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balance

... what it's all about

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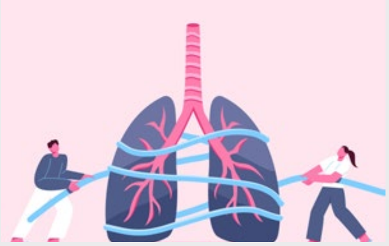

Welcoming CARMA to Technology for Living

By Christine Gordon

The Community and Residents Mentors Association (CARMA) was founded in 1998 by Taz Pirbhai and Mary Lambert, who were Board members of the BC Coalition of People with Disabilities. Taz and Mary, later joined by Heather Morrison, had all been residents of George Pearson Centre, a care facility in Vancouver for people with disabilities of all ages. They knew that peer support had been the key to their being able to leave the institution, and they wanted to give back to the people who remained at Pearson by offering peer support on site.

> **They knew that peer support had been the key to their being able to leave the institution, and they wanted to give back.**

In the ensuing twenty-seven years, CARMA has not wavered. It is the oldest formal peer support program in the province. It has assisted more than 150 people to leave George Pearson Centre; revived the Resident Council and catalyzed several action groups; built bridges to the world outside of Pearson by partnering to create a farm and garden program on site; advocated fiercely for resident participation in the redevelopment of the Pearson lands and provided resettlement support to the people who have moved into Cambie Gardens, which is the first phase of housing that will eventually replace Pearson, now called Oak Care Centre.

Beginning in July of this year CARMA will transition from Disability Alliance BC and become an official Technology for Living (TFL) program under the umbrella of our Peer Program. TFL is thrilled to welcome CARMA and treasures its rich history and depth of experience in peer support. TFL's Peer Program is a vital pillar of our organization and defines the principle that our members drive the organization. As it enters its third decade of proving the value and power of peer support, CARMA chose TFL as a natural home base because of our commitment to the cause. There is a positive karmic spirit to this union, which will reverberate into the future.

TFL

Peer Program

Technology for Independent Living Program

Provincial Respiratory Outreach Program

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Technology for Living round up

Peers Celebrate Competition Success with Boathouse Lunch

Alex Carey, TFL Board Member, Monica Gärtner, TFL Peer, and Robin White, TFL Community Advisor

Following the Simon Cox Student Design Competition, peers were invited to gather at The Boathouse Restaurant in New Westminster for a celebratory lunch. The event drew mostly competition participants, including those who had worked directly with student teams and others who attended the presentations.

The lunch gave everyone a chance to unwind after an exciting day and catch up with fellow peers. People shared their thoughts on the innovative projects they'd seen and connected with others in the community.

Victoria Foundation Supports Peer-Led Travel Presentations

Ean Price, Peer Team Manager, presents on his tips for successful travel

This summer, our peer team was busy on Vancouver Island delivering Diverse Destinations, an in-person presentation series focused on inclusive travel and accessibility. With generous support from the Victoria Foundation, TFL peers and staff shared firsthand stories, practical advice, and resources to show that travel is possible for everyone, regardless of ability.

The series included multiple in-person events and one virtual session, all wheelchair-accessible and free to attend. The events drew strong community interest from people eager to learn about barrier-free exploration.

TFL Staff Complete Cultural Perspectives Training

As part of Technology for Living's reconciliation commitment, staff participated in Cultural Perspectives Training delivered by the Indigenous Perspectives Society on June 10, 2025.

The full-day training explored the ongoing impacts of colonization and residential schools while providing frameworks for meaningful allyship and culturally responsive practices. Through guided discussions and self-reflection, participants examined how to address unconscious bias and serve Indigenous communities with cultural humility.

BITS & BYTES

TIL is proud to be invited back to UBC's Master of Occupational Therapy Experience Day in September 2025. Nicole, TFL Community Advisor, and Benson, TIL Technician, will represent the TIL and YAT programs, sharing information about them with some of BC's brightest occupational therapists.

UBC MOT students will have the chance to explore the programs, interact with some of the assistive technology used by TIL, and walk through a typical use-case scenario to see how this technology supports independent living.

We'd like to thank the UBC MOT program and Dr. William Miller for inviting us to be part of this exciting event.

CONTACT US!

