



# 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)

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## SECTION 1: Introduction

Finding housing can be difficult for people with disabilities. This guide includes resources, information and tools which will make it easier for you.

In June 2017, the Hamilton Spectator had [a story](#) about a woman who ran into problems finding a suitable home in Hamilton.<sup>1</sup> Amanda had some limitations, including the use of mobility devices. Her circumstances made finding a home for her and her son more difficult. The story also highlighted that while Hamilton has made considerable progress in supporting the housing needs of people with disabilities This guidebook's goal is to help people with visible or invisible disabilities navigate the housing system with less difficulty.

Canadian law does not formally recognize the right to adequate housing. However, Canada is part of 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 important for maintaining a person's independence and quality of life, especially when they have a disability. This guide is informed by Hamilton's [Housing and Homelessness Action Plan](#), which is a 10-year, person-centred plan to make sure that everyone in Hamilton has a home. It builds on the progress of the Action Plan by continuing to fill the gaps in access to housing and related services for persons with disabilities. Some of these gaps include:

- Lack of supports for people navigating and understanding the housing system
- Limited housing resources including available accessible housing and supports

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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/>

- Matching people with disabilities with the appropriate units and supports they need
- Income barriers
- Lack of advocacy for people with disabilities
- Accessible housing for marginalized populations who face discrimination

**Please Note/Disclaimer:**

This guidebook includes general information and was prepared with the best information available. For more information, contact the organizations listed in [Section 2](#) of this guide. We intend to update this guidebook regularly.

**Availability:**

You can get a copy of this guidebook at the Community Information Services / Information Hamilton at Hamilton Public Library and you can access it online at <https://www.hamilton.ca/social-services/housing>

## SECTION 2: General Information

The following organizations provide general information about housing and housing services, broker services or provide housing services directly to people with disabilities.

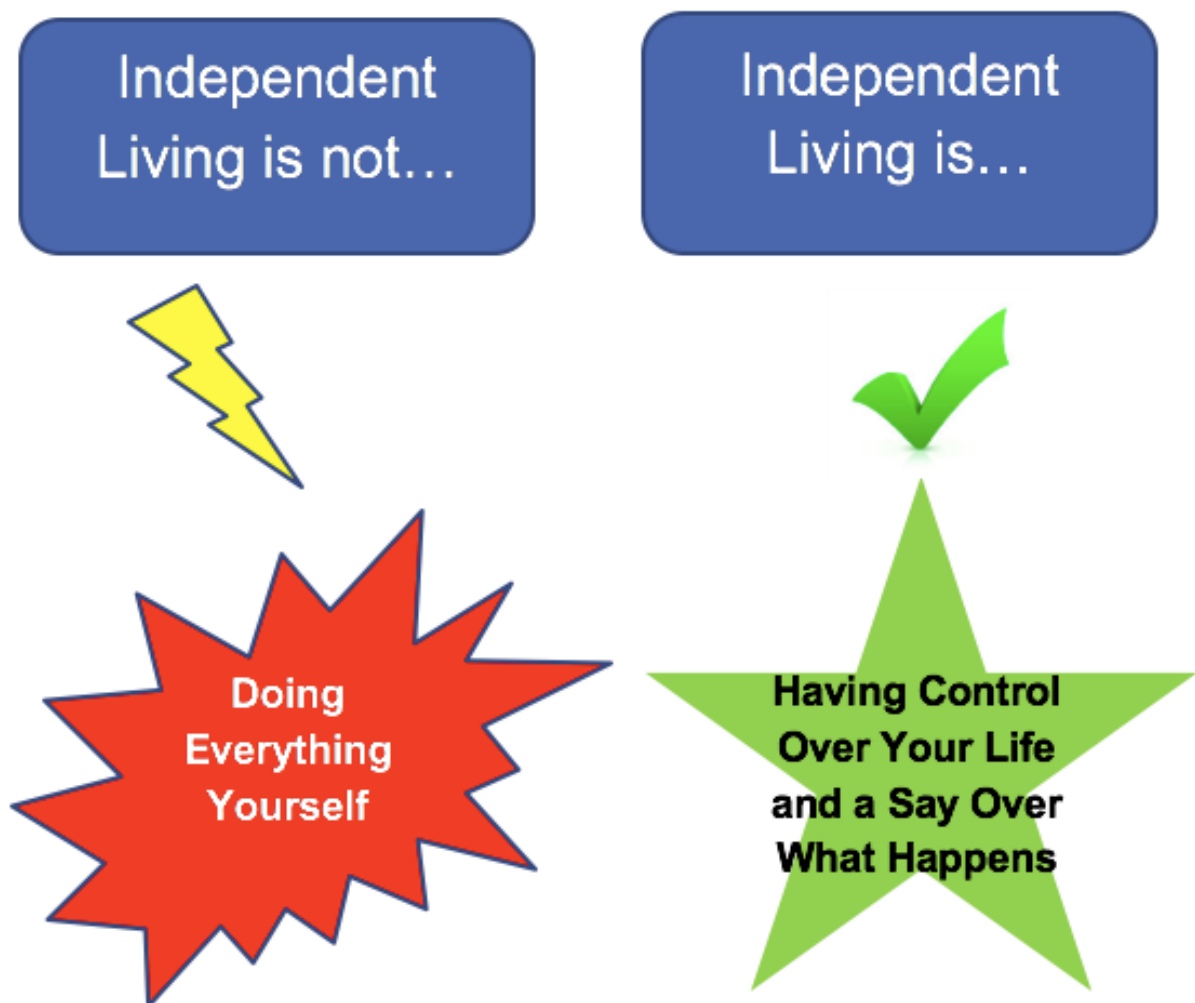
Organization	Address / Contact Information	Type of Information
<a href="#"><u>City of Hamilton Housing Services Division</u></a>	350 King Street East, Unit 110 Hamilton, ON L8N 3Y3 <b>General Inquiries</b> Ph: 905-546-3901 Email: <a href="mailto:housing@hamilton.ca">housing@hamilton.ca</a>  <b>Access 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="#"><u>Local Health Integrated Network (LHIN)</u></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 questions about patient care call: 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="#"><u>Disability Information Service Program</u></a>	Hamilton Central Library 55 York Blvd, Hamilton ON L8R 3K1 Ph: 905 546-3200 x3205	<ul style="list-style-type: none"> <li>• Help &amp; advice</li> <li>• Link to community Services and benefits</li> <li>• Assessments</li> </ul>

