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Did you know that one in five British Columbians experiences chronic pain and the prevalence increases with age? What’s more, research shows that people with low incomes, people living with mental health conditions and survivors of trauma are at an even higher risk of experiencing chronic pain.

Chronic pain creates complex challenges. People living with pain often experience adverse effects on their mental and physical health, their relationships with family and friends, and their ability to work. They are at increased risk for depression, anxiety, substance use and overdose.

In fact, it is sobering to know that more than half of people who have died of overdose in BC since 2016 sought medical help for unmanaged physical pain in the year before their death.

Despite these significant effects on people living with pain, BC struggles to meet the need. The availability of pain services varies by community and may depend on the number of local practitioners who have an interest and training in pain management. In addition, access to specialized care varies considerably across the province and is often constrained by long wait times and geographic barriers.

Access to chronic pain services is particularly limited for people with low incomes, people who use drugs, those in rural and remote regions, and people in Indigenous communities.

Multidisciplinary care is a gold standard for chronic pain management, including services like physiotherapy, counselling and occupational therapy. However, too often these services are inaccessible to people with pain due to the fees associated with these health services and, for people in rural and remote areas, a lack of access to these services in their communities.

Instead, the prescription pad is one of the few affordable and readily available tools doctors have that can help manage pain, regardless of location. However, many people living with pain face another obstacle—they are being weaned or cut off opioid pain medications due to concerns regarding BC’s ongoing overdose crisis.

Responsible prescribing is, of course, vital for patient and public safety, but prescribing restrictions are resulting in unintended harms for people who live with pain. Patients have been cut off the medications they desperately need to function without being given access to any other supports.

As a result, some people with pain have felt no other option but to turn to the illicit market to self-medicate.

That is why Pain BC is working with the Ministry of Health, in collaboration with health authorities and other stakeholders, to improve pain care for citizens in BC.

Our goal is the development of an equitable and comprehensive provincial pain management system designed to support timely access to quality, publicly-funded pain ser-
However, many people living with pain face another obstacle: they are being weaned or cut off opioid pain medications due to concerns regarding BC’s ongoing overdose crisis.

These services would include comprehensive pain assessment, pain education for health care providers, and publicly-funded allied health services such as physiotherapy, counselling and occupational therapy, as well as relevant and culturally safe care for Indigenous communities.

In this Transition, we shine the light on living with chronic pain. You’ll find perspectives from people who cope with pain each day, issues related to eligibility for disability benefits and pain, and resources on pain management. I hope you will find this edition helpful.

Living well with chronic pain is possible, but it requires support from a compassionate community of health providers, friends and family, and a system of care that is responsive to the complex nature of pain.

Pain BC, in collaboration with our network of people in pain and their families, health care providers, other non-profit organizations, government, researchers, and other stakeholders, is working to build such a community, so we can address the unmet needs of British Columbians living with pain.

MARIA HUDSPITH IS EXECUTIVE DIRECTOR OF PAIN BC. LEARN MORE ABOUT PAIN BC’S RANGE OF PROGRAMS AT HTTPS://WWW.PAINBC.CA.

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A MESSAGE FROM PAIN BC Hudspith to Co-Chair Task Force

Congratulations to Maria Hudspith on her appointment as co-chair of the newly created Canadian Pain Task Force. Dr. Fiona Campbell, President of the Canadian Pain Society and Anesthesiologist at the Hospital for Sick Children in Toronto, is the other co-chair.

With 20% of the country’s population living with persistent pain, Canadians are in desperate need of improved pain care and treatment in their communities.

The task force was established in response to this need, and to address the barriers that prevent people with persistent pain from receiving the care and treatment they need.

Key priorities over the next three years will be to consult with stakeholders and governments across the country to:

• Assess how chronic pain is currently addressed in Canada
• Identify best practices to prevent and manage chronic pain
• Disseminate findings to facilitate the implementation of these practices

“I’m extremely hopeful that by bringing together people with pain, health care providers and pain researchers from around the country, we’ll be able to develop a greater understanding of the issues Canadians face with pain, and that our work will lead to actionable decisions,” said Maria Hudspith.
The Right Fit Pilot Project Turns Two!

I BY JESSICA ROBERTS-FARINA

The Right Fit Pilot Project (RFPP) is a multi-partner effort working to address challenges in matching indoor wheelchair users with affordable, accessible housing in Metro Vancouver.

We have faced many challenges during the first two years of our three-year pilot project, but we also have many milestones to celebrate. In honour of our achievements, we want to share a few personal stories of clients who were successfully matched with their new homes through the project.

Sean Haffey, a stroke survivor paralyzed on the left side of his body, had been searching for an affordable, accessible home for over two years. RFPP navigators first connected Sean with a unit that was perfect for him, except it did not have a roll-in shower.

The housing provider felt a connection with Sean, so we started the process of obtaining funding for a shower renovation. The unit was renovated and he moved in November 26, 2018.

Natasha, who has a spinal cord injury, had also been looking for over two years for an accessible unit. She struggled to find one with a roll-in shower and lowered countertops. Natasha’s efforts were fruitless, until she connected with the RFPP.

A provider approached us with a vacancy in a brand new building that was a perfect fit for her. Working with the provider and Natasha, we successfully connected her with the unit that is now her new home.

Alex came to Vancouver from Vancouver Island to pursue post-secondary education. He wanted to move as soon as possible, so he initially chose to move into a supportive living facility to achieve his goals.

RFPP navigators helped Alex to get into the Choice in Supports for Independent Living (CSIL) program so he could live independently.

Alex now lives independently with the proper supports in place to focus on school and reach his goal of working in the gaming industry.

Although the project continues to unfold within an extreme housing and affordability crisis, we are now in a unique position to influence government decisions on the local, provincial and federal level to address the crisis. We are excited about the possibilities ahead.

For more information on The Right Fit Pilot Project, go to http://disabilityalliancebc.org/program/the-right-fit-pilot-project/.

