



Canadian Paraplegic Association  
Association Canadienne des Paraplegiques  
(Manitoba) Inc.

**MPF** MANITOBA  
PARAPLEGIA  
FOUNDATION INC.

**August 2011**

**Summer Issue**

***Newsletter of the Canadian Paraplegic Association (Manitoba) Inc.***

# PARATRACKS



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& CCESS

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### Email Addresses & Voice-Mail Extensions:

Phone: (204) 786-4753

Staff Name	E-mail Address	Ext
John Powell	<a href="mailto:jpowell@canparaplegic.org">jpowell@canparaplegic.org</a>	221
Adrienne Conley	<a href="mailto:aconley@canparaplegic.org">aconley@canparaplegic.org</a>	222
Willie Ducharme	<a href="mailto:wducharme@canparaplegic.org">wducharme@canparaplegic.org</a>	223
Ron Burky	<a href="mailto:rburky@canparaplegic.org">rburky@canparaplegic.org</a>	224
Darlene Cooper	<a href="mailto:djcooper@canparaplegic.org">djcooper@canparaplegic.org</a>	225
Greg Winmill	<a href="mailto:gwinmill@canparaplegic.org">gwinmill@canparaplegic.org</a>	226
Scott Coates	<a href="mailto:scoates@canparaplegic.org">scoates@canparaplegic.org</a>	227
Maria Cabas	<a href="mailto:mcabas@canparaplegic.org">mcabas@canparaplegic.org</a>	228
Laurence Haien	<a href="mailto:lhaien@canparaplegic.org">lhaien@canparaplegic.org</a>	234
Maureen Sullivan	<a href="mailto:msullivan@canparaplegic.org">msullivan@canparaplegic.org</a>	235

Please note that Gail Burnside, CPA Hospital Services, can be reached at the following telephone number: (204) 787-2026

Toll-free: (800) 720-4933 (within Manitoba only)

Visit CPA's website at [www.cpamanitoba.ca](http://www.cpamanitoba.ca)

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Canadian Paraplegic Association (Manitoba) Inc.  
 825 Sherbrook Street  
 Winnipeg, Manitoba R3A 1M5

Tel: (204) 786-4753

Fax: (204) 786-1140

Toll-free: 1-(800) 720-4933

(within Manitoba only)

E-mail: [winnipeg@canparaplegic.org](mailto:winnipeg@canparaplegic.org)

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# Volunteer Spotlight



## *Volunteer Manitoba Awards Safeway Celebration of Ability Award to CPA Member Paul MacDonald*

**P**aul MacDonald was among dozens of individuals and organizations honoured for their volunteer efforts at the Volunteer Manitoba Awards Dinner held April 27th. The Safeway Celebration of Ability Award was presented to Paul by Safeway's John Graham, who sang Paul's praises for more than 2000 hours of volunteer service.

Paul has been a regular voluntary contributor to ParaTracks since December 2009. He has provided valuable information to our members by submitting articles on various topics such as:

- ~ *Public Transit for All*
- ~ *To Go or Not To Go*
  - *Wheelchair Repair*
- ~ *Fall '0 Up to Summer*
  - *Safety Tips for Using Powered Mobility Devices*
- ~ *Crime Proofing the Most Vulnerable*
  - *Crime Prevention Tips*
- ~ *Filling the Void*



*Paul MacDonald and John Graham,  
Safeway's Director of Public Affairs*

*Thank you, Paul, and Congratulations!*

## CPA (MANITOBA) INC.

### BOARD OF DIRECTORS UPDATE

At CPA's Annual General Meeting on June 14, 2011, the membership approved the continuance of the following Board of Directors for the upcoming year:

E. Arthur Braid \*  
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Pauline Day  
Corrine Deegan \*  
Dr. Karen Ethans  
Ron Fortier  
Jeannette Gougeon  
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Bill Neill  
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# Accessible Manitoba

On June 1, 2011, the Province of Manitoba announced Legislation to create an Accessibility Advisory Council. Labour and Immigration Minister Jennifer Howard stated that the Manitoba government is “taking action to create greater accessibility for people with disabilities and all Manitobans who face barriers in everyday life”. Minister Howard introduced legislation that will lead to the creation of an advisory council that will move Manitoba one step closer to a fully accessible province where everyone can live, work and play together, free of barriers. The Advisory Council will be made up of members of the disability community and will be responsible for identifying barriers that people face and find ways to prevent and remove those barriers. The Advisory Council will make recommendations on:

- Legislation or regulation that would set up a process to identify, prevent and remove barriers faced by people with disabilities
- Policies, practices and requirements that may be implemented by government to improve accessibility; and
- Development of long-term accessibility objectives.

At CPA’s Annual General Meeting on June 14, 2011, Guest Speaker John Wyndels’ from the Manitoba Disabilities Issues office; presentation focused on Accessibility Legislation.

## **The highlights of his presentation follow:**

### **Who are Manitobans with Disabilities?**

- Nearly all Manitobans are affected by disability, personally or through family members and friends.
- 40% of adults without a disability will experience a long term disability before they are 65.

### **Who are Older Manitobans?**

- One of out every six Manitobans has a disability: approximately 170,000 Manitobans.
- This number is expected to increase by 38% by the year 2031, largely due to an aging population.
- Right now there are 161,885 Manitobans who are 65 years of age and over.
- They also are active members of society that contribute to family, friends, communities and the workforce.
- Within a decade, adults aged 65 and over will outnumber children under the age of 15.

### **What are Barriers to Accessibility?**

- Barriers to full participation come at a high cost to older adults, persons with disabilities, to their families and friends, and to their community and the economy as a whole: attitudes; physical environment (settings and structures); communication; technology; policies and practices.
- Events or meetings held in inaccessible facilities.
- Elevators without Braille markings.
- Shopping aisles too narrow for walkers or wheelchair passage.
- Timing of crosswalks are too fast for individuals to cross safely.
- Silent electric cars that provide no audible warnings to blind persons.
- Fire alarms that give no visual signal (such as strobe lights) to Deaf persons.
- Accessible “universal” design benefits everyone and creates age-friendly communities...often at little or no additional cost when considered in advance: electric door openers for dad loaded down with groceries; ramps versus stairs for mom with baby stroller; and large print for almost anyone over 40!

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## What are the Benefits of Making Manitoba More Accessible?

