with a disability, these situations can be difficult to avoid. Ontario has a new law to change this. It's called the Accessible Customer

Service Standard and is now in force for Ontario's public sector organizations.

As of January 1, 2010, Ontario's hospitals, schools, municipalities and other public organizations are now required to provide service that is accessible to everyone. The private sector and non-profit organizations will follow in 2012. The Accessible Customer Service Standard requires that all businesses and organizations in Ontario:

- train staff about meeting the needs of customers with a variety of disabilities;
- communicate with a person in a manner that takes into account their disability
- permit customers to bring their service animals, such as guide dogs, onto their premises.

"Accessible customer service is about learning how to communicate with someone who has a disability and, most importantly, it is about being willing to help," says Community and Social Services Minister Madeleine Meilleur.

Simply put, accessible service is good customer service. And with the number of people with disabilities on the rise as our baby boomer population ages, accessibility is quickly becoming a necessity. By being more welcoming to

the 1.85 million Ontarians with disabilities, businesses and organizations can:

- increase their customer base
- improve customer satisfaction
- tap into an annual spending power of \$25 billion.

The Accessible Customer Service Standard is part of the province's plan to make Ontario accessible by 2025. More accessibility standards will soon be finalized to tackle barriers in other key areas of every day life. For more information, visit [www.Ontario.ca/AccessON](http://www.Ontario.ca/AccessON). Here are some ways you make your services accessible for people with disabilities:

- Treat people with disabilities with the same respect and consideration you have for everyone else.
- Smile, relax, and keep in mind that people with disabilities are just people.
- Don't make assumptions about what type of disability or disabilities a person has.
- Some disabilities are not visible. Take the time to get to know your customers' needs.
- Be patient. People with some kinds of disabilities may take a little longer to understand and respond.
- If you're not sure what to do, ask your customer, "May I help you?"



## CILT NEWS

### SEED Project Update

By: Chris Lytle

The Safe Engaged Environments-Disability (SEED) project is an initiative of the Safety Investment Fund and the Centre for Independent Living in Toronto. What makes this project so interesting is that it is run by the principals of participatory action research (PAR) which means that it is for people with disabilities conducted by people with disabilities.

To date, after conducting 18 focus group interviews, accounting for 164 people across the city, we are proud to say that we are now in the second stage of our interview process and the SEED project is running smoothly. The SEED project team is now starting to interview people who live specifically in Toronto Community Housing Corporation's (TCHC) buildings.

A lot of ideas about safety came out of these interviews, and these ideas are key to our discussions, and ultimately, to the impact that this project will have on the City of Toronto. At the moment we are in the process of organizing these ideas into themes, and seeing where all of the suggestions fit into the larger report that we are developing.

A few of these themes include:

- Social boundaries
- Physical boundaries
- Emotional impacts
- Solutions

We have made some progress in the creation of tools that can be put to use by people with disabilities in combating safety issues. Also, we are in the planning stages of creating skills development and media workshops to address some of the concerns we have heard throughout the first stage of the interview process. The information that we will use to create possible resources comes from the interviews conducted with people with disabilities in Toronto. This progress would have never been possible without the involvement of the community.

For more information, or to contact a SEED representative, please contact: John Mossa, Centre for Independent Living in Toronto, 416 599-2458, ext. 238, 365 Bloor Street East, Suite 902, Toronto, Ontario M4W 3L4; [ilskills@cilt.ca](mailto:ilskills@cilt.ca).



## Women's Workshop Series By: Nancy Barry

The Centre for Independent Living in Toronto's Peer Support Program is hosting another Women's Workshop Series in April. This year, however, we are adding a fifth session to the series. We hope that many women take this opportunity to join us in celebrating our womanhood in exploring topics that will ensure that we are taking the best possible care of ourselves. All workshops are on Thursdays in April from 1:00pm- 4:00pm:

***PART I: Self Esteem: April 1, 2010***

***PART II: How To Maintain a Healthy Body Image: April 8, 2010***

***PART III: Learning the Signs: Healthy versus Unhealthy Relationships: April 15, 2010***



***PART IV: How to Be More Assertive in Our Relationships: April 22, 2010***

***PART V: Coping With Stress in Our Relationships: April 29, 2010***

Register Early, Space is Limited. To register, contact 416-599-2458 (x270). Refreshments and Attendant Services will be provided. Other accommodations may be provided upon request.

## Diner's Club Starting in Peel Region

The Centre for Independent Living in Toronto (CILT) would like to start up a Diner's Club for people with physical disabilities living in the Peel Region.

CILT's Toronto Diner's Club has been in operation for 20 years and we would now like to bring this popular program to folks living in the Brampton and Mississauga Area.

All restaurants will be checked for wheelchair accessibility and affordability! We would like to have these events on a monthly basis. We need to develop a consumer base in the Peel Region. If interested please call Nancy at (416) 599-2458, ext 227, TTY (416) 599-5077 or email to [peers@cilt.ca](mailto:peers@cilt.ca). Check out our website at [www.cilt.ca](http://www.cilt.ca).

We hope to hear from you soon! Let's get this show on the road!



Please remember to share with us any used childcare equipment that you would like to get rid of and we can advertise it for you right here. To place a free ad call 416-599-2458, ext. 227.

PARENTING WITH A DISABILITY BULLETIN is a publication of the *Centre for Independent Living in Toronto (CILT) Inc.*

To become a member of the *Parenting with a Disability Network (PDN)* or to submit an article to the PARENTING BULLETIN, contact *CILT* at:

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Funded by



**United Way of Greater Toronto**

ISSN 1481-918X