



**City of Hamilton**  
**ADVISORY COMMITTEE FOR PERSONS WITH DISABILITIES**  
**COMMITTEE**

**Meeting #:** 18-006  
**Date:** June 12, 2018  
**Time:** 4:00 p.m.  
**Location:** Room 192 and 193, City Hall  
71 Main Street West

Loren Kolar, Legislative Coordinator (905) 546-2424 ext. 2604

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**Pages**

**8. DISCUSSION ITEMS**

\*8.1 Guide to Finding Housing in Hamilton for People with Disabilities

**2**

# A Guide to Finding Housing in Hamilton for People with Disabilities

Prepared by the City of Hamilton's Advisory  
Committee for Persons with Disabilities (ACPD)



Hamilton



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## SECTION 1: INTRODUCTION

Finding housing can be a difficult process for people with disabilities. The goal of this guide is to simplify the process by providing resources, information and tools for some of the most vulnerable people in the community.

In June 2017, the Hamilton Spectator published [a story](#) about a woman who experienced this kind of difficulty.<sup>1</sup> She could not find appropriate housing in Hamilton because of a variety of limitations which included the use of mobility devices. The reporter painted a picture of how her life circumstances made the situation more difficult. The story also highlighted that while Hamilton has made considerable progress in supporting the housing needs of people with disabilities, there is still work to be done. The goal of this guidebook is to fill the gaps for people with visible or invisible disabilities who need help navigating the housing system.

Canadian law does not formally recognize the right to adequate housing; however, Canada has signed on and ratified several international human rights treaties that recognize the right to adequate housing such as [Article 25 \(1\)](#) of the United Nations Universal Declaration of Human Rights.

Looking at housing needs in a comprehensive manner is vital to maintain a person's independence and quality of life, especially when they live with a disability. Until recently, housing needs have been categorised only from a bricks and mortar, or single diagnosis, aspect. This guide is informed by Hamilton's [Housing and Homelessness Action Plan](#), which is a

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<sup>1</sup>The long wait for affordable, accessible housing in Hamilton <https://www.thespec.com/news-story/7357112-the-long-wait-for-affordable-accessible-housing-in-hamilton/>



comprehensive 10-year, person-centred plan to make sure that everyone in Hamilton has a home.

This guide builds on the progress of the Action Plan; while the Action Plan offers considerable information and acts as a valuable resource, gaps in access to housing and related services continue for persons with disabilities, including but not limited to:

- Lack of supports with navigating and understanding the housing system
- Lack of housing resources including supply of accessible housing and supports
- Matching people with disabilities with appropriate units and supports
- Income barriers
- Lack of advocacy for people with disabilities
- Accessible housing for marginalized populations who face discrimination

**Please Note/Disclaimer:**

This publication contains general information and is prepared with the best information available at one point in time. For more information, contact an organization listed in [Section 2](#) of this guide. It is important that this guidebook be updated regularly.

**Availability:**

This publication is available at the Community Information Services / Information Hamilton located at Hamilton Public Library

You can also access this guide online at <https://www.hamilton.ca/social-services/housing>



## SECTION 2: GENERAL INFORMATION

The following organizations provide general information about housing and housing services.

Organization	Address / Contact Information	Type of Information
<a href="#">City of Hamilton Housing Services Division</a>	350 King Street East, Unit 110 Hamilton, ON L8N 3Y3 <b>General Inquiries</b> Ph: 905-546-3901 Email: <a href="mailto:housing@hamilton.ca">housing@hamilton.ca</a>  <b>Access to Housing Waitlist</b> Ph: 905-546-2424 x3708 <a href="mailto:ath@hamilton.ca">ath@hamilton.ca</a>	<ul style="list-style-type: none"> <li>• Homelessness &amp; housing first</li> <li>• Home renovations &amp; emergency repairs</li> <li>• Affordable housing</li> <li>• Housing supports</li> <li>• Social housing</li> </ul>
<a href="#">Local Health Integrated Network (LHIN)</a>	270 Main Street East, Units 1-6 Grimsby, ON L3M 1P8 Ph: (905) 945-4930 Email: <a href="mailto:hamiltonniagara.haldimandbrant@lhins.on.ca">hamiltonniagara.haldimandbrant@lhins.on.ca</a> For any questions regarding patient care: 1-800-810-0000	<ul style="list-style-type: none"> <li>• Health supports for Housing</li> <li>• Home and community care</li> <li>• Patient care</li> </ul>
<a href="#">Disability Information Service Program</a>	Hamilton Central Library 55 York Blvd, Hamilton ON L8R 3K1 Ph: (905) 546-3200 ext. 3205	<ul style="list-style-type: none"> <li>• Help &amp; advice</li> <li>• Link to community Services and benefits</li> </ul>



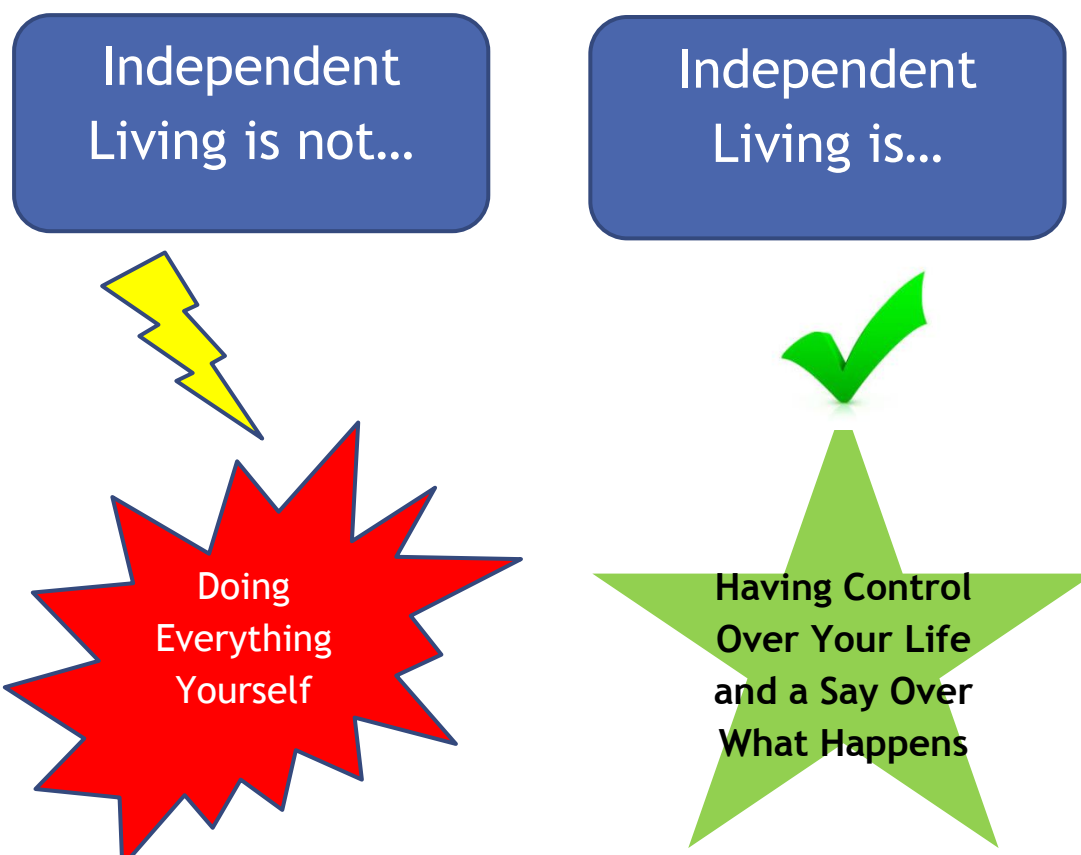
		<ul style="list-style-type: none"> <li>• Assessments</li> </ul>
<a href="#"><u>Hamilton Housing Help Centre</u></a>	<p>119 Main Street East Hamilton, ON L8N 3Z3 Ph: (905) 526-8100 E: <a href="mailto:info@housinghelpcentre.ca">info@housinghelpcentre.ca</a></p>	<ul style="list-style-type: none"> <li>• Housing search</li> <li>• Link to community services</li> <li>• Housing stability benefit</li> </ul>
<a href="#"><u>Canada Mortgage &amp; Housing Corporation (CMHC)</u></a>	<p>Phone: 1-800-668-2642 Email: <a href="mailto:contactcentre@cmhc.ca">contactcentre@cmhc.ca</a>  <a href="https://twitter.com/CMHC_ca">@CMHC_ca</a></p>	<ul style="list-style-type: none"> <li>• Housing data and statistics</li> <li>• Housing development programs</li> </ul>
<a href="#"><u>Hamilton Community Legal Clinic</u></a>	<p>100 Main St E. Suite 203 Hamilton, ON L8N 3W4 Ph: 905-527-4572  <a href="https://twitter.com/HamiltonJustice">@HamiltonJustice</a></p>	<ul style="list-style-type: none"> <li>• Legal advice</li> <li>• Tenant's rights</li> <li>• Help with evictions</li> </ul>
<a href="#"><u>Realtors Association of Hamilton and Burlington</u></a>	<p>505 York Blvd Hamilton, ON L8R 3K4 Ph: (905) 529-8101 Email: <a href="mailto:info@rahb.ca">info@rahb.ca</a>  <a href="https://twitter.com/RAHBNews">@RAHBNews</a></p>	<ul style="list-style-type: none"> <li>• Property search</li> <li>• Buying &amp; selling</li> <li>• Housing market news, data and statistics</li> </ul>
Government of Ontario	<ul style="list-style-type: none"> <li>• <a href="#"><u>Ontario Healthy Home Renovations Tax Credit</u></a> Ph: 1-866-668-8297</li> <li>• <a href="#"><u>Ontario Disability Support Program</u></a> Ministry of Community and Social Services 119 King St. West, 3rd Floor Hamilton ON L8P 4Y7 Ph: (905) 521-7280</li> <li>• <a href="#"><u>Other Grant Programs</u></a></li> </ul>	



## SECTION 3: PERSONAL RESPONSIBILITIES

Everyone wants to maintain his or her independence, but to address housing needs a person needs to know and understand their limitations. They must know what part of the City they want to live in. This is called “due diligence”. Before making a decision, everyone should investigate, gather as much information as possible, and explore all available housing options.

