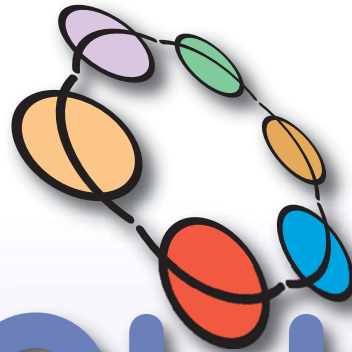




**ACTIVE  
LIVING ALLIANCE**  
FOR CANADIANS WITH A DISABILITY



All  
**Abilities**  
Welcome

# TOOL KIT



|                                      |           |
|--------------------------------------|-----------|
| INCLUSIVE, HEALTHY LIVING            | <b>1</b>  |
| THE ALL ABILITIES WELCOME TOOL KIT   | <b>2</b>  |
| WHAT IS A DISABILITY?                | <b>2</b>  |
| WHAT IS ACTIVE LIVING?               | <b>3</b>  |
| WHAT IS HEALTH?                      | <b>3</b>  |
| WHAT IS INCLUSION?                   | <b>3</b>  |
| INCLUSIVE ACTIVE LIVING IS IMPORTANT | <b>4</b>  |
| STEPS TO INCLUSION                   | <b>5</b>  |
| WHAT YOU SHOULD ALSO KNOW            | <b>10</b> |
| KEEPING RECORDS                      | <b>14</b> |
| FACILITY AND PARK CONSIDERATIONS     | <b>15</b> |
| POLICY CONSIDERATIONS                | <b>16</b> |
| ADDITIONAL RESOURCES                 | <b>16</b> |



All  
Abilities  
Welcome

# TOOL KIT

## INCLUSIVE, HEALTHY LIVING

### IT'S CATCHING ON!

If you're a program or service provider, whether through a municipality, school, club or other type of organization, you know how important it is to be inclusive to *all* members of your community and to promote healthy, Active Living for everyone.

Including persons with a disability, however, can sometimes seem challenging.

To help, the Active Living Alliance for Canadians with a Disability (ALA) and its partners created **All Abilities Welcome**, a campaign to help you meet the challenge.

When you take on the **All Abilities Welcome** challenge, it's an indication that you've made a commitment to find a way for everyone to participate. It means you and persons with a disability are working together to create inclusive opportunities for Active Living in your community.

A good place to start is the **All Abilities Welcome** tool kit.

To become a member, ask questions, share success stories and find links for more information, go to [www.allabilitieswelcome.ca](http://www.allabilitieswelcome.ca), or contact the ALA at 1-800-771-0663.

# THE ALL ABILITIES WELCOME TOOL KIT

ALA has created the **All Abilities Welcome** tool kit to help you get started.

- This kit includes:
  - This introductory booklet
  - Tools to promote your inclusive programs, services and facilities
  - A CD with promotional pieces and electronic tracking tools
  - Words with Dignity – tips on appropriate terminology
  - A sample chart to help you through the inclusion process

In this booklet you'll find:

- An introduction to Active Living and why it's important for persons with a disability
- A step-by-step approach to creating inclusive programs
- Easy modifications to make programs and services more inclusive
- Information on additional resources

As you read, keep in mind that this is just a guide. Each facility, school, service provider, organization and program is unique and there is no one absolute or right way to create inclusive Active Living opportunities. You'll need to design and follow a path that suits your facility or program.

## WHAT IS A DISABILITY?

The World Health Organization (WHO) defines a disability as “any restriction or lack of the ability to perform an activity due to impairment.”

Disabilities come in different forms and their impact is measured in degrees. For example, one person with a spinal cord injury may not be able to walk, while another may be able to walk short distances with crutches or aids.

Canadians with a disability come from all areas of life, are of all ages, and have wide ranges of abilities and impairments. The most common disabilities in Canada are mobility- and agility-related (52.5 and 50.2 percent respectively). Today, more than 4.2 million Canadians, or 15 percent of the population, have a disability. Most are over 65. As our population ages, the number of Canadians with a disability will increase — some estimate that it will double over the next 25 years!

## WHAT IS ACTIVE LIVING?

Active Living is taking part in physical activity in a way that is determined by the individual according to their own ability, needs, aspirations, and the environment they are participating in.