JESSICA ROBERTS-FARINA IS THE PROJECT COORDINATOR FOR THE RIGHT FIT PILOT PROJECT.
Women with disabilities who have experienced sexual assault do not currently have information about what the reporting options are, in formats appropriate to their communication needs.

For the last five years, I’ve sat on the BC Coordinating Committee for Women’s Safety (CCWS). This is a provincial working group of community advocates in the anti-violence sector, police, RCMP, lawyers, academics, the BC Coroner, government ministry representatives, and health professionals and led by the Ending Violence Association of BC.

Through our work on this committee, it became clear that many women with disabilities—intellectual, learning, brain injuries, and deaf women—couldn’t easily access or use existing information on how to report sexual assault. We discussed this gap at DABC and successfully sought funding for a new project.

Sexual Assault Reporting Options: Increasing Access for Women with Disabilities will offer plain language, graphic-enhanced, information on sexual assault reporting options, including Third Party Reporting in BC.

DABC will also create a sign language and captioned video for people who are deaf on sexual assault reporting options, including Third Party Reporting in BC.

One of the key objectives of this project is to continue working in close partnership with community-based victim services and other victim-serving organizations.

One tool we will create for these organizations is a checklist on “How to Create an Inclusive and Accessible Communication and Outreach Plan.” This will be an easy-to-follow checklist on how to make their outreach more effective and ensure they are reaching women with disabilities in their community.

The checklist will also provide information on appropriate ways to communicate with and accommodate women using their services. For example, what alternative communication formats are, who uses them and why it’s critical to provide them when women with communication disabilities are using their services.

DABC will be collaborating with the CCWS team on the content of the video and information help sheet on Sexual Assault Reporting Options. We will also be working with consultant, Chastity Davis, Chair of the Minister’s Council on Indigenous Women, on the creation of a how-to checklist in order to ensure this resource includes information on how to engage in culturally-appropriate communication with, and outreach to, Indigenous women.

This is critical because Indigenous women have double the rate of chronic illness and disability of non-Indigenous women, and Indigenous women experience very high rates of violence.

KAREN MARTIN IS COORDINATOR OF ACCESSIBILITY AND INCLUSION PROJECTS AND TRAINING AT DABC.

THIS PROJECT HAS BEEN GENEROUSLY FUNDED BY THE MINISTRY OF PUBLIC SAFETY AND SOLICITOR GENERAL, CIVIL FORFEITURE CRIME PREVENTION AND REMEDIATION GRANT PROGRAM – CIVIL FORFEITURE GRANT.
At DABC, our Access RDSP advocates help people apply for the Disability Tax Credit (DTC). The DTC is the first step in qualifying for the RDSP.

We talk with clients about how the small adjustments or accommodations they need to make to get through their day can mean a lot when applying for the DTC.

So, when we help clients with their applications, we do our best to get an accurate picture of their disability and limitations. We help them move beyond their diagnoses toward a description of how their disability affects everyday activities.

Some of our clients are living with chronic pain. They are usually aware of the many daily modifications they make to manage their pain. For some, every action starts with a question like: “What am I able to do today?” “How far will I be able to walk before I have to turn back?” “How long will I have to rest if I stay outside?”

However, for those with more complex diagnoses like fibromyalgia and dysfunctional pain, they may be making many small changes they don’t really think about; they are so automatic.

Feeling constant or unpredictable patterns of pain can often mean that basic activities of daily living revolve around pain management. For some, it might mean walking with a different posture to help alleviate pain symptoms. For others, it’s knowing that over-exertion can result in hours or days in bed.

Even with the help of supportive doctors, getting an accurate diagnosis and appropriate supports can be frustrating. It’s also an isolating experience.

Andrea lives with dysfunctional pain and arthralgias which migrated from her jaw, neck and hips over the course of several years. The lengthy and arduous journey to find a diagnosis, and the types of benefits for which she would be eligible, has been lonely.

“I think I’m really lucky because I have such a good doctor. He’s very patient-focused. But he doesn’t have access to a lot of the information about disability benefits. I’ve had to find it on my own.” Being an informed patient can be a real help navigating complex application processes.

And chronic pain comes in many forms. It can be constant or recurring. We do our best to capture the range of people’s experiences in their applications. Even if clients identify their predominant restriction in one of the eligible categories, such as walking, feeding or dressing, we help clients carefully consider all of their symptoms or restrictions.

Pain management also takes a large toll on mental functioning. Kathie has chronic pain from a back injury. The energy it takes to manage her pain contributes to frequent brain-fog or a diminished ability to concentrate. Says Kathie, “My mind is scattered and I struggle to get through day-to-day activities.”

Living with chronic pain can also contribute to feelings of depres-
Feeling constant or unpredictable patterns of pain can often mean that basic activities of daily living revolve around pain management.

For an in-person appointment with one of our advocates, please call to make an appointment.
Local 604-872-1278 Toll free 1-800-663-1278

This kind of comment from our clients tells us a lot about how pain is affecting their daily activities. Every moment of every assessment we do can be significant, when we’re getting an accurate picture of a client’s limitations for a DTC application.

If you need help applying for the DTC or RDSP, please give us a call.

CYNTHIA MINH IS PROGRAM MANAGER AND OUTREACH COORDINATOR FOR THE ACCESS RDSP PROGRAM AT DABC.
RDSP/DTC
Access RDSP advocates provide workshops on the eligibility criteria for the Disability Tax Credit (DTC), strategies for communicating with your doctor, options if your DTC application is denied and eligibility criteria for the Registered Disability Savings Plan (RDSP).

Other topics include: tips for communicating with your bank, information about Canada Disability Savings grants and bonds, best practices for maximizing RDSP benefits, and accessing the Endowment 150 grant.

Emergency Preparedness
DABC offers workshops to businesses, provincial and local governments, and community organizations on how to create emergency plans that include people with disabilities and seniors. These workshops may be provided at no cost, when funding is available.