Discuss the housing options with a spouse, children and other family member or close friends. A family doctor should be consulted because he/she may have to fill out parts of an application that refer to limitations and specific needs.





## SECTION 4: TYPES OF HOUSING

This section describes housing options in context for people with disabilities. It is divided into two subsections; types of homeownership and types of rental housing. For people with disabilities who have low incomes, various financial and housing supports are available to support their needs. For more information about housing subsidies available to you please contact the City of Hamilton's [Housing Services Division](#) at 905-546-3901 or [housing@hamilton.ca](mailto:housing@hamilton.ca)

### 4.1 Types of Ownership Housing



Home ownership can become a major concern or be an asset for people living with disabilities.

Some people may own their home but be forced to downsize or move into a more accommodating living situation due to changing needs. For some, paying for maintenance costs, utility costs and taxes may be a constraint.

A homeowner with a disability may have the opportunity to customize their home to make it as accommodating and accessible as possible. One benefit of owning private property is that the owner can modify their home with fewer constraints than exist in a rental situation with a tenant-landlord relationship.

Check with your local real estate office, connect with the [Realtors Association of Hamilton and Burlington](#) by calling (905) 529-8101 or review listings online for availability/purchase of condos throughout Hamilton.



The following are housing options that may be advantageous for people living with disabilities:

#### 4.1.1 - Garden Suite

A garden suite (commonly known as a granny flat) is a pre-made residential structure installed on a one unit basis (up to 20 years) in the backyard of an existing home owned by a family member. It allows an individual with a disability to live independently and remain close to family for mutual assistance. Garden suites are generally allowed in Hamilton, though planning approvals are necessary. Servicing a new garden suite with water and sewer services can be expensive in some situations.

Call the Canada Mortgage and Housing Corporation (CMHC) at [1-800-668-2642](tel:1-800-668-2642) and/or the City of Hamilton Planning Department at [905-546-2720](tel:905-546-2720) for further information.

#### 4.1.2 - Home Sharing

Home sharing is a living arrangement where a number of unrelated people live in a single dwelling. Owners with an extra bedroom can consider renting it for an exchange of money and additional services such as chores and general maintenance. Home sharing can assist financially and/or provide assistance, companionship and a sense of security. For persons with disabilities, this type of living arrangement can save the expense of bringing in specialized services.

While popular elsewhere in Canada and across the Globe, there are limited home share organizations in Hamilton. At present, McMaster University School of Graduate Studies offers a limited Home Sharing program called [MacSymbiosis<sup>2</sup>](#) - a program that connects graduate

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<sup>2</sup> McMaster [Student-Senior Co-housing Program](#)  
[https://gs.mcmaster.ca/sites/default/files/images/gs\\_symbiosis\\_brochure\\_8.5x11\\_v1.11.pdf](https://gs.mcmaster.ca/sites/default/files/images/gs_symbiosis_brochure_8.5x11_v1.11.pdf)



students with seniors in the McMaster community for a mutually beneficial housing relationship. For more information call 647.648.4421 or Email [symbiosiscohousing@gmail.com](mailto:symbiosiscohousing@gmail.com).

### 4.1.3 - Co-housing

Co-housing is a concept where a group of people get together to plan and develop their housing community. It can either be a new-build or an adaptation of an existing building(s).



Residents own their own housing unit, but often share spaces such as dining, laundry and recreational facilities, as well as services.

For instance, support services can be shared among the residents creating efficiencies. In this option, people with disabilities maintain independent spaces and choose to live with friends and share interests and workloads.

Contact the Canadian Co-housing Network at [info-east@cohousing.ca](mailto:info-east@cohousing.ca) or visit [www.cohousing.ca](http://www.cohousing.ca) for further information.

### 4.1.4 - Purchased Condominiums

Condominiums (“condos”) are dwellings (houses, townhouses and apartments) purchased from private housing companies/providers or prior owners.



TOWNHOUSE



An owner is an individual deed holder of a unit and a shareholder of common elements (passageways, gardens, roadways). An individual is responsible for their share of the condominium and you are responsible for selling it when you move. Condos are governed by the *Condominium Act, 1998*. The Canada Mortgage and Housing Corporation offers a variety of free publications including a condo buyer's guide which assists people in understanding some of the complexities that can be involved with condo buying and living.



#### 4.1.5 - Life Lease Housing

Life lease housing is usually owned and managed by a non-profit organization. Residents pay for the right to occupy a unit by purchasing a lease for a period of time for an upfront payment, plus a monthly maintenance fee. Unlike renting, the lease is for a set number of years or for life. When the resident moves out, the lease is sold at fair market value, less a fee. Most life lease communities maintain a waiting list of potential buyers. Application is to the individual life lease building or corporation.

More information on life leasing can be found through the [Ministry of Housing's website](#).

#### 4.1.6 - Renovating Your Home

Renovating a home can help meet a person with a disability's current and future needs as well as assist in maintaining independence. There are an infinite number of arrangements and adaptations a person can make to reduce barriers and achieve increased levels of accessibility. The most suitable modifications depend on an individual's personal circumstances; however, common options include but are not limited to:



- Adding grab bars in the bathroom
- Changing the bath tub to a barrier-free shower
- Installing hand railings or a stair lift
- Modifying kitchen cupboards or counter heights
- Relocating a bedroom to the main floor
- Installing illuminated fire alarms for the hearing impaired

The City of Hamilton has developed guidelines for barrier free design. To obtain more information call [905-546-2424 ext. 8080](tel:905-546-2424) or go to: [cityofhamilton-barrier-free-design-guidelines.pdf](http://cityofhamilton-barrier-free-design-guidelines.pdf)

#### 4.1.7 - Property Tax Assistance

Meeting property tax obligations can become challenging for people with disabilities since expenses increase as physical conditions deteriorate. The City of Hamilton has tax assistance programs available for residential tax payers with disabilities.

**Deferral of Tax Increase Program** - This program allows eligible low-income seniors (65+) to defer property tax increases. The individual must be in receipt of assistance from the Ontario Disability Support Program (ODSP), have a disability and be paid under the Guaranteed Income Supplement (GIS) or the CPP disability benefit.

**Full Deferral of Taxes Program** - In 2018 the City of Hamilton started a new 3-year pilot program that allows a homeowner with a disability to defer the full amount of property taxes (subject to interest) until the property is sold. Eligible households must have a combined income of less than \$33,840 to qualify.

For further eligibility criteria for both programs, and to obtain an application form contact (905) 546-2489 or [www.hamilton.ca/tax](http://www.hamilton.ca/tax)



## 4.2 Types of Rental Housing

Rental housing is a common living arrangement where a tenant pays rent to a landlord in exchange for occupation or part-use of a larger facility.



Rental accommodations can be found in single detached homes, townhouses, or apartment buildings. These may be owned privately (for profit) or by non-profit organizations. Some condominium owners also rent out their units.

Costs for a rental unit will vary. Refer to the [Glossary](#) for more information about market rents and rent-geared-to income.

### 4.2.1- Apartments

Apartments are typically forms of independent living. Apartments can exist in many built forms including but not limited to studios, garden, secondary suites, two-storey flats, maisonettes or lofts. Townhomes, row houses, and semi-detached and single detached homes are also available for rent.

Tenants and landlords have legal rights and responsibilities, most of which are outlined in the *Residential Tenancies Act (RTA)*; however, some regulations exist in other legislation including but not limited to the *Municipal Act*, the *Housing Services Act*, the *Planning Act* and local by-laws.

### 4.2.2 Group Homes

A group home is a residence licensed or funded under a federal or provincial statute for the accommodation of three to 10 persons, exclusive of staff, living under supervision in a single housekeeping unit and who, by reason of their emotional, mental, social or physical



condition or legal status, require a group living arrangement for their well-being

#### **4.2.3 Residential Care Facilities**

Residential Care Facilities (RCFs) are homes where a number of people live together and are provided with care. They often provide housing for elderly people and/or people living with disabilities.

Some residential complexes are occupied by residents for the purpose of receiving 24-hour care services. RCFs include geriatric care homes, psychiatric care homes, and homes for residents with developmental disabilities. A RCF is an example of supported housing. Most of these facilities are privately owned but licensed by the City of Hamilton which means they have to comply with certain health, fire and living standards. Some RCF units are subsidized for people who have low income.