The Public Health Agency of Canada (PHAC) has guidelines for the level of physical activity a person needs to maintain a healthy lifestyle: <http://www.phac-aspc.gc.ca/pau-uap/paguide/>

Active Living is about choice — allowing each person to make their own decisions about how to incorporate physical activity into their lives. Everyone, regardless of whether they're a marathon runner or someone who takes the dog for a walk, can successfully maintain a healthy lifestyle.

Active Living is the right of all Canadians, regardless of disability, race, gender, religion, income, level of education, or location and should take into account the changing needs, aspirations, and values of Canadians.

## WHAT IS HEALTH?

The presence of a disability does not automatically mean that the person is in poor health. Health status is determined by a number of factors, and that status may fluctuate over time. Persons with a disability *may* start closer to the unhealthy side, but not necessarily.

## WHAT IS INCLUSION?

Inclusion is *meaningful* participation while learning new skills, with every participant accepted and supported by peers. A successful inclusive physical activity program is one where:

- activities are modified and individualized as necessary
- expectations are realistic yet challenging
- assistance is provided only to the degree required
- there is dignity-of-risk and choice available

In parks, for example, inclusion allows individuals with a disability to use all areas as independently as possible, participate actively with friends and family and have a choice of activities to take part in.

# INCLUSIVE ACTIVE LIVING IS IMPORTANT

## For Canadians with a Disability

Active Living:

- increases overall health
- reduces the risk of developing illnesses or conditions that are generally linked to an inactive lifestyle
- reduces the risk of developing secondary conditions specific to a person's disability
- lessens some of the negative effects that are associated with a disability
- makes daily living easier
- increases overall quality of life

Persons with a disability have a greater risk of developing medical conditions such as heart disease, respiratory conditions, high blood pressure and others. Often, the effects of these conditions are more severe. An illness generally considered *minor* in nature, may result in *major* health problems for someone with a disability. So, physical activity to maintain health is particularly important.

Persons with a disability are also less likely to be physically active than those without a disability. Research by Human Resources and Social Development Canada shows that adults with a disability are more likely to have a sedentary lifestyle than those without a disability.

## For an Organization

If your programs or services are not suitable for Canadians with a disability, you are missing out on more than 15 percent of your community. That number is likely higher when you consider that a whole family or the friends of a person with a disability might not participate either if one of them can't.

Providing inclusive opportunities:

- opens an organization's market to serve all community members
- recognizes the diversity of your community

## For Canada

Our society benefits from inclusive Active Living opportunities in many ways. Primarily, Active Living provides an economic benefit by lowering health-care costs.

It also:

1. creates a society where all community members are treated with dignity and respect;
2. provides an opportunity for social interaction, friendship, and development of social support networks; and
3. encourages fairness and diversity, as well as promoting equity and full participation.



## Tips on Creating a Welcoming Environment

1. Treat all participants as you would like to be treated.
2. Make no assumptions or generalizations. For instance, do not assume that persons with a disability are sick, poor or helpless.
3. Pity is not proper!
4. Treat persons with a disability as people first, their disability does not define them.
5. Not everyone requires or wants help. Don't insist or be offended if your help is not needed.
6. Like all, persons with disabilities come with all temperaments. Should you encounter an abrasive or negative individual, do not generalize this experience to characterize all persons with a disability.
7. Ask, listen and do not assume. Everyone is different!
8. Each person is the authority on their disability or condition.
9. Don't lean on a wheelchair — it is part of personal space.
10. Speak directly to a person with a disability, not to their caregiver, parent or friend.
11. There are different degrees of disability and persons with the same disability may have different limitations.
12. Don't get caught up in your words — it is okay to use terms like “running in,” “I see” or “go for a walk” even if literally they are not abilities of the person you are speaking with.
13. Do not treat disability as a tragedy.

## STEPS TO INCLUSION

Here are some ideas to begin with:

- Make your public meetings accessible. Include persons with disabilities in the consultation process
- Add persons with disabilities from your community to project-planning committees

Plan for the greatest needs and think ahead. People may move in and out of communities, but these projects last for many years.

### The Team Approach

Inclusion is a team effort.