- Manitoba needs skilled employees to grow.
- With tight labour markets, persons with disabilities and older people represent a labour force that is skilled, loyal and available.
- Older adults aged 55 and over represent 16.5% of the employed labour force.
- 55% of employed Manitobans aged 65 and over are still working full-time jobs.
- 17% of retired Manitobans would have continued to work at the time of their retirement if they could work part time.
- Of Manitobans with disabilities in the labour force, the unemployment rate is nearly double of those without disabilities.
- A recent survey of employers in the United States found that the majority of workplace accommodations cost nothing. Examples: Computer voice software approximately \$1,000; accessible keyboard same cost as regular, articulate speech, facing someone hard of hearing.
- Manitobans with disabilities represent over \$1 billion in consumer spending. Half of these individuals are the principle shoppers of their households.
- Manitobans are not isolated in decision-making: Their families and friends will seek out businesses where everyone feels welcome.
- A recent study in Ontario found that retail sales in that province are projected to increase between \$3.8 and \$9.6 billion over 5 years due to the elimination of access and customer service barriers.
- Products and services targeted to persons with disabilities and older adults often appeal to a much broader market, known as the 'curb cut effect'.
- For example, cell phones and MP3 players with voice output screen readers: designed for persons who are blind, enjoyed by many more who prefer voice to a small screen search.
- Accessible business is good business for Manitoba.
- Making Manitoba more accessible contributes to the independence of seniors in the province and contributes to an age friendly province which: encourages healthy, active aging; promotes the participation of older Manitobans in all aspects of our community; and engages stakeholders in building accessible, safe environments for older adults.

## What has been done in other jurisdictions?

- **Ontario:**
  - The Accessibility for Ontarians with Disabilities Act, 2005, focuses on accessibility with respect to: goods, services, facilities, accommodation, employment, buildings, structures and premises.
  - Accessibility standards set out measures, policies, practices or other requirements for the identification and removal of barriers.
- **United States:**
  - The Americans with Disabilities Act, 1990, prohibits discrimination on the basis of disability in the areas of: employment; public services; accommodations and customer service; and telecommunications.
  - An Access Board develops and maintains design criteria for: built environment; transit vehicles; telecommunications equipment; and electronic and information technology.

## A 'Made in Manitoba' approach to accessibility legislation:

- While there are many types of legislative models, there are certain elements common to all: clear, specific and achievable goals; accessibility standards for both the public and private sectors; and persons with disabilities, older adults and other stakeholders play a central role in the development of legislation.
- The statute envisioned would offer a long-term provincial vision and values statement for persons with disabilities and older adults.
- The Province plans to be a leader in fulfilling a vision of barrier-free participation for Manitobans with

disabilities.

- But full inclusion can only be achieved through a collaborative effort between all stakeholders.
- Access legislation will demonstrate that we all have the same vision for an inclusive and accessible province for every Manitoban.

**Bill 47:** The Accessibility Advisory Council Act was introduced on June 1, 2011. The Bill passed Third Reading at the Legislature on June 16, 2011 with all-party support in a unanimous vote. The Bill came into force later that same day when it received Royal Assent.

The new law requires that the provincial government complete the following steps forward within set time lines.

**Within the next 3 months (on or before September 16, 2011)**

- The minister must make the first appointments to the Advisory Council.

**Within the next 12 months (on or before June 16, 2012)**

- The Advisory Council must make its initial recommendations to the minister. These recommendations must be made public, followed by 45 days for public comment and feedback.

**Within 90 days after the period for public comment ends (on or before November 1, 2012)**

- The minister must provide written comment to the Advisory Council on the Council's recommendations and the public feedback received.

If appointments are made to the Advisory Council in the coming weeks and/or if the Advisory Council works with both focus and resolve, new accessibility-rights legislation could be introduced as early as the fall of 2012.



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## Supports and barriers to participation in community and life

By Jacquie Ripat, Nathanael Sawatzky,  
Annaka Vermeulen & Roberta Woodgate

*What does participation mean? What do people with spinal cord injuries say promotes or restricts life and community participation for them?*

With funding support from the GOING FORWARD TOGETHER: THE GOVERNMENT'S CONTRIBUTION TO SPINAL CORD INJURY LEADERSHIP IN MANITOBA, 19 adults with spinal cord injury (SCI) living in Manitoba went out into their communities armed with cameras to answer these questions. Facilitated by researchers from the Department of Occupational Therapy at the University of Manitoba, the research technique used is called *photovoice*, where people's photos and corresponding comments about the story, meaning, or message the photos represent are used to provide insight about their experiences and to highlight problematic aspects that should be the focus of change.

Individuals in this study described participation as an experience of engagement in activities, roles, and relationships that promoted their sense of accomplishment, autonomy, inclusion, and opportunity for reciprocity. Participants used phrases such as *"it's a sense of belonging"* and being able *"to do what you want, where you want, and when you want"* as they discussed participation within their lives and communities.

Individuals photographed numerous examples of supports to their participation, particularly in relation to the help and encouragement of family and friends, and the assistive technologies that they used. However, participants also took many photos capturing participation barriers.

The majority of the problematic photos related to community accessibility. Participation was limited by factors such as uneven sidewalks, high curbs, stairs, and entrances with absent or poorly placed automatic door openers. Getting into the building or business that they wanted to access could be a major challenge for participants, related to poor design and/or poor maintenance of entrances. Individuals found this especially frustrating with newer buildings, where they found inaccessibility to be unacceptable. After examining the National Building Code, the research-

ers determined that some of the newly constructed spaces identified by study participants did not meet the barrier-free design standards, leading to questions about improper design, inspection, and enforcement.



*"I don't know how they get away with this...They built this place maybe five years ago and it's not wheelchair accessible...You know it's a four or five inch curb...I thought it would be mandatory."—Participant 8*

Parking was identified as another major issue, including number and location of handicapped parking spaces, as well as size of handicapped parking spaces. Many individuals had difficulty getting in and out of their vehicles when parked in a handicapped space due to high curbs without curb cuts next to the space or inadequate room left between theirs and the neighboring parking space. Participants suggested that the lack of room could be due to outdated policy around the size of parking spaces that does not account for vans with side access. Analysis of policies relating to accessible parking revealed that, in the City of Winnipeg, accessible spaces are required to be 10 feet wide, and one in ten is required to be at least 8 feet wide, with an 8-foot wide loading or maneuvering area beside it. Considering that the average minivan is 6.5 feet wide, perhaps 3.5 feet is not enough room to load a wheelchair using a side-entry ramp or lift.

*"It is a handicap slot [on each side]; on the left-hand side or the driver's side, I am basically on the line which is as far as I can go inside the [lines]...[When the] lift is down if another car was to park close to their line then*

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*I would be running into him...This is when I have my trouble with the side there, with the mount."*

—Participant 18



The other important element of accessible parking policy is the number of accessible spaces required relative to the total number of parking spaces. Currently, as the total number of parking spaces increases, the percentage required to be accessible decreases. For example, in a lot with 100 parking spaces, four must be accessible, whereas in a lot with 1000 spaces, only 20 must be accessible. In either case, the percentage of handicapped parking spots required (4% for 100 spaces and 2% for 1000) is disproportionate to the percentage of Manitobans reported to have a disability (15.7%).

There were many photos of *pseudo accessible* public spaces - spaces which remained inaccessible despite including features to promote accessibility, such as ramps that were too steep to navigate in a wheelchair, elevators only accessible by going up or down stairs, and accessible washrooms with non-accessible door handles.