#### **4.2.4 Long Term Care Facilities**

Long term care facilities (sometimes called nursing homes) are institutional buildings for people who can no longer live independently in the community and need access to 24-hour personal and nursing care, sometimes within a secure setting. They include a variety of services and supports for people with disabilities, elderly people and family caregivers. Services and supports include a broad range of personal care, support and health services provided to people who have limitations that prevent them from participating independently in everyday activities.

#### **4.2.5 Retirement Homes (Assistive Living Facility)**





Retirement homes (assistive living facility) provide a fee-based specialty accommodation and communal programmes for seniors who may need some help with activities of daily living.

Retirement homes are usually privately owned and must make available at least 2 of 13 care services as set out by the *Retirement Homes Act* (RHA, 2010) This housing option may be outside the budget for those on a fixed income.

#### 4.2.6 Assisted Living Services (Rental or Ownership)

Assisted living services provide people with disabilities personal/home support services so that they can continue living in their home as their health needs change. Services include assistance with personal care (such as bathing, mouth and skin care), personal support (such as dressing and assistance with premeasured medications), homemaking services (such as light housekeeping and laundry), and home maintenance. Services are provided to clients in their own homes within a geographic service area designated by the Local Health Integration Networks (LHINs) as a “hub”, or to groups of clients in apartment buildings. A variety of private services are also available for a fee.





## SECTION 5: SPECIAL NEEDS/CONDITONS

This section provides a brief overview of common types of conditions and how those conditions can play a role in shaping the housing needs of people with disabilities. It also offers an array of resources to assist people with these conditions access housing and housing supports in the community.

### 5.1 - Circulatory Conditions

The circulatory system describes the heart and blood vessels. There are a number of circulatory diseases including high blood pressure, coronary artery disease, and hypotension (low blood pressure). Persistent circulatory conditions can often result in a person suffering from a stroke or heart disease. Stroke may result in weakness or paralysis, cognitive problems including difficulties with reading, talking and comprehension, problems with vision, depth-perception and short-term memory loss.

Those with circulatory conditions regularly require medication to control their health, so housing with appropriate storage for medication is required. Many people with circulatory conditions require special diets, therefore appropriate appliances and customized kitchen space may be required. Circulatory conditions often require special accommodations in the home such as assistive devices and assistance with care. For those with the most severe circulatory conditions, barrier-free housing that is fully wheelchair accessible may be needed. Housing with appropriate



storage facilities and turning radius' is required for those with assistive devices. Ultimately the goal is to maximize safety and independence.

March of Dimes is one of many community-based rehabilitation organizations for people with circulatory conditions or physical disabilities that occur as a result of a circulatory conditions.


For more information on supports you may contact:

[March of Dimes Canada](#)

20 Emerald Street North, Unit 309

Hamilton, ON L8L 8A4

Ph: (905) 527-6653

 @modcanada

[Heart and Stroke Foundation](#)

1439 Upper Ottawa St Unit 7

Hamilton ON L8W 3J6

Ph: 905-574-4105

[The Hamilton-Wentworth Stroke Recovery Association](#)

70 King Street East, B

Stoney Creek, ON L8G 1K2

Ph: 905-662-7819

Email: [strokerecovery@gmail.com](mailto:strokerecovery@gmail.com)

[AbleLiving Services](#)

565 Sanatorium Road,

Hamilton, ON L9C 7N4

Ph: 289-309-8477

Email: [info@ableliving.org](mailto:info@ableliving.org)

## 5.2 Cognitive/Mental Health

There is a wide range of mental health conditions. Many people with less severe conditions only require limited supports. Supports with activities of daily living such as bathing, eating, dressing, cleaning, toileting,



and/or other personal care are common. On the other hand, individuals with moderate to severe psychiatric or other cognitive impairment often require special care including 24-hour day supervision. Specialized supports are often required to assist individuals who experience challenges with communication and controlling difficult behaviour.

Many with severe cognitive/psychiatric limitations require residential care as the amount of support needed to live independently is not feasible or viable. In addition, many experience gradual declines in ability over time. Living in a residential care facility allows additional 'on-site' services to be added over time to meet the person's needs.

A major concern for those able to live independently or with the assistance of limited supports is safety. People who are on the Autism Spectrum and those with cognitive disabilities may have a variety of limitations such as autism, dementia or brain injuries which may make it difficult for them to understand their environment and other people. Safety is a major issue as they wander. Therefore, in these cases, appropriate locks to secure the residence and medication are needed. Additional safety measures to consider within the home include a secure stove to prevent fires as well as a water heater temperature governor to avoid burns from hot water. Bathroom grab bars and grips and non-skid rugs are also common helpful household features.

For more information on residential care facilities in Hamilton please contact the [Housing Services Division](#) 905-546-3901 and for more information on supports for cognitive/psychiatric conditions you may contact:

[Autism Hamilton](#)

533 Main Street East

Ph: 905 528 8476

E: [lb@autismontario.com](mailto:lb@autismontario.com)

[Alzheimer Society Hamilton and Halton](#)

206-1685 Main St. W., Hamilton L8S 1G5

Ph: 905-529-7030





### [Brain Injury Services of Hamilton \(BISH\)](#)

225 King William Street, Suite 508

Hamilton, Ontario L8R 1B1

Ph: 905-523-8852

E: [info.news@braininjuryservices.com](mailto:info.news@braininjuryservices.com)

## 5.3 Developmental Limitations

There are a wide range of developmental conditions comprised of language disorders, learning disorders, motor disorders and autism disorders. Some conditions are very visible such as cerebral palsy and some conditions are less visible such as dyslexia. These conditions begin in childhood and become more severe over time. Because of visible spastic-like movements or unclear means of communication, individuals may be misunderstood or be regarded as not being smart; this is not the case, as in most circumstances people suffering from these types of conditions are quite intelligent.

It is important for people with developmental conditions to be matched with the type of housing and supports they need. Contacting Development Services Ontario (DSO) is the first step in this process. DSO will assess the condition and housing needs to determine eligibility for programming.

### [Development Services Ontario](#)

140 King Street E. Suite 4

Hamilton, Ontario L8N 1B2

Ph: 905-522-3304 x214 | E: [info@dsohnr.ca](mailto:info@dsohnr.ca)

The DSO will make recommendations to find an environment that will maximize safety, independence and enable people to have a satisfying quality of life. There are several local programmes and housing providers that provide specialized services for people with developmental disabilities. These include but are not limited to:

#### [Choices](#)

59 Kirby Avenue

Dundas, ON L9H 6P3

#### [Indwell](#)

1430 Main St E

Hamilton, ON L8K 1C3

#### [Community Living](#)

191 York Blvd

Hamilton, ON L8R 1Y6



Ph: 905-628-6147 x221  
 @ChoicesDundas

Ph: 1-866-529-0454  
 @IndwellCA

Ph: 905-528-0281  
 E: [info@clham.com](mailto:info@clham.com)

### L'Arche

664 Main Street E.  
 Hamilton, ON L8M 1K2  
 Ph: 905-312-0612  
 E: [office@larchehamilton.org](mailto:office@larchehamilton.org)

### Christian Horizons

4278 King Street E.  
 Kitchener ON, N2P 2G5  
 Ph: 519-650-3241  
 E: [info@christian-horizons.org](mailto:info@christian-horizons.org)

Housing needs for people with developmental disabilities often grow over time. A common challenge is the aging of primary caregivers (typically parents) who may no longer be able to provide the depth and range of supports to meet the needs of the person with the developmental disability. Transitions from receiving in-home supports from a parent or primary care giver to supportive housing are a major challenge in the lives of people with developmental conditions.

## 5.4 Mobility/Physical (Neuro-Muscular Conditions)

This spectrum of limitations for people with neuro-muscular conditions vary. People using mobility devices or with conditions like cerebral palsy have very obvious and visible disabilities. On the other hand, people with early onset multiple sclerosis or forms of neuroglia or epilepsy may not show any visible abnormalities at all.

Tailoring the right kind of housing and supports to suit the conditions of people with these disorders are especially important as physical limitations often require a variety of modifications to the home. It is best practice to speak to your family doctor; they are aware of how a condition will evolve and progress over time and can trigger an occupational therapist to do a home assessment and recommend specific modifications.

Stairs are the most common barrier with mobility restrictions; however, there are many other common features of household design that pose challenges for people with neuro-muscular conditions or physical



disabilities. For example, the height of light switches, the location and height of buttons or knobs on kitchen appliances or the shape of taps can all be limiting factors. Carpeting presents a barrier for people using mobility devices, especially manual wheelchairs. Bathing poses many problems for people with the slightest of mobility issues. Common mobility aids include bathtub assist bars, bath chairs and even ‘roll-in’ showers.

Special housing considerations are needed for some people with epilepsy. For people with epilepsy or a non-epileptic seizure disorder, environmental features in the home like flashing lights on smoke detectors, on appliances or on certain kinds of electronics can trigger serious epileptic seizures. The more disabling or chronic the condition, the greater the need for people to modify their homes to prevent serious injury.

While there are several support groups for particular conditions, the [Community Care Access Centre](#) 1-800-810-0000 is usually the first point of contact. They provide Care Coordinators who set up an initial assessment and they also coordinate ongoing care.