Teamwork is essential to developing successful inclusive Active Living opportunities. The team may include program and facility staff, the person with a disability, their family members and friends, peers, volunteers, and medical professionals (if necessary). A supportive administration that minimizes class size, provides volunteers, encourages professional development and recognizes the need and responsibility to include ALL community members is also important.

There are many resources and tools available to create inclusive Active Living opportunities. Here is a basic eight-step approach to get started.

## **Eight Steps to Inclusion**

Open Up Communication! Get Informed! ASK!

### **Step 1: Ask about the disability**

First, you need to find out the nature of the person's disability. How?

Ask. It's the best way to get essential information and most will welcome the opportunity to talk to you about how they feel about Active Living; what it means to them, and what their Active Living goal is.

Some specific information you will need to know is their age, skill, fitness levels, and abilities.

Each person's disability is unique and it's important to identify their specific barriers and work together to overcome them. For wheelchair users, degree of arm strength will help determine their ability to participate in different activities. For example, those who can't propel themselves with their arms may not be able to play basketball, but they may be able to play floor hockey.

Once you know the nature of the disability, you can then start thinking about the modifications you can make to include the person in the activity or program.

### **Step 2: Ask about support**

If a person requires physical assistance to take part in a program or activity, ask whether they have the support of family or friends to be active. This support could also come from peers, volunteers, program assistants and education assistants. What about your organization — does it include people who can provide support?

Identify additional supports available to you, your program and your facility. Is there someone in your community or in another community who provides the same or a similar physical activity to persons with a disability? Can you use them as a resource?

For example, some Canadian rowing clubs offer adaptive rowing programs. However, adaptive rowing is still relatively new in Canada. More and more clubs are looking to start adaptive rowing programs, and coaches from other, more established programs mentor the clubs just starting.

### **Step 3: Define safety concerns**

Even for those without a disability, it's important to identify and address safety concerns related to physical activity. For a person with a disability, you may need additional safety measures. In addition, some sports or activities may not be suitable for persons with certain types of disabilities.



Things to consider:

- **Is the activity appropriate for the age and development level of the person?** The motor skills of a person with a disability may be less developed than those of others their age. You may need to make modifications so that no one is at risk.
- **What are the person's specific safety needs?** Survey your facility to see if there are any safety concerns you need to address. For example, is the playing surface even? If not, it may not be safe for a person who uses a wheelchair. Also, you will need to orient a person with a visual impairment to obstacles, stairs and exits. For activities conducted on an ice surface, participants will need helmets.
- **Are there specific health concerns related to the person's disability that might be made worse by participating in the activity? Is the intensity level of the activity safe, for the nature of the person's disability?**
- **Is equipment safe?** Equipment needs to be well maintained, correctly assembled and properly fitted. If it has been modified, it's important to be particularly cautious. Make sure that assistive devices used by a person with a disability are in suitable shape for physical activity: wheelchair brakes properly adjusted, tires fully inflated, and walkers properly fitted. Persons with a disability may also need to talk with a physical or occupational therapist to assess specific safety concerns before beginning an activity.
- **What about risk?** Some activities or disabilities require a high level of supervision. You may need to provide one-to-one assistance for some activities (e.g. canoeing) or offer additional verbal instruction to someone who has a visual impairment and can't see a demonstration.
- **Are all clients with a disability aware of your facility's emergency procedures?** Discuss your facility's emergency procedures with any person with a disability. Work with them to prepare a plan for their evacuation and safety during an emergency. Then make sure everyone at your facility is aware of this plan in case an emergency occurs when you're not there.

Plan for safety but allow "dignity of risk." Excessive safety concerns hinder the person's ability to experience physical activity.

#### **Step 4: Assess skill**

It's important to determine the skill level of the person with a disability so you and your clients can set appropriate expectations, determine if modifications need to be made, and assess safety.

You should ask yourself if **the person has been taught progressive lead-up activities**. Scale up the program at a pace that suits the individual's progress. Make sure you know the person's level of fitness, their knowledge of the activity and their skill level before beginning any program — teach the fundamentals if necessary. If they are completely new to physical activity, or just to a specific activity, they may need to start at a more basic level. Someone who is returning to an activity, or who is already physically fit, may start at a higher level.

Often, a person's success in physical activity revolves around their manoeuvrability and their mode of transport (do they use a device such as a wheelchair, crutches, etc.) and how well they can control objects (e.g. wield a stick, bat, or racquet; or catch, hold or throw a ball).