CMIST
CMIST stands for the following needs: Communication, Medical, Functional Independence, Supervision and Support, and Transportation.

This approach to emergency planning and response offers a different way to consider the range of needs of the people in your local community.

The Duty to Accommodate is part of the BC Human Rights Code. You will learn what the law says about pro-
DABC offers workshops to businesses, provincial and local governments, and community organizations on how to create emergency plans that include people with disabilities and seniors.

Providing public services in a way that is accessible to all citizens and how to implement solutions to address accessibility.

The CMIST workshop can make your emergency planning and response more comprehensive and inclusive.

We provide half and full-day workshops (half-day workshops are offered only in Metro Vancouver).

Through presentation, table top exercises and group discussions, you will gain an understanding of how disabilities impact a person’s ability to respond in emergencies, and you will take away planning and response solutions you can implement to meet those needs.

Join DABC’s Visionaries Circle

Help promote the dignity and independence of people with disabilities.

Be part of DABC’s Visionaries Circle with monthly giving: the best kind of support you can offer.

Even a small amount goes a long way and provides a more stable funding base we can count on to plan and provide our programs and services.

Joining is easy. You choose how.

• You can set up monthly donations in seconds at [www.CanadaHelps.org](http://www.CanadaHelps.org) by searching for “Disability Alliance BC.”
• Or, set up a monthly credit card donation by contacting Terry at 604-875-0188.

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Transition Sponsorships

Sponsors have a unique opportunity to promote their business to our community network. For full details on ads and sponsorships, please contact Ann at 604-875-0188 or transitionads@gmail.com.

Premiere Sponsorship
- A 1/2 page, colour banner ad on the back cover
- Two inside colour pages
- A quarterly thank you in our e-newsletter, for one year

Ad Design
Sponsors may design their own banner ad or we will design it for you at no charge. We can also design interior pages for you from text and graphics you provide.

Feature Sponsorship
- A 1/3 page, colour banner ad on the back cover
- One inside page
- Two thank yous in our e-newsletter

Disability Alliance BC
“Living with severe chronic pain is like climbing Mount Everest without any witnesses.” So said a chronic pain specialist at a lecture we attended on pain management.

Pain is a lonely experience. It can’t be objectively measured and everyone’s experience of pain, and their threshold for it, is unique.

Pain is difficult to describe because it is so personal. So, it’s difficult for one person to understand another person’s pain. People often misinterpret pain behaviour as apathy, anger or anti-social sentiment.

People generally don’t want to hear about pain, and my husband and I often have to spend precious energy to mask it.

It is not at all a given that you will find a doctor who understands your pain and is willing, if necessary, to support your application for disability benefits. Receiving correct dosages of pain medication is now increasingly difficult as doctors are under increasing pressure not to prescribe opioids.

Medical Treatments that are not covered, such as medicinal marijuana, adapted yoga, massage therapy or physiotherapy, are usually just not affordable.

Managing chronic pain is complicated even more by the cost of treatment options. Assistive equipment and devices that alleviate chronic pain, such as special mattresses, custom orthotics, and mobility devices, are expensive and often out of financial reach for many of us. Untreated chronic pain restricts sleep, too. This makes pain worse and creates a vicious cycle of pain and fatigue. This cycle can severely restrict everything from employability to social functioning, and create depression and loneliness.

Anyone suffering with chronic pain knows you must treat energy like money or any other limited commodity. Whatever activity you choose, you have to add whatever recovery time is necessary for you to get back to your functioning self.

The spoon theory of pain management is a helpful tool. You assess the number of spoons of energy you have for the day and use them wisely. And when you use more than your daily allotment, you reduce the number of spoons you have for tomorrow.

The appropriate response to pain is empathy and compassion—within communities and within ourselves. People reading this article may be experiencing chronic pain on a spectrum from overwhelming and unmanageable pain, to distracting but manageable pain.

The one thing pain has taught me and my husband is to be aware of our fellow mountaineers and to hope others will do the same.

ANNETTE MURRAY IS SENIOR ADVOCATE WITH DABC’S ADVOCACY ACCESS PROGRAM.
Pain serves a purpose. It’s the difference between a quick, superficial burn and a permanent injury when, as children, we learn that the stove top is hot when it glows.

Some people feel no pain at all. They have a condition called “congenital insensitivity to pain” (CIPA) or “congenital analgesia.” This may sound like a good thing, but in reality, it’s a tragedy. People with this condition will scratch an itch until it bleeds. They are always at risk because they lack the normal warning function that pain serves.

But pain can also be dysfunctional. It can be more severe than the cause would usually create. It might last longer than expected, and it can be triggered by harmless stimuli or no obvious stimuli at all. For people with this experience, pain goes from a survival mechanism to an often overwhelming burden.

For those of us who experience a painful condition, which can include disorders where the pain is unrelated to any injury or stimulus at all, day-to-day living becomes difficult and stressful. Constant or frequent severe pain goes beyond the conscious suffering the person experiences. Stress hormones can alter and damage the body, cognitive and emotional processes are disrupted and restricted, and even the smallest of tasks can require incredible effort to complete.

Treatment is hit and miss. The disorders that cause pain vary widely and, for many of them, the best treatment available is to mask the symptoms instead of addressing the underlying issue. The medications that are most effective tend to have serious side effects, from nausea, fatigue, impaired motor and cognitive function, physical dependency, to psychological addiction.

Unfortunately, these complications often result in patients being under-treated. Plus, everyone is worried these days about drug abuse and overdose. Physicians hesitate to prescribe painkillers, either out of genuine concern for their patient’s well-being or because their prescriptions are under scrutiny.

One concept of justice says it’s better for several guilty thieves to go free than for one innocent person to be imprisoned. I think it follows, especially with the low rate of drug abuse among those with severe chronic pain, that it is unjust that so many go under-treated because of so few misusing medication.