Quite often, major home modifications can be expensive. People with low income who own their own homes can apply for financial assistance through the Ontario Renovates Program. Please contact the City of Hamilton’s [Housing Services Division](#) by phone at 905-546-3901.

For more information on specific conditions:

[Arthritis Society](#)

460 Brant St. Suite 11  
Burlington On L7R 4B6  
Ph: 905-632-9390  
E: [info@on.arthritis.ca](mailto:info@on.arthritis.ca)

[Epilepsy Hamilton, Halton, Peel](#)


2160 Dunwin Drive  
Mississauga ON L5L 5M8  
Ph: 1-855-734-2111  
E: [info@epilepsysco.org](mailto:info@epilepsysco.org)

For more information on housing services for physical conditions:

[Brain Injury Services of Hamilton](#)

225 King William Street, Suite 508  
Hamilton, Ontario L8R 1B1  
Ph: 905-523-8852  
E: [info.news@braininjuryservices.com](mailto:info.news@braininjuryservices.com)

[March of Dimes Canada](#)

20 Emerald Street North, Unit 309  
Hamilton, ON L8L 8A4  
Ph: (905) 527-6653  
 @modcanada



### 5.4.1- Respiratory

## 5.5 Respiratory

There are many common respiratory conditions that affect people such as asthma; however, there are many more severe conditions such as emphysema, chronic obstructive pulmonary disease (COPD) and lung cancer as well. People suffering from some of the more severe conditions have medical equipment to assist with breathing or take medication to control their symptoms. Examples include but are not limited to inhalators, portable oxygen and continuous positive air pressure (CPAP) machines. Even when treated, respiratory conditions can often have a major affect on a person's quality of life.

Living in the right environment is critical for those with a respiratory condition. Known triggers for respiratory distress include air quality, dust, mold, pollen and temperature so it is essential for many to maintain a clean unit as well as live in a building that has high air quality. In situations where the person's lung capacity is diminished, their respiratory functions would benefit from a smoke-free environment.

Organizations such as the [Hamilton Housing Help Centre](https://www.hamilton.ca/housing-help-centre) (905) 526-8100 can assist with housing search. When applying for public subsidized housing, the Access to Housing (ATH) application lists the need for oxygen on its special needs questionnaire but does not ask for the need for smoke-free accommodation. It is important to communicate this to staff at the [City of Hamilton Housing Services Division](https://www.hamilton.ca/housing-services-division) 905-546-2424 x3708 during your application process.



Local programmes providing specialized services for people with respiratory conditions include but are not limited to:

[Firestone Clinic for Respiratory Health](#)

50 Charlton Ave E,  
Hamilton, ON L8N 4A6  
Ph: (905) 522-1155 ext. 36000

[Lung Association](#)

762 Upper James, Suite 278  
Hamilton ON L9C 3A2  
Ph: 905-745-7416  
E:[schapman@lungontario.ca](mailto:schapman@lungontario.ca)

## 5.6 Hearing/Vision Conditions (Sensory)

### Vision

There are many levels of vision loss/blindness. They range from those who can be helped with corrective lenses to those who only have some or no light perception. Vision loss can be genetic or caused by many acute conditions such as stroke, degenerative diseases, cataracts or glaucoma just to name a few. There are also those who have multiple disabilities as well as vision loss which would impact the kind of housing required. This can make it difficult to accommodate an individual's housing needs.

Accessible housing features such as automatic doors, high quality lighting, color contrast in walls and floors and removal of all carpets are typical building design features helpful for those with impairments to their vision. An uncluttered front lobby/entranceway, audible or tactile markings in elevators to indicate the appropriate floor, tactile or large print numbers on doors are more specific building design features that someone with vision loss should look for during their search for appropriate housing.

The [Canadian National Institute for the Blind](#) (CNIB ) provides in-home supports for people with vision loss or impairment. They will complete assessments, perform helpful home modifications such as marking appliances or reorganizing units to make them more accessible and suggesting products to improve independence.







Social isolation is also a major challenge for people with vision loss. Living in a central location near to shops, medical facilities, good transportation and social/recreation activities is preferred and helpful for mobility purposes. The [Canadian Council of the Blind](#) is a social group that meets once a month and is a great place to meet people and get involved in social activities. Activities range from blind golf, bowling for the blind, curling for the blind.

Local specialized services for people with vision loss include but are not limited to:

[Canadian National Institute for the Blind](#) (CNIB)

115 Parkdale Ave S.  
Hamilton, ON L8K 6K4  
Ph: 905-528-8555  
 @CNIB

[Lions Foundation of Canada's Dog's for the Blind](#)

152 Wilson Street  
Oakville, ON L6K 0G6  
Phone: (905) 842-2891  
TTY: (905) 842-1585  
 @LFCDogGuides

[Canadian Council of the Blind](#)

Ph: 1-877-304-0968  
Email: [ccb@ccbnational.net](mailto:ccb@ccbnational.net)

## Deaf, Deafened & Hard of Hearing

Approximately 23% of adult Canadians report experiencing some hearing loss and this number is projected to increase as the average age grows. Hearing loss ranges from mild to profound. Deaf, deafened and hard of hearing individuals may use hearing aids, cochlear implants or other assistive listening devices.

### Deaf



The term “deaf” is generally used to describe individuals with a severe to profound hearing loss, with little or no residual hearing. Some deaf people use sign language, such as American Sign Language (ASL) or Langue des signes québécoise (LSQ) to communicate. Others use speech to communicate using their residual hearing and hearing aids, technical devices or cochlear implants, and/or speechreading.

### **Deafened (or late-deafened)**

The terms “deafened or late-deafened” describe individuals who grow up hearing or hard of hearing and, either suddenly or gradually, experience a profound loss of hearing. Late-deafened adults usually cannot understand speech without visual clues such as captioning/computerized notetaking, speechreading or sign language.

### **Hard of hearing**

Most hard of hearing people can understand some speech sounds with or without hearing aids and often supplement their residual hearing with speechreading, hearing aids and technical devices. The term “person with hearing loss” is increasingly used and preferred.

Deaf and hard of hearing people have unique housing needs. Many people require space that is quiet and/or well lit to properly communicate. End units are often preferred in multi-residential buildings as they are located in areas with less noise and limited hallway traffic. Some of the most important building design features are:

- Security and fire alert systems that are not dependent on alarms.
- Building layouts that do not obstruct visibility
- Doorbells that light-up
- High-speed internet access that enables specialized communications technology



When looking for a home, an interpreter is often needed to compensate for some of the challenges in determining whether a unit meets their needs. Once living in a unit, challenges present themselves when attempting to communicate with the building manager. Upon rent-up, it is important to establish a system of communication and rapport so needs and concerns can be communicated as easily as possible.

### **Deaf-Blindness**

Being deafblind does not necessarily mean that you are totally deaf or totally blind as most individuals who are deafblind have some residual sight and/or hearing. The major challenge with this disability is not as much about the amount of sight and hearing; it is about the combined impact of having more than one sensory impairment.

As the impairments can include both vision and hearing loss, very specific living accommodations are typically needed to accommodate the person's needs. When looking for housing, a community with nearby shopping, medical centres, transportation and audible traffic signals makes it easier to integrate into the community. Within the home or building; an elevator must have Braille and raised numbers on the buttons, if there is no audible floor indicator Braille or raised number is needed outside the elevator door on all floors. Other helpful building design features include flashing and/or vibrating door bells, flashing and/or vibrating fire alarms. Often supports are needed for a variety of community organizations specializing in providing hearing and vision assistance to maximize quality of life.

## **5.7 Bowel / Bladder Conditions**

Gastric or urinary issues are commonplace for people with Crohn's Disease, Irritable Bowel Syndrome (IBS), Bladder or Bowel Cancers, incontinence or those who experience frequent bladder infections.



People with these conditions often have special housing needs, especially with respect to bathrooms. Group homes, residential care facilities and home share facilities are typically challenging places for people with these conditions as bathrooms are shared.

Specialized services and support groups for people with gastric issues include but are not limited to:

[Crohns's and Colitis Canada - Hamilton](#)

Ph: 1-800-387-1479

Email: [hamilton@crohnsandcolitis.ca](mailto:hamilton@crohnsandcolitis.ca)

## 5.8 Emergency Situations

People with disabilities experience emergency situations unique to their conditions. Two key components are prevention and mitigation.

### Emergency Prevention

The best way to deal with emergencies is to stop them from happening in the first place. For people living with disabilities, depending on their condition, there are a number of measures that can be put in place to reduce the risk of or prevent emergencies from occurring; common measures include:

- For people with mobility restrictions, install non-slip rugs, grab bars in the kitchen/bathroom or where needed or other supports that may prevent slips and falls or other unfortunate outcomes that result in emergencies.
- For the visually impaired or those with mobility restrictions, ensure proper and adequate lighting
- For those with disabilities which require medication, using a medication dispensing system prevents missed or inaccurate dosages



- Have a frequency checklist/schedule for regular maintenance for needed assisted devices, appliances or key items in the home
- Have a home security system in place
- All multi-residential buildings are required to have a fire plan. Participating in fire drills or familiarizing with fire routes are good practices for persons with disabilities to establish a fire plan
- Fire departments recommended that anyone using a mobility device not live higher than six floors so emergency personnel can easily evacuate the person in case of an emergency.

