



Canadian Disability Policy Alliance

**Alliance Canadienne concernant
les politiques reliées au handicap**

Main Street Accessibility: Thornbury, Ontario

Final Report

Katherine Irwin (Summer Intern)

Mary Ann McColl, PhD, MTS

August 31, 2012

Table of Contents

About the Canadian Disability Policy Alliance	
Executive Summary	
Introduction	
Policy Analysis	
Method <ul style="list-style-type: none"> • Design • Sample • Data Collection • Data Analysis 	
Findings <ul style="list-style-type: none"> • Accessibility Audit • Key Informant Interviews 	
Discussions and Conclusions	
References	
Appendix: Main Street Accessibility Checklist	

ACKNOWLEDGEMENTS

The authors gratefully acknowledge the assistance the local organizing committee (Bruce Sinclair, Cho Sinclair, Catherine Smart), and of the CPA Ontario (Bill Adair and Michael Johnson). We also appreciate the assistance Lynn Roberts and Mike Schaub at the Centre for Health Services and Policy Research at Queen’s University, and the Canadian Disability Policy Alliance.

This research was supported by:



Social Sciences and Humanities
Research Council of Canada

Conseil de recherches en
sciences humaines du Canada



Canadian
Paraplegic
Association
Ontario

Association
canadienne des
paraplégiques
Ontario



ABOUT THE CANADIAN DISABILITY POLICY ALLIANCE

The **Canadian Disability Policy Alliance** is a national collaboration of disability researchers, community organizations, and federal and provincial policy-makers, aimed at creating and mobilizing knowledge to enhance disability policy in Canada, to promote equity and opportunity for disabled Canadians. The Alliance is funded by the Social Science and Humanities Research Council for a period of 5 years, during which time the members will address four policy areas: **Employment, Education, Citizenship, Health services.**

Our vision for Canada is a place where people with disabilities enjoy full participation and citizenship, supported by a coherent framework of **legislation, regulation and program entitlements.** This vision is achieved through:

- **United voices** – of researchers, consumers, policy makers, providers, educators, employers; across jurisdictions, across boundaries, across barriers;
- **Learning collaboratively** – through focused, interactive research cycles;
- Effectively using **tools for change** – producing context-relevant evidence to promote equity-based policy.

University Partners:

Mary Ann McColl	Queen's University (University Lead)
Alice Aiken	Queen's, Rehabilitation (Health Services Lead)
Lyn Jongbloed	UBC, Occupational Therapy (Employment Ld)
Audrey Kobayashi	Queen's, Geography (Citizenship Lead)
Vianne Timmons	University of Regina (Education Lead)
Jerome Bickenbach	Queen's, Philosophy / Law
Mary Law	McMaster University, Rehabilitation Science
Kathleen Norman	Queen's, Rehabilitation
Helene OuelletteKuntz	Queen's, Community Health & Epidemiology
Scott Thompson	University of Regina, Faculty of Education

Community Partners:

Bill Adair	Canadian Paraplegic Association Ontario (Community Lead)
Katherine Hum-Antonopoulos	Canadian Hearing Society
Max Beck	Easter Seals Canada
Steven Christianson	Ontario March of Dimes
Gordon Porter	Canadian Association of Community Living

Policy Partners:

Abdou Saouab	HRSDC, Knowledge Planning & Exchange
Ellen Waxman	Assistant Deputy Minister, Ontario Accessibility Directorate

Project Manager:

Mike Schaub	Queen's Centre Health Services & Policy Research
-------------	--

*Queen's University, Abramsky Hall, 3rd Floor, Kingston, ON, Canada, K7L-3N6
 Ph: 613-533-6000 (x79363) Fax: 613-533-6353 www.chspr.queensu.ca*

Executive Summary

The Accessibility for Ontarians with Disabilities Act (AODA) was enacted in 2005 to ensure an accessible society for people with disabilities by 2025, including both private and public businesses and organizations. How does the Act actually work, and what difference does it make in communities in Ontario? Questions such as these motivated a small group in Thornbury, ON to seek the assistance of the Canadian Paraplegic Association Ontario and the Canadian Disability Policy Alliance to examine accessibility in their town. Over a four-month period during the summer of 2012, research was conducted to evaluate physical accessibility and attitudes towards disability among “main street” businesses in Thornbury. The study consisted of two design elements: an accessibility audit of downtown Thornbury, and key informant interviews with “early adopters” in terms of accessibility.

The following report summarizes the limited information available in grey and peer-reviewed literature on promoting community accessibility; reviews the current status of the AODA, and its potential contribution to this issue; presents the results of a two-part study conducted on site in Thornbury in July 2012; and, discusses potential next steps and recommendations for increasing accessibility.