Modern medicine advances rapidly these days and there are many potential developments to look forward to. Devices that could quantify a patient’s pain could reduce the number of people going untreated or under-treated because their pain is only “subjective.”

There are also refinements in the medications themselves. Drugs that target more specific pain receptors, others which supplement and augment traditional analgesic drugs, and even non-chemical treatments are being researched, produced or tested.

As with many cutting-edge discoveries, however, “...the future may be here, but it is poorly distributed.”

Relief from suffering is a human right. No one who lives in intense pain should ever remain so a minute longer than necessary to receive treatment.
DTC RESOURCES FOR HEALTH PROFESSIONALS

Access RDSP has created two new booklets to help health professionals support clients with Disability Tax Credit applications:

- A Nurse Practitioner’s Guide to the Disability Tax Credit
- A Guide to the Disability Tax Credit for Occupational Therapists

The Disability Tax Credit (DTC) offers significant benefits for people with disabilities who qualify.

With these guides, we explain the different sections of the form and offer suggestions for supporting patients’ applications.

For more information, please contact the Access RDSP Outreach Coordinator at DABC at 604-872-1278 or rdsp@disabilityalliancebc.org.

ACCESS RDSP IS A PARTNERSHIP OF BC ABORIGINAL NETWORK ON DISABILITY SOCIETY, DISABILITY ALLIANCE BC AND PLAN INSTITUTE, MADE POSSIBLE WITH GENEROUS SUPPORT FROM THE VANCOUVER FOUNDATION.

THANK YOU TO THE BC NURSE PRACTITIONERS ASSOCIATION FOR THEIR COLLABORATION ON THIS RESOURCE.
in the community

DABC advocates and staff are often out in the community presenting workshops, speaking at events and participating on committees. Here are some of our recent and upcoming events.

If you would like to book a DABC speaker at your organization or event, please contact Val at 604-875-0188 or feedback@disabilityalliancebc.org.

FEBRUARY-APRIL/19

On-Site Services with Community Partners

In addition to serving clients at our DABC office in Vancouver and at the Surrey Centre Library, this year the Tax AID DABC team launched an on-site service based on partnerships with community living organizations. We’d like to thank these groups for their collaboration on these events:

Community Living Society, New Westminster, Thursdays from February 28 to April 18
Salsbury Community Society, Vancouver, March 27
Milieu Family Services, Delta, March 29

FEBRUARY-MARCH/19

Tax Benefits for Self-employed People with Disabilities, and Tax Tips for People with Disabilities and Their Families, DABC

The Canada Revenue Agency (CRA) Audit Division from the Vancouver Tax Services Office presented a workshop on self-employment for people with disabilities at DABC on February 21. CRA’s Outreach Officer for the Pacific Region, Zubie Vuurens, gave a workshop on tax tips for people with disabilities. She explained tax credits, medical expenses and the Canada Caregiver Credit.

Our Tax AID DABC team will offer the self-employment workshop regularly. Please visit our Tax AID DABC website at https://taxaiddabc.org for details.

MARCH 16/19

Tax Benefits for People with Disabilities and Their Families, Abbotsford

Myung Lee, Tax AID DABC Program Manager, presented a workshop at the MSA Society for Community Living and the Bethesda Christian Association.

The workshop covered non-refundable and refundable tax credits, Canada Caregiver Credit, and the Child Disability Tax Benefit.

APRIL 27/19

Transition Fair and Workshop, Hugh Boyd Secondary, Richmond

Access RDSP was an exhibitor at the Richmond Transition Fair to support students with diverse needs and their families, as they look ahead and prepare to transition to life after high school.

APRIL 29/19

I Am a Voice for Epilepsy Awareness Expo & AGM, BC Epilepsy Society

Access RDSP had an exhibit at the I Am a Voice for Epilepsy Awareness Expo & AGM. It was the Society’s 60th Anniversary celebration this year. We joined lawyers, medical professionals, civic leaders, and people living with epilepsy, in a knowledge exchange on epilepsy, neurology and related topics.
MAY 3/19

Canadian Federation of the Blind AGM, CNIB
Access RDSP was also an exhibitor at the CNIB’s AGM. Topics discussed at the convention included employment, advocacy, peer mentoring, Braille literacy, adaptive technology and blindness.

MAY 7/19

Walrus Talks event, SFU Goldcorp Centre for the Arts
We were excited to be part of the Walrus Talks Inclusion Program, How design, technology, education and more can remove barriers for people with disabilities. Access RDSP, and our partner and friend, Neil Belanger, Executive Director for BC Aboriginal Network on Disability Society, was one of the featured speakers at the event.

MAY 23-25/19

Inclusion BC Conference, Victoria
The Inclusion BC conference in Victoria was attended by Access RDSP.

MAY 4-26/19

BC Rural Health Conference, Nanaimo
Access RDSP joined rural physicians and healthcare professionals from across BC at this conference.

JULY-SEPTEMBER/19

Tax AID DABC Webinars
Since our first Step-by-Step Taxes DIY webinar was full, Tax AID DABC will now be hosting regular webinars! These events will allow people with disabilities and their families to learn about filing income taxes from the comfort of their own homes.

Upcoming dates
Tuesday, July 16 at 10 am
Friday, September 20 at 2 pm
Thursday, November 11 at 10 am
Please register for the webinars at https://taxaiddabc.org.

ONGOING

Tax AID DABC and Access RDSP will deliver joint sessions at the City Centre Library in Surrey, BC.
We will offer on-site assistance with the Disability Tax Credit for people with disabilities. Sessions will take place bi-weekly on Tuesdays, beginning March 12.
For more information and to book your appointment, please call 604-872-1278 or email rdsp@disabilityalliancebc.org.
Meet the Accessibility Project Winners | by Justina Loh

In 2018, DABC was selected by the Ministry of Social Development and Poverty Reduction to disburse funding to community-based Accessibility Projects. Here are the 16 amazing winners!