We are always happy to discuss any member's needs. Simply phone us at:

☎ 604.326.0175
or send an email to
✉ info@technologyforliving.org

TIPS & TRICKS

With so many TIL members across BC, we appreciate your help keeping things running smoothly. If you're planning to change your Wi-Fi provider or router, let us know in advance. We can guide you through the transition or book a support visit if needed.

Also, remember to regularly charge or replace batteries so your tech stays reliable when you need it most.

Meet SwitchBot!

By Wayne Pogue

It's not hard to find companies that make a couple of really great smart home devices. Nor is it difficult to find companies that make so many smart home devices of poor quality. What's hard to find is a company that creates a wide array of smart home devices that not only are made well, but also interact well with each other and other smart home environments.

> **Their fleet of smart devices is ever-expanding, including the recent addition of a mobile unit to [...] carry your drinks!**

SwitchBot is a company that creates well-thought-out smart home devices, many of them designed to be retrofitted into any environment. Among other things, they make smart devices to clean your floors, control your humidity, clean the air in your home, adjust your lighting, operate your blinds and curtains, secure your doors, and so much more. Their fleet of smart devices is ever-expanding, including the recent addition of a mobile unit to carry their other smart devices around...or even carry your drinks! One amazing upcoming addition is their AceMate, which is a tennis robot that actually rallies with you!

While TIL does not provide all of the devices made by SwitchBot, we wanted to applaud them for consistently pushing the boundaries of what's possible, adding to the devices that would be useful to our members.

Here are some of the SwitchBot devices that TIL currently provides to our members:

SwitchBot Bot: This is a tiny (~1.5" × 1.5") box that extends a finger to press buttons. It is great for pressing light switches, portable AC power buttons, or any other button you can think of.

SwitchBot Tilt: This device connects to the header of your blinds and wraps around your tilt wand, allowing you to voice/app control your tilt wand blinds. The nice thing about the design is that anyone who wants to use the original tilt wand still can!

SwitchBot Lock: We have used multiple variations of the SwitchBot Lock over the years. Most of them have been retrofit locks (don't need to change your current lock), but their newest lock allows for unlocking with facial recognition!

SwitchBot Curtain: Using this device, you'll be able to control your curtains with your voice, phone, or schedule them to open and wake you up in the morning! The SwitchBot Curtain connects to rod, U-shape, and I-shape curtain rods, making them a universal solution for any of your curtains.

SwitchBot Relays: We've recently discovered that SwitchBot is also making Wi-Fi-activated relays. So, you may soon be operating your Automatic Door Opener using these relays—"Hey Google, open the door!"

As you can tell, we at TIL love it when companies create a wide array of smart home devices, as long as they are made with quality. We look forward to seeing how companies like SwitchBot can assist our members in the future.

INHALE / EXHALE

Excess water inside your BiPAP/ventilation hoses may be due to temperature shifts within the home. The heated air in the hoses can hold more water vapour (humidity) than cooler air. Subsequently, if environmental conditions, such as a fan and/or an open window, create a cooling effect on the hoses, the water molecules once suspended in the warmer air will now condense and water pooling occurs.

To remedy this condensation, here are two simple solutions: make sure fans do not directly blow on any hoses. If you have an open window, place hoses under the sheets or use a "hose cozy" to cover the hoses from excessive heat loss. These simple adjustments can help reduce condensation in your hoses.

CONTACT US!

If you need respiratory advice or support please contact the PROP team at
☎ 1.866.326.1245

IDEA CORNER

Clean your water tub weekly. PROP recommends disassembly (if possible) and soaking in warm soapy water. Use a non-abrasive soft cloth and/or brush to gently remove debris. Hand wash, rinse, air dry, and reassemble. Fill with distilled water only to prevent hard water stains. Empty and refill daily.

Why Most People Use Inhalers Wrong

By Amy Duhra, RRT

Did you know that *80% of people use their inhalers incorrectly?* 80%! For a medication that helps you breathe! Are you as surprised as I am? Improper technique directly affects how much medication actually reaches our lungs (this is called *deposition*). Instead of making it to our lungs, much of the medication ends up in our mouths or throats, where it is ineffective.

So why does this happen? Several factors play a role: the speed and length of your inhalation, your ability to hold your breath, and the type of inhaler you're using. Not all inhalers are the same; some use a fine mist or a dry powder and some even puncture a capsule to release medication. Each one requires slightly different technique and some need more strength or coordination than others.