More than half of Main Street businesses in Thornbury are at least minimally wheelchair accessible – about a quarter are ideally accessible, and a quarter have compromised accessibility. Less than half of businesses are not accessible, typically characterized by an inaccessible entrance including stairs or narrow doorways. In some instances, these businesses were also characterized by a lack of interest in accessibility, and although no one was actually hostile to our overture, several were dismissive.

The early adopters pointed to the importance of a policy framework that supports accessibility and includes enforcement measures. Several had initially made changes to enhance accessibility because they were required to do so by law. They were however surprised that the costs were manageable, and that significant good will and increased business was generated as a result. A short summary and analysis of the AODA shows the potential for this legislation to act as a tool to promote greater awareness, accessibility and inclusion in Ontario communities.

Accessibility is important not only for disabled Ontarians, but for society as a whole. It benefits both community members and local businesses owners. In this spirit, we offer the following recommendations based on the findings of this study.

1. Patronize, publicize, celebrate businesses that are accessible, and encourage others to do the same.
2. Look for opportunities to promote the friends and allies that have already declared their support by making their business accessible.
3. Seek appointment of sympathetic individuals to key positions in municipal affairs and business development.
4. Develop a strategy to address the approximately half of businesses that are not accessible. In particular, do not patronize these businesses, regardless of personal preferences.
5. Identify key stakeholders and decision-makers in the community and cultivate a positive position on accessibility.
6. Become familiar with the AODA, and the potential to use it as a tool in promoting the local agenda – particularly the Customer Service and Built Environment Standards.

7. Develop materials to assist businesses to know where to turn for information on AODA, Building Codes, Universal Design. Assemble a resource kit.
8. Offer the expertise of individuals within the group to businesses seeking information on accessibility.

Introduction

The Accessibility for Ontarians with Disabilities Act (AODA) was enacted in 2005 to ensure an accessible society for people with disabilities by 2025, including both private and public businesses and organizations. It is unique in Canada, making Ontario the only province with explicit disability accessibility legislation. At a time when international and national jurisdictions (including the UN, US, UK and Australia) have enacted disability rights protections, Ontario has adopted a different approach to ensuring equity and opportunity for disabled members of society. Rather than attempting to ensure the protection of individual rights, the Ontario Act takes a systemic approach to a more accessible and inclusive public and private sector, and attempts to enforce accessibility standards across the province.

How does the Act actually work, and what difference does it make in communities in Ontario? Questions such as these motivated a small group in Thornbury, ON to seek the assistance of the Canadian Paraplegic Association Ontario and the Canadian Disability Policy Alliance to examine accessibility in their town. Over a four-month period during the summer of 2012, research was conducted to evaluate accessibility and attitudes towards disability among “main street” businesses in Thornbury.

The following report:

- summarizes the limited information available in grey and peer-reviewed literature on promoting community accessibility;
- reviews the current status of the AODA, and its potential contribution to this issue;
- presents the results of a two-part study conducted on site in Thornbury in July 2012;
- discusses potential next steps and recommendations for increasing accessibility.

Statistics

Currently, more than 1.85 million citizens in Ontario qualify as having a disability. This accounts for approximately 15% of the population (Statistics Canada, 2001). Approximately 53% of the population is affected personally by disabilities, meaning either they or a close family member has a disability (Beers, 2010).

Accessibility

Accessibility is defined as “the degree to which an environment is can be approached, entered, operated in or used safely with dignity by individuals with disabilities” (Welage & Lin, 2011). In this project, because of the affiliation with the Canadian Paraplegic Association Ontario, and because of the interests of the local group, the emphasis is on wheelchair accessibility.

Barriers in the Community

The way communities are designed is a reflection the values they hold (Rothenberg & Hornstein, 2001). Barriers are defined as anything that may cause an individual with a disability to be excluded. Four types of barriers inhibit accessibility for people with disabilities:

- Physical barriers, including narrow doorways, stairs, lack of manoeuvring room, obstacles;
- Attitudinal barriers, such as stereotypes, perceptions or assumptions about an individual's ability;
- Expertise-related barriers, meaning lack of knowledge about disabilities and the accommodation needs of individuals; and,
- Systemic barriers, referring to systems or structures that discriminate against individuals with disabilities (McColl & Jongbloed, 2006).

The literature shows that 61% of disabled people who use wheelchairs felt they were excluded because of the way businesses and services are designed (Bromley et al., 2007). Some of the main physical barriers found in the literature included narrow doors, inaccessible entrances, lack of curb cuts, and unnavigable passages (Thapar et al., 2004; Bromley et al., 2007). Disabled individuals who live in inaccessible communities have lower rates of community participation (Chaves et al., 2004), and face greater social isolation than their non-disabled counterparts (Riley, Rimmer, Wang & Schiller, 2008).