UVIC SCHOOL OF PUBLIC HEALTH AND SOCIAL POLICY
Project: James at UVic
Grant Amount: $18,454
The project will build an autonomous mobile robot (James), designed to assist the 1600 registered students with disabilities at UVic.

L’ARCHÉ COMOX VALLEY
Project: I Belong Centre Outreach program
Grant Amount: $10,000
This program encompasses the arts, wellness and social-recreation-al activities delivered from L’Arche Comox Valley’s I Belong Centre.

THE CRIDGE CENTRE FOR THE FAMILY
Project Name: Food Service Skills Training & Employment
Grant Amount: $40,000
FSST is aimed at removing employment barriers for individuals living with a brain injury.

posABILITIES ASSOCIATION OF BC
Project Name: Individualized Sexual Health and Health Relationship Training for Adults with Cognitive Disability
Grant Amount: $40,000
The project will focus on making information on sexuality/health relationships accessible to individuals with cognitive disabilities.

PRINCE GEORGE BRAIN INJURED GROUP SOCIETY
Project Name: People with Brain Injury-Preparing for wildfire & other emergencies
Grant Amount: $40,000
This emergency preparedness program will provide a range of practical supports, especially for those living in poverty and those with cognitive or physical challenges.

AQUAFIT FOR ALL ASSOCIATION
Project Name: Aqua BLAST
Grant Amount: $27,641
Aqua BLAST will provide an accessible and inclusive aquatic activity that improves physical and mental well-being for stroke survivors.

BC WHEELCHAIR SPORTS ASSOCIATION
Project Name: Aboriginal Bridging the Gap Program
Grant Amount: $20,000
The Bridging the Gap program addresses the various barriers to participation for individuals with a physical disability.

BURNABY ASSOCIATION FOR COMMUNITY INCLUSION
Project Name: Making Kudoz Accessible in new BC regions
Grant Amount: $40,000
Kudoz is an online learning platform that facilitates meaningful in-person exchanges by bridging youth and adults with cognitive disabilities.

PACIFIC SPORT VANCOUVER ISLAND REGIONAL CENTRE
Project Name: WheelKids
Grant Amount: $40,000
WheelKids is an exciting physical literacy program for kids aged 5-12.

VIASPORT BRITISH COLUMBIA
Project Name: #LevelTheField: Disability Inclusion in Sport & Recreation
Grant Amount: $32,800
Using the online platform, https://www.viasport.ca/ash viaSport’s #LevelTheField project aims to increase participation in sport and recreation.
VICTORIA DISABILITY RESOURCE CENTRE  
Project Name: Disability Awareness Training Project  
Grant Amount: $30,000  
The Centre will develop a disability awareness curriculum for employers, to increase their awareness of and comfort level with addressing disability issues.

RICHMOND CENTRE FOR DISABILITY (RCD)  
Project Name: Accessible Parking in Accessible Communities  
Grant Amount: $28,000  
This initiative is designed to strengthen enforcement around the delivery of accessible parking.

BLIND BEGINNINGS SOCIETY  
Project Name: Youth Speakers Bureau  
Grant Amount: $15,000  
Blind Beginnings prepares blind and partially sighted youth for their future transition to work and adult life.

THE ASSOCIATION OF NEIGHBOURHOOD HOUSES OF BC, D.B.A. FROG HOLLOW NEIGHBOURHOOD HOUSE  
Project Name: MAKE IT  
Grant Amount: $24,000  
Make It is a therapeutic art program for youth aged 16-30.

CAMP BOWEN SOCIETY FOR THE VISUALLY IMPAIRED  
Project Name: Music Camp 2019  
Grant Amount: $35,436.80  
The program will bring together blind and Deaf-blind children and youth ages 10-18 from across the province for nine days on Bowen Island, BC.

NANAIMO FOODSHARE SOCIETY  
Project Name: Everyone At the Table (EAT)  
Grant Amount: $35,668  
EAT will facilitate group volunteer activities with a focus on food.

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Please make cheques payable to Disability Alliance BC (DABC) and send to TRANSITION, c/o DABC, 204-456 W. Broadway, Vancouver, BC V5Y 1R3.

THANK YOU!
Support DABC

ABOUT US

Our mission is to support people, with all disabilities, to live with dignity, independence and as equal and full participants in the community. We champion issues impacting the lives of people with disabilities through our direct services, community partnerships, advocacy, research and publications.

FRONTLINE SERVICES

Our Advocacy Access Program provides one-on-one assistance with provincial and federal (Canada Pension Plan Disability) income supports and other benefits. Our Tax AID DABC program helps PWD and PPMB recipients to file their income taxes year-round. Access RDSP helps people with the Disability Tax Credit and with opening a Registered Disability Savings Plan (RDSP).

Our projects respond to community need and increase people’s ability to participate and contribute.

GROWING PARTNERSHIPS

We stay connected with a large network of community organizations across BC and regularly provide them with updates about issues of importance to the disability community.

FREE PUBLICATIONS

We publish a range of capacity-building, self-help guides and advocate resources, in reader-friendly language. Resources are provided free of charge, either by mail or from our website.
BECOME A DABC MEMBER

Numbers matter. The more members we have, the stronger our voice in the community.

Please become a Disability Alliance BC (DABC) member today. You can be a voting member or a non-voting member, and we welcome both individuals and groups.

I accept your invitation to join the DABC and enclose my membership fee of $15 (individuals) and $25 (groups).

I am also including a tax-deductible donation of $\_\_\_\_\_\_. (Donations over $10 are tax deductible).

Please return your payment/donation with this form to: DABC, 204-456 W. Broadway, Vancouver, BC V5Y 1R3.

You can also become a member or donate online at: http://www.disabilityalliancebc.org/about-dabc/become-a-member.