Want to make sure you're doing it right? Good news: there are great online resources, like the Lung Association website, where you can find step-by-step instructions on how to take your inhaler correctly. Visit the Lung Association website for more information: https://www.lung.ca/inhaler-how-to

Here are a few extra tips to remember:

- Use a spacer! A spacer is a hollow chamber that attaches to your inhaler and has a mouthpiece for breathing in. It helps improve medication delivery, requires less coordination, and gives the user more time to inhale. Spacers also give feedback on how quickly you're breathing in, which can be very helpful! A spacer can only be used with a metered dose inhaler (MDI). Common inhaled medications such as Salbutamol (Ventolin) or Pulmicort come in this format.
- Find a position that allows you to take a deep breath comfortably, this may look different for everyone!
- Always rinse or wipe your mouth after using an inhaled steroid to reduce the risk of oral thrush.
- Store your inhalers in a cool, dry place as recommended.

For people who are ventilated: An MDI adapter can be placed in the ventilator circuit. It is important to time the delivery of medication with inhalation, as this ensures better deposition.

If you're unsure whether you're using your inhaler correctly or if it is the best device for you, please reach out to your pharmacist or a PROP Respiratory Therapist. We are happy to assist!

MEET EVAN MUTRIE

Evan Mutrie has joined TFL as our new Community Advisor for the Interior. Based in Kamloops, Evan will be connecting people throughout the Interior and surrounding communities with the resources and information they need to live more independently. His role involves helping individuals navigate available assistive technologies and support services across the region. Evan brings years of experience coaching football for the Kamloops Broncos and enjoys getting outdoors whenever possible.

CONTACT US!

We are always happy to discuss any member's needs. Simply phone us at:

☎ ***604.326.0175***
or send an email to
✉ ***peer@technologyforliving.org***

TIPS & MORE

Google Maps now has accessibility info for over 50 million places! Look for the ♿ icon to find wheelchair-accessible entrances, with details about accessible restrooms, parking, and seating on the About tab. You can even filter reviews for accessibility insights. Business owners can also add Auracast to their profiles for hearing device support.

Nine Months to Prove I'm Not a Criminal

By Ean Price

If I ever decide to switch careers and become a criminal mastermind, I'd probably get away with it because the RCMP still can't take my fingerprints properly.

Unfortunately, this ongoing fingerprint fiasco isn't a joke when you're just trying to obtain a Criminal Record Check (CRC). Years ago, I was working as an IT Manager for a company in the Kootenays. I loved my job and was in line for a promotion—pending a CRC for security clearance. I enthusiastically rolled into the local RCMP detachment only to discover my fingerprints couldn't be taken. No CRC meant no promotion. Despite my best efforts to appeal, the company needed someone fast and gave the role to someone else. I was heartbroken.

So when Technology for Living requested a CRC, a standard practice for all employees, the nerves kicked in. I wasn't about to let my uncooperative fingerprints sabotage me again.

> **I received a letter saying my info *partially matched* a registered sex offender.**

I have spinal muscular atrophy, a genetic neuromuscular disorder that causes significant muscle weakness. I've used a power wheelchair since I was three and have very limited movement in my hands. My fingers are curled, and my fingerprints are faint, which makes capturing them a technical nightmare.

I explained all this at the Kelowna RCMP office. The officers were kind and tried digital scans—no luck. They entered a note in the system and submitted what partial prints they could. Weeks later, I received a letter saying my info *partially matched* a registered sex offender. Shocked, I raced back to the RCMP. The officer chuckled, "Don't worry, I received a similar letter when applying for my kid's daycare." Reassuring … but I still needed to prove my innocence.

Eventually, after many failed attempts and a mountain of paperwork, I submitted the following documents to the Criminal Records Review Program:

- ☐ **Form 1 – Consent to a Vulnerable Sector Search for a sexual offence for which a record suspension (pardon) has been granted or issued**
- ☐ **Form 2 – Consent to disclosure of criminal record information**
- ☐ **C-216C Fingerprint Form with the best thumbprints we could manage**
- ☐ **A cover letter on RCMP letterhead explaining that digital prints couldn't be taken due to my medical condition**
- ☐ **A $25 bank draft made out to the Receiver General for Canada**
- ☐ **A scanned copy of my BC ID**

After submitting everything, I waited … and waited … until finally, nine months from beginning this process, I received the email confirming that no criminal record was found. Success—at last! It was exhausting, but I didn't give up. Next time, I'll be ready—and maybe my story will make things easier for the next person rolling in with stubborn fingers and a clean record.