Questions you can ask to help you assess transport proficiency include:

- “How do you get around? What is your primary mode of transport (wheelchair, walker, ambulatory)?”
- “Do you have areas that would benefit from additional skill development before joining the activity?”
- “Can you run, jump forward, jump down, skip, gallop, hop, leap or slide?”
- “Is your transport skill (level of manoeuvrability) up to participating in the activity?” If not, use adaptive equipment to accommodate for the limitations.

Some questions to help assess object-control skills include:

- “Can you reach, grasp, control, release objects, catch, throw, bounce, kick or strike?”
- “Can you hold a racquet, rope or bat and control them while moving?”
- “Can you apply skills by yourself, with assistance, or with modifications?”

Individual activities may require specific skills and the ability to use specific types of equipment.

**Please see the “Additional Resources” section at the end of this booklet for a list of manuals that provide assessment tools.** Also, the person with the disability may have information regarding their skill level. Their involvement is key! ASK!

## Step 5: Set realistic objectives

As much as possible, a person with a disability should be integrated into an activity in the same way that other participants are. Their level of participation should be based on the relationship between their skill level and the complexity of the task.

Sometimes, however, inclusion means an individual's participation takes a different form. When selecting activities for a person with a disability, it's important to ask them where in the **range-of-participation** options they would like to participate. What you know about the complexity of the activity will also help to determine this.

**Range of participation** — participation that takes place at different levels — allows a person with a disability to take part in physical activity inclusively with their peers.

- **Full participation** – participation in an activity with no modifications.
- **Modified active** – participation in an activity with modified equipment, rules, distances or skill requirements. For example, for persons who use a wheelchair to play tennis, allowing the ball to bounce twice, instead of once before returning it.
- **Active parallel** – participation in an activity at their skill level. For example, a swimming class that teaches skills according to a participant's swimming ability.
- **Passive** – participation in an activity in a passive role, such as taking score, recording times, etc.
- **Informed observer** – participation by attending an activity as an observer with the goal of becoming knowledgeable about the activity.

## Step 6: Select activities

Begin by ranking the activities and programs you offer. Sort them by the easiest to make inclusive, those that would require more modification and those that have higher fitness and skill-level requirements. You can then work with the person to develop an inclusive participation model.

## Step 7: Make modifications

Once you have selected the activities in which a person with a disability will participate, determine what modifications, if any, you need to make. When making modifications, make sure that you don't compromise the activity for other participants.

You can modify equipment, skill complexity, rules of the game and distance or space. Minor modifications have little effect on other participants and the integrity of an activity. Moderate modifications may affect the role a person with a disability plays within the activity. Considerable modifications often affect the integrity of an activity and are not recommended.

Visit the All Abilities Welcome website to post your successful modification or learn from others – [www.allabilitieswelcome.ca](http://www.allabilitieswelcome.ca)

Here are some examples of simple modifications:

### Equipment modification ideas

- Lighter, softer ball – slows game and allows more time to prepare and execute skill.
- Shorter, lighter striking implement – allows greater control for weaker and less skilled players

### Skill-level modification ideas

- Substitute wheeling for running; rolling a ball for throwing, striking a soccer ball with a floor hockey stick rather than foot
- Simplify tasks

### Rule modification ideas

- Don't allow a direct challenge when the ball comes within two metres of a player.
- Allow a different scoring system to award points for specific behaviours.
- Allow an unlimited number of contacts with the ball before crossing net or centre line.
- Allow an unequal number on teams.
- Increase the number of trials allowed (for example, allow more than three strikes per batter in a game of baseball).

### Distance / Space modification ideas

- Use a smaller playing area
- Lower or reposition the target
- Reposition the start or finish line

## Step 8: Implement and evaluate

Put your plan in operation.

Don't forget to evaluate the program to see if it's working. Have the modifications you made accomplished what you intended? Is the person with a disability participating at the anticipated level? If not, you may need to find a more appropriate activity, or make further modifications. This is also an ideal opportunity to evaluate the safety checks.

# WHAT YOU SHOULD ALSO KNOW

## Language with Dignity

The language you use is an important part of inclusion.