THANK YOU FOR YOUR INVALUABLE SUPPORT

Please check the applicable boxes:
- New membership or Renewal
- Voting Member or Non-voting Member

Voting members are people with disabilities and self-help groups where at least 50% of members have a disability.

Name ______________________________________________

Organization ________________________________________

Address ____________________________________________

City/Prov___________________  Postal Code ____________

Phone _______________  Email _________________________

KEEP IN TOUCH!

Disability Alliance BC

@DisabAllianceBC

http://tinyurl.com/jbgdm2u

https://www.linkedin.com/company-beta/4863769/

Sign up for our Enews at disabilityalliancebc.org

Thank you for your invaluable support. Keep in touch!

Visit our website often to see our work on behalf of the disability community, and to connect with us through social media.

We hope to see you there.
specialize in Canada Pension Plan Disability (CPP-D) applications at DABC. Over the years, I’ve seen many clients who live with chronic pain and the difficulties they may have in qualifying for benefits. I’d like to give readers some tips on this, as well as describing some general information about CCP-D applications.

CPP Contributions
When applying for CPP-D, the first hurdle people face is the issue of contributions. You have to have worked and paid into the plan for at least four out of six years (three out of six if you have worked and paid into the plan for at least 25 years). By the end of the most recent time period, you must show that you fit CPP’s definition of disability.

If you have been on Early Retirement for more than 15 months, you will not be eligible for CPP Disability, but you may be eligible for the Post Retirement Disability Benefit. Both programs stop at age 65, so if you are over 65, unfortunately you will not be able to collect CPP-D or the Post Retirement Disability Benefit.

CPP Definition of Disability
Each disability program has a different definition of disability. Even though you may already receive another disability benefit, it does not mean you will automatically qualify for CPP-D. For CPP, the key criterion is that your disability must be severe and prolonged.

A disability is severe if it stops a person from working at any regularly scheduled and substantially gainful employment. This does not mean you cannot work at your career or your previous job. You have to show that you don’t have the capacity to retrain or do a different type of work, and that you can’t work in full-time, part-time or seasonal work.

A disability is considered prolonged if it is expected to last a long time or result in death. If you are waiting for treatments or testing, this may increase the chances you will be denied CPP Disability benefits.

Once your application has been sent to Service Canada for processing, the department will often collect additional information.

For example, they may ask your doctor to provide any reports or clinic notes they have. If you have a chronic and long-standing condition, and think you may apply for CPP Disability benefits, please make sure your doctor’s clinic notes include your symptoms related to the condition causing you chronic pain.

As someone with a chronic pain condition myself, I will regularly share the reports from my tracking with my doctor, even if the appointment isn’t related to my pain.

If you stopped working because you were taking care of a child under the age of seven, you can apply to have those years left out of your contribution calculation. Also, if you are divorced or separated, and were the lower earner during your relationship, you may want to explore the possibility of a credit split. To find out which years you paid into CPP Disability, you can contact CPP by phone at 1-800-277-9914.

CPP Disability and People Living with Pain
I BY ASHLEY SILCOCK
Symptom Tracking and Medication

One of the easiest ways to include information about your symptoms is by symptom tracking. There are countless apps and paper templates available to do this. They can help you show trends, the chronic nature of your pain, and the impacts different treatments have or have not had on your pain.

As someone with a chronic pain condition myself, I will regularly share the reports from my tracking with my doctor, even if the appointment isn’t related to my pain. My doctor includes them in my medical file, so if I need to apply for disability benefits in the future, I will have more supporting documentation.

You may also want to speak to your pharmacist about requesting copies of your Pharmacare records. This will give you a print out of all the medications you have tried over the years. The CPP-D application asks for a list of medications you are currently taking, but when I am helping a client with their application, I like to include a list of medications that have been tried and stopped, and the reasons why they were discontinued.

It is not unusual for people to be denied at application, especially if they have a subjective condition like chronic pain. If you are denied CPP Disability benefits, it may be in your best interests to make an appeal.

If you have turned down or refused a medication or treatment, you will need to explain why. When Service Canada sees a notation like this in a medical record, they often conclude that if you had attempted the treatment or medication you might have been able to return to work.

If Your Application is Denied

It is not unusual for people to be denied at application, especially if they have a subjective condition like chronic pain. If you are denied CPP Disability benefits, it may be in your best interests to make an appeal. I often see appeals where a person may have applied two or three times, and are only now going through the appeals process. Any retroactive benefits that a person can get in these cases is based on the date of the most recent CPP-D application.

If you are in a position where you are having to appeal a CPP Disability denial, please feel free to consult our CPP-D guides or reach out to talk to myself or my colleague in our CPP Disability Program.

ASHLEY SILCOCK IS A CPP ADVOCATE WITH DABC’S ADVOCACY ACCESS PROGRAM.

TO MAKE AN APPOINTMENT WITH AN ADVOCATE, PLEASE CALL LOCAL 604-872-1278 OR TOLL FREE 1-800-663-1278. YOU CAN DOWNLOAD DABC’S CPP DISABILITY GUIDES FROM OUR WEBSITE HTTP://DISABILITYALLIANCEBC.ORG ON OUR PUBLICATIONS PAGE.
Mindfulness and Pain Management

BY MARGARITA TARTAKOVSKY

When we’re in pain, we want it to go away. And that’s understandable. Chronic pain is frustrating and debilitating, said Elisha Goldstein, Ph.D, a clinical psychologist and Psych Central blogger. The last thing we want to do is pay more attention to our pain. But that’s the premise behind mindfulness, a highly effective practice for chronic pain.

Goldstein describes mindfulness as “paying attention to something on purpose and with fresh eyes.” This is why mindfulness is so helpful. Instead of focusing on how badly we want the pain to stop, we do our best to pay attention to our pain with curiosity and without judgment.