### Emergency Mitigation

Another key component is to mitigate the impact of emergencies when they occur. Common ways for people with disabilities to promote harm reduction include:

- Wearing an “Emergency Help” assistance device
- Wearing a [Medic-Alert](#) bracelet
- Pre-programming emergency contacts, medical conditions, in your home/cell phone
- Having a well-stocked maintenance toolkit for important electronics, appliances or assisted devices that require regular upkeep (backup fuses, batteries for hearing aids etc.)
- Having a list of emergency contacts near the telephone (neighbours, friends, family, medical contacts, medication refill/pharmacy, elevator repair, assistive device repair etc.)

### Specific Emergencies

Sometimes hydro can go down for a long period of time and this can pose serious problems for vulnerable people who rely on electricity to power specialized medical equipment. In this case, persons with applicable disabilities should have a plan to connect to a backup generator or ensure batteries are available for respirators or other items that typically rely on



electricity.

A heavy snow fall can pose added difficulties for people with disabilities. Those with respiratory conditions or physical disabilities are particularly challenged to shovel their own snow.



Finding or changing housing is seldom easy especially when it is not a desirable choice. Recognizing that the move to social or subsidized housing is often done under less than ideal circumstances, the first step in coming to terms with the process. Those circumstances, too often, involve a crisis which may range from financial to health and often include both concerns. The crisis is often sudden and unplanned. Both the individual involved, their family and friends are likely to have a difficult time coming to terms with this new reality.

For people with disabilities, housing choices are limited and come with constraints or limitations. This guide attempts to ease the process in searching for and selecting housing. Discussion regarding the variety of medical conditions and health concerns including mental health, addictions, low income or poverty and chronic conditions acknowledges that these concerns are complicated and multi-factorial. These factors present trade-offs between meeting needs and the costs associated with finding new accommodations or adapting existing living conditions.

### Key Factors in Decision Making

**Person-Centeredness** - focuses on placing the person at the center of all factors considering their needs including their unique economic, cultural and gendered experiences. This approach has demonstrated value and is widely adopted within medical and



health care (Mayo Clinic, Ottawa Hospital Research Institute, CIHI, E-health) as well as in [Hamilton's 10-year Housing and Homelessness Action Plan](#).

**Balancing Needs and Wants** - sometimes it is challenging to determine the difference between a need and a want. With limited access to resources, a thorough discussion about personal circumstances, conditions and available resources allows people with disabilities to come to terms with what is needed. Prioritization assists in navigating through crisis situations, preventing on-going stress and concerns around funding suitable housing and supports.

**Cost-effectiveness** - in this context focuses on maximizing meeting the needs of people with disabilities while minimizing the costs without compromising quality.



### **An Example of Decision-Making & Housing:**

Judy, 61, has a chronic respiratory condition. Her condition requires her to have access to a suitable breathing environment to meet her needs. Judy works at home as a freelance transcriber and earns just about \$20.00/hour

In Judy's housing search, she worked with her family and upon the advice of her doctor selected a recently built smoke-free unit in a duplex on the southwest mountain, an area of the City away from the industrial core.

The rent, while higher than a similar unit she found in the lower-city, was well worth the price in exchange for the better air conditions. Because of the slightly higher rents, Judy has decided to forgo investing in a central air system and will settle with her window air conditioning unit until she can save for the system she wants.

## **SECTION 7: RESPITE CARE**

Respite services give primary caregivers a temporary break from the routine of providing care to the person they are caring for with a disability. Caregivers, whether family or health care professionals, are sometimes unable (or unwilling) to provide full-time or round-the-clock supports. Most people living with a disability have a daily routine that they prefer to maintain. On the other hand, the person receiving care may need a temporary change of type of care; there are agencies which exist that provide respite care in these cases. There are agencies specialize in providing supports to people who live in a private unit and can come anywhere from once-a-day to once-a-week or on an 'as-





needed' bases basis to provide needed services and care.

Some agencies require a vulnerable or disabled person to be moved to a centralized setting to provide care. This is especially the case for extended care. Often there are waitlists and queueing which require appropriate advanced planning in order to get the care and supports needed in a timely manner.

[Community Care Access Centre](#) 1-800-810-0000 is the main service agency; however, [other organizations](#) such as [Community Living](#) 905-528-0281 are available as well.

### [Von Canada Respite Services](#)

414 Victoria Ave N, Suite M2

Hamilton, ON

L8L 5G8

Ph: 905-529-0700 or 905-523-1055

Email: [national@von.ca](mailto:national@von.ca)

## SECTION 8: SAFETY FEATURES TO CHECK

During a housing search, there are a number of features which may be particularly important to consider for people with disabilities. Properly considering these elements will maximize the ability for housing to be tailored to suit the needs of the person living within.

**Accessibility to the Home for Care Providers** - It is important for people with disabilities to have strike the proper balance between having accessibility for caregivers while preventing against strangers or unwanted solicitors entering their home. Some common safety features include windows in or next to the front door to help identify whoever knocks. Key



boxes are recommended over hiding keys outside the home for care providers. High-rise and multi-res buildings present some different challenges insofar as many use an intercom system to notify tenants and security cameras to monitor who comes in and out of the building. It is important these are functional and accessible so caregivers can access the units inside. Automatic doors are often activated by accessibility buttons or keys or fobs where residents should be careful to advise caregivers not to allow piggybacking (the practice where 2 people enter through a door where there has only been one security swipe).

**Alarms** - Some buildings have alarms located on each floor while other have them within each unit. It is important to tailor the alarm needs to suit the type of condition (visual alarm for deaf / audio alarm for visually impaired)

**Appliances** - in the kitchen should be located at accessible heights and distances. Countertops and cupboards, taps, sinks, buttons/knobs on stoves and ovens.

**Common Spaces** - Accessibility considerations must also be made in building where there is public office, public meeting rooms, laundry facilities and washrooms

**Computer/Cell-Phone** - Having access to modern technological devices can assist in staying informed about emergencies. These devices can also act as tools in communicating with others about personal emergencies. Based on their location, units and buildings vary by their quality of cell-phone reception. Internet access varies as well as some buildings provide wi-fi in common areas.

**Elevators** - should be large enough for ambulance stretcher or a wheelchair to turn around. The buttons should be lit and have a tactile surface, ideally



braille. Some elevator systems use audio to assist those with visual disabilities. The number of elevators should also be considered.

**Colour Contrast** - is essential for people who have visual impairments to recognize corners and doorways and stairs.

**Fire Drills** - should be conducted regularly involving an evacuation procedure for people with disabilities. Accommodations should be made for the hearing and visually impaired.

**Flooring** - has many varieties such as hardwood, tile and carpeting or a combination of all. Hardwood, properly laid is the best for people using mobility devices. The same applies to tiles. Even well-laid carpeting can be a problem for people using mobility devices. Scatter rugs, no matter the size can be a tripping hazard, especially for people with limited vision or mobility difficulties

**Grab Bars and Handrails** - need to be installed properly to be effective. Ideally, an occupational therapist should help with personal placement, in addition to referencing barrier-free guidelines. Handrails are essential for all stairways. They are made of a variety of materials, and should be installed with the proper grip to be really safe.

**Height of Building** - has many safety considerations. Even a few stairs can be insurmountable for people with severe mobility challenges. Fire departments recommended that anyone using a mobility device not live higher than six floors so emergency personnel can easily evacuate the person in case of an emergency.

**Height of Intercom** - Can pose a problem for a person sitting in a wheelchair.



**Smoking** - There are a number of safety and health issues for people with disabilities related to smoking. It is a particular concern for people with respiratory issues.

**Sprinkler Systems** - A good practice to consider in housing search is to prioritize buildings with sprinkler systems as they can prevent against risk in the case of a fire. Systems should be in all multi-residential buildings.

**Storage Space** - The volume varies in each housing unit. People with disabilities may have unique storage needs for mobility devices or other needs. Often, designated space in other parts of the building pose problems for people with a variety of limitations so in-unit space is required.

**Stairs (or ramps)** - Need to be well constructed with wide treads and regular risers. Any carpeting will shorten the tread and may cause slipping/falling. Ideally each step should have a tactile or any slip edge.

## SECTION 9: FREQUENTLY ASKED QUESTIONS (FAQ's)

**Q: Who do I call if I need accessible housing**

**A:** Every situation is unique. For more information contact an organization listed in [Section 2](#) of this guide.

**Q: How do I identify my needs?**

**A:** Everyone's needs are unique. A good first step is to discuss your situation with your spouse, children and other family member or close friends. A family doctor should be consulted because he/she



can advise, direct or provide a referral to an agency or organization that can specifically assess your limitations and specific needs.

**Q: What do I do when my needs change?**

**A:** it is important to stay in touch with your health care and housing providers so they can be responsive to changes in your condition. It is not always easy to quickly accommodate changing needs. Sometimes there are trade-offs between getting access to additional services and care and maximizing independence.

**Q: Who do I contact to assist about completing an assessment to make my home more accessible?**

**A:** Contact staff at the [Disability Information Service Program](#) (905) 546-3200 x3205 at the Hamilton Central Library. Program staff will assist in making arrangements for an in-home assessment.

**Q: Where do I apply for grants to assist me in adapting my living space to make it more accessible?**

**A:** The Homeowner Ontario Renovates offers financial assistance to low-income households who own and occupy substandard housing to enable them to repair their dwellings to a minimum level of health and safety.