*"This is an elevator where the only way to get to it is to either go up or down stairs...Proper planning is very essential."* —Participant 6

Sometimes efforts to make a space accessible were limited to only a portion of a building, meaning the participant could not access the unmodified areas. Participants believed pseudo accessible spaces were the result of a lack of practical and accurate information about what it takes to make a space accessible. The majority of pseudo accessible public spaces appeared to have been created prior to the introduction of barrier-free design codes, or in minor retrofit situations where permits were either not required or not obtained. In either case, the building owner has made an effort to create an accessible environment, but has come up short. Why is this? Can we safely assume that they meant well, but lacked a full understanding of how to make a space truly accessible?

Participants in the study also tried to capture societal attitudes in their photos. For the most part, the public was viewed as kind, willing, to help, and accommodating; as one participant summed it up, *"It is never a problem for people to help"*. However, some deemed the help to be *overly* helpful, especially when it was not asked for. When help was not offered, most attributed this to society's lack of awareness of the kinds of accessibility issues those with SCI face. Participants generally believed that by increasing public awareness of these issues, individuals and businesses would generate increased action to promote accessibility and ultimately participation.

In summary, participants believed that the key to future development of accessible spaces is finding ways to educate those responsible for creating them. In addition to the barrier-free design sections in the Manitoba Building Code and the National Building Code of Canada, a useful resource for those seeking information on accessibility is the City of Winnipeg's Accessibility Design Standards, which are based on universal design principles. These standards can be found at: <http://winnipeg.ca/ppd/UD/default.stm> More information on Winnipeg Zoning By-Law No. 200/2006 and the requirements for accessible parking spaces can be found at: [http://www.winnipeg.ca/ppd/bylaws/Bylaw200/By-Law\\_200.2006.htm](http://www.winnipeg.ca/ppd/bylaws/Bylaw200/By-Law_200.2006.htm)

For more information about this study, please contact Jacquie Ripat at 789-3303 or [ripatj@cc.umanitoba.ca](mailto:ripatj@cc.umanitoba.ca)

**Did you know** that the Access 2 Entertainment card provides free admission for support persons accompanying a person with a disability at member movie theatres and selected attractions across Canada. The person with the disability pays regular admission.



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Simply present the Access 2 Entertainment card when purchasing tickets with your support person at participating movie theatres. A support person is an individual who accompanies a person with a disability to provide those services that are not provided by theatre employees, such as assisting the person with eating, administering medication, communication and use of the facilities. This must be verified by a registered health care provider or a recognized service provider such as your CPA Rehabilitation Counsellor.

**There is a \$20.00 fee for obtaining the card  
and the card is valid for a period of 5 years from the date of issue.**

Application forms are available at [www.access2.ca](http://www.access2.ca)  
or call the CPA office and an application form will be sent out to you.

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Payworks is a national company, but is locally headquartered in Winnipeg. Payworks has offices in Victoria, Vancouver, Kelowna, Calgary, and Toronto, as well as an enthusiastic team of payroll professionals at our national service centre in Winnipeg. The Payworks National Service Centre is located on Pembina Highway and employs more than 60 people.



## *The Payworks National Service Centre*

Payworks moved into this office space in late 2008, after the building was completely renovated. The 16,000 square foot facility is centrally located on Pembina Highway near the Jubilee overpass, offering employees ample parking and access to bus routes, shopping, and food. Most workspaces are open and central, allowing for collaboration and discussion when needed. Our offices are tastefully decorated, and there is room to grow. There are multiple classrooms, boardrooms, and a bright and cheerful lunchroom. Offering the latest in office furnishings, employee comfort and privacy was paramount.

With the recent hire of Kevin Black, a member of the Canadian Paraplegic Association (Manitoba), as a member of our Customer Service team, the Payworks team automatically made plans to upgrade the building's functionality to accommodate our

new employee. Payworks was already equipped with ramps and a wheelchair-accessible front door, so the next step was to install automated door openers on our card-entry doors into the secure main office. This was done quickly and efficiently, to ensure minimal disruption to our everyday office functions. Payworks is committed to offering a comfortable working environment for all of our employees.



## *Work Environment and Community Involvement*

At Payworks, we provide a professional and friendly environment where camaraderie is fostered and employees can work towards fulfilling career goals. We even have fun at work, because that is important. We are committed to building a highly motivated and dedicated workforce, and we appreciate our staff.

As Payworks is a national company working within a demographically diverse country, our customer service team must reflect that. We provide equal employment opportunities, and individuals hired to work for the company are selected from all applicants solely on the basis of their qualifications, without prejudice or discrimination.

Most importantly, Payworks is dedicated to our community. The Payworks philosophy is to participate in meaningful ways in the community where our employees work, live, and raise their families. We believe that the richness and health of our community greatly enhances the quality of life for everyone. Payworks proudly supports a wide range of local and national charities including: the United Way of Winnipeg, the Manitoba Theatre for Young People, Special Olympics Manitoba, and many others.

## *This is how we work!*

*~ Amanda Stephens, Payworks ~*

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# Curb Cuts Are Not Enough

By Paul A. MacDonald



*Crumbling Corner, on Sherbrook St.  
In Front of HSC*

*Here we are, another summer come and gone.* I'm hoping it was just as filled with activities and good times for all of you as it was for me. Now, we face the challenging months again. Manitobans stare old man winter

right in the eye and say "Bring It"! The big problem we all face is that our weather is harsh on infrastructure. Unrepaired sidewalks, roadways and parking lots are an annoyance for able-bodied people. For those with disabilities, it ranges from being an inconvenience to an impassable obstruction forcing the use of a more dangerous route.

If you have read my previous articles, then you know I get around a lot and have a "can do" attitude. These issues are of great interest to me, so I attended the Bill 47 hearing at the Manitoba Legislature on June 13, 2011 in hope of hearing them addressed.

There were certain concerns that were reiterated by many of the presenters that evening. One was about revising the building codes to have supports for persons with disabilities installed during construction. I have little understanding of political mumbo jumbo, so I am speaking from the perspective of being a layman with legalese **not** being my second language. I am in fact, fluent in gibberish! ☺ The provision as



*Buckled Sidewalk On Pembina Hwy.*

I understood it, would do little for existing high-rise buildings.

Frankly, too many multi-level buildings that are now in use are little more than

fire traps for anyone with mobility problems. A wheelchair cannot use the fire escape stairwell. Many places do not even have a solid plan of what to do about getting a person who uses wheelchair out of danger in

the event of a fire. I am shocked that something so obvious is missing or poorly planned in a fire policy.

## TRAPPED & DESERTED

I have personally witnessed this on more than one occasion. While being on upper floors in various buildings during fire drills, I have often been left alone to sit by the elevator and wait to be rescued. I could not know if it was a fire drill, or the real thing. I'm certain that I have already died a few times, if not from fire itself, then certainly by smoke inhalation. I am saying this and will not name places because I simply want to raise awareness that the problem exists, and it is inevitably going to lead to a tragedy. I am urging all building managers to review their fire & safety policies and be sure they have provisions for persons with disabilities. I am urging all readers to speak up on this issue. Apathy can only lead to tragedy.