No One is 'Other'

By Lasha Seniuk

I remember every minute of it: the years of social isolation, the judgement of health professionals and the not-so-hidden rejection by friends, colleagues, and … yes … family members. Like so many others coming to terms with a history of chronic weight gain, I began to realize in my mid-30s that my life would continually be a never-ending trap of disapproval, invisibility, loneliness, and poverty. Every person I met insinuated that I did not belong in civilized society. And, of course, in my present state I believed I was not worth helping.

In today's world it is socially acceptable to hate fat people. Hate. I don't use that word lightly. Much of the time it is overt: objects thrown from cars, laughter, pointed fingers, disgusting jokes. More often, it's delivered by concerned friends couched in sincere advice and life-saving instructions on how to not be so ... well … you know. But make no mistake, it's hate.

Medical science always assumed that OHS was caused by obesity. However, recent research proves the opposite: breathing disorders can cause obesity.

Late in my 50s I lost my ability to regulate my breath. Over time my legs and arms had become numb, sluggish and swollen. I couldn't sleep, my vision blurred, quick headaches became a staple, emotion faded and a slow decline in consciousness seemed to be taking over. Doctors all offered their wise counsel: lose the weight, stop being unhealthy and get some exercise. And, as if I haven't been trying that all my life, they took my vital signs, smiled knowingly and said, "come back when you feel better". Problem solved, right?

But the problem was not solved. Within two months my blood oxygen levels had dropped into the low 70s. Every breath became a struggle and for several minutes at a time I would simply stop breathing. I could not even walk into the hospital's emergency room without assistance. It was a nightmare. For several weeks, however, the dedicated team of respiratory therapists at St. Paul's Hospital worked with me until, finally, a concrete and reliable diagnosis was reached. I had obesity hypoventilation syndrome (OHS).

In all my fifty years I had never heard of OHS. My respiratory team soon discovered that I had likely been suffering from OHS since early childhood. Early childhood? Are you kidding me?

OHS, also known as Pickwickian syndrome, is a breathing disorder affecting some obese individuals. It is characterized by low blood oxygen levels and high carbon dioxide levels which lead to various health problems. Those with OHS build up carbon dioxide in their blood, gradually lose the ability to absorb oxygen and end up in the hospital gasping for breath.

Medical science always assumed that OHS was caused by obesity. However, recent research proves the opposite: breathing disorders can cause obesity. The causal links are very strong: prolonged stress, trauma in childhood … even minor head injuries … can disrupt the brain's respiratory mechanisms, trigger cascading hormone dysfunction and severely limit the body's ability to regulate metabolism. Essentially, medical science now knows that breathing restrictions almost always lead to unstoppable

weight gain. Breathing disorders have also been linked to the causes of anorexia, bulimia and a variety of metabolic disorders.

I cried when I first found out. It was the only thing that made sense. For years I had tried everything to lose weight. Diets, exercise, fasting; nothing worked. Always there came a devastating rebound of equal or more weight gained. It was not a moral or habitual deficiency on my part, not in the least. In my heart I knew that something deeper was going on.

Four major causes for OHS-related obesity include: brain dysfunction, wrongly triggered gut nerves, pre-diabetes, or hormonal imbalance. Medical science has now discovered that unnecessary weight gain is an extremely complicated reaction that, much like diabetes, must be treated with drugs. It is a physical disorder. In recent years several OHS drugs have entered the market or are being tested by large pharmaceutical companies. At present, only an informed doctor or endocrinologist can diagnose OHS.

Immediately after my diagnosis, the good people at the Provincial Respiratory Outreach Program (PROP), part of Technology for Living (TFL), outfitted me with a *BiPAP* machine to help correct my oxygen levels during sleep and retrain my body for improved breathing. Within days I could feel my legs and arms again, my energy dramatically improved, and I began dreaming at night for the first time in years. It was a stunning change. I had spent much of my life as an outsider, as a pariah. Social acceptance, career advancement, family participation … even medical assistance … were unavailable to me. There was no way around it. I had to accept my role as ‘other.’

No one deserves to be 'other'.