The Person with Disabilities Ontario Renovates offers financial assistance to households occupied by persons with disabilities who require special modifications to improve accessibility to their residence.

Assistance is provided as a 10-year forgivable loan up to a maximum of \$20,000 to assist with the cost of certain work required to the home. Modifications to increase accessibility including but not limited to:

- permanent installations of ramps, handrails, chair and bath lifts,
- height adjustments to countertops
- cues for doorbells/fire alarms

For more information, or to apply, contact program staff the City of Hamilton's Housing Service's Division by Email:

[housing@hamilton.ca](mailto:housing@hamilton.ca) or by Phone (905) 546-2424 x2758

**Q: Who do I call about pests (bed bugs, cockroaches, ants etc.) in my unit?**

**A:** Every landlord is responsible for examining a housing unit for pests and arranging for the appropriate treatment. If you are a person with a disability you may need someone to help you prepare for the treatment. If you have limited income, you can contact the [Hamilton Housing Help Centre](#) (905) 526-8100 who offers supports for qualified households.

If your landlord is not cooperative, you may need to contact the [Public Health Department](#) (905) 546-2489 who can assist in resolving the matter up to and including issuing a work order.

**Q: How do I ensure the unit I am moving into is free of pests (bed**



bugs, cockroaches, ants etc.)

**A:** The City of Hamilton offers a useful website which provides some helpful tips, tools and preventative practices on pests. To access the information follow the link below:

<https://www.hamilton.ca/home-property-and-development/pest-control/bed-bugs>

**Q: Who do I contact about an unresolved maintenance problem in my building?**

**A:** It is important that you have every complaint made to a landlord about a maintenance issue written and dated as verbal complaints cannot be tracked.

The City of Hamilton Property Standards Department should be contacted to resolve the matter up to and including conducting an inspection or issuing a work order. If this approach does not fully resolve the matter, tenants can contact the [Landlord Tenant Board](#) 1-888-332-3234 for further assistance

**Q: Who do I call if I want information about the Social Housing waitlist or help filling out my waitlist forms?**

**A:** Call the Housing Services Division Access to Housing Line

Ph: 905-546-2424 x3708 or contact them by email at:  
[ath@hamilton.ca](mailto:ath@hamilton.ca)

**Q - Should I advise my building manager about my disability? If so, how?**



**A:** Yes, this is good practice in the event of an emergency. You may provide your building manager or live-in superintendent with details about your condition and contact information of who they should call in the event of an emergency.

**Q - How are service dogs accommodated?**

**A:** Service Animals are allowed in all public buildings. When searching for a suitable housing location, service dog owners should look for a space that can accommodate the needs of the animal (adequate space, amenities, nearby parkland etc.)





## SECTION 10: GLOSSARY

### Legend:

Housing	Frequently used terms	Equity and Inclusion
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### Glossary of Terms to Help You Use this Guide

<b>Abuse</b>	May be defined as the physical, psychological, social or financial mistreatment. Neglect is frequently associated with abuse.
<b>Ableism</b>	<p>It is a set of cultural, institutional and individual practices and beliefs that assign different values to persons who have various kinds of disabilities. It is a form of discrimination, prejudice and social exclusion based on a person's abilities, whether developmental, learning, physical, psychiatric or sensory, which devalues and disregards persons with disabilities.</p> <p>It is derived from the unconscious or conscious practice of setting the needs of persons without disabilities as the norm for the provision of programs, services and opportunities. It is coupled with a belief in the inherent superiority of those</p>



	<p>who do not have a disability. As a result of these beliefs and behaviours, facilities and programs may not be accessible to persons with disabilities.</p>
<b>Access or Accessible Buildings</b>	<p>A person with a disability is, without assistance, able to approach, enter, pass to and from, and make use of an area and its facilities. (BC Building Code, 1992)</p>
<b>Access</b>	<p>Ensuring that the basic needs of everyone is met through the removal of barriers to services, programs, opportunities, resources, information, and decision-making, which is essential to maintaining and improving their quality of life and sense of belonging.</p>
<b>Accessibility</b>	<p>When this term is used in relation to human rights concepts, it implies that all groups and individuals should be able to participate fully in all, programs, services and opportunities free of barriers and limitations.</p> <p>There are many kinds of disabilities such as physical, psychological, mental, learning disabilities and can be visible, non-visible, permanent, temporary, or occur only at certain times.</p> <p>It is often used with specific reference to the needs of persons with disabilities.</p>



<p><b>Accessibility for Ontarians with Disabilities Act (AODA)</b></p>	<p>The AODA was enacted in 2005. This legislation is intended to benefit all Ontarians by developing, implementing and enforcing accessibility standards in order to achieve accessibility for Ontarians with Disabilities, with respect to goods, services, facilities, accommodation, employment, buildings, structures and premises, and to ensure equal citizenship and full human rights.</p> <p>The Accessibility standards (Customer Service Standard, Integrated Accessibility Standards (Information &amp; Communications Standards, Employment Standards, Transportation Standards) and Built Environment Standards) set out requirements, to which municipalities, businesses and organizations are legally required to comply.</p>
<p><b>Accommodation (verb)</b></p>	<p>The act of accommodating. Housing is designed in a way to maximize the removal of barriers that may exist for persons with disabilities; and, housing services are provided in a way to maximize the inclusion of people with disabilities or in need of assistance.</p> <p>“Housing providers” includes landlords and other responsible parties, such as governments or agencies that provide housing-related services</p>



<p><b>Adaptable Housing</b></p>	<p>Housing that looks like traditional housing but has features designed and constructed for easy modification and adjustment to suit the needs of any occupant- seniors, children, people with disabilities.</p>
<p><b>Accountability</b></p>	<p>It means that people (elected officials, managers, staff, and contractors) are held responsible for carrying out a defined set of duties or tasks, and for conforming with policies, rules and standards that are applicable to their jobs and responsibilities.</p> <p>It is being responsible, liable, or answerable to the actions taken by an individual or organization.</p>
<p><b>Affordable Housing</b></p>	<p>Housing for lower and middle income households. A common measure of affordability is households pay no more than 30% of their household income for housing.</p>
<p><b>Ageing in place</b></p>	<p>Is coordination in the delivery of housing, healthcare and services in order to create and maintain livable communities that respond to the changing needs of people as they get older.</p>
<p><b>Ageism</b></p>	<p>Attitudes, labels and behaviours that make assumptions about persons and their abilities based on their age.</p>



	Is a way of thinking of older people based on negative stereotypes about ageing, and structuring society as if everyone is young. (Ontario Human Rights Commission)
<b>Amenity</b>	Is a desirable or useful feature or facility of a building or place. Synonym: facility, service, convenience, resource, appliance, aid, comfort, benefit, etc., such as bus stop, drug store, grocery store, library, schools, etc. (Thesaurus)
<b>Anti-Racism</b>	Beliefs, policies and practices that have been put together, designed, adopted or developed in order to identify, isolate and counteract the impacts of racism and to prevent or diminish the oppression of racialized communities, groups and individuals.
<b>Apartment (Apt.)</b>	A self-contained (kitchen, bathroom and living space) unit. It is in a building with a few or many other units.
<b>Appliances (Appl.)</b>	Include but are not limited to: washer and dryer, refrigerator, stove, dishwasher. Often most or some or all of the appliances are included in your rent. The most common appliances included in rents are refrigerators and stoves.
<b>Assistive Devices</b>	Compensatory equipment used to overcome a physical or sensory disability including hand held, electronic or prosthetic aids.



<b>Bachelor (Bach.)</b>	A one room unit - living room, dining room and bedroom. The kitchen may either be in the main room or in a small separate room. The bathroom is usually a separate room.
<b>Barrier</b>	A barrier is defined as "anything that prevents a person with a disability from fully participating in all aspects of society because of their disability. It includes a physical barrier, an architectural barrier, an informational or communications barrier, an attitudinal barrier ... a policy or a practice barrier." (Ontarians with Disabilities Act, 2001).
<b>Attitudinal Barriers</b>	Are about our assumptions, beliefs, thoughts and fears. Attitudes can be shaped by our knowledge, previous experience, stereotypes and what we hear and see from media and others. Attitude can significantly impact how we view, interact and treat people with disabilities.
<b>Architectural or Structural Barriers</b>	May result from design elements of a building such as stairs, doorways, the width of hallways and room layout. Every day practices such as where we store boxes, if accessible pathways are obstructed, how we layout the office or a meeting room can also create barriers.
<b>Information or Communication Barriers</b>	Affect access to public information, opportunities to express oneself and access to essential services. Communication barriers interfere with the ability of people to participate in life and obtain services. Only providing material in small print,



	low colour contrast between text and background, or not facing the person when speaking- can make it difficult for a growing number of people to receive or convey information. Only accepting information in paper format, and not allowing or using electronic communication and information sharing can equally present barriers to people with a range of disabilities.
<b>Barriers (Related to Technology)</b>	Technological barriers can prevent people from accessing information. Common tools like computers, telephones and other aids can all present barriers if they are not set up or designed with accessibility in mind. Using only recorded messages, sending out documents or information as images or inaccessible pdf's, requiring people to use an online service but having an inaccessible website can all create barriers for people with disabilities.
<b>Barriers (Systemic)</b>	Arise when policies, practices and procedures support some groups without considering or understanding the needs of others. Having policies that treat everyone the same, regardless of circumstance can create barriers for some groups. For example, a policy that does not allow for people to obtain a copy of a document ahead of the actual meeting can create barriers for people with vision loss or learning disabilities who may not be given the opportunity to read or review the document.