## SNOW EXCUSES

Another glaring issue that must be addressed is that in the winter, very little regard is given to accessibility to stores and services for people using mobility aids. Sidewalks are so poorly cleared that people have no choice but sharing the roadway with vehicular traffic. On busy streets; it can be nerve wracking and is a disaster waiting to happen. Even when the sidewalks get cleared there often is a mound of snow right at the end of the block, which is blocking access to the curb for anyone who cannot walk. One is forced to turn around and go all the way back, then use the street. Combining frigid temperatures and bitter wind chills, dangerous conditions and misery become unwelcome complications to a person with a disability's life. Bus stops are poorly cleared in winter. What is the point of having low floor accessible buses when we can only use them in the summer?



*Buckled Sidewalk On  
McPhillips St.*

Many traffic lights change so fast that a wheelchair gets stuck halfway across the street. If there is a safety island, it is often inaccessible. One is left blocking traffic.

In the springtime, we face crumbling infrastructure. In my area alone, I have documented almost 20 places where the curb has crumbled making it impossible to go over in a wheelchair. Also included were several places where two slabs of sidewalk have buckled forming a steep peak. I have lived here for 5 years and these hazards are yet to be fixed. I have even taken photographs of places where bent rebar was sticking up out of the broken concrete. Not only are things like this a hazard to wheelchairs, but the angle is often perfect to puncture car and truck tires.

I'll now jump off my soapbox and simply hope



*Rebar Sticking Out Of Broken Concrete In Garden City.*

that the three levels of government take these issues seriously and that positive results from Bill 47 come sooner than later. With an election looming, this is a good time to put pressure on your M.L.A.'s.

Next time around I'll be writing on preparedness to survive disasters & fires when disabilities limit the ability to escape the danger. Until then, enjoy autumn and our resumption of the N.H.L.! Finally, it's back where it belongs! If someone could score me a ticket to the opener, please email me!

## INTERNATIONAL WOMEN'S DAY CELEBRATES 100TH ANNIVERSARY Achievements of Women with Disabilities Honoured at Ceremony

March 8, 2011

Labour and Immigration Minister Jennifer Howard, minister responsible for the status of women, joined Manitobans at the Legislative Building today in celebrating International Women's Day (IWD) 2011 with a special program and public reception honouring the achievements of women with disabilities.

"We are privileged to benefit from the immense contributions women with disabilities bring to the social, cultural, economic and political landscapes of Manitoba," said Howard. "We celebrate their successes and support others in the disability community who are facing and meeting the challenges life has set before them with dignity and determination."

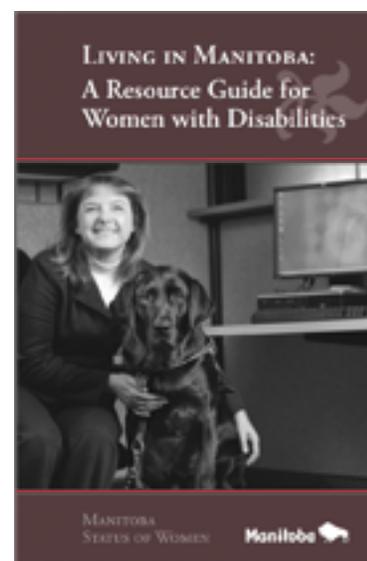
This year, IWD commemorates 100 years of successful events and worldwide observance. Every year, this occasion is an opportunity to pause and reflect in solidarity with others across the globe on the social, economic, cultural and political struggles, and achievements of women, Howard said.

Yvonne Peters, a featured guest speaker, is a lawyer who specializes in equality and human rights law focusing on women with disabilities.

Howard also unveiled a new publication, **Living in Manitoba: A Resource Guide for Women with Disabilities**. It provides information to help women with disabilities find resources, and access programs and services. This resource was developed by Manitoba Status of Women with assistance from the Dis-

abilities Issues Office and the Women with Disabilities Advisory Committee.

"Women with disabilities are leaders in all spheres of society such as business, social services, health, education, sports and recreation. Manitoba's disability community is inclusive and supportive of members, and collectively gives them a stronger voice," said Howard. "They work towards improving rights, access and quality of life for all people with disabilities, and our province is a better place because of their dedication."



**The guide *Living in Manitoba: A Resource Guide for Women with Disabilities*** provides links and information to education and training, employment and volunteering, well-being, and income benefit programs, etc. To receive your copy of the guide by mail, please call 945-6281, Toll Free 1-800-263-0024 or email [maw@gov.mb.ca](mailto:maw@gov.mb.ca). You may also download a PDF file of the guide from: [http://www.gov.mb.ca/maw/publications/womens\\_disability\\_guide.pdf](http://www.gov.mb.ca/maw/publications/womens_disability_guide.pdf).

## Circle of Life Gathering ~ Life After Addiction and Suicide

**On** May 10 and 11, 2011 my coworker Willie Ducharme and I, participated in a two day workshop named "Circle of Life Gathering – Life after Addiction and Suicide" that took place in Winnipeg at Thunderbird House hosted by Comprehensive Community Initiatives. During this gathering people shared how other people deal with the devastation of addictions to their family and the loss of loves ones to suicide. The main speakers were Mr. George Chuvalo "Fight Against Drugs", Thereon Fleury "Don't Quit Before the Miracle Happens", Tobasonakwut Peter Kinew "A Life After Addiction – The Spiritual Route", Jeff Brightnose "The Spirit Within the Tongue", Chickadee Richard "The Consequences of Addictions From the Front Lines" and others. The intensity of the pain and despair felt by people affected by addiction and suicide, and their solution for those problems, were very educational for all of the participants and they have a long lasting effect on all.

Working in the spinal cord injury field for over 5 years, I noticed we have people who experienced a spinal cord injury as a result of their addiction - during their use of alcohol and/or drugs or being with someone who is affected by their own addiction. Some examples of these incidents are: accidents caused by drinking/using drugs and driving or being the passenger of someone else under the influence who is driving a motorized vehicle (car, boat, snowmobile, quad or motorcycle). Falls down stairs, falls off bridges, being run over by car while drunk, falls off bicycles, being shot or stabbed at a party or after a party, blacking out and not remembering what happened and waking up with a spinal cord injury. The results are all the same - spinal cord injuries based on addiction.

I don't know too many people who become addicted or start to drink or use drugs after they experience a spinal cord injury, but I do know people who were addicted prior to their spinal cord injury and the use of the alcohol and drugs then increased even more. Addiction is very powerful and destructive in anybody's life. Addiction can run in the family or relationships and can destroy them too. The addiction is a jealous thing that does not like to share the addicted person with any-



body. Alcohol and /or drugs become the centre and the only important thing in the addicted person's life. There are people who have been in two to five different addiction treatment programs in their lives but relapsed. I also know people who completed no treatment program and stay sober. Addiction does not discriminate people based on their age, sex, race or social status but affects everybody. It is progressive and can kill you.