Community Engagement

In order to promote accessibility, disabled individuals or advocacy organizations often engage with community businesses and groups to consider the needs of disabled customers and to marshal resources in the community to promote accessibility and opportunity. Community engagement has benefits for both individuals and for the community as a whole. First, community engagement has been shown to improve quality of life for individuals who choose to "get involved" (Ranatakokko, 2010). Second, community engagement is essential to ensure change occurs. Citizen engagement leads to best results that are longer lasting and a strong sense of pride in the community (Aboelata & Erosoylu, 2011).

There are three steps in the process of seeking change toward better physical accessibility:

- The first step is to understand what needs to be improved. A community audit is the best way to do this (Andrade & Ely, 2012). This may include a "guided tour", where individuals visit a particular area to see the challenges faced by that community (Andrade & Ely, 2012). Conducting focus groups to ask about accessibility issues and priorities is another useful method (Rimmer et al., 2004).
- The second step is to engage concerned citizens to create a plan to make change.
- The third step is to identify key authority figures and determine how best to work with them. Local authorities have the power to provide financial support, create policy, hold the community responsible, and maintain standards.

Policy Analysis

The Accessibility for Ontarians with Disabilities Act is analyzed here using the disability policy analysis framework proposed by McColl & Jongbloed (2006). The framework is one of the key methodologies used by the Canadian Disability Policy Alliance. It consists of 7 questions that constitute a comprehensive analysis of policy as it affects people with disabilities.

1. ***Objective:*** *What is the objective of the policy: Equity, Access, or Support?*

The Accessibility for Ontarians with Disabilities Act (AODA) is designed to promote access. The goal of the standards is to “create an inclusive society where everyone can participate to their full potential” (Beer, 2010). The AODA proposes five standards for ensuring accessibility: customer service, transportation, information technology, employment and the built environment (Beer, 2010). It applies to both public and private sectors across Ontario (Ministry of Community and Social Services, 2008).

2. ***Jurisdiction:*** *At what level of jurisdiction is the policy (federal, provincial, regional, municipal)? How does it correspond to other policies at that level? At other levels?*

AODA is administered at the provincial level in Ontario. It coexists with social assistance and disability pensions, human rights, housing and health care legislation that specifically addresses issues of importance to people with disabilities. Other provincial legislation that seeks to assist and protect individuals with disabilities include the Blind Person’s Act, the Education Act, the Planning Act and the Highway Traffic Act (Beer, 2010).

The federal and provincial Human Rights codes and the Charter of Rights and Freedoms take precedence over all provincial legislation, including AODA. It is possible that businesses or organizations could meet AODA standards yet still receive complaints and violations of individual rights (Beer, 2010). Disabilities advocates point to the fact that standards of the AODA represent minimum requirements for accessibility (Beer, 2010).

3. ***History:*** *At whose initiative was the issue brought to public attention? Who were the proponents and detractors of the policy?*

The AODA was passed in June 2005, to augment the commitment to accessibility first expressed in the Ontarians with Disabilities Act (Ministry of Community and Social Services, 2001). The AODA (and previously the ODA) were driven by individuals with disabilities, and organizations that seek to represent individuals with disabilities, in particular the AODA Alliance, led by David Lepofsky. Although individuals with disabilities contribute approximately \$25 billion in spending power across Canada, opposition has come from the business community related to the costs of meeting the standards (Ministry of Community and Social Services, 2008).

4. ***Eligibility:*** *What definition of disability is employed? Who is included and who is excluded from the considerations spelled out in the policy?*

The definition of disability used by AODA is derived from the Human Rights Code of Ontario:

- a) *Any degree of physical disability, infirmity, malformation or disfigurement caused by bodily injury, birth defect or illness and, without limiting the generality of the foregoing, includes diabetes mellitus, epilepsy, a brain injury, any degree of paralysis, amputation, lack of physical co-ordination, blindness or visual impediment, muteness or speech impediment, hearing impairment or physical reliance on a guide dog or other animal or on a wheelchair or other remedial appliance or device,*
- b) *A condition of mental impairment or a developmental disability,*
- c) *A learning disability, or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language,*
- d) *A mental disorder, or*
- e) *An injury or disability for which benefits were claimed or received under the Workplace Safety and Insurance Act, 1997.*

5. **Stakeholders:** *Does the policy correspond to the mission of pertinent advocacy organizations? If so, how are they involved? What is their position, and how are they making it known?*

Stakeholders in AODA are represented on the Standards Development Committees, which “develop proposed standards to be submitted to the government for approval as regulations” (Beer, 2010). These committees must have representation from: persons with disabilities; representatives from industries or organizations to which the standards will apply; and, government. The goal of each standards committee is to determine long-term accessibility goals to be accomplished by 2025 relative to each of the five standards (Beer, 2010).

6. **Minority vs universality:** *Does the policy refer to disability as a minority group issue or as a mainstream, universal issue? Does it provide specialized services to people with disabilities, or does it apply generally to society as a whole?*

AODA takes a universal perspective, adopting a systemic approach to increasing accessibility and inclusiveness for all Ontarians. There are no specific benefits or services extended to people with disabilities based on their ability to conform with eligibility criteria.