<a href="#"><u>Hamilton Housing Help Centre</u></a>	119 Main Street East Hamilton, ON L8N 3Z3 Ph: 905-526-8100 Email: <a href="mailto:info@housinghelpcentre.ca">info@housinghelpcentre.ca</a>	<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>	Phone: 1-800-668-2642 Email: <a href="mailto:contactcentre@cmhc.ca">contactcentre@cmhc.ca</a>  <a href="#">@CMHC_ca</a>	<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>	100 Main St E. Suite 203 Hamilton, ON L8N 3W4 Ph: 905-527-4572  <a href="#">@HamiltonJustice</a>	<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>	505 York Blvd Hamilton, ON L8R 3K4 Ph: 905-529-8101 Email: <a href="mailto:info@rahb.ca">info@rahb.ca</a>  <a href="#">@RAHBNews</a>	<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 stay independent. However, to address housing needs you need to know and understand your limitations. You must know where in the City you want to live. This is called “due diligence”. Before deciding, you should get as much information as you can and explore all available housing options.

Discuss the housing options with your spouse, children and other family member or close friends. Talk to your family doctor, who can help with applications that refer to limitations and specific needs.



## SECTION 4: Types of Housing

This section describes two types of housing options; homeownership and rental housing. There is financial help and housing supports available for people with disabilities with low incomes. For more information about these subsidies and supports please call the City of Hamilton's [Housing Services Division](#) at 905-546-3901 or e-mail them at [housing@hamilton.ca](mailto:housing@hamilton.ca)

### 4.1 Types of Ownership Housing



Home ownership can be an asset for people with disabilities. However, it can also become a concern.

If you own your own home, you may have to downsize or move into a more accommodating living situation due to changing needs. Paying for costs of maintenance, utilities and taxes can become a constraint when the changing needs of a disability or condition force you to spend more of your income on health care than what you have budgeted for in the past.

As homeowner with a disability, you might be able to customize your home to make it more accessible. One benefit of owning your own home is that the you can often change it easier than you could if you rented. This is especially the case of major home modifications.

To find homes for sale in Hamilton contact a local real estate office. You can also contact [Realtors Association of Hamilton and Burlington](#) by calling 905-529-8101 as well as looking at listings online.

The following housing options may be useful for people with disabilities:



### 4.1.1 - Garden Suite

A garden suite (commonly known as a granny flat) is a pre-made residential structure set up as one unit (up to 20 years) in the yard of a home owned by a family member. It allows an individual with a disability to live independently and remain close to their family. Garden suites are allowed in Hamilton but planning approvals are necessary. In some cases, servicing a new garden suite with water and sewer services can be expensive.

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 more information.

### 4.1.2 - Home Sharing

Home sharing is when several a number of unrelated people live together in a single dwelling. Owners with an extra bedroom can rent it to a tenant who will typically provide other services like chores and general maintenance in addition to money as a form of compensation. Home sharing works as a traditional financial arrangement and it can also give companionship and a sense of security for both the tenant and owner. For people with disabilities, this living arrangement can save the cost of paying for specialized services.

Home share organizations are popular in Canada and around the world. However, there are not many home share organizations in Hamilton. McMaster University School of Graduate Studies small Home Sharing program called [MacSymbiosis<sup>2</sup>](#) . This program connects graduate students with seniors in the McMaster and Westdale community. This housing relationship is good for both students and seniors.

For more information call [647-648-4421](tel:647-648-4421) or contact the program by Email [symbiosiscohousing@gmail.com](mailto:symbiosiscohousing@gmail.com).

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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)

### 4.1.3 - Co-housing

Co-housing is when a group of people plan and develop their housing community. It can be a new building or an existing building(s) that has had changes made to it. Residents own their unit, but often share spaces like dining, laundry and recreational facilities. They can also share support services.



In a co-housing community, people with disabilities keep independent spaces. They can choose to live with friends and share interests and workloads.

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

### 4.1.4 - Purchased Condominiums

Condominiums (“condos”) are dwellings (houses, townhouses and apartments) purchased privately from developers or prior owners.