In their website <http://dpnoc.ca/drug-facts/alcohol/>, the Drug Prevention Network of Canada identify alcohol as an addictive depressant which enters the bloodstream and acts on the central nervous system. Ingested in large doses it causes slurred speech, nausea and vomiting, impairs judgment and motor function. Based on this site, statistics indicated that in the past 12 months 79.3% of Canadians 15 and older consumed alcohol, and 22.6% of past-year drinkers exceeded the low-risk drinking guidelines. In 2003 in Canada, road crashes involving a driver who had been drinking killed 902 people, of which half (450) were drivers who were legally impaired. Those are scary numbers, especially since those people are someone's brothers, sisters, mothers, fathers, relatives or friends.

The same web page also indicated that prescription drugs like Stimulants, CNS Depressants, Analgesics (uppers, downers, and bennies) are also used in Canada. A study published in November 2006 in the Canadian Medical Association Journal found that heroin was no longer the opiate of choice among many substance abusers in Canada. Prescription narcotics such as morphine and OxyContin were taking its place. Winnipeg also has seen an increase of OxyContin use.

I know that some members with spinal cord injuries use marijuana for reducing pain or spasms, but I also believe that everybody should be informed about the effects of its use on their body. Based on the same web page from above, marijuana is described as the most commonly used illegal drug. The main active chemical is THC - street Names known as: pot, ganja, weed, grass, bud, mary-jane, reefer and many others.

The following are some of the common side effects of using marijuana: trouble remembering things, sleep-

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iness, anxiety, paranoia (feeling that people are out to get you), altered time perception, relaxation, reduced coordination, reduced blood pressure. They also indicated that using marijuana for a long time makes some people lose interest in school, work, relationships and other activities. It may also cause legal problems. Using marijuana can be especially dangerous in certain situations, such as when you are driving. The following are some of the common physical effects of marijuana: tremors (shaking), nausea, headache, coordination becoming worse, breathing problems, increased appetite, and reduced blood flow to the brain. Based on statistics published in that website, 44.5% of Canadians and 70% of 18-24 year olds have used marijuana, and 47% of 18 and 19 year olds have used it in the past year. There are approximately 300 million marijuana users worldwide and 28 million users in the United States (Diaz, 1997).

Mr. Sven-Olov Carlsson, President of the World Federation Against Drugs concluded in his article published in the webpage <http://www.itfsdp.org/> - "Drug addiction is a modern form of slavery that kidnaps the free will of drug users, creates massive social burdens, and promotes hostile and dangerous behavior. To eliminate this problem, as the world community has pledged, we need balanced and restrictive policies including prevention, treatment, law enforcement, and research focusing on both demand and supply reduction,"

Having a spinal cord injury, living with a disability and being addicted to alcohol and/or drugs makes any person's life hard to manage. It is very difficult and stressful for any person who experiences spinal cord injury to transition from a lifestyle of being able-bodied to a lifestyle of being spinal cord injured. The level of spinal cord injury indicates the level of challenges a person has to deal with. These range from hard to even harder. For many people, once they experience a spinal cord injury, their lives change forever.

Everything that an able-bodied person used to do automatically without thinking about it – like using the washroom, mobility, eating independently - now has to be relearned. These include taking pain or spasm medication, managing bladder and bowel routines, preventing pressure sores, managing diabetes, accumulating knowledge about equipment and medical supplies, finding a family doctor, relocating from the reserve to Winnipeg and learning how the health care system works. Learning how to manage life after a spinal cord injury is very intensive and hard labour. Using alcohol

and /or drugs and dealing with an addiction on top of a spinal cord injury makes the transition even harder. Some of the medication may interfere with the alcohol addiction, especially when they are taken together. The medication can also be addictive and have some side effects like constipation. The person who has an addiction may also have to take higher doses of medication for them to work.

The addiction affects all of the family members. Some of them may struggle with their own addictions or try to cover up for other family members who are addicted. My advice to them is to get help for themselves. You have to take care of yourself first before you can take care of someone else. The pressure is even more intense if the family members have to also provide the personal care for the person with a spinal cord injury who has addiction problems. Sometimes you have to use "tough love" - a term used in the addictions field. There are Al-anon support groups for the people who live with someone that is addicted.

My message for you is about hope. You can have a healthy lifestyle, be happy, be successful, and enjoy sobriety with your family and friends. It is not easy to stop the denial of addiction, to stop using alcohol and drugs and to get help and go to treatment. All of those actions are very hard work that you have to do. In the process of getting sober you may experience the loss of the family members and friends that will choose to still drink and use drugs instead of getting sober like you. They may not want to spend time with you if you are sober or like you when you are sober or not using drugs. They will still want to drink and struggle with their addiction. Getting sober and staying sober may be the hardest things you may have to do in your life but the sacrifice of alcohol and drugs for a healthy and happy life is worth all of the hard work.

There has to come a time in everybody's life when they are forced to stop what they are doing, analyze their life and make a decision about their future. I learned that we can't change people and if you hope that you have the magic power to make people stop drinking or using drugs, it's a waste of your time. The only person that can change is the person that wants to change. If you have an addiction and this addiction is affecting your life, then it is time to deal with it. Stop the denial. Clean your house from the drugs you have hiding in your secret places, empty the entire alcohol bottle in the sink and throw the empty bottle away. Tell your friends and family members that you decided to not drink or use drugs anymore and ask them to

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respect your decision. Only you can change if you want to change. Only you can stop drinking or using drugs or stop both drinking and using drugs. You are the only one that can decide what you want to be, what you want to do and do it - don't wait for others to do the work for you because you have to do it. Young or old, having multiple addictions or one addiction, having a disability or having none, we all struggle with changes in our lives. You don't have to do it alone. Call for help. There are many treatments out there. Stop drinking and using drugs. Stop wasting your health, your time, your money. Make that decision now and get help now and be ready to do the work. Don't ever give up. I read somewhere that "It will work if you work it" or "You are as successful as the effort and work you put in."

In conclusion, addiction is affecting lots of people with or without spinal cord injuries, their family and friends. Because of the untreated addiction, people can experience spinal cord injury or death. Please don't be

afraid to stop drinking and /or using drugs. There is help out there and you don't have to do it alone. Call or email for help and don't wait anymore. Stop drinking and using drugs. Start to live a healthy lifestyle. There is hope for everyone.

There are some of the places you can call or email for treatment information:

Help line for alcohol and drugs treatment :

1-877-777-4386

Northern Region 1-866-291-7774

Western Region 1-866-767-3838

Winnipeg Region 1-866-638-2561

<http://www.afm.mb.ca>

<http://www.churchillrha.mb.ca>

<http://www.whisperingpine.ca>

<http://www.escape.ca/~nacm/>

~ Maria Cabas ~

## *Native Addictions Council of Manitoba - Pritchard House*

**Pritchard House** is one of the places I reach out for help for our people with spinal cord injuries who are affected by alcohol or/and drug addictions. This treatment centre is also known as the Native Addictions Council of Manitoba and it has the mission to provide traditional healing services to Aboriginal people through holistic treatment of addictions. On February 21, 2011 the Native Addictions Council of Manitoba celebrated 39 years of existence. Based on their history, the treatment centre was developed after a tragic, alcohol-related accident which occurred on May 10, 1968 on Highway 59, just south of Brokenhead, Manitoba. The accident claimed the lives of nine people. The only survivor was left using a wheelchair, and thirty-three children were left orphans. This accident brought various Native people together to determine what could possibly be done to combat this massive alcohol problem. On November 18 and 19, 1971, after a two day conference in Winnipeg, the Native Alcoholism of Manitoba was formed as an organization.