7. **Rights vs responsibility:** *Does the policy aim to correct an injustice perpetrated on an individual, or does it seek to make Canadian society collectively a more supportive place for people with disabilities? Does it seek to enforce individual rights, or to outline collective responsibilities?*

The AODA seeks to enforce the responsibility of all public and private sector organizations to ensure that they are accessible to people with disabilities. The Act requires full compliance by January 1, 2025, but is meant to be implemented in increments, as the 5 standards take effect (Ministry of Community and Social Services, 2008). Businesses and organizations must report regularly, detailing their compliance with the Act (Beer, 2010). Enforcement will consist of inspections, orders, administrative penalties, appeals to the Human Rights tribunal and in the last instance, fines for those not complying (Beer, 2010). Issues that may compromise the effectiveness of the AODA include the lack of public awareness of the Act, negative attitudes about disabilities, and economic tensions, especially in current strained economic circumstances (Beer, 2010).

Methods

Design

The study consisted of two design elements: an accessibility audit of downtown Thornbury, and key informant interviews with “early adopters” in terms of accessibility.

Sample

The sample for the audit was 41 businesses with storefronts on or close to the three main blocks in downtown Thornbury, Ontario.

The sample for the key informant interviews consisted of 7 individuals associated with businesses in downtown Thornbury, Ontario that had already taken steps to ensure that their businesses were fully accessible.

Data Collection

The data for the accessibility audit was collected on July 17th and 18th, 2012. Without prior notice, the two researchers walked into the designated premises, introduced themselves, and completed the audit form appended. Based on observations as well as speaking to employees, the checklist was completed in consultation between the two researchers.

The key informant interviews were conducted during the same two-day period on-site at the businesses in question. The interviews were guided by 12 questions (see textbox following), and took approximately 15 minutes to complete. Interviews were audio-taped and transcribed verbatim, for use as qualitative data.

Data Analysis

The accessibility checklist was scored on a five-point scale, based on the Planat scoring system (<http://www.rickhansen.com/language/en-CA/What-We-Do/planat.aspx>; Rick Hansen Foundation). Scores range from 1 (not accessible) to 5 (excellent accessibility) for 5 categories: entrance, venue pathways, main function, washrooms, and customer service. The total score was averaged out of 5 to account for businesses where washroom accessibility was not applicable. Using these scores, businesses were classified as either excellent accessibility, compromised accessibility or no accessibility.

Data from the transcribed interviews were analyzed manually to identify themes according to 5 *a priori* research questions:

1. What motivated individual business owners to make their premises more accessible to people in wheelchairs?
2. What changes did they actually make?
3. What was the response to those changes?
4. What supports did they require / discover to assist with making changes?
5. What barriers / difficulties did they encounter?

Subsequent open-coding resulted in themes that are outlined in detail below.



Canadian Disability Policy Alliance
**Alliance Canadienne concernant
les politiques reliées au handicap**

Main Street Accessibility – Thornbury:
Interview Questions

1. Tell us about your business and your clientele?
Prompts: -products/services; history; ownership; size
2. What kinds of disabilities do you see among your clientele?
3. What changes have you made in your business to accommodate clients/ customers with disabilities?
Prompts: -physical; training; information (advertising, etc); products/service lines
4. What encouraged you to make those changes?
Prompt: What obstacles did you encounter once you decided to make a change from customers, local business owners; the larger community?
5. What do you estimate was the overall cost of those changes?
Prompts: -total costs; itemized
6. What feedback did you receive on those changes?
7. What has been the impact of those changes on your business?
Prompts: -customer base; community recognition/good will; business generation
8. What would you recommend to other businesses in Thornbury ?
9. Are you aware of the AODA and its requirement for all businesses to be fully accessible by 2025?
Prompts: -customer service; employment; communication; built environment
10. Did you have a particular resource to help guide your plans for the changes being made?
Prompts: Who advised you: individuals; private company; government or community organization
11. What would have been the most helpful to you when you were contemplating making changes?
12. Would you be prepared to be a resource to other business's seeing how to improve accessibility?

Findings

The findings for the study are presented in two sections: results of the accessibility audit, and results of the key informant interviews.

Accessibility Audit

On the basis of scores on the accessibility audit, the 41 businesses visited were categorized as excellent, compromised or no accessibility.

Excellent Accessibility

Ten (10) of the 41 businesses audited (24%) were classified as having excellent accessibility, based on scores between 3.5 and 5.0. These businesses had level entrances or adequate ramps, wide doorways, flat and level floors, merchandise that could be reached and seen, trained staff responsive and sensitive to customers with disabilities, and where applicable had fully accessible washrooms. An example was *The Cheese Gallery* - recently renovated to ensure accessibility. They had good maneuvering room, work surfaces at an appropriate height, a fully accessible washroom, merchandise at an appropriate height to be reached and seen, helpful pleasant staff that had not received formal training but showed great sensitivity to individuals with disabilities.