We have included the Active Living Alliance "Words With Dignity" pamphlet in this tool kit.

In general, focus on *respect*. Speak with people the same way you would want them to speak with you. Place the person before the disability (not "disabled person," but "person with a disability,") and focus on accuracy (e.g. "confined to a wheelchair," isn't accurate; a wheelchair is anything but confining).

Your body language is just as important as the words you use. When talking with someone in a wheelchair, try sitting or kneeling next to them to increase eye contact. If someone with an intellectual disability has an assistant or aide, don't talk to the aide in place of the person.

Often, a person who has cerebral palsy, some forms of autism, who is hard of hearing, or who has experienced a stroke, may have difficulty speaking clearly. Although it may be a challenge to understand the person at first, being patient, respectful, and creative through use of hand gestures and/or writing if necessary may help to facilitate greater ease of communication.

## Characteristics of Disabilities

Disabilities that are visible fall into three broad categories: physical, intellectual and sensory. In addition to these, however, you may also have persons with psychiatric disabilities and other medical conditions that are not as apparent as those in the three categories listed here.

Even though each disability is as individual as the person with the disability, there are some key characteristics you should know to help you be inclusive of participants with disabilities.

## Physical Disabilities

Spinal cord injury (SCI), amputation, cerebral palsy and brain injury are the most common causes of physical disability. With each of these, the level of ability can vary greatly. The disability can be mild and require only minor adaptation to participate fully in a sport or physical activity program; it can be severe and require many special considerations; or be somewhere in between.

## Spinal Cord Injuries

*Characteristics:* With *spinal cord injuries*, the level of disability depends on where the injury occurred — the higher the injury is on the spinal cord, the greater the disability. Usually, after the initial changes in the body following the injury, the disability remains the same over time. **Quadriplegia** affects the arms, trunk and legs. **Paraplegia** affects the trunk and the legs. People with SCI use a wheelchair for sports and for daily living.

Individuals with SCI can take part in almost all sports and other physical activities with appropriate adaptations to equipment and rules. If the person was active before the injury, they are more likely to want to participate in the wheelchair version of the activity being considered.

## Amputees

*Characteristics:* Depending on the location of the amputation, many amputees can participate in both able-bodied and adapted activities with the use of prosthesis. It's important to remember that a sport prosthesis is as important to the amputee as any sports equipment is to the able-bodied athlete. For lower-limb amputees, the level of energy needed for daily living increases the higher on the leg the amputation occurred. Because of the added energy required, the person may grow fatigued more quickly.

## Cerebral Palsy (CP)

*Characteristics:* Cerebral Palsy (CP) is acquired during gestation, at birth or in infancy. The disability can range from mild to severe and include muscle weakness, paralysis, poor coordination and uncontrolled movement in the limbs, some may also have an intellectual impairment. The arms, legs, trunk or head may be affected and one side of the body may be more affected than the other, and some limbs more than others. With a milder disability the person with CP may be able to run, walk and talk without any limitations.

The three types of CP are *Spastic CP* (weak muscle tone, poor coordination, and muscle contractions that make affected limbs stiff); *Athetoid CP* (continuous, uncontrolled, purposeless movements); *Ataxic CP* (poor balance, uncoordinated movements and lack of spatial awareness).

Those with CP participate in a wide variety of sports and physical activities. However, a lack of coordination and trouble with quick movements can make taking part in ball sports difficult.

## Brain Injury

*Characteristics:* There are three types of brain injury. *Acquired Brain Injury* (ABI) resulting from tumours or blood clots and *Traumatic Brain Injury* (TBI) resulting from trauma to the head, both cause temporary or permanent damage to the brain. Depending on where in the brain the damage occurs, the person may be affected in motor control, personality and/or cognitive abilities. The third type, *Hemiplegia*, which can be caused by stroke, head trauma or cerebral palsy, involves partial or complete paralysis of one side of the body.



Poor balance, uncoordinated movement, lack of spatial awareness, impulsiveness or poor judgement can make participating in physical activities difficult, particularly at a high intensity level and in sports with fast movement or when rapid decision-making is required.