Pritchard House Treatment Program is explained on their website as Manitoba's longest running program comprised entirely of staff who are of Native descent and uses traditional Native methods like sharing circles, sweat lodges, ceremonies, in combination with current addictions treatment techniques and strategies. The counsellors have experience, educa-

tion and training in various areas which are helpful to their roles as counsellors. The program also includes Life Skills, Anger Management, how to deal with the impact of the Residential School system on Native families and cultural tradition, Human Development, Native Spirituality, Speaker meetings, morning ceremonies, and so on. Residents can speak in their own language if they so choose and are assigned a counsellor for individual sessions. The in-patient program is five weeks in duration.

On their website Pritchard House also identifies their basic criteria for admission: a desire to quit drinking and/or abusing drugs or chemicals; individuals must be assessed by referral sources prior to treatment and individuals must have a medical checkup before admission. Couples are allowed to enter Pritchard House together. No outside appointments are allowed during scheduled meeting times in order to prevent distraction from the program as much as possible and individuals must have a willingness to do something about the problems in their lives related to alcohol, drugs or chemical abuse.

Pritchard House has also an Outreach Program for the people who are currently dealing with addiction-related issues but who do not feel a residential program to be appropriate. This holistic program is based on the healing of mind, body and spirit. As per their website "NACM's programs have, at their heart, a spiritual

view which suggests all things in life are related in a sacred manner, and are governed by natural laws. The fundamental elements stressed are: "a belief in or knowledge of unseen powers - FAITH; knowledge that all things in the universe are dependent on each other -SHARING; a belief that we must respect all creation - KINDNESS; a personal commitment to be forthright in all our affairs - HONESTY; and that personal worship reinforces the bond between an individual, the family, the community and the Great Spirit - Worship/PRAYER is a personal commitment to the sources of Life."

Pritchard House is currently located at 160 Salter Street in Winnipeg, Manitoba R2W4K1. Their email address is [info@nacm.ca](mailto:info@nacm.ca). You can call them at 1-204-586-8395 and their fax number is 1-204-589-3921.

The Intake Counsellor can be reached at [intake@nacm.ca](mailto:intake@nacm.ca). Intake for Pritchard House is conducted through the Intake Office, which is open from 8:30 a.m. - 4:30 p.m., Monday to Friday.

All of this information was take from their website:

<http://www.mts.net/~nacm/ph.html>

~ Maria Cabas ~

**What Plans do some of our Aboriginal CPA members have for the 2011 summer?**

" I will spend time with my grandchildren and my family in reserve." A.L. Swan River

" I will get ready for school in September ."

J.K. Winnipeg

" I will go fishing and spend time with my family in Fisher River." J.V. Winnipeg

" I will move into a new place and then I will get ready for Red River College in September."

T.C. Winnipeg

" I will enjoy having my first new place and get ready for school in September." R.P. Winnipeg

" I hope to improve my health after the pressure sore operation and enjoy the summer." V.S. Pine Falls

"I want to move into Fokus Unit then enjoy my children for the summer when they visit me."

J.M. Winnipeg

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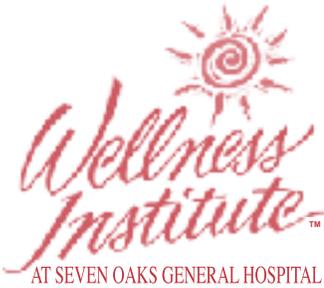
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**Get Better Together!** is a free six-week workshop designed to help Manitobans with ongoing health conditions to take control of their health. Learn to solve problems and set goals to live a better life in each of the 2½-hour sessions. Workshops are offered during Spring, Fall & Winter. You'll receive a copy of the book "Living a Healthy Life with Chronic Conditions" and you're welcome to bring a support person. The program is also available in French.

## PROGRAM SCHEDULE

**Get Better Together!** helps you learn strategies to control pain, deal with fatigue and frustration, get more active, handle stress and eat well to live well. Discussion and goal setting will help you to increase your energy level, use medications effectively and talk about your condition with health professionals, friends and family.

**Get Better Together!** is a licensed version of the highly successful Chronic Disease Self-Management Program at Stanford University Patient Education Centre.

**Get Better Together!** is for anyone living with a chronic disease or ongoing health concern, such as Arthritis, Asthma, Cancer, Chronic Fatigue Syndrome, Chronic Back Pain, Diabetes, Fibromyalgia, Heart Disease, Hepatitis, High Blood Pressure, Lupus, Multiple Sclerosis, Parkinson's Disease, Stroke or other health problem or disability! You must be 18+ years old (some exceptions may apply) and able to attend for six weeks consistently.

## Call 632-3927 to Register Free

Register through the Wellness Institute by calling 632-3927, emailing [gbt@wellnessinstitute.ca](mailto:gbt@wellnessinstitute.ca) or through their online services at [www.wellnessinstitute.ca/gbt](http://www.wellnessinstitute.ca/gbt). You may also register at participating program sites. You must be 18+ years old (some exceptions may apply) and be able to attend for six weeks consistently.

## For information on Programs throughout Manitoba, please contact the following;

Assiniboine Regional Health Authority – 204-483-7328 ext#171

Interlake - 204-785-4839

Brandon - 204-578-2196

NOR-MAN - 204-627-1401

Burntwood - 204-667-5316

North Eastman – 204-444-6142

Central – 204-870-0629

Parkland - 204-629-3014

Churchill - 204-675-8360

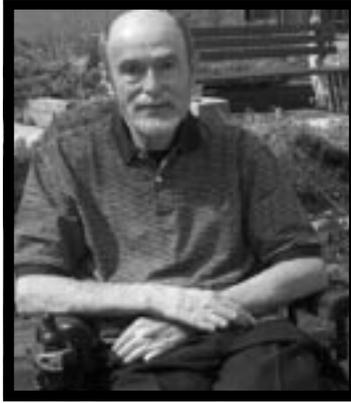
South Eastman - 204-346-7001

# Don Ament

**Don Ament**, former CPA Board Member, passed away in April of this year. Don served on the Board of Directors of CPA for nine years – from 1987 to 1996.

Don spent many years working on shared care service models and independent living practices, particularly in the context of the Fokus Council – an organization to which he devoted considerable time, almost since its inception. Don was one of the pioneers of community service models.

Don's passion for and knowledge of accessible design was incredible and he was very interested in sharing that knowledge with government, disability organizations and private developers. With his extensive knowledge of housing options for persons with disabilities, he was a tremendous resource for



many. He was a tireless advocate for accessible and affordable housing. He was involved in many accessible housing projects such as Fokus, Tranquility Place, Cluster, HAL, Bertrand Place, etc. during his 26 years as the Housing Development Coordinator at Ten Ten Sinclair Housing Inc. He also helped many CPA members identify their housing needs, assisted with connecting them with the right people and accompanied them to check out potential housing accommodations.