Business	Entrance	Venue Pathways	Main Function	Washroom	Customer Service	Comments	Score
The Cheese Gallery	5	5	5	5	5	-Newly renovated to ensure accessibility	5.00
The Diamond Studio Jeweler	5	5	5	N/A	5	-Moved to a new location that was accessible	5.00
Integrated Wellness Chiropractic	5	4	5	5	5	-Newly renovated to ensure accessibility	4.80
Simplicity Bistro	5	5	5	4	4	-Newly renovated to ensure accessibility	4.60
Orchard Café	5	5	4	5	4	-Moved to a new location and renovated it to ensure accessibility	4.60
Remax Sales Office	5	4	4	N/A	5	Newly renovated to ensure accessibility	4.5
Tigs Ladies Fashion	4	4	5	N/A	3	-Fully accessible	4
Furbelows Ladies Fashion	4	4	4	N/A	3	-Level entrance, merchandise accessible	3.75
Benjamin Moore Paints	4	4	4	N/A	3	-Level entrance and good maneuvering room	3.75
McGillis Orthodontics	(5)	(4)	(4)	(5)	(4)	-Based on new location's plans, have not seen the physical building	(4.4)

Compromised Accessibility

Twelve (12) businesses (29%) were classified as compromised accessibility, on the basis of scores between 2.5 and 3.4. For the most part, these businesses could be made accessible with some minor changes; for example, *Paperwhite Florist* had a four inch step at the front entrance and a four inch step in the middle of the building. There was a level entrance at the back door and the back half of the store was flat and even. Thus half the store was accessible from the back entrance, and half was accessible with some assistance from the front entrance. Another example was *The Mill Café*, where the entrance was level and there were good clear venue pathways, but there was no accessible washroom – the only washrooms were located at the bottom of a stair case. In most business, staff had not received any training on how to assist customers with disabilities.

Business	Entrance	Venue Pathways	Main Function	Washroom	Customer Service	Comments	Score
Two the Core Physiotherapy	4	3	3	3	3	-Flat entrance, first floor fully accessible but private rooms on second floor inaccessible	3.20
The Dam Pub	4	2	4	1	1	-There is a ramp but it lead to a locked door and had flowers growing onto it making it difficult to maneuver, no accessible washroom	3.00
The Mill Café	4	4	5	1	1	-Level entrance no accessible washroom	3
New Orleans Pizza	4	4	2	3	1	-Level entrance, good venue pathway	2.80
Gyles Marine Store	4	2	1	N/A	3	-Newly constructed ramp, very little maneuvering room	2.75
Terase: Art and Home	4	1	4	N/A	1	-Level entrance to ground floor	2.60
Paperwhite Florist	4	2	3	N/A	1	-4 inch step at front entrance and halfway in the middle of the store, back entrance level so back half of the store is accessible	2.50
Ian Whitton Accountant	3	4	2	N/A	1	-Level entrance, negative attitude from staff	2.50
Maytag Laundromat	3	2	2	N/A	N/A	-Level entrance, small threshold at entrance	2.30
Jessica's Book Nook	3	1	3	N/A	2	-Level entrance, but store is broken into separate rooms each which has 2 inch steps	2.25
Studio 16 Cards and Gift Store	3	1	3	N/A	2	-narrow aisles difficult to maneuver	2.25
Bridges Tavern	1	1	4	1	1	-recently built patio four large steps going up, portable ramp not up to code	2.00

No Access

Nineteen (19; 46%) businesses that fell into the category of No Accessibility. While scores varied between 1 and 2.5, these buildings did not have accessible entrances, and therefore any further discussion of access was moot. None of these businesses had either a level entrance or ramp. These locations also often had narrow doors, little maneuvering room, uneven floors, work surfaces and merchandise located too high to be seen, no accessible washroom, unaccommodating staff, and no training on how to assist individuals with disabilities.