It was only after discovering the true nature of my weight management struggle that my outer world began to make sense. On the first Saturday of each month, I offer a Peer Hub Zoom Meeting for all those experiencing OHS, their friends or family members and any medical or industry professionals that would like to offer their knowledge or broaden their awareness. With the help of PROP and TFL I hope to create an OHS information hub and resource centre dedicated to exploring this groundbreaking research and sharing our lived experience.

Most of all, however, I hope to support our members and inform our community that they do not need to be marginalized, forgotten, or ignored. This information needs to be given to the public. No one deserves to be ‘other.’

Please join us at www.technologyforliving.org/ohs to share your experiences and suggestions.

When the Lights Go Out ⚡

By Taylor Danielson

It's 2:00 AM when the piercing alarm from my BiPAP machine jolts me awake. The power's out again. But within seconds, my permanent standby generator kicks in, and I hear its familiar, reassuring hum as it starts up. My internet router stays online thanks to a backup battery, with an extension cord positioned nearby, ready to plug the battery unit into a generator-powered outlet if needed. This scenario isn't uncommon in BC, and for those of us who depend on assistive technology, backup power isn't a luxury—it's a necessity.

Why Backup Power Matters

Many Balance readers rely on equipment that simply can't wait for BC Hydro to restore service. Ventilators, BiPAPs, and communication devices all require consistent power to maintain our independence and, frankly, our lives. My ResMed AirCurve 10, for example, consumes about 30-60 watts per hour without its humidifier—roughly the same as four smart LED light bulbs (which use 5-15 watts each). With the humidifier running, consumption jumps to 90-150 watts, similar to a large TV or electric blanket.

For perspective, a smartphone charger uses just 5-20 watts, while a hair dryer demands 1,200-2,200 watts—understanding these differences helps you plan which devices to prioritize during an outage and size your backup system appropriately.

Backup power isn't a luxury—it's a necessity

BC's weather presents unique challenges. Storm systems regularly knock out power across the province, and rural areas often wait longer for restoration. Having a backup plan isn't just about comfort—it's about maintaining the technology that keeps us alive and connected.

Traditional Generators

Portable gas generators ($1,000-$5,000) remain popular, though they require setup during outages and aren't suitable for indoor use. My permanent standby generator automatically activates when the power fails, powering essential household circuits. These systems ($8,000-$20,000 installed) require professional installation but offer whole-home coverage.

Modern Battery Systems

Battery backup has revolutionized residential power. Portable power stations range from compact 148Wh units (perfect for charging phones and small devices) to robust systems with over 3,000Wh capacity, capable of running larger appliances. To put this in perspective, a system with 3,000Wh could keep a modern efficient refrigerator running for roughly 20-24 hours, accounting for the compressor cycling on and off (modern fridges typically use between 800-1,700Wh per day).

BC Hydro's virtual power plant program represents an interesting approach to home energy management. Think of it as a shared pool of residential batteries—participants in Sun Peaks and Harrison Mills receive 14kWh/5kW batteries that provide personal backup power while also contributing stored energy back to the grid during peak demand periods, benefiting the broader community

A Backup Power Guide

Apartment-Friendly Options

Renters face unique challenges, but viable solutions exist. Portable power stations require no installation and can keep essential devices running during outages. These battery-powered units operate silently—a crucial advantage over gas generators, which typically produce 70-90 decibels (vacuum cleaner level) compared to whisper-quiet battery systems. Cold weather performance matters in BC. Lithium-based batteries with built-in heating systems perform well in our climate, while traditional lead-acid batteries struggle below freezing. Rural residents in colder regions should prioritize battery systems specifically designed for sub-zero conditions.

Creating Your Emergency Plan

The key to effective backup power is preparation, not panic. Identify your most important devices and where they're plugged in. Know where your extension cords are stored—you'll be fumbling for them in the dark at 2:00 AM. Practice your backup routine during daylight hours so everyone in your household knows their role.

The key to effective backup power is preparation, not panic

Create a simple checklist: Which devices are truly essential? Where are your charging cables? Do you have backup power for medical equipment? Consider what happens if the outage lasts hours versus days. Test your plan quarterly—what works in daylight might feel very different when you're startled awake by equipment alarms.

Consider your power needs realistically. A smart LED bulb uses about the same power as a regular LED, while an electric space heater demands 1,000-3,000 watts—potentially more than your backup system can provide. Plan accordingly.