### **Recommendations**

- For best communication get eye-to-eye with a participant, for example, by kneeling or sitting when you are speaking with someone who uses a wheelchair.
- Ask the participant to identify their own needs and abilities.
- Think of their wheelchair, prosthetic limb, walker, etc. as a piece of sports equipment.
- Make sure facilities are wheelchair accessible.
- Ensure there is transportation to and from the activity venue.
- Make playing surfaces smooth and hard.
- Concentrate on the technical aspects of coaching, instructing or activity leadership and treat this participant as you would any other.
- When teaching the skills needed to participate, break it down into very small steps and allow the participant to master each step before moving on.
- Communication can be difficult if the person has difficulty speaking. Don't pretend to understand if you don't. Ask them to repeat what they said and ask for help from family, friends or caregiver.
- Work with the participant to slowly increase the intensity, length and complexity of the activity
- If the participant's personality or cognitive abilities are affected to a point where instruction or delivery of the activity is impacted, work with their parent, guardian or caregiver to facilitate their involvement.

### **Intellectual Disabilities**

*Characteristics:* With intellectual disabilities chronological age may not match developmental ability. Persons with intellectual disabilities may have below-average intellectual functioning, less capacity for adaptive behaviour and lower basic motor skills.

Those with intellectual disabilities can have challenges in the learning, and social and emotional areas. With certain conditions, there are associated disabilities that you may need to consider. For example, approximately 17 percent of people with Down syndrome have a condition called Atlanto-axial instability, which is greater-than-normal flexibility in the upper two vertebrae.

### **Recommendations**

- Ask questions. Find out what medical considerations you need to be aware of before planning a practice or to make the activity safe.
- Find out if the participant has participated in sports and other physical activities before.
- Find out the level of ability in all areas: learning and cognitive; social and emotional; and, physical and motor.
- When instructing, check for understanding often, make sure they understand before you move on to the next step.



- Adjust your plans to make sure they are age appropriate and suited to the ability of the participant to understand.
- Have appropriate safety and supervision practices in place.

## Sensory Impairment

The most common sensory impairments are loss of sight and loss of hearing. Sight and hearing loss may be partial or total. Depending on when the person experienced the loss — from birth, during early development, or later in life — they will have different needs and learning requirements.

### **Blind or Low Vision**

*Characteristics:* Those who experienced the loss at birth and before they developed the fundamental sport skills of running, jumping, catching and kicking, will take longer to learn physical skills and will learn in a different way. Athletes who are blind or visually impaired are supported by a guide or pilot in some sports. The trust relationship between them is vital.

### **Deaf/Hearing Impaired**

*Characteristics:* Many who are deaf do not consider themselves to be disabled but members of an alternative culture with its own language for communication. Many with a hearing impairment use a hearing aid. For deaf and hearing impaired athletes, competing in a wide range of able-bodied sports up to and including professional team sports is no problem. Minor accommodations may need to be made for the person who can't hear a referee's whistle to start or stop play, the sounds of music, verbal cues from other participants or other audible prompts. Alternatively, coloured flags can be used to indicate stops in play or other commands.

### **Recommendations:**

- Be patient in communicating with the participant. Using a different form of communication can take time to develop as you and the person get used to each other.
- Make sure the circumstances allow the participant to use their available senses well. For example, try to give instruction to athletes who are blind in a quiet environment where they can clearly hear instructions. Use the person's name when you are speaking to them, so they know you are talking to them. For those who are deaf or hearing impaired, make sure they have a clear view of your face and lips when you are speaking to them, and speak normally.

# KEEPING RECORDS

Track the results of the changes you make to your programs. Ask the participant, program coordinator or activity facilitator for their opinions on what worked and what didn't, and if there are any other changes that would make it better.

A sample template is included in the All Abilities Welcome kit and an electronic copy is available on the AAW CD for you to customize.

| Date                            | Event              | What Worked  | What Didn't  | Volunteer/ Staff Comments   | Participant Comments   | What to Change Next Time      |
|---------------------------------|--------------------|--|--|---|--|-------------------------------|
| Insert date activity took place | Inclusive Handball | Using a larger, softer ball made it easier for participants with disabilities to take part. Also, the "1-metre," safe zone rule worked well. | 15-minute quarters may have been too long for some participants. | "I really enjoyed the handball but, next time, the nets should be made larger for some participants." | "It was a lot of fun, but the softer ball wasn't necessary. Can we use a standard ball? The other changes worked great." | Larger nets, shorter periods. |

Other things your template could document:

- All meetings you have with participants (both those with disabilities and those without);
- The date and time you made any changes to your location to promote inclusion;
- The names of activity leaders involved;
- Your facility and program safety protocols;
- Financial concerns; etc.