An owner is an individual deed holder of a unit. The owner is responsible for maintaining and paying that property. They are also a shareholder of common property elements like; passageways, gardens and roadways. These common elements are maintained through regular financial contributions made by the condo owners; these are typically called ‘condo fees’. The condo owner handles their share of the condominium and is responsible for selling it when they move. Condos are governed by the *Condominium Act, 1998*. The Canada Mortgage and Housing Corporation has a free [condo buyer's guide](#). This guide can help people learn more about 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 to live in a unit by purchasing a lease for an upfront payment and a monthly maintenance fee. Unlike renting, the lease is set for several 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 future buyers. Applications are managed by the life lease building or corporation.

For more information on life leasing visit the [Ministry of Housing's website](#).

#### 4.1.6 – Renovating Your Home

If you have a disability, home renovations can help with your independence both now and in the future. There are many arrangements and adaptations that can reduce barriers and improve accessibility. The best changes depend on your personal circumstances.

Some common options include:

- Adding grab bars in the bathroom
- Changing the bath tub to a barrier-free shower
- Adding hand railings or a stair lift to staircases
- Changing the heights of kitchen cupboards and/or counter heights
- Moving a bedroom to the main floor
- Putting in fire alarms that light up for people who are deaf or hard of hearing

The City of Hamilton has developed guidelines for barrier free design. For more information call [905-546-2424](tel:905-546-2424) x8080 or download the PDF document at the following link: [cityofhamilton-barrier-free-design-guidelines.pdf](#)

### 4.1.7 – Property Tax Assistance

Paying property taxes can become challenging for people with disabilities since expenses often tend to increase with changes to physical conditions. 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. You must be receiving the Ontario Disability Support Program (ODSP), have a disability and 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. Your household must have a combined income of less than \$33,840 to qualify.

For more eligibility criteria for both programs including getting application forms call [905-546-2489](tel:905-546-2489) or visit [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 to live part of a larger facility.



Rental accommodations can be 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 be; studios, garden suites, 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 are outlined in the *Residential Tenancies Act (RTA)*. However, some regulations exist in other legislation. Some examples are 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 and funded by the government for three to 10 persons, not including staff. Residents of a group home are supervised living under supervision in a single housekeeping unit. Due to different reasons including; emotional, mental, social or physical condition or legal status, living in a group home is best 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 care. They often provide housing for older adults and/or people living with disabilities. An RCF is type of supported housing.

Some residential complexes have residents who receive 24-hour a day care. RCFs include geriatric care homes, psychiatric care homes, and homes for residents with developmental disabilities. Most are privately owned and licensed by the City of Hamilton. This means they need to follow certain health, fire and living standards. Some RCF units are subsidized for people who have a 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. They need 24-hour a day personal and nursing care, sometimes within a secure setting. They include many services and supports for people with disabilities, older adults and family caregivers. Residents receive personal care and health services, as they have limitations that prevent them from taking part 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 programs for seniors who may need help with daily living activities.

Retirement homes are usually privately owned. They must have at least 2 of 13 care services as set out by the *Retirement Homes Act* (RHA, 2010). This housing option may cost too much for people on a fixed income.

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

Assisted living services provide personal and home support services. This allows people to live in their home as their needs change. This includes help with personal care (bathing, mouth and skin care), personal support (dressing and help with taking medicine), homemaking services (light housekeeping and laundry), and home maintenance. Services are accessed through regional “hubs” provided through the Local Health Integration Networks (LHINs). Many private assisted living service providers/services are also available on a fee-for-service basis.

## SECTION 5: Conditions and Special Needs

This section includes information on common conditions and how those conditions can shape and affect the housing needs of people with disabilities. This section also offers resources to help people with these conditions access housing and housing supports in their community.

### 5.1 Circulatory Conditions

The circulatory system describes the heart and blood vessels. Some circulatory diseases include; high blood pressure, coronary artery disease, and hypotension (low blood pressure). On-going circulatory conditions can often result in strokes or heart disease. Results of a stroke may include; weakness or paralysis and vision problems including depth-perception. Other issues include; cognitive problems like reading difficulties, speaking, comprehension and short-term memory loss.

If you have circulatory condition you often need regular medication for your health. Housing with proper storage for medication is needed. Those with circulatory conditions may also need special diets. In these cases, appropriate or specialized appliances and customized kitchen space may be needed. Circulatory conditions often need special accommodations in the home such as assistive devices and help with care. In some cases, barrier-free housing that is fully wheelchair accessible might be needed. Housing with proper storage areas and turning radius is needed for those with assistive devices.

March of Dimes is one of many community-based rehabilitation organizations for people with circulatory conditions or physical disabilities due to circulatory conditions.

For more information on March of Dimes and other organizations 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 Disabilities/Mental Health Conditions**

There is a wide range of mental health conditions and cognitive disabilities. Some are acquired at birth and some acquired later in life like a brain injury. Many people with less severe conditions only need limited supports. Help with daily living activities such as bathing, eating, dressing, cleaning, using the toilet, and/or other personal care are common. Individuals with more serious cognitive disabilities often need special care, including 24-hour supervision. Specialized supports are often needed for those who have communication disorders and have trouble controlling difficult behaviour.



In some cases, people with severe cognitive disabilities, may need residential care as living independently is not possible or practical. In addition, many experience gradual declines in ability over time. Living in a residential care facility allows more 'on-site' services to be added over time to meet the person's needs.