For those using respiratory equipment or other medical devices, remember that your PROP team can provide specific guidance on backup power requirements tailored to your particular equipment and situation.

Looking Forward

Having lived through countless power outages, I can attest that preparation makes all the difference. Whether you choose a simple portable power station or invest in a comprehensive home backup system, the peace of mind knowing your essential equipment will continue running is invaluable.

Don't wait for the next outage to make your plan—start today. Your future self will thank you when the lights go out, but your world stays powered on. Backup power lets us maintain the independence that assistive technology provides, even when everything else goes dark.

Power Outage Emergency Plan Checklist

Before an Outage

- ☐ Identify your most critical devices (BiPAP, ventilator, communication aids)
- ☐ Know where these devices are plugged in
- ☐ Make sure extension cords are easily accessible
- ☐ Practice your backup routine during daylight
- ☐ Ensure everyone in household knows their role
- ☐ Contact your PROP team for respiratory equipment guidance

Essential Equipment:

- ☐ Portable power station (compact units for phones/small devices, larger units for critical equipment)
- ☐ Extension cords (appropriate length and rating)
- ☐ Flashlights with extra batteries
- ☐ Car charger for phone (for emergency communication)
- ☐ Generator (if suitable for your living situation)

During an Outage:

- ☐ Connect critical devices first
- ☐ Monitor battery levels
- ☐ Avoid high-drain devices where possible
- ☐ Keep devices prioritized by importance

An (Accessible!) Game Development Journey

By Alex Carey

I've always loved video games. Even as a wee lad, games gave me a space to express mastery and feel included. As I grew up that love never faded and I found myself pursuing a career making video games. Like, for money, like a real adult … wild I know.

As of April 2025, I'm so incredibly proud to say I was part of a team that released a game on Steam and Nintendo Switch. For five years working part-time we tinkered away on our little game called Sacre Bleu. Sacre Bleu is a hack-and-slash platformer—a type of action game where you play as a musketeer and break out of prison to save France!

> **After all, I love games and think they should be for everyone.**

I worked primarily as the game designer. My role involved planning what mechanics and features would go into creating the playable game space. As part of that planning, accessibility was a major pillar. With the resources we had we wanted an experience that was as accessible as possible to players of all shapes and sizes.

Accessibility in video games can be roughly broken down into eight barrier areas. Strength and dexterity, blindness, hard of hearing or d/Deaf, colour blind, low vision, cognitive, emotional, and speech. Not every game can address every barrier area (or even needs to, sometimes things are accessible by default!) but ideally developers should attempt to address what they can within their constraints of time and money.

To address potential strength and dexterity barriers, Sacre Bleu provides flexibility in input methods by allowing the player to play by mouse and keyboard or by controller. We also offer rebindable inputs so players are able to customize their controls to fit whatever configuration is most comfortable to them.

> **Not every game can address every barrier area […] but ideally developers should attempt to address what they can.**

In addition to strength and dexterity barrier features, we also strived to not use colour as the sole feedback method to the player. This meant using multiple channels of feedback, i.e., visuals as well as audio, so that colour blind barriers could be addressed. Much like the use of colour, we didn't rely on solely sound at any point to make the game d/Deaf accessible as well.

Unfortunately, we ended up not having the budget to address barriers for the blind. With more resources, we could have created a rich soundscape that would allow the player to navigate by audio alone. Hopefully for the next project, we can attempt this. While we weren't able to implement everything we had hoped for, I'm still happy we achieved what we did with the time and budget we had.

Overall, being part of the team that made Sacre Bleu was extremely educational and rewarding. If you're of the game playing persuasion, I'd love to hear what you think of it. Especially if you have notes on its accessibility. After all, I love games and think they should be for everyone.

The Words That Changed Everything

By Nicole Whitford

You might have heard the phrase "Nothing About Us, Without Us" before, but do you know how much it's changed our lives? These five words have transformed how laws get made and who gets to have a say in their own life.

"Nothing About Us, Without Us" is simple. If you're making decisions about people with disabilities, you better have people with disabilities helping make those decisions. Same goes for Indigenous people, or any group that's going to be affected. Sounds obvious, right? But for way too long, that's not how things worked.