Business	Entrance	Venue Pathways	Main Function	Washroom	Customer Service	Comments	Score
Evolution Men's Fashions	1	3	5	N/A	1	-4 inch step at entrance	2.50
Fig	1	2	4	N/A	2	-entrance not level	2.25
Ashanti Coffee	1	3	3	1	1	-3 inch step at entrance, no accessible washroom	1.80
DeCorsos Ladies Fashions	1	1	4	N/A	1	-4 inch step at entrance	1.75
Marion Hair Studio	1	3	1	N/A	2	-two 8inch steps at entrance	1.75
BRE: Environmental Consulting	1	1	4	1	1	-entrance no level, work surfaces at appropriate height	1.60
Thornbury Graphics	1	2	1	N/A	2	-6 inch step at entrance	1.50
Cherche: House of Design	1	2	2	N/A	1	-major obstacles by doorway, 3 large steps at entrance	1.50
Baywaters Market	1	2	2	N/A	1	-4inch step at entrance	1.50
Hasty Market	1	2	2	N/A	1	-4inch step at entrance, back entrance flat but blocked	1.50
Kopperud Hamilton Law	1	1	2	N/A	1	-two 2 inch steps at entrance	1.25
Century 21 Office	1	2	1	N/A	1	-three 4 inch steps at entrance	1.25
Thrive Frozen Yogurt	1	1	1	N/A	1	-5 inch step at entrance	1.00
Drewhaven Town Decorating	1	1	1	N/A	1	-No level entrance, no maneuvering room	1.00
Black Angus Meats	1	1	1	1	1	- 4 inch step at entrance, no accessible washroom	1.00
Calen Island Dance	1	1	1	1	1	-4 inch step at entrance, no accessible washroom	1.00
Harbor Market	1	1	1	1	1	- two 3 inch steps at entrance	1.00
Thornbury Bakery and Café	1	1	1	1	1	-one 2 inch step at entrance, no accessible washroom	1.00
Sisi Trattoria	1	1	1	1	1	-3 inch step at entrance and throughout	1.00

Key Informant Interviews

Seven interviews were conducted with business owners or managers who had already taken the initiative to make their premises accessible and welcoming to patrons in wheelchairs. We asked them to comment on what had motivated them to become accessible, what processes they had followed and what impact it had had on their business.

What motivated you to seek to make your business accessible to people in wheelchairs?

The interviewees expressed four themes about how they decided to adapt their business to include customers in wheelchairs.

The majority of the early adopters made changes and renovations to improve accessibility because they were legally required to in order to open their business. For example, when Gyles Marine wanted to turn a residential location into a mixed residential and commercial space, they had to renovate the building to make it accessible. The business owner said:

“When we bought the property and changed it into commercial, one of the requirements was to make it barrier free... [otherwise] I wouldn’t have been approved. As much as you want to make it look like we are doing the right thing, but the bottom line is it was mandatory.”

Another motivating circumstance for increasing accessibility was as part of a move. In the case of Simplicity Bistro, the proprietors chose a location that was accessible for wheelchair users, and then took steps to design the interior layout to further enhance accessibility. Any changes that were made were checked to ensure the location was totally accessible.

“It took us about seven months to renovate... We were lucky that the place was already accessible.”

The Diamond Studio also was moving, and sought an accessible location.

“...I actually used to be up the hill in a highly inaccessible location from a wheelchair point of view...when I moved down here, a person in a wheelchair commented how nice it was to just come in ...”

Most of the early adopters were also motivated by the idea that becoming accessible was the “right thing to do”. These businesses believed everyone has a right to enjoy life and participate in the community. The representative from Simplicity Bistro pointed out it is not acceptable to exclude individuals:

“I don’t feel comfortable trying to separate the handicapped when there is really no difference. In some ways, we are all handicapped.”

Finally, early adopters were motivated by the desire to maximize their customer base by making their businesses accessible to all, and not excluding any possible customers.

"...as a business you want your facility open to as many customers as possible, so why close your doors to anyone?"

Early adopters mentioned that accessibility meant a small increase in customers with a minimal but positive impact overall financially. They recognized that as the population ages, the number of individuals with disabilities will increase as well.

"...I think it makes us a better business because we have accessibility for existing clientele and future clientele."

How Were the Changes Made?

There were three main sources of information on how the changes should be made and what changes need to be made. The first was a wheelchair user – in most cases, someone from the community who knew the contractors, owners or designers. Many of the early adopters found the best way to ensure accessibility was having an individual who used a wheelchair become involved during the design phase, and "test-drive" the facility to ensure it is fully accessible. The Georgian Bay Golf Club found this was very useful:

"... we were going through all the accessibility issues and I was dealing with the architect and I just thought there was a great opportunity to involve somebody who was going to be requiring handicap railings, bars, accessibility into our club house."

Simplicity Bistro also used this method. In their case, instead of a current customer, they brought in a friend of the contractor who used a wheelchair.

"...while we were building it, the contractor had a friend who was in a wheelchair and he actually brought him in here and we kind of used him in the bathroom to see how he could turn around, where the sinks could be, where the toilets could be, so he was sort of our guinea pig."

For both of these businesses a lay person, outside of the building and design profession, but with personal experience of using a wheelchair, was able to provide a practical test of accessibility and suggestions for improved accessibility.

The second approach to deciding how to make changes was to use building and design professionals who had specific expertise in accessibility. Gyles Marine Store used an expert to help them with advice. In this case the inspector told them what specifically needed to be done.

"...the building inspector gave us what the requirements were ... simple things like the upper platform there had to have enough room so that you could maneuver without going off."

Third, building codes were a useful source of information. Most business owners were aware that they had to comply with the building code as a starting point to address accessibility issues. At Tig's Fashion, the building code acted as a guideline in order to ensure permits would be able to be issued.