Safety can be a major concern for those with cognitive disorders who live independently and/or with limited supports and supervision; for example, those with Autism Spectrum Disorder (ASD), dementia or brain injuries may have trouble understanding their environment and other people. Safety is a major issue as they may wander off. Proper locks are required to secure the residence and any medication. Other safety measures to consider within the home are; a secure stove to prevent fires and a water heater temperature governor to avoid burns from hot water. Bathroom grab bars and grips and non-skid rugs are also helpful household features.

For more information on residential care facilities in Hamilton please call the [Housing Services Division](#) at 905-546-3901.

For information on supports for cognitive disabilities contact the following organizations:

[Autism Hamilton](#)

533 Main Street East  
Hamilton, ON L8M 1H9

Ph: 905 528 8476

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

[Alzheimer Society Hamilton and Halton](#)

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

Ph: 905-529-7030



@DementiaAlzh

### Brain Injury Services of Hamilton (BISH)

225 King William Street, Suite 508

Hamilton, Ontario L8R 1B1

Ph: 905-523-8852

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

## **5.3 Developmental Disabilities**

There are a range of developmental disabilities which can include; Down Syndrome, Cerebral Palsy and autism. Communication disorders can like language/speech disorders, learning disorders and motor disorders fall into this category for the purpose of this guidebook. Some conditions are more visible such as cerebral palsy and some are less visible such as dyslexia.

These conditions can appear at birth or childhood and in some cases can become more severe over time into adulthood. 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 disabilities 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 | Email: [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 programs and housing providers that provide specialized services for people with developmental disabilities.

Some of these organizations include:

[Choices](#)

59 Kirby Avenue  
Dundas, ON L9H 6P3  
Ph: 905-628-6147 x221  
 @ChoicesDundas

[Christian Horizons](#)

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

[Community Living Hamilton](#)

191 York Blvd  
Hamilton, ON L8R 1Y6  
Ph: 905-528-0281  
Email: [info@clham.com](mailto:info@clham.com)

[Indwell](#)

1430 Main St E  
Hamilton, ON L8K 1C3  
Ph: 1-866-529-0454  
 @IndwellCA

[L'Arche](#)

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

Housing needs for people with developmental disabilities often grow over time. A common challenge is that as the primary caregivers (typically parents) get older, they may no longer be able to care for the person with the developmental disability. Moving from home with a parent providing primary care to supportive housing is a challenge for people with developmental disabilities.

#### **5.4 Mobility and Physical Disabilities (Neuro-Muscular Conditions)**

People with neuro-muscular disabilities each have different limitations. If you use mobility device or have cerebral palsy your disability is visible. However, those with early onset multiple sclerosis or neuroglia or epilepsy may not have any visible signs of disability.

Physical limitations often need modifications so tailoring (finding and adapting) the right kind of housing and supports to your needs is important. Speak with your family doctor as they are aware of how a condition will change over time. Your doctor can also refer an occupational therapist to do a home assessment who will recommend specific modifications.

Stairs are the most common barrier for those with mobility restrictions. There are also many other common household design features that are challenging 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. Carpeting can be a barrier for people using mobility devices, especially manual wheelchairs. Bathing can be problematic but common mobility aids like bathtub assist bars, bath chairs and 'roll-in' showers can help.

People who have epilepsy or a non-epileptic seizure disorder need to be aware of electronics that can trigger a seizure. This can include flashing lights on smoke detectors and appliances. Depending on how severe a seizure disorder is, there may be greater need to modify homes to prevent serious injury.

There are several support groups for particular conditions. The Community Care Access Centre [1-800-810-0000](tel:1-800-810-0000) is usually contacted first. Their Care Coordinators will set up an assessment first and then coordinate ongoing care.

Quite often, major home modifications can be expensive. If you own your home and have a low income, you can apply for financial help through the Ontario Renovates Program. Please contact the City of Hamilton's [Housing Services Division](#) by phone at [905-546-3901](tel:905-546-3901).

For more information on specific conditions:

[Arthritis Society](#)

460 Brant St. Suite 11  
Burlington On L7R 4B6  
Ph: 905-632-9390  
Email: [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  
Email: [info@epilepsysco.org](mailto:info@epilepsysco.org)

[Ontario Federation for Cerebral Palsy](#)

1100 Main Street West, Suite 301  
Hamilton, ON L8S 1B3  
Ph: 905-522-2928

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  
Email: [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

### [THRIVE Participation House](#)

2080 Trinity Church Road

Mount Hope, On L0R 1C0

Ph: 905-692-4465

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

## **5.5 Respiratory Conditions**

Asthma is a common respiratory condition; however, there are more serious respiratory conditions like emphysema, chronic obstructive pulmonary disease (COPD) and lung cancer. In some cases, medical equipment helps with breathing or medications are used to control symptoms. Examples include; inhalators, portable oxygen and continuous positive air pressure (CPAP) machines. Respiratory conditions even when treated can still affect your 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. It is important to keep a clean unit and live in a building with good air quality. A smoke-free environment is beneficial.

Call the Hamilton Housing Help Centre at [905-526-8100](tel:905-526-8100) for help with housing searches that suit your needs. When applying for public subsidized housing, the Access to Housing (ATH) application includes the need for oxygen on its list. However, it doesn't ask about smoke-free accommodation, so you must include this under unlisted needs.