We're the experts on our own lives

For decades, other people made all the big decisions about our lives. Doctors decided where we should live. Politicians decided what services we needed. Our families sometimes decided we couldn't make choices for ourselves.

Sometimes these people said they were helping. Sometimes they weren't even pretending to help. But either way, they were making choices about our lives without asking us what we wanted.

As an Indigenous person with a disability, I see this double. Both my communities have dealt with other people deciding what's "best for us." Sometimes claiming good intentions, but rarely with our voices.

In the 1960s and 1970s, people with disabilities got fed up. We started organizing. We demanded to be heard. "Nothing About Us, Without Us" became our battle cry. And it worked. The Americans with Disabilities Act was fought for by people with disabilities who demanded to be part of writing it. Here in Canada, our accessibility laws came from the same activism.

The biggest win was the UN Convention on the Rights of Persons with Disabilities in 2006. For the first time ever, an international treaty was written with massive input from the people it was actually about.

Right here in BC, this principle is changing things every day. When the province develops accessibility standards, they're required to include people with disabilities. When health authorities plan services, they have to ask us what we need.

For Indigenous communities, this connects to something we've always known: we're the experts on our own lives. The fight for self-determination and disability rights are the same fight.

This principle is about respect. It's about recognizing that people are experts on their own lives. If you work somewhere that serves people with disabilities, ask yourself: are we working WITH people, or just doing things TO them? And if you have a disability, remember you have the right to be heard. You have the right to be part of decisions that affect your life. That's not a favour. That's your right.

These words changed everything because they're true. We all deserve a say in our own lives. And we're going to keep fighting to make sure that happens.

Antibiotics: The Benefits, The Risks and Avoiding C. diff

By Arjo

***Editor's Note:** The following article shares one community member's personal research and experience with Clostridioides difficile (C. diff)—a bacterial infection that can cause severe intestinal illness, often following antibiotic treatment. This information reflects their individual journey and is not medical advice. Always consult your healthcare provider before making changes to your treatment or diet.*

If you've had multiple infections and used antibiotics often, like I have, you might want to learn about C. diff risk. This knowledge could potentially save your life—it certainly changed mine.

We are the fortunate ones. Prior to 1928, even the tiniest wound, if infected, could be catastrophic.

We live in the age of antibiotics. We simply take a pill or apply an ointment and expect things to be better. And most of the time they are.

As a 20-plus-year veteran of a spinal cord injury, I have had about 40 upper respiratory tract infections (URTI) requiring antibiotics, at least 2 staph infections, numerous urinary tract infections (UTIs) and countless topical conditions.

This knowledge could potentially save your life—it certainly changed mine.

I had heard the horror stories: overprescribed antibiotics, antibiotics in the ecosystem, resistant bacteria, hospitals with superbugs—but I never experienced them. Then, after a round of antibiotics to treat a UTI, then another to treat a URTI, I got C. diff. The first sign was diarrhea.

“Eat simple-to-digest foods, stay well hydrated, and give it time.” My doctor explained that I should minimize fibre because it can irritate the digestive tract. They emphasized that diarrhea's greatest threat is dehydration, so I measured my blood pressure often and drank water with sea salt to replace electrolytes.

A week later, no improvement. I was minimally active, but losing weight. A stool test revealed C. diff. I was prescribed an expensive, targeted antibiotic. This almost took care of the problem, but my stool remained a weird, slushy, yellow-green. C. diff reappeared when treating an infected pressure sore with cephalexin.

C. diff can be fatal, so I decided to dive deep into C. diff and what to do.

Among my findings:

- Bacteria play a critical role in absorbing water in the large intestine. If the bacteria are absent, diarrhea can result. Recovery requires beating C. diff and replacing colonies of friendly microbes. A competitor to C. diff, a yeast, can be key to recovery.
- Simple sugars are C. diff’s favourite, so I avoided them.
- Protein is essential.
- Fibre is essential to absorb toxins and promote regularity.

- The cruciferous vegetable family may cause gas and bloating. Avoid broccoli, kale, and so on when fighting C. diff.
- Increase natural probiotics: organic food, fruit, vegetables, fermented foods.

My GP discussed C. diff and medications, but my research took me on a path toward nutrition and the microbiome (the collection of beneficial microbes living in your gut). I realized this wasn't territory we'd explored together. I had been recommended acidophilus as a probiotic, which contained billions of colony forming units (CFUs)—essentially live bacteria counts—but just one strain.