"You have the building code, which gives you a general guideline obviously so there are requirements in the code that you have to meet..."

Benefits of Ensuring Accessibility

Interviewees discussed many benefits for businesses to be accessible. The first is that accessibility was viewed in a positive light by potential customers. Simplicity Bistro found that having an accessible business helped how they were perceived with the Thornbury community.

"...definitely helped our business. I think we come across as caring people."

A second benefit the early adopters experienced was positive regard and promotion of the business by community members in Thornbury. Integrated Wellness noted that in a close community such as Thornbury, word of mouth can be a strong motivator when customers are choosing which business to patronize.

A third benefit of being an accessible business reported in the interviews was an expansion of customer base. When businesses became accessible they reported an increase in their customer base; for example, both the Georgian Bay Golf Club and Simplicity Bistro added new customers in wheelchairs, some of whom have become regulars.

"Yes we have had numerous players that come to play the golf course who are in wheelchairs, and we have been complemented for the access in the club house."

The Diamond Studio found that when they moved to an accessible location, they began to get customers from a nearby retirement home, and there has been evidence of an increase of sales.

"...I do get a number of residents that come down in their motorized wheelchairs for a battery and things like that. It's not a big sale but still allows them to come in..."

Some features of renovations, done to ensure accessibility, can assist other customers and employees. Many of the features would ensure accessibility for someone in a wheelchair would also benefit those who are injured, pregnant or pushing a stroller.

"Anyone who is tired or sore or anything like that would notice those differences and probably overall, even on an unconscious level, appreciate those things, even if they don't require them. So I think that would generate a sense of good will."

Deterrents to Making Changes for Accessibility

There were a number of factors that the interviewees noted that made it more difficult to make the desired changes to make their businesses accessible. Several of our interviewees found it was difficult to understand what changes were needed. Many businesses simply did not know where to get information about what they should improve upon. This could discourage businesses from becoming accessible simply because they could not locate needed information or didn't know what changes could improve their space. Integrated Wellness, a business determined to provide an accessible space, searched and could not find proper guidelines in Canada so they used the Americans with Disabilities Act guidelines.

"There were no Ontario guidelines, and there were no Canadian guidelines, so we used the different websites for the US, since I know they are ahead of the game in the aspect as far as the requirements..."

For businesses that are not as committed to accessibility, the fact that they cannot find information may deter them from proceeding with an accessibility project.

Another deterrent might be the fact that in a small community, such as Thornbury, disability is not a highly visible issue. Several of the interviewees referred to an attitude that was prevalent among business owners, and that was confirmed by several of the businesses audited. They were skeptical regarding the number of customers who would benefit from any changes they might make, and felt there was no financial benefit to becoming accessible. With only a handful of wheelchair users in the community, many did not see the benefit to their business in pursuing accessibility. They did not believe it would expand their customer base, nor did they believe there was a financial loss associated with not being accessible. There was a perception that renovations made to improve accessibility would be quite costly and that there would never be a financial return on the investment.

However, several of the business owners interviewed reported that the cost was minimal. For example, Georgian Bay Golf Club started planning for a new facility and found with planning they could avoid large financial costs.

"The cost was minimal – on a six million dollar clubhouse, I bet we didn't spend an extra \$2,000... I think across the board absolutely, it's a positive impact on business..."

Gyles Marine Store, a smaller business, made renovations on an already existing building and also reported that the cost was very small.

"Probably about a thousand [dollars] I would think."

The interviewees emphasized that the changes they had made, such as wider doorways, ramps, washroom installations, represented an almost insignificant additional cost. The interviewee from Integrated Wellness pointed out that when you are already purchasing an item such as a door to buy that item slightly wider is very inexpensive.

“We essentially gutted the interior of the building, and when designing the layout of the rooms and the function of the facility, we made sure it had wheelchair accessibility and that it worked for the purpose of meeting standards of accessibility with reference to disability.”

“It wasn’t very difficult because we are laying out new blueprints and plans, so making the hallway the right size or the door, the difference would be minimal. Since you are already purchasing a door, the difference between a 36 inch door and a 42 inch might have been a couple of dollars . . .”

Business owners who did not have accessible businesses may have over-estimated the costs of ensuring accessibility while underestimating the number of additional customers they will attract by improving accessibility. In addition the interviewees also suggested that any gains in customers or revenue are meaningful, even if modest in size.

Conclusion

This project set out to assess Main Street accessibility in Thornbury Ontario and to learn from early adopters about the process and experience of pursuing accessibility. The study consisted of two design elements: an accessibility audit of downtown Thornbury, and key informant interviews with “early adopters” in terms of accessibility.