Local programs providing specialized services for people with respiratory conditions include:

[Firestone Clinic for Respiratory Health](#)

50 Charlton Ave E,  
Hamilton, ON L8N 4A6  
Ph: 905-522-1155 x36000

[Lung Association](#)

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

## **5.6 Hearing/Vision Conditions (Sensory)**

### **Vision**

There are many levels of blindness and vision loss. Some individual may have improved vision with corrective lenses. Other people may just see some light or shadows or nothing at all. Vision loss can be genetic, caused by a stroke, degenerative diseases, cataracts or glaucoma, just to name a few. People with other disabilities, who also have vision loss have specific housing needs. In these cases, it can be difficult to accommodate an individual's housing needs.


Features such as automatic doors, good lighting, color contrast in walls and floors and no carpets are helpful for those who are blind or have vision loss. Features that someone with vision loss should look include; a clear front lobby/entranceway, audible or tactile markings in elevators to show or say the appropriate floor and tactile or large print numbers on doors.

The [Canadian National Institute for the Blind](#) (CNIB) provides in-home supports. They complete assessments, suggest products to improve independence and perform helpful home modifications. These modifications can include; marking appliances or reorganizing units to make them more accessible.

Social isolation can be a 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 monthly and is a place to meet people and get involved in social activities. Activities include; blind golf, bowling for the blind and curling for the blind.

Some local specialized services for people with vision loss include:

[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 and Hard of Hearing**

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

### **Deaf**

The term ‘deaf’ describes people 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, have a profound loss of hearing. Adults who become late-deafened usually cannot understand speech without visual clues such as captioning, computerized notetaking, lip reading or sign language.

### **Hard of hearing**

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

Deaf and hard of hearing people have unique housing needs. They need a quiet and/or well-lit space to properly communicate. End units are preferred in multi-unit buildings as they could be quieter and have less noise and limited hallway traffic.

Some important building design features to look for are:

- Security and fire alarm systems that do not just use sound
- Building layouts that do not block views
- Doorbells that light-up
- High-speed internet access that allows for specialized communications technology

When looking for a home, an interpreter is often might be needed by the potential homeowner or renter to help with deciding whether a unit meets their needs or not. Once living in a unit, it is it is important to set up a way to communicate and build a rapport with your building manager. This will help you resolve any future concerns and allow your manager to better understand and be responsive to your needs.

## **Deaf-Blindness**

Someone who is deafblind is not necessarily totally deaf or totally blind. Many people who are deafblind have some residual sight and/or hearing. The major challenge is not about the amount of sight and hearing; it is about the combined impact of having more than one sensory impairment.

Since being deafblind includes both vision and hearing loss, very specific living accommodations are needed. When looking for housing, a community with nearby shopping, medical centres, transportation and audible traffic signals makes it easier to be a part of the community. Within the home or building there are many things to consider. Do the elevators have Braille and raised numbers? Also, are there audible floor indicators, Braille or raised numbers 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. Help may be needed from several community organizations that specialize in hearing and vision loss to maximize quality of life.

## 5.7 Bowel / Bladder Conditions

Gastric or urinary issues are common 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, particularly bathroom use and availability. Group homes, residential care facilities and home share living arrangements can be challenging for people with these conditions due to shared bathrooms.

One specialized service and support group for people with gastric issues is:

[Crohn'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 things to consider 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 needs, there are a number of measures that can be put in place to reduce or prevent emergencies

Common emergency prevention tips include:

- For people with mobility restrictions, install non-slip rugs, grab bars in the kitchen/bathroom or where needed. These will prevent slips or falls or other situations.
- For those who are blind or have low vision and/or those with mobility restrictions, good lighting is important.

- For people who need medication, using a medication dispensing system prevents missed or inaccurate dosages
- Have a checklist/schedule for regular maintenance for needed assistive devices, appliances or key items in the home
- Have a home security system
- All multi-residential buildings must have a fire plan. It is a good idea to participate in fire drills and know the fire routes in your building.
- Fire departments recommend that anyone who uses a mobility device not live higher than six floors. This helps emergency personnel easily evacuate the person in an emergency.

## **Emergency Mitigation**

Another key part is to lessen the impact of emergencies when they occur.

Common ways people with disabilities promote harm reduction include:

- Wearing an “Emergency Help” device
- Wearing a [Medic-Alert](#) bracelet
- Having a well-stocked maintenance toolkit for important electronics, appliances or assistive devices that need regular upkeep. This kit could include backup fuses and batteries for hearing aids, for example.
- Pre-programming emergency contacts and medical conditions, in your home and/or cell phones
- Having a list of emergency contacts near the telephone which includes; neighbours, friends, family, medical contacts, pharmacy, elevator repair, assistive device repair etc.
- Keeping a list handy of any medications you take

## **Specific Emergencies**

Sometimes your power can go out and this can be an issue if you rely on electricity for medical equipment. If you have such equipment you should

have a backup generator or have batteries on hand for respirators or other items that need power.

A heavy snowfall can be challenging for people with disabilities. If you have respiratory conditions or physical disabilities you can have issues or be unable to shovel your own snow.

## SECTION 6: Decision Making

Finding or changing where you live isn't always easy especially when it is not your most desirable choice. In the case of moving to social or subsidized housing, it often involves a crisis. The first step is coming to terms with the crisis which can range from financial to health and often include both concerns. The crisis is often sudden and/or unplanned. Both the individual and their family and friends may have a difficult time coming to terms with the new reality.