As well as volunteering his time with the CPA Board, Don also volunteered with many other agencies such as Manitoba League of Persons with Disabilities, Fokus Council and Canadian Centre for Disability Studies.

Don will be missed by the countless number of people whose lives have been enriched by his own.

## Ability Axis Employment Expo

Staff from the Vocational Rehabilitation Program, Family Services and Consumer Affairs informed CPA's vocational services staff of The Ability Axis Employment Expo. The Ability Axis Employment Expo is focused on increasing employment opportunities for Manitobans with disabilities. Information suggests that 40% of working age people with disabilities in Manitoba are not engaged in the workforce and that persons with disabilities experience an unemployment rate 50% higher than that of persons without disabilities.

The Expo began with a "Best Practices Breakfast." Randy Lewis, Senior Vice President, Distribution and Logistics, Walgreens which is a national employer based in the United States, was the featured speaker. Mr. Lewis advised the audience that his son, Austin, a young adult, was diagnosed with autism. He indicated that his son has no friends, has never been invited to a birthday party, would never marry, and that he would never be offered a job. Mr. Lewis advised of the common belief that people with disabilities cannot do the job.

Mr. Lewis indicated the belief at Walgreens is that people with disabilities can work as well as anyone else, that they can work full-time, work to the same

standard as any other employee, work side-by-side with any employee and for the same rate of pay. He indicated that more than 40% of the staff at the Walgreens distribution centre in South Carolina have a cognitive, mental health or physical disability and boasts a 20% greater production rate than many counterparts across the nation. The video in which staff was interviewed speaks of an inclusive workplace, where people are treated as they themselves would want to be treated and as a "melting pot" where everyone comes together for the good of the company.

A number of hour-long workshops followed the Best Practices Breakfast, including "The Nuts and Bolts of Supported Employment," "Disclosing Your Disability in the Job Search Process," "Your Own Business: Self Employment & Entrepreneurship," and "Disability-Friendliness in Customer Service Delivery." Additionally, a number of exhibitors were represented including but not limited to: Assiniboine Credit Union, Bison Transport, Connect Employment Services, Inc., Manitoba Entrepreneurship, Training, and Trade, Reaching E-Quality Employment Services, Manitoba Public Insurance, Partners for Workplace Inclusion Program, and the Manitoba Metis Federation

~ Laurence Haien ~

## Gold Podium Finish for Manitoba Wheelchair Curlers

By Allen Christopher

*“There are times when life is pure joy,”* were the thoughts going through the minds of the members of the Manitoba Wheelchair curling team, as the final Alberta stone came up short giving the team from the Keystone Province an 8-7 victory over their counterparts from the Wild Rose Province. For Manitoba’s first ever National Championship at the Canadian Wheelchair Curling Championships in Edmonton this spring, it provided feelings of redemption and enormous accomplishment.



It’s been a long climb to the top and a golden podium finish for the Manitoba rink of skip Chris Sobkowicz, third Dennis Thiessen, second Melissa Lecuyer, lead George Horning, and with alternate Don Kalinsky, and coach Rob Lamb. It was an extremely emotional time for the whole team, as they remembered that they did not win a single game in their first three years as the Provincial reps beginning this journey six long years ago. The last three years proved to show the improvement of the team, as they brought home a Bronze medal at each outing. “Don’t take it wrong for us saying that we were getting tired of Bronze; but we just knew that we were a better team skill wise this year, and made the necessary physical and mental preparations to get us over the hump”, explained coach Lamb.

In the championship game Manitoba made a huge case for themselves by stealing 2 in the 5<sup>th</sup> end to go



up by one. “It was the game breaker which gave them all the confidence to play the next 3 ends” said Wayne Ficek skip of the Northern Ontario Team after the game. “I knew Manitoba was going to build on that steal.....it was so pivotal.” Sobkowicz concurred with his rival skip from Kenora saying that “it provided us the quiet confidence that we might just pull it off.” In the sixth end, Alberta drew to the four foot to get their point going to the 7th end all tied up. In the 7th end, Manitoba played a picture perfect end with George Horning and Melissa Lecuyer setting up the end, and Dennis Thiessen placing two perfectly placed stones, putting tremendous pressure on the Albertans. Sobkowicz made a nice hit and roll on his first stone, and needed a draw to the button to take a back breaking 3 in the seventh. In the final end, Manitoba leading by two played to keep everything clean. Sobkowicz missed an open hit on his first stone but redeemed himself by executing a very difficult double take out and hiding behind cover. The Alberta skip only needed to draw to the four foot to tie the game, but came up short resulting in a Manitoba Celebration that had many spectators wondering if the players were going to fall out of their chairs.



The Manitoban team went 7-2 during the round robin, earning a spot in the three-versus-four page playoff game. “The goal all along was to make the playoffs,”

said third Dennis Thiessen, “We knew how tiring the week could be for the players, and we were determined to bring a team that would be as strong in the playoffs as it was in the opening draw”. It’s a tribute to our coach, Rob Lamb, and the commitment to buying into that philosophy by the whole team.

Although a rookie to Wheelchair Curling, Melissa Lecuyer proved to be one of the biggest surprises to the rest of the country, by her strong take out strength, and her precise draw weight. “Mel had played ringette and hockey before her injury, and certainly knew how to bring her “A” game when it was needed most,” said coach Rob Lamb.



### *Coming to a Club near you.....*

Now that the Nationals are over, Manitoba is embarking on growing the sport in the province for more people to participate. Manitoba can no longer come in under the radar on the National scene, and will have that proverbial target on their backs. So the need to increase the numbers and provide training to new players on a regular basis is a focus for Team Manitoba and the Manitoba Curling Association.

Wheelchair curling is identical to the stand up game, however there is no sweeping allowed. That puts tremendous pressure on the players to understand the ice conditions, throw the right weight, and obviously hit the target. The game is open to all persons of both genders with a disability who could not play the game safely without the use of a wheelchair. The game is open to paras and quads, amputees, and persons afflicted by polio, stroke, or other types of physical disability. There are even a few players that use an electric chair to play. The target market group

for wheelchair curling is two fold. The sport is always looking for and encouraging the disabled community who might be interested in learning the sport, however the sport is also encouraging those curlers in the community who no longer can get into the hack as a result of arthritis or other invisible disability for fear of falling - to come out and try it from a chair.