This approach is very different from what our brains naturally do when we experience the physiological sensation of pain. Our minds typically launch into a litany of judgments and negative thoughts. What makes matters worse is our minds start brainstorming ways to soothe the pain. Goldstein likens this to the Roomba, a robot vacuum. If you trap the Roomba, it just keeps bouncing off the edges. Our brains do the same with scouring for solutions. This “creates a lot of frustration, stress and feeling trapped.”

Mindfulness teaches people with chronic pain to be curious about the intensity of their pain, instead of letting their minds jump into thoughts about it.

It also teaches individuals to let go of goals and expectations. When you expect something will ease your pain, and it doesn’t or not as much as you’d like, your mind goes into alarm- or solution-mode, he said. You start thinking thoughts like “nothing ever works.”

“What we want to do as best we can is to engage with the pain just as it is.” It’s not about achieving a certain goal – like minimizing pain – but learning to relate to your pain differently, he said.

As Jon Kabat-Zinn, Ph.D, writes in the introduction of The Mindfulness Solution to Pain, “From the perspective of mindfulness, nothing needs fixing. Nothing needs to be forced to stop, or change, or go away.”

Kabat-Zinn founded the Mindfulness-based Stress Reduction (MBSR) program in 1979. While today it helps individuals with all sorts of concerns, it was originally created to help chronic pain patients.

“In MBSR, we emphasize that awareness and thinking are very different capacities. Both, of course, are extremely potent and valuable, but from the perspective of mindfulness, it is awareness that is healing, rather than mere thinking…”

Mindfulness can provide a more accurate perception of pain, according to Goldstein. For instance, you might think that you’re in pain all day. But bringing awareness to your pain might reveal that it actually peaks, valleys and completely subsides.

If you’re struggling with chronic pain, Goldstein suggests mindfulness-based strategies, such as the body scan and breathing exercises.

He also stresses the importance of paying attention to what works for you and what doesn’t.

EXCERPTED FROM USING MINDFULNESS TO APPROACH CHRONIC PAIN BY MARGARITA TARTAKOVSKY, M.S. SEE THE FULL ARTICLE AT HTTPS://TINYURL.COM/Y6DXAKRS.
We couldn’t get there without you.

Programs and Projects

♥ BC Rehabilitation Foundation
♥ City of Vancouver
♥ Council of Canadians with Disabilities
♥ Insurance Corporation of BC
♥ Law Foundation of British Columbia
♥ Ministry of Social Development and Poverty Reduction
♥ Ministry of Public Safety
♥ Vancouver Coastal Health
♥ Vancouver Foundation

Dedicated Supporters and Friends

♥ BC Government and Services Employees’ Union
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♥ BC Teachers’ Federation
♥ CUPE Local 1936 (Community Services of Greater Vancouver)
♥ CUPE Metropolitan Vancouver District Council
♥ Hospital Employees’ Union
♥ Klein Lawyers LLP
♥ Provincial Employees Community Services Fund
♥ Simpson, Thomas and Associates (Trial Lawyers)
♥ TELUS Employees Charitable Giving Program
♥ Tompkins Wozny, Chartered Professional Accountants
♥ Vancouver Taxi Association

And many generous donors like you!

We gratefully acknowledge the financial support of the Province of BC.
Contact Tax AID DABC Today for Free Income Tax Assistance

Program Manager
Disability Alliance BC
taxaid@disabilityalliancebc.org
https://taxaiddabc.org

Tax AID DABC helps people in BC receiving PWD (Persons with Disabilities) or PPMB (Persons with Persistent and Multiple Barriers to Employment) benefits to file their income taxes.
Yes, our income tax services are free.

Am I eligible for Tax AID DABC services?
We help people who are receiving:
• Persons with Disabilities (PWD) or
• Persons with Persistent and Multiple Barriers (PPMB) to Employment benefits.

What if I Haven’t Filed Taxes for Years?
We help prepare simple income tax returns for the most recent tax year, as well as for previous years. One of our specialties is to help people who have multiple years of taxes to file.

What if I Don’t Have All My Tax Documents (T5007, T4s)?
Don’t worry! We’ll contact government agencies to help you find them.

My Income is Low. Why Should I File Taxes?
There are many advantages to filing your income taxes! Our clients usually receive $400 to $600 in income tax credits for each year they file. People eligible for an income tax refund, and those with dependent children, often receive much more.

If you haven’t filed your taxes for multiple years, your refunds may grow dramatically.

Other benefits you may be eligible for include:
• GST Credits
• BC Sales Tax and Climate Action Tax Credits
• Working Income Tax Credits
• Child Tax Benefits
• Registered Disability Savings Plan Grants and Bonds

Income tax filing can also help you qualify for MSP Premium Assistance coverage, subsidized housing, and other income-tested benefits.

What Should I do Next?
Contact Disability Alliance BC or one of our Regional Partners. We’ll set up an appointment to meet with you. Call us today! We’re here to help.
If your pain lasts three months or longer and affects your quality of life, you are not alone.

Getting your pain under control might require several things including physical therapy, counselling and possibly medications. And, what works for one person may not work for someone else. Finding the tools that work best for you can take time, but it’s worth it.

There are several programs and resources in BC that can help.

**Pain Support Line**
Operated by Pain BC, the Pain Support Line offers free information, support and a listening ear to talk about your own pain or that of a family member or friend. It provides a safe space to talk about pain and its impact on your life. You’ll also find information on community resources including health care, social services and supports, income assistance, transportation, home health support, food, housing and more. Volunteers are available to take your calls from Monday to Friday 9 am – 4 pm.
Call 1-844-880-PAIN (7246) or email supportline@painbc.ca.

**Coaching for Health**
Coaching for Health is a free telephone or video conference coaching program designed to help people living with pain learn self-management skills, regain function and improve their well-being. Coaching for Health requires a referral from a registered health professional. Talk to your doctor, physiotherapist, chiropractor, counsellor or other health provider to see if Coaching for Health is right for you.
www.painbc.ca/coaching
**Live Plan Be**

Live Plan Be is a free online self-management tool that supports you on your pain management journey. The site will help you to learn the science behind chronic pain, keep track of your symptoms and their impacts, develop a plan for better pain management and quality of life, and connect with a like-minded community of people with pain.