<b>Bias</b>	An inclination with little or no justification towards or against an individual or group that affects the way one sees them.
<b>Bigotry</b>	Intolerant prejudice which tends to glorify one's own group while denigrating members of other groups.
<b>Built-environment</b>	Refers to more than just buildings. It includes sidewalks, streetscapes, outdoor areas and any space we make for people to use.
<b>Canadian Charter of Rights and Freedoms</b>	This legislation which falls under the Constitution Act of 1982 guarantees the rights and freedoms of all Canadians. In particular, it states that everyone is entitled to fundamental freedoms protects everyone's right to be treated fairly, without discrimination.
<b>Classism</b>	A system of beliefs and cultural attitudes that ranks people according to economic status, family lineage, job status, level of education, and other divisions. Middle-class and owning- or ruling-class people (dominant group members) are seen as smarter and more articulate than working-class and poor people (subordinated groups). In this way, dominant group members (middle-class and wealthy people) define for everyone else what is "normal" or "acceptable" in the class hierarchy. Systems of policies and practices that are set up to





	benefit the upper classes at the expense of the lower classes, resulting in drastic income and wealth inequality
<b>Culture</b>	<p>A shared set of ideas, beliefs, customs, values, traditions and beliefs among a group of people. The term can apply to an organization or to a group that subscribe to a common language, religion, history or social norms.</p> <p>Cultural groups are distinguished by a set of unspoken rules that shape their people's values, beliefs, habits, patterns of thinking, behaviors and styles of communication.</p>
<b>Communication</b>	A means of providing information in a variety of formats, such as audio tape, braille, print and speech.
<b>Co-operative Housing (CO-OP)</b>	Housing that operates on a not-for-profit basis. Those living there are members. They help to manage and run the property.
<b>Deposit (Dep.)</b>	Money that a tenant may have to give to a landlord to hold/reserve a rental unit.



<p><b>Dignity</b></p>	<p>Providing services in ways that allow people to maintain his or her self-respect and the respect of other people. It means not treating persons with disabilities as an afterthought of forcing them to accept lesser service, quality or convenience. It means understanding and respecting the various ways people can effectively access and use services.</p>
<p><b>Disability</b></p>	<p>A disability is any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect or illness.</p> <p>May also lead to physical reliance on a service animal or on a wheelchair or other remedial appliance or device.</p> <p>A disability can also be invisible such that it can be a condition of mental impairment or a developmental/learning disability, a mental disorder, or an injury which may place a person at a disadvantage or may interfere with work or personal activities.</p>
<p><b>Discrimination</b></p>	<p>Is different treatment or practice either intentional or otherwise that can occur through action, policy, procedures or practice.</p> <p>Discrimination is the denial of equitable treatment, human rights and opportunities. Discrimination can be practised on the basis of race, nationality, ethnicity, gender, sexual</p>



	orientation, age, religious or political affiliation, marital or family status, or disability.
<b>Diversity</b>	<p>Diversity recognizes the broad variety of differences, similarities, backgrounds and life situations among individuals and groups of people that exist.</p> <p>Diversity can include differences in culture, education, class, perceived racial heritages, age, heritage, religion, ancestry, colour, citizenship, gender, sexual orientation, ethnic origin, abilities and disabilities, marital, parental or family status, literacy, geographical location, income, and work experience.</p>
<b>Duplex/Triplex/Multiplex</b>	<p>Duplex - a building with 2 units</p> <p>Triplex - a building with 3 units</p> <p>Multiplex - A building with several or many separate units</p>
<b>Emergency Shelter</b>	A temporary place you can go if you don't have a home and need somewhere to sleep.
<b>Equal/Equitable Opportunity</b>	<p>Providing services in a way that allows individuals with disabilities to have the same chances, options, benefits and results of services as others. It means that persons with disabilities should not have to make significantly more effort to access or</p>



	obtain service or accept lesser quality or more inconvenience.
<b>Equality</b>	Equality is based on the concept of ‘fairness’, whereby everyone has the same means to a desired end. However, equality does not always assure equal outcomes because individual abilities, capabilities and access to resources, power and privilege vary. See <a href="#">Equity</a>
<b>Equity</b>	Equity ensures that differentiated treatment is required to meet the needs of marginalized groups and to ensure equal outcomes for diverse groups across our society and help reduce the barriers or deficits faced by a specific group.
<b>Ethnicity</b>	<p>Ethnicity is a social construct which categorizes people into social groups based on characteristics such as a shared sense of group membership, values, behavioural patterns, language, political and economic interests, history and ancestral and/or geographical origins.</p> <p>Some examples of different ethnic groups are: Caribbean peoples; African Canadians; Haitians; Chinese, Korean, Vietnamese; Cherokee, Mohawk, Navajo; Cuban, Mexican, Puerto Rican; Polish, Irish, Swedish.</p>
<b>Eviction</b>	The Residential Tenancies Act allows a landlord to evict a household for reasons including:



	<ul style="list-style-type: none"> <li>• Non-payment of rent or persistent late rent payments</li> <li>• Damage to the unit</li> <li>• Conducting illegal activity within the unit or building</li> <li>• Excessive noise</li> <li>• Safety matters</li> <li>• Over-occupancy (too many persons in the unit)</li> <li>• If the landlord wishes to use the unit for themselves or their family</li> </ul> <p>A person cannot be evicted for living with a disability. There are remedies and resources for people with disabilities need assistance with matters related to evictions including rent repayment plans, interpretation services and appeals through the Landlord Tenant Board. (RTA, 2006)</p> <p>City Housing Hamilton has an Eviction Prevention Policy <a href="#">Click here for more information</a></p>
<p><b>Harassment</b></p>	<p>Persistent, ongoing communication in any form of negative attitudes, beliefs or actions towards an individual or group with the intention of placing that person in an unfavourable role. Harassment is manifested in name-calling, jokes, slurs, graffiti, insults, threats, discourteous treatment and written or physical abuse</p>



	Bill 168, Amendment to the Occupational Health and Safety Act to include workplace violence and workplace harassment
<b>Health Status</b>	A state of complete physical, mental and social well-being, and not merely the absence of disease or infirmity. (WHO, 1986)
<b>Holistic</b>	The treatment of the whole person, taking into account mental and social factors rather than the symptoms of a disease.
<b>House</b>	A unit that usually has a yard and is separated from other units.
<b>Identity</b>	<p>Refers to how people are understood or perceived by others in society. Identity is related in one way or another to a description of a person, and how that person fits into his/her social group(s) and the larger society.</p> <p>An individual's sense of identity is constantly developing, shifting, and evolving in relationship to history, institutional power, the shifting beliefs of the dominant culture, the individual's own personal development, and the actions of other social groups to create change.</p>



<b>Impairment</b>	Any disturbance or interference with the normal structure and functioning of the body, including the systems of mental health (WHO). This may or may not be a disability, for example high blood pressure would be classified as an impairment but not a disability.
<b>Independence</b>	Providing service in a way that ensures people are able to do things on their own, in their own way, without unnecessary help, interference or influence from others. It means providing individuals with the freedom to make their own choices about how to receive service.
<b>Integration</b>	Providing service in a way that allows the person with a disability to benefit from the same services, in the same place and in the same or similar way as others. It means that policies, practices and procedures are designed to be accessible to everyone including people with disabilities. It is a seamless continuum of services.
<b>Interpreter</b>	Is a trained person who can use sign language to communicate with people with hearing impairments. This can also be a person who can speak more than one language and can converse with people who speak different languages.
<b>Intervenor</b>	Is a trained person who can help a deaf or blind person adapt to his/her environment.



<b>Landlord</b>	A person who rents out housing (apartments, townhouses, rooms, etc.). Landlords are responsible for collecting rent and keeping the housing in good condition. The landlord may use a property manager to operate the property.
<b>Landlord and Tenant Board (LTB)</b>	Like a court, the Landlord and Tenant Board settles disagreements between landlords and tenants using the Residential Tenancies Act (2006).
<b>Last Month's Rent (LMR)</b>	<p>Money that you may be asked to pay to the landlord when you first rent your unit. It must be equal to or less than your monthly rent.</p> <p>If you pay LMR it is typically used to cover your final rent payment upon moving out of your home; should the LMR be less than the current rental amount, you only owe the balance. Any deposit you pay should be applied to your last month's rent. A landlord is allowed to ask for the last month's rent when you move into a unit.</p> <p>Receipts are available for rent as well as LMR</p>
<b>Lease</b>	<p>A written contract that you and a landlord both sign. A lease will outline things like:</p> <ul style="list-style-type: none"> <li>• how much your rent is</li> <li>• when you are to pay your rent</li> <li>• what is included in your rent</li> </ul>