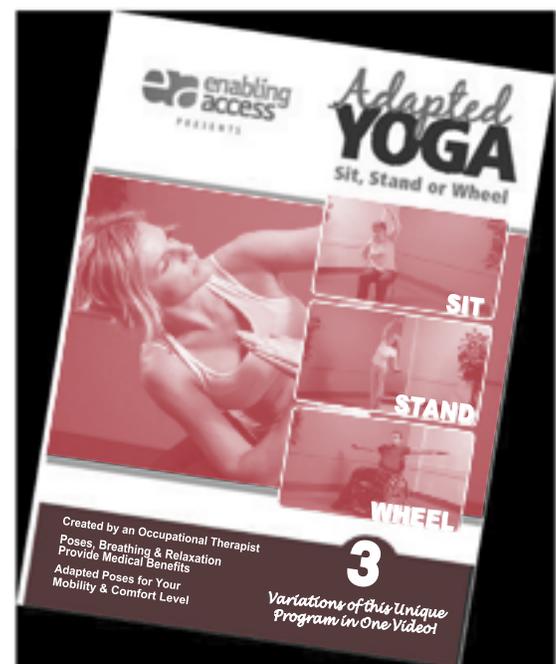
Members of Team Canada, and Team Manitoba will be holding awareness clinics in September for those interested in giving it a try. Learning from the best would be a good start. Canada has won the World Wheelchair Championships for the last 3 years, and now with Manitoba being the reigning Canadian National Champions, you cannot find a better field of teachers anywhere. There are a number of curling clubs being used for wheelchair curling to date, and they include: Fort Rouge, Assiniboine Memorial, Fort Garry, Stonewall, West Kildonan, East St. Paul, Warren, St. Anne, Petersfield, La Salle, and Brandon.

If you are interested in considering curling either as a passionate competitive sport, or as a relaxing social and recreational outing it is suggested to contact any one of the National Champions if you know them, or to contact Chris Sobkowicz directly at 453-1010 in Winnipeg, or by email at [sobby9@shaw.ca](mailto:sobby9@shaw.ca).

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## 2011 Merit Award Presented to Scotiabank Winnipeg Region

CPA's Merit Award was initiated in 1965 to recognize organizations, supporters and persons with spinal cord injuries who have made a contribution to the Association either through their personal efforts or as an example of successful rehabilitation.



*At CPAs* Annual General Meeting on June 14, 2011, Board Member Art Braid presented the 2011 Merit Award to the Scotiabank Group, Winnipeg Region, for “its dedication and commitment in supporting persons with spinal cord injury and other physical disabilities to achieve greater independence, self-reliance and full community participation.”

Art stated that “At a national level, Scotiabank in 2003 partnered with Rick Hansen to be a lead sponsor of Wheels in Motion. The various Regions of the bank were requested to help out in their areas. When Bill Crook and I co-chaired the first event, representing Scotiabank on the Committee was Terry Bjornson, then a senior executive of Scotiabank in the Region. CPA was involved because it was hoped that 40% of the gross proceeds from the event would be used for CPA projects. The Winnipeg event started with just a wheel around Assiniboine Park and we raised a modest \$4000.00 for our project, “Reclaiming Self-hood”. At the event itself we needed lots of volunteers to take pledges, register participants, mark and monitor the course, direct the parking, etc. Terry said that he had all that covered and not to worry. Indeed, on the day of the event there were people with red Scotiabank T-shirts everywhere you looked. Without these engaging, happy and helpful red shirts the event simply would not have happened.

In the third year Bill Crook left to join Rick in Vancouver and Terry became co-chair with me. He brought on a few new people from the bank to participate on the organizing committee. Now, not only

was the District supplying the volunteers to run the day's events but also providing key people to plan and organize the activities. When I ceased to be co-chair after four years, Scotiabank stepped in and provided that leadership. And what leadership it was! They started the “Bud and Spud” fund-raiser that more than doubled the revenues and brought awareness of SCI to countless additional people. CPA was always given a prominent role in the program at the Bud and Spud and the Wheels in Motion event itself. In the last three years the Scotiabank volunteers almost single-handedly planned and organized the day itself and the Bud and Spud. Additionally, some individual branches conducted their own awareness and fund-raising events.

I mentioned that in the first year CPA received a modest \$4,000.00 as its share of the event proceeds. Thanks to the creativity, organizational ability and plain hard work of the Scotiabank volunteers, CPA has received over the past eight years for various programs and projects, approximately \$200,000.00! Another \$33,000.00 was raised by Scotiabank for projects outside Winnipeg. We can measure the dollars raised but the promotion of SCI awareness and public education is immeasurable. All this was quite simply, not possible without the dedication of the management and staff of this Scotiabank region.”

Past Wheels in Motion Committee Presidents **Terry Bjornson**, Janice Butler, Sandie Edie and Roxana Mazur were in attendance to accept the Award (Past President Larry Fayle was not able to attend. *Please see front cover*) Art expressed his and CPA's pleasure and gratitude to Scotiabank and their colleagues for their contribution to CPA and persons with disabilities in the community.

### **FOR SALE:**

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## BECOME A CPA MEMBER TODAY!

Your membership dollars support us in our efforts to remove barriers in the community, publish the newsletter ParaTracks and provide rehabilitation counselling services to our members.

**We have changed our membership program from monthly renewal to annual renewal.  
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**Please take a moment to fill out the application on the back cover  
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**Thank you for your commitment to the vital work  
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Return undeliverable Canadian addresses to: \_\_\_\_\_  
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825 Sherbrook St., Winnipeg MB R3A 1M5

PM 40050723

## MEMBERSHIP APPLICATION

**YES!** Count me in as a member of the Canadian Paralegic Association (Manitoba) Inc. All members receive "Para-Tracks" CPA (Manitoba) newsletter, "Total Access" CPA National Magazine and voting privileges at the Annual General Meeting. Members also receive discounts at various health care supply stores – Stevens Home Health Care Supplies (special pricing for supplies & 10% off equipment), The Access Store (10%), Northland Home Health Care (10% off medical supplies) and Disabled Sailing membership (25%).

I wish to select the following category of Membership:

- \$15 - \$24 - Member                       \$250 - \$499 - Charter Member  
 \$25 - \$99 - Supporting Member                       \$500 and over - Patron Member  
 \$100 - \$249 - Sustaining Member

*All Monies donated remain in Manitoba to support CPA (Manitoba) Inc. An income tax receipt will be issued for any amount over \$15.00. Sustaining, Charter and Patron Members will receive recognition of their generous contribution in the context of events such as our Annual General Meetings or in the programs of other CPA (Manitoba) Inc. functions.*

**\*\* IMPORTANT \*\*** According to Canada's Personal Information Protection and Electronic Documents Act, commencing January 1, 2004, all businesses and organizations are required to obtain an individual's consent when they collect, use or disclose their information. **Unless you indicate otherwise by checking the box below, signing and returning this form to CPA, you are providing a form of consent that permits CPA to use the information you provide on this membership form for the purposes of sending out membership receipts and cards, reminder notices with membership applications and newsletters as noted above. You are also consenting to having your name listed in CPA's Annual Report (Sustaining, Charter and Patron members).**

**CPA (Manitoba) Inc. does not sell or trade personal information and does not rent out mailing lists. Personal information is provided to a third party only for the purpose of sending out CPA's newsletters.** If you have any questions, please call the CPA office.

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Make cheque payable to: **Canadian Paralegic Association (MB) Inc.**

Mail to: 825 Sherbrook Street  
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For more information:

Phone: 204-786-4753

Toll-free within MB: 1-800-720-4933

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