The results showed that:

- More than half of Main Street businesses in Thornbury are accessible – about a quarter ideally accessible and a quarter with compromised accessibility.
- Less than half of businesses are not accessible, typically characterized by an inaccessible entrance including stairs or narrow doorways. In some instances, these businesses were also characterized by a lack of interest in accessibility, and although no one was actually hostile to our overture, several were dismissive.
- The early adopters pointed to the importance of a policy framework that supports accessibility and includes enforcement measures. Several had initially made changes to enhance accessibility because they were required to do so by law. They were however surprised that the costs were manageable, and that significant good will and increased business was generated as a result.
- A short summary and analysis of the AODA shows the potential for this legislation to act as a tool to promote greater awareness, accessibility and inclusion in Ontario communities.

Accessibility is important not only for disabled Ontarians, but for society as a whole. It benefits both community members and local businesses owners. In this spirit, we offer the following recommendations based on the findings of this study.

1. Patronize, publicize, celebrate businesses that are accessible, and encourage others to do the same.
2. Look for opportunities to promote the friends and allies that have already declared their support by making their business accessible.
3. Seek appointment of sympathetic individuals to key positions in municipal affairs and business development.
4. Develop a strategy to address the approximately half of businesses that are not accessible. In particular, do not patronize these businesses, regardless of personal preferences.
5. Identify key stakeholders and decision-makers in the community and cultivate a positive position on accessibility.
6. Become familiar with the AODA, and the potential to use it as a tool in promoting the local agenda – particularly the Customer Service and Built Environment Standards.
7. Develop materials to assist businesses to know where to turn for information on AODA, Building Codes, Universal Design. Assemble a resource kit.
8. Offer the expertise of individuals within the group to businesses seeking information on accessibility.

References

- Aboelata, M. J., Ersoylu, L., & Cohen, L. (2011). Community Engagment in Design and Planning. In A. L. Dannenberg, H. Frumkin & R. J. Jackson (Eds.), *Making Healthy Places* (pp. 287-316). United States of America: Island Press.
- Andrade, I. F., & Ely, Vera, Helena, Moro, Bins. (2012). Assessment method of accessibility conditions: how to make public buildings accessible? *Work, 41*, 3774-3780.
- Beer, C. (2010). *Charting a Path Forward: Report of the Independent Review of the Accessibility for Ontarians with Disabilities Act, 2005*. (). Toronto, ON, CAN: Government of Ontario.
- Bromley, R. D. F., Matthews, D. L., & Thomas, C. J. (2007). City centre accessibility for wheelchair users: the consumer perspective and the planning implications. *Cities, 24*(3), 229-241. doi:10.1016/j.cities.2007.01.009
- Chaves, E. S., Boninger, M. L., Cooper, R., Fitzgerald, S. G., Gray, D. B., & Cooper, R. A. (2004). Assessing the influence of wheelchair technology on perception of participation in spinal cord injury. *Archives of Physical Medicine & Rehabilitation, 85*(11), 1854-1858.
- Children's Aid Society. (2011). *ACCESSIBILITY FOR ONTARIANS WITH DISABILITIES ACT, 2005(AODA)Standard for Customer Service Policy*. Retrieved 08/22, 2012, from <http://www.torontocas.ca/wp-content/uploads/2011/CASTAODAPolicy2011web.pdf>
- Ministry of Community and Social Services. (2008). *About the Accessibility for Ontarians with Disabilities Act, 2005 (AODA)*. Retrieved 08/22, 2012, from http://www.mcsc.gov.on.ca/documents/en/mcss/publications/accessibility/AboutAODAWeb20080311_EN.pdf
- Rantakokko, M., Iwarsson, S., Kauppinen, M., Leinonen, R., Heikkinen, E., & Rantanen, T. (2010). Quality of life and barriers in the urban outdoor environment in old age. *Journal of the American Geriatrics Society, 58*(11), 2154-2159.
- Riley, B. B., Rimmer, J. H., Wang, E., & Schiller, W. J. (2008). A conceptual framework for improving the accessibility of fitness and recreation facilities for people with disabilities. *Journal of Physical Activity & Health, 5*(1), 158-168.
- Rimmer, J. H., Riley, B., Wang, E., Rauworth, A., & Jurkowski, J. (2004). Physical activity participation among persons with disabilities: barriers and facilitators. *American Journal of Preventive Medicine, 26*(5), 419-425.
- Rothenberg, K. H., & Hornstein, A. D. (2001). Building community, recognizing dignity: beyond the ADA. *Mental & Physical Disability Law Reporter, 25*(5), 709-710.
- Thapar, N., Warner, G., Drainoni, M., Williams, S. R., Ditchfield, H., Wierbicky, J., & Nesathurai, S. (2004). A pilot study of functional access to public buildings and facilities for persons with impairments. *Disability & Rehabilitation, 26*(5), 280-289.

Welage, N., & Liu, K. P. (2011). Wheelchair accessibility of public buildings: a review of the literature. *Disability & Rehabilitation Assistive Technology*

, 6(1), 1-9.