## CHECKLIST

The checklist below can help you think of what you need to do to create inclusive programming.

### Sample Checklist

Have you:

- Talked with persons with a disability about their specific needs?
- Talked with other sources (doctors, physiotherapists, recreational therapists, other local/provincial/territorial/national organizations that offer sport and recreation opportunities for persons with a disability, etc.) and reviewed literature about inclusion and healthy, Active Living for persons with a disability?
- Asked staff, volunteers and other members of your program/facility for their input?
- Reviewed safety protocols (evacuation plans, location of first aid equipment, etc.) with staff, volunteers and all participants?
- Kept detailed records of communications and changes?

As the program runs are you:

- Checking with staff, volunteers and participants to see how the program is running and if changes are needed?
- Making any changes necessary to ensure all participants enjoy their participation?
- Watching and compensating for any safety concerns as they arise?
- Keeping records?

Once the program ends will you:

- Review the process with staff, volunteers and participants: what went well and what didn't?
- Talk one-on-one with participants with disabilities: ask if their concerns were addressed and their needs met?
- Keep detailed records of outcomes?

## FACILITY AND PARK CONSIDERATIONS

Building a new park or facility, or renovating an existing one should also take everyone in your community into consideration. Universal design accommodates not just persons with a disability, it benefits everyone — parents pushing their babies in strollers, children on bikes, older people, and individuals with a temporary disability. Incorporating the needs of persons with a disability in the planning and designing, effectively meets the needs of everyone in your community and will not increase costs.

### Accessibility ideas

#### Facilities:

- Use your municipality's Building Code and Barrier Free Design Guidelines
- Make sure all facilities allow for access into and throughout the building, including to and from the activity
- Make sure there are accessible and unisex washrooms and change rooms
- Provide adequate lighting and signage
- Make sure all areas are accessible and include adapted equipment as needed (i.e. pool lifts and ramps, TTY machines, adapted fitness equipment)
- Explore opportunities for grants in your community

## Parks and Play spaces:

- Work towards making all areas of the playground accessible.
- Use safe and accessible surfacing
- Pathways and trails should be wide, level and made of packed material
- Make tables, picnic tables, water play areas, gardens and seating accessible.
- Ramps should be incorporated into structures
- Use clear and contrasting colours for all signs

## POLICY CONSIDERATIONS

Here are some examples of policies and practices that are being used in communities across Canada. Check the All Abilities Website to learn more or to add yours!

- Fee-reduction programs (based on low income, not disability)
- Free admission for attendants
- Accessible buildings for programs
- Accessible transportation options
- TTY machines (telephone typewriter, also known as TDD-telecommunications device for the deaf)
- Sign language and real-time captioning support
- Staff training
- As new playgrounds/ parks are being built ensure they are accessible
- Consulting with and involving persons with disabilities in the program, facility and park planning process
- Program brochures in alternate formats, using plain language
- Partnering with community-based organizations that service persons with a disability to provide them with active living programming options

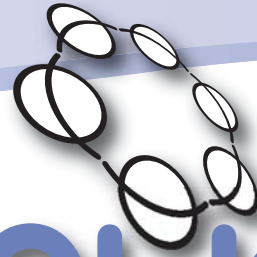
## ADDITIONAL RESOURCES

Don't forget, you are not alone in this! There is a multitude of resources available to you, to help you create inclusive Active Living opportunities.

Here are just some of the people and organizations you can contact:

- The Active Living Alliance for Canadians with a Disability [www.ala.ca](http://www.ala.ca)
- Local provincial/territorial and national disability-specific groups
- Local hospitals and rehabilitation centres
- Your municipality
- Community-based provincial/territorial and national organizations that focus on sport and recreation opportunities for those with a disability
- Local or regional health promotion departments

For a list of ALACD partners, go to [www.allabilitieswelcome.ca](http://www.allabilitieswelcome.ca)



All  
Abilities  
Welcome

# TOOL KIT



All  
**Abilities**  
Welcome

# TOOL KIT