[www.liveplanbe.ca](http://www.liveplanbe.ca)

**BC Arthritis Society Chronic Pain Management Module**

Living with arthritis can often mean living with chronic pain. The Managing Chronic Pain online learning module provides strategies, resources, and tips on how to minimize your pain symptoms and find relief.

[www.arthritis.ca/support-education/online-learning/managing-chronic-pain](http://www.arthritis.ca/support-education/online-learning/managing-chronic-pain)

**BC’s Chronic Pain Self-Management Program**

The Chronic Pain Self-Management Program is a free six-week workshop that helps people with chronic pain to better manage their symptoms and their daily lives. The workshop provides information and teaches practical skills, and gives people the confidence and motivation they need to manage the challenges of living with chronic pain.

[www.selfmanagementbc.ca/chronicpainprogram](http://www.selfmanagementbc.ca/chronicpainprogram)

**Pain Waves Podcast**

Pain Waves is a podcast where listeners can hear leading chronic pain experts and people in pain discuss the latest pain management research, tools, stories and trends.

Subscribe through iTunes or visit [www.spreaker.com/show/pain-waves](http://www.spreaker.com/show/pain-waves)

TO LEARN MORE, PLEASE VISIT THE PAIN BC WEBSITE AT [WWW.PAINBC.CA](http://WWW.PAINBC.CA)

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**DABC MEMBERS**

You’re Invited to Our 2019 Annual General Meeting!

DABC’s 2019 Annual General Meeting (AGM) is an opportunity for DABC members to come out and support DABC, and voting members in good standing can vote on important Bylaw changes.

AGM attendees will also have the chance to learn about the upcoming provincial disability legislation (British Columbia Accessibility Act) from Sam Turcott, DABC’s former Advocacy Access Program Director and Executive Director. Sam is now working with the Ministry of Social Development and Poverty Reduction to develop the legislation.

DABC membership fees are $15/year for individuals and $25/year for groups. To pay your membership, please call Valerie at 604-875-0188, send us a cheque, or pay online: [http://disabilityalliancebc.org/about-dabc/become-a-member/](http://disabilityalliancebc.org/about-dabc/become-a-member/)

**Date:** Saturday, June 29th

**Time:** 11:00 am – 1:00 pm (registration begins at 10:30 am)

**Where:** Croatian Cultural Centre, 3250 Commercial Dr, Vancouver

We hope to see you there!
In March 2019, the federal government announced important changes within the 2019 budget related to the RDSP. To open an RDSP, an individual must be eligible for the Disability Tax Credit (DTC). When a beneficiary no longer qualifies for the DTC, the RDSP rules can require that the plan be closed, and grants and bonds repaid to the Government of Canada.

To address concerns that this does not appropriately recognize the financial impact that periods of severe, but episodic, disability can have on individuals, Budget 2019 proposes to eliminate the requirement to close an RDSP when a beneficiary no longer qualifies for the DTC.

Doing so will allow grants and bonds otherwise required to be repaid to the Government to remain in the RDSP.

To ensure fairness for DTC-eligible beneficiaries, some restrictions on access to these amounts will apply. The estimated cost of this measure is $109 million over five years, beginning in 2019, and $33 million per year ongoing.

Unlike RRSPs, amounts held in RDSPs are not exempt from seizure by creditors in bankruptcy.

To level the playing field, Budget 2019 also proposes to exempt RDSPs from seizure in bankruptcy, with the exception of contributions made in the 12 months before the filing.

We’re very excited to see the Federal Government acknowledging the need for change as we continue to advocate for improvements related to the RDSP.

FROM THE DABC BLOG

Budget Changes to the RDSP

Budget 2019 proposes to eliminate the requirement to close an RDSP when a beneficiary no longer qualifies for the DTC. Doing so will allow grants and bonds, otherwise required to be repaid to the Government, to remain in the RDSP.

What does community mean to you?

The next edition of Transition will look at Community—what it means to us, how we find it and how we build it.

We would love to include your stories or tips in Transition. Tell us about your community, what it is and what it adds to your life. Did you find it or did it find you?

Please get in touch with us! If we use your story, we can publish it anonymously, with your first name only or your full name.

Enter our raffle

When you send your submission to Transition, your name will go in a raffle to win a $20 gift certificate to London Drugs. Your story or tip can be anywhere between 100-500 words.

Contact us

Please email us at trans@disabilityalliancebc.org by June 30/19 to enter the raffle.

Thank you!
Access RDSP is a partnership between Disability Alliance BC, Plan Institute and BC Aboriginal Network on Disability Society.

Information and Support on the Registered Disability Savings Plan

CONTACT OUR PARTNERS

BC ABORIGINAL NETWORK ON DISABILITY SOCIETY
For Indigenous people with disabilities, contact BCANDS and we can help you with the RDSP process. We can assist with the DTC application, filing taxes, and opening the RDSP account.
Phone: (250) 381-7303 ext. 204 | Toll Free: 1-888-815-5511 (TTY Accessible) | rdsp1@bcands.bc.ca

DISABILITY ALLIANCE BC
To access DABC’s RDSP and DTC services, or to request one of our workshops, please contact us at:
Local: 604-872-1278 | Toll Free: 1-800-663-1278 | rdsp@disabilityalliancebc.org

PLAN INSTITUTE
We can provide you with information on the RDSP, future planning, and the Endowment 150 (free $150 for BC residents).
• Call our disability planning hotline at 1-844-311-7526
• Take the RDSP tutorial or apply for Endowment 150 at www.rdsp.com
• RDSP info sessions and other future planning workshops at planinstitute.ca

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Celebrating over 40 years of advocacy

Thank you to the Province of BC for their continuing support.