	<ul style="list-style-type: none"> <li>You must be given a copy of the lease. A typical lease is for a term of 1 year or more.</li> </ul>
<b>Long Term Care</b>	Includes a variety of services for elderly people, people with disabilities and family caregivers. It refers to a broad range of personal care, support and health services provided to people who have limitations that prevent them from participating independently in everyday activities.
<b>Long Term Care Facilities</b>	Sometimes called nursing homes are institutional buildings for people who can no longer live independently in the community and need access to 24- hour personal and nursing care, sometimes within a secure setting.
<b>Market Rent</b>	Rent that is not subsidized and set according to the local economic conditions.
<b>Modifications (Modified Units)</b>	<p>Usually refers to pre-existing housing that has been changed to meet the particular needs of a person (such as assist bars in the washrooms). Most do not have widened doorways or turning radius for wheelchair use.</p> <p>Application forms for social housing include a section where the applicant can specify accommodations that they require to meet their needs.</p>



	<p>The Person with Disabilities Ontario Renovates Program offers financial assistance to households occupied by persons with disabilities who require special modifications to improve accessibility to their residence. <a href="#">For more information about the Ontario Renovates Program click here</a></p>
<p><b>Non-Profit Housing</b></p>	<p>Housing provided by community agencies that don't make a profit.</p>
<p><b>Ontario Human Rights Code</b></p>	<p>This legislation provides protection from discrimination and harassment at work, including in housing, and in the receipt and delivery of services, and contracts because of race, colour, heritage and ancestry, country of origin, ethnic background, citizenship, creed (religion), gender, disability, sexual orientation, age, marital or family status, or receipt of public assistance.</p> <p>For more information on the Ontario Human Rights Code please call 1-800-387-9080 or visit their website <a href="http://www.ohrc.on.ca">www.ohrc.on.ca</a></p>
<p><b>Ontario Disability Support Program (ODSP)</b></p>	<p>A program that provides people with a disability and their families financial assistance and benefits.</p> <p>ODSP applications are started by telephone or <a href="#">on-line</a>. If you need financial assistance right away, it is better to apply for Ontario Works (OW) first as applying for ODSP is a longer process. OW will help you to apply for ODSP.</p>



<p><b>Ontario Works (OW)</b></p>	<p>A program that provides financial help and benefits to eligible people with little or no income. OW applications are started by telephone or <a href="#">on-line</a>.</p> <p>You should apply as soon as you have a need. You will only get money from the date you make the call or submit the application.</p>
<p><b>Persons with Disabilities</b></p>	<p>Persons with disabilities are individuals experiencing difficulties in carrying out the activities of daily living due to a long-term or recurring physical or mental condition.</p> <p>There are a wide variety of disabilities that include physical, mental, audio-visual, developmental or psychological and psychiatric disabilities.</p> <p>Persons with disabilities may experience discrimination differentially because they have different types of disabilities and therefore have different, varying and often unmet needs.</p>
<p><b>Personal Care Worker (PCW)</b></p>	<p>Personal care workers assist in the daily care of elderly or disabled individuals. They can live in the individual's home or live outside the home and make regular and frequent visits. They specialize in providing day-to-day care. Job duties may include housekeeping, food preparation, bathing and shopping</p>



<b>Private Market Rental Housing (Market Rent)</b>	<p>Housing that isn't government or subsidized housing but is a private business. It can include but is not limited to:</p> <ul style="list-style-type: none"> <li>• apartments</li> <li>• townhouses</li> <li>• duplexes</li> <li>• triplexes</li> <li>• houses</li> </ul>
<b>Post-Dated Cheques</b>	<p>Cheques dated for some time in the future. These cheques can't be cashed until the date that is written on them.</p>
<b>Quality of life</b>	<p>Refers to a person's sense of well-being and satisfaction in the context of the culture and value systems in which they live, and in relation to their goals, expectations, standards and concerns (WHO).</p>
<b>Rent</b>	<p>Money that a tenant pays a landlord for the right to live in a rental unit. Depending on your lease you may pay rent</p> <ul style="list-style-type: none"> <li>• weekly</li> <li>• bi-weekly</li> <li>• monthly</li> </ul>



<b>Rent-Geared-to-Income (RGI) or Social Housing/Subsidized Housing/ Public Housing</b>	Housing paid for partly by the government or a community agency. The amount of rent is based on your household income. public
<b>Residential Tenancies Act (RTA)</b>	The law that sets out rules for tenants and landlords in Ontario.
<b>Rooming House</b>	Licensed by the City. Housing where tenants have their own rooms but share kitchens, bathrooms and/or common areas.  Rooming houses don't provide care for their tenants.
<b>Semi-Detached Unit</b>	Two self-contained (your own kitchen, bathroom and living space) units attached side by side.
<b>Service Animal</b>	Any animal trained to help a person with a disability with activities related to daily living. Conditions service animals can assist with include: visual impairments, epilepsy, diabetic conditions, autism and others.
<b>Social Determinants of health</b>	Refer to factors that affect the quality of life of a person, such as income and social status, social support network, education and literacy, employment/working conditions, social environment, physical environments, personal health practices and coping skills, healthy child development, biology and genetic endowment, health services, gender and culture (National Health Forum, 1997)



<p><b>Social Housing</b></p>	<p>Provided to households for whom affordability is an issue. It is administered by housing providers made up of private non-profit corporations, municipally owned non-profit corporation and non-profit cooperative housing corporations (co-ops). A subsidy is provided so that households only spend 30% of their income on rent. For some people with low income, a rent subsidy is providing to live in a unit in a private market rental building. This subsidy is referred to as a rent supplement (RGI) or a housing allowance (flat rate reduction), (City of Hamilton Housing and Homelessness Action Plan 2013)</p>
<p><b>Special Priority</b></p>	<p>The Housing Services Act requires that special priority applicants ranks ahead of all other applicants on the centralized waiting list for RGI housing and a housing provider's internal transfer list. Status is granted through an approval process by Service Managers to applicants or in-situ tenants who have experienced abuse where the abuser is someone they live with or recently separated from or someone sponsoring the abused individual as an immigrant.</p>
<p><b>Statuses (on the Access to Housing Waitlist)</b></p>	<p>There are 6 categories on Hamilton's waiting list. Application forms in each area provide details on the processes.</p> <ol style="list-style-type: none"> <li>1. Special Priority Status (SPP)</li> <li>2. Urgent Status (the terminally ill fall into this category)</li> </ol>



	<ul style="list-style-type: none"> <li>3. Homeless Status</li> <li>4. Newcomer Status</li> <li>5. Youth Status</li> <li>6. Chronological Status</li> </ul> <p>For more information about each Status type <a href="#">click here</a></p>
<b>Suitability</b>	One size does not fit all
<b>Supported Housing</b>	A person receives care from one or more agencies coming into the home environment. For example, services can include Personal Care Workers (PSW), Physiotherapist, homemakers & cleaning services, meal preparation services etc.
<b>Supportive Housing</b>	Housing where services are provided to tenants. This can include help with home maintenance, daily activities or health care. A residential care facility is an example of supportive housing.
<b>Tenant</b>	A person who lives in a rental unit and is responsible for paying rent to the landlord.
<b>Transitional Housing</b>	Long-term but non-permanent stay to help build housing independence.
<b>Townhouses</b>	Self-contained units (your own kitchen, bathroom, bedroom and living space) attached side-by-side in a row or a square.



	They can also be stacked one on top of the other, but have their own outside entrance.
<b>Unit (Dwelling Unit)</b>	A self-contained living space (your own kitchen, bathroom and living space). A unit can be an apartment, townhouse, semi-detached house, house or room.
<b>Universal design</b>	<p>Provides product, environment, building design and construction that aims to accommodate the functional needs of everyone, including children, adults and seniors, with or without disabilities.</p> <p>The word universal is often seen coupled to specific design environments or products such as universal kitchen design or universal bathroom design.</p>
<b>Utilities</b>	Water, electricity, hydro, gas, etc. Sometimes the costs of utilities are included in the rent and sometimes they are not. This should be a key question for tenants when speaking with landlord when considering renting a unit.
<b>Visitability</b>	a measure of a place's ease of access for people with disabilities





## SECTION 11: COMMON ABBREVIATIONS

	What it means		What it means		What it means
A1	Good Condition	Furn.	Furnished	Ph.	Phone (please phone)
<a href="#">Appl.</a>	Appliances	Hyd.	Hydro, electricity	Prkg.	Parking
Avail, immed.	Available immediately	Immed.	Immediately	Priv.	Private
<a href="#">Apt.</a>	Apartment	Incl.	Included	Refs.	References required
<a href="#">Bach.</a>	Bachelor Unit	Kit.	Kitchen	Renov.	Renovated / Newly painted
Bal.	Balcony	Last/ <a href="#">LMR</a>	Last month's rent	Rm	Room
BR	Bedrooms	Laun/Lndry	Laundry	Upr.	Upper
Bsmt.	Basement	Lrg.	Large	Util.	Utilities
Dep.	Deposit	Lwr.	Lower Floor	W/	With; included in the rent
Dr.	Dining Room	Mo.	Month	XL	Extra large
Fam.	Family Room	Msg.	Message		
Gar.	Garage	Neg.	Negotiable		
Flr.	Floor	Na. or N/A	Not Available		
Frdg.	Fridge	Nr.	Near		

### Acknowledgements:

This guidebook was created by the Housing Working Group of the Advisory Committee for Persons with Disabilities (ACPD), with special thanks to Mary Sinclair for her time and dedication.

Thank you to the ACPD Committee and City of Hamilton staff in the Corporate Services and Healthy and Safe Communities Departments with special thanks to the Housing Services Division for their support.