For people with disabilities, housing choices are limited and come with constraints or limitations. This guide attempts to provide people with information to assist them searching for and selecting housing. Several medical conditions and health concerns including; mental health, addictions, chronic conditions and low income makes finding suitable housing difficult. The reality is you many need to make choices or accept trade-offs between meeting needs/wants and staying within your household budget. One example of this choice for people with disabilities is deciding between affording the costs of 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** - it can be challenging to determine what is a need versus what is a want. Having limited resources, it is important to carefully analyze your personal circumstances, physical/medical/health

conditions and preferences. Prioritization assists in navigating through crisis situations, preventing on-going stress and concerns around funding suitable housing and supports.

**Cost-effectiveness** – means maximizing meeting the needs of people with disabilities while minimizing the costs without compromising quality.

### **A Decision-Making and Housing Example:**

Judy, 61, has a chronic respiratory condition. She needs a suitable environment for her breathing. She works at home as a freelance transcriber and earns about \$20.00/hour.

Judy worked with her family to find a home. She took her doctor's advice and selected a recently built smoke-free unit in a duplex. The home was located on the southwest mountain, and area of the City away from the industrial core.

The rent was higher than a similar unit she found in the lower-city but having better air quality Judy determined the higher rents were an acceptable trade-off for the better standard of living as she prioritized her long-term health. As a result of her decision, Judy was not able to immediately afford central air conditioning because of her slightly higher rent. She'll use her window air conditioning unit and save for the system she wants to buy in the future.

## SECTION 7: Respite Care

Respite services give primary caregivers a temporary break from 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 give full-time or round-the-clock care. Most people living with a disability have a daily routine that they like; however, they may need a temporary change of type of care. In these cases, there are agencies that provide respite care. There are also agencies that provide support to people who live in a private unit. They can come once-a-day to once-a-week or on an 'as-needed' basis to give needed care and services.

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

Call [LHIN Home and Community Care](#) at 1-800-810-0000 who is the main service agency. There are also [other organizations](#) such as [Community Living](#) 905-528-0281 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

There are many features to look for when searching for a home in the context of meeting the needs of people who have a disability. Considering and prioritizing the features that apply your condition will maximize the ability for housing to be tailored to suit your needs.

**Accessibility to the Home for Care Providers** – It is important to balance between having access for caregivers while preventing against strangers or unwanted solicitors entering a home. Some common safety features include windows in or next to the front door to show who is at the door. Use a key box instead of hiding a key outside for care providers. High-rise and multi-residential buildings may have an intercom system to notify tenants and security cameras to watch who comes in and out of the building. These should be working and accessible so caregivers can access the units inside. For automatic doors that are activated by accessibility buttons, keys or fobs, residents should tell caregivers to not allow piggybacking. Piggybacking is when two people enter through a door where there has only been one security swipe.

**Alarms** – Some buildings have alarms on each floor while others have them in each unit. It is important to tailor the alarm that meets the needs of the resident. This would include a visual alarm for someone who is deaf or hard of hearing and an audible alarm for some who is blind or has low vision.

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

**Common Spaces** – Accessibility should be considered in buildings where there are public offices, public meeting rooms, laundry rooms and washrooms.

**Computers/Cell-Phones** – Access to technological devices can help with being informed about emergencies. These devices also help with communication with others about personal emergencies. Based on location, cell phone and internet reception can vary in units and buildings. Basement apartments tend to have poor reception. Some buildings provide Wi-Fi in common areas.

**Elevators** - Should be large enough for an ambulance stretcher or a wheelchair to turn around. The buttons should light up and have a tactile surface, like raised letters or ideally Braille. Elevator systems should have audible cues to help those who have low vision. The number of elevators should also be considered.

**Colour Contrast** - is necessary for people who are blind or have low vision to recognize corners, pathways, doorways and stairs.

**Fire Drills** – should be done regularly including an evacuation plan for people with disabilities. Accommodations should be in place for people who are deaf, hard of hearing, blind or have low vision.

**Flooring** – Hardwood and tile are ideal for people using mobility devices. Even well-laid carpeting can be a problem for people using mobility devices. Scatter rugs can be a tripping hazard, especially for people with vision loss or mobility issues.

**Grab Bars and Handrails** – should be installed with the proper grip to be effective. Barrier-free guidelines should be referenced and an occupational therapist should help with personal placement. Handrails are necessary for all stairways.

**Height of Building** – has many safety considerations. Even a few stairs can be impossible for people with mobility issues. Fire departments recommend that anyone who uses a mobility device to live no higher than six floors so emergency personnel can easily evacuate the person in an emergency.

**Height of Intercoms** – Can often be too high for a person who uses a wheelchair.

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

**Sprinkler Systems** – It is a good idea when looking for housing to look at buildings with sprinkler systems. These systems can prevent against risk in the case of a fire. Systems should be in all multi-residential buildings.

**Storage Space** – The amount of space is different in each housing unit. People with disabilities may have unique storage needs for mobility devices or other items. Sometimes designated space in other areas of the building can be a problem, so in-unit space is needed.

**Stairs and Ramps**– Should be well-built with wide treads and regular risers. Any carpeting will shorten the tread and may cause slipping or falling. Ideally each step should have a tactile slip edge.

## SECTION 9: Frequently Asked Questions (FAQ's)

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

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

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

**A:** A good first step is to discuss your situation with your spouse, children, other family members or close friends. Talk to your family doctor as they can advise, direct or refer you 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 respond to changes in your condition. It isn't 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 for help with completing an assessment to make my home more accessible?**

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

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

**A:** Call the Housing Services Division Access to Housing Line  
Phone: 905-546-2424 x3708 or email at: [ath@hamilton.ca](mailto:ath@hamilton.ca)

**Q: Where do I apply for grants to help me in making my living space more accessible?**

**A:** The Homeowner Ontario Renovates, offers financial help 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.

A 10-year forgivable loan up to a maximum of \$20,000 is given 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 at 905-546-2424 x2758

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

**A:** If you complain to your landlord about a maintenance issue, make sure you write it down and date it. Verbal complaints cannot be tracked.

Contact the City of Hamilton Property Standards Department to get an inspection or issue a work order. If this doesn't fix the problem, tenants can call the [Landlord Tenant Board](#) at 1-888-332-3234 for more help.

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

**A:** Landlords are responsible for examining a housing unit for pests and taking care of their removal. If you have a disability you may need help to prepare for the treatment. If you have limited income, you can call the [Hamilton Housing Help Centre](https://www.hamilton.ca/home-property-and-development/pest-control/bed-bugs) at 905-526-8100 who offers supports for qualified households.

If your landlord doesn't help, you may need to call the [Public Health Department](https://www.hamilton.ca/public-health) at 905-546-2489. They can help resolve the matter up to and including issuing a work order.

**Q: How do I know if the unit I am moving into has pests (bed bugs, cockroaches, ants etc.)?**

**A:** The City of Hamilton has a useful website which has tips, tools and ways to prevent pests. For that information follow the link below: <https://www.hamilton.ca/home-property-and-development/pest-control/bed-bugs>

**Q – Should I tell my building manager about my disability? If so, how?**

**A:** Yes, this is good idea in case of an emergency. You can give your building manager or live-in superintendent details about your condition. You can also give them contact information of who they should call if there is an emergency.

**Q - Are service animals allowed?**

**A:** Service animals are allowed in all public buildings. When looking for a home, service dog owners should look for a space that can meet the animal's needs. This includes enough space, services and nearby park areas.

## 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 physical, psychological, social or financial mistreatment. Neglect is often 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 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>	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)
<b>Access</b>	Ensuring that the basic needs of everyone are 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.
<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>
<b>Accessibility for Ontarians with Disabilities Act (AODA)</b>	The AODA was enacted in 2005. This legislation is intended to benefit all Ontarians by developing, implementing and



	<p>enforcing accessibility standards 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 legally must comply.</p>
<b>Accommodation (verb)</b>	<p>The act of accommodating. Housing is designed in a way to maximize the removal of barriers that may exist for persons with disabilities. As well, that housing services are provided 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>
<b>Adaptable Housing</b>	<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. This may include seniors, children and people with disabilities.</p>

<b>Accountability</b>	<p>It means that people (elected officials, managers, staff, and contractors) are responsible for carrying out a defined set of duties or tasks, and for conforming with policies, rules and standards that apply to their jobs and responsibilities.</p> <p>It is being responsible, liable, or answerable to the actions taken by an individual or organization.</p>
<b>Affordable Housing</b>	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.
<b>Ageing in place</b>	Coordination in the delivery of housing, healthcare and services to create and maintain livable communities that respond to the changing needs of people as they get older.
<b>Ageism</b>	<p>Attitudes, labels and behaviours that make assumptions about persons and their abilities based on their age.</p> <p>It 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)</p>
<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, bedroom, bathroom and living space) unit. It is in a building with a few or many other units.
<b>Appliances (Appl.)</b>	Some include: washer and dryer, refrigerator, stove, dishwasher. Often some or all appliances are included in your rent. The most common appliances included 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 our assumptions, beliefs, thoughts and fears. Attitudes can be shaped by what we know, previous experience, stereotypes and what we hear and see from media and others. Attitude affects 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>	<p>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.</p> <p>Examples of information and communication barriers can make it difficult for people to receive or convey information include:</p> <ul style="list-style-type: none"> <li>• Only providing material in small print</li> <li>• Low colour contrast between text and background</li> </ul>

	<ul style="list-style-type: none"> <li>• Not facing someone when speaking</li> <li>• Only accepting information in paper format</li> <li>• Not allowing or using electronic communication</li> </ul>
<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 PDFs, 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 made for people to use.
<b>Canadian Charter of Rights and Freedoms</b>	This legislation falls under the Constitution Act of 1982 guarantees the rights and freedoms of all Canadians. 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 cost 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>	Providing information in several different formats, such as audio tape, braille, print and speech.
<b>Co-operative Housing (CO-OP)</b>	Housing that runs 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.
<b>Dignity</b>	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.

<b>Disability</b>	<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 the use of a service animal, a wheelchair or other assistive equipment or devices.</p> <p>A disability can also be invisible. This includes mental health, cognitive and learning disabilities all which might put a person at a disadvantage or may interfere with work or personal activities.</p>
<b>Discrimination</b>	<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 fair treatment, human rights and opportunities. Discrimination can be practised based on race, nationality, ethnicity, gender, sexual orientation, age, religious or political affiliation, marital or family status, or disability.</p>
<b>Diversity</b>	<p>Diversity recognizes the broad variety of differences, similarities, backgrounds and life situations among individuals and groups of people.</p> <p>Diversity includes differences in; culture, education, class, perceived racial heritages, age, heritage, religion, ancestry colour, citizenship, gender, sexual orientation, ethnic origin,</p>



	abilities and disabilities, marital, parental or family status, literacy, geographical location, income, and work experience.
<b>Duplex/Triplex/Multiplex</b>	Duplex – a building with 2 units Triplex – a building with 3 units Multiplex - A building with several separate units
<b>Emergency Shelter</b>	A temporary place to go if you don't have a home and need somewhere to sleep.
<b>Equal/Equitable Opportunity</b>	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 more effort to access or 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 must 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>	<p>The Residential Tenancies Act allows a landlord to evict a household for reasons including:</p> <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</p>

	<p>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>
<b>Harassment</b>	<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 includes name-calling, jokes, slurs, graffiti, insults, threats, discourteous treatment and written or physical abuse</p> <p>Bill 168, Amendment to the Occupational Health and Safety Act to include workplace violence and workplace harassment</p>
<b>Holistic</b>	<p>The treatment of the whole person, taking into account mental and social factors rather than the just the disease symptoms.</p>
<b>House</b>	<p>A unit that usually has a yard and is separate from other units.</p>
<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 their 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</p>

	power, the shifting beliefs of the dominant culture, the individual's own personal development, and the actions of other social groups to create change.
<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 that makes sure people can do things on their own, in their own way, without unnecessary help, interference or influence from others. It means giving individuals the freedom to make their own choices about how they receive service.
<b>Integration</b>	Providing service that allows people 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>	A person trained in sign language to communicate with people who are deaf or hard of hearing. This can also be someone

	who speaks more than one language and can communicate with people in different languages.
<b>Intervenor</b>	A trained person who acts as the eyes and ears for people who are deaf, blind or deafblind and helps them adapt to their environment.
<b>Landlord</b>	A person who rents out housing (apartments, townhouses, rooms, etc.). Landlords collect rent and keep 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>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>

	Receipts are available for rent as well as LMR
<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 need to pay your rent</li> <li>• what your rent includes</li> </ul> <p>You must be given a copy of the lease. A typical lease term is one year or more.</p>
<b>Long Term Care</b>	Includes several different services for older adults, people with disabilities and family caregivers. It refers to a range of personal care, support and health services provided to people who have limitations that affect them participating independently in everyday activities.
<b>Long Term Care Facilities</b>	<p>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.</p> <p>These are sometimes called nursing homes.</p>
<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.</p>
<b>Non-Profit Housing</b>	Housing provided by community agencies that don't make a profit.
<b>Ontario Human Rights Code</b>	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>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>
<b>Ontario Disability Support Program (ODSP)</b>	<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 by going to the following link to apply online: <a href="#">ODSP Income Support</a>. If you need financial help right away, apply for Ontario Works (OW) first as applying for ODSP is a longer process. OW will help you to apply for ODSP.</p>
<b>Ontario Works (OW)</b>	<p>A program that gives financial help and benefits to eligible people with little or no income. OW applications are started by telephone or by going to the following link to apply online: <a href="#">Application for Social Assistance</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 send in the application.</p>
<b>Persons with Disabilities</b>	<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. Disabilities can be visible or invisible.</p> <p>Persons with disabilities may experience different discrimination because they have different types of disabilities and therefore have different, varying and often unmet needs.</p>
<b>Personal Care Worker (PCW)</b>	<p>Personal care workers help 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 visits. They provide day-to-day care. Job duties may include housekeeping, making food, 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. These may include:</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>	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).
<b>Rent</b>	Money paid to a landlord by a tenant for the right to live in a rental unit. Depending on your lease you may pay your rent; weekly, bi-weekly or monthly.
<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.
<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 units attached side by side. Each unit has its own kitchen, bathroom and living space.
<b>Service Animal</b>	Any animal trained to help a person with a disability with activities related to daily living. Service animals can help with;

	visual loss, epilepsy, diabetic conditions, autism and other disabilities.
<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)
<b>Social Housing</b>	Given to households who have a limited income. It is administered by private non-profit corporations, municipally owned non-profit corporation and non-profit cooperative housing corporations (co-ops). A subsidy is given so that households only spend 30% of their income on rent. For some people with low income, a rent subsidy helps them 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)
<b>Special Priority</b>	The Housing Services Act requires that special priority applicants rank ahead of all other applicants on the centralized waiting list for RGI housing and a housing provider's internal transfer list. Status is granted by Service Managers who approve 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.
<b>Statuses (on the Access to Housing Waitlist)</b>	<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> <li>3. Homeless Status</li> <li>4. Newcomer Status</li> <li>5. Youth Status</li> <li>6. Chronological Status</li> </ol> <p>For more information about each Status type <a href="#">Hamilton Social Services</a></p>
<b>Suitability</b>	One size does not fit all
<b>Supported Housing</b>	This is when a person receives care in their home from one or more agencies. For example, services can include Personal Care Workers (otherwise known as a PSW), physiotherapists, homemakers, cleaning services and meal preparation services.
<b>Supportive Housing</b>	Housing where services are provided to tenants. This includes 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 pays 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 that include a kitchen, bathroom, bedroom and living space. They can be attached side-by-side, in a row or in a square. They can also be stacked one on top of the other. All have their own entrance from the outside.
<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. The Canadian Housing and Mortgage Corporations' report on Accessible Housing by Design — Visitability is found here: <a href="https://www.cmhc-schl.gc.ca/">https://www.cmhc-schl.gc.ca/</a>

## 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		

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