Through my research, I learned that if your body identifies that single strain as an enemy, the probiotic could be completely useless. This discovery led me to look for probiotics with multiple strains, since variety seemed to matter enormously. Sauerkraut, particularly the juice, could have a trillion CFUs in a serving and five to ten different strains.

Yogurt, as healthy as it is, may have only two strains. The king of fermented foods is kefir, which may contain 60 strains. As well, ensure your fermented food is unprocessed and requires refrigeration. If it's sitting on a shelf in the aisle, it has probably been pasteurized, making the product nice tasting but likely devoid of beneficial bacteria.

What Worked for Me:

- All fresh fruits and vegetables contain naturally occurring probiotics, unless they have been killed off by pesticides, herbicides, cooking, or other means.
- Virtually all fruits contain water-soluble fibre.
- Even natural, healthy remedies, such as raw garlic, can kill off healthy bacteria.
- I learned to watch out for deep-fried and heavy fats, like butter. I dilute my butter with olive oil. Whenever I eat deep-fried or fun foods with preservatives, like whipped cream in a can, I use a probiotic.
- [See diet section below]
- I found herbal solutions helpful for some common ailments.
- Turmeric became my go-to natural anti-inflammatory.
- I carefully avoided artificial preservatives, pesticides, herbicides, chlorinated water, and mouthwash.

I learned that if you have had C. diff, your chance of re-infection is higher. In order to prevent recurrence, I take fermented foods and fresh fruit and vegetables every day. I take a probiotic, with 12 strains, one of which is Saccharomyces boulardii, if taking antibiotics or if I notice any softening of the stool. I eat organic wherever I can afford it, and avoid pesticides and artificial preservatives that could kill off healthy bacteria. It’s been almost two years now, without recurrence.

When I was actively fighting C. diff, I focused on foods that would support my gut bacteria while being gentle on my digestive system.

My C. diff Recovery Diet:

- Gentle starches: Oatmeal and some white rice
- Proteins: Tempeh, eggs, light fish
- Dairy: Parmesan cheese, yogurt
- Vegetables: Spinach, seaweed, cooked vegetables (raw vegetables only after significant recovery - I avoided raw vegetables for months during early stages)
- Fermented foods: Sauerkraut, kosher pickles
- Supplements: Vitamin and mineral supplements, a locally available traveller's probiotic with multiple key microbes including *Saccharomyces boulardii*, turmeric
- Fresh foods: A variety of fresh fruits

Besides being life-threatening, C. diff can be tricky to recover from. The chance of reinfection is high, but I have had success and never had to resort to antibiotics to treat it since I took action. I wish you the same success in your treatment or healthy avoidance of it!

Getting Outdoors at Agur Lake

By Robin Whyte

Tucked away in the serene wilderness of British Columbia's interior lies a rare gem: a place where nature doesn't put up barriers. Agur Lake Campground, located near Summerland, welcomes everyone—including those who rely on mobility devices or medical equipment. For many in the disability community, truly accessible outdoor experiences can be hard to come by. That's what makes Agur Lake so remarkable.

Founded on the belief that nature should be inclusive, Agur Lake is the only wheelchair-accessible wilderness campground in the province. This non-profit organization operates with the mission of creating a safe, inclusive environment where people of all ages and abilities can enjoy nature alongside family, friends, and caregivers. The camp features barrier-free cabins, paved trails, accessible docks, and adaptive amenities designed with care. Guests can enjoy glamping-style comfort alongside campfires, fresh air, and the simple joy of being outdoors.

To explore the impact of this special place, I spoke with two people who've spent time at Agur Lake: Evan Murtrie, Community Advisor at Technology for Living (TFL), and Ean Price, TFL's Peer Program Manager and Innovation Strategist. Both know firsthand how rare inclusive wilderness experiences can be—and why they matter.

An Expert's Assessment

Ean Price is an accomplished Kelowna-based entrepreneur, advocate, and accessibility innovator who lives with spinal muscular atrophy type II. He's the founder of ICAN Resource Group Inc., a past TFL board member, and a former president of the Disabled Sailing Association of BC. His passion for independence through technology and peer collaboration has shaped his leadership within the community. "I love challenges," he says, and Agur Lake meets the challenge of inclusion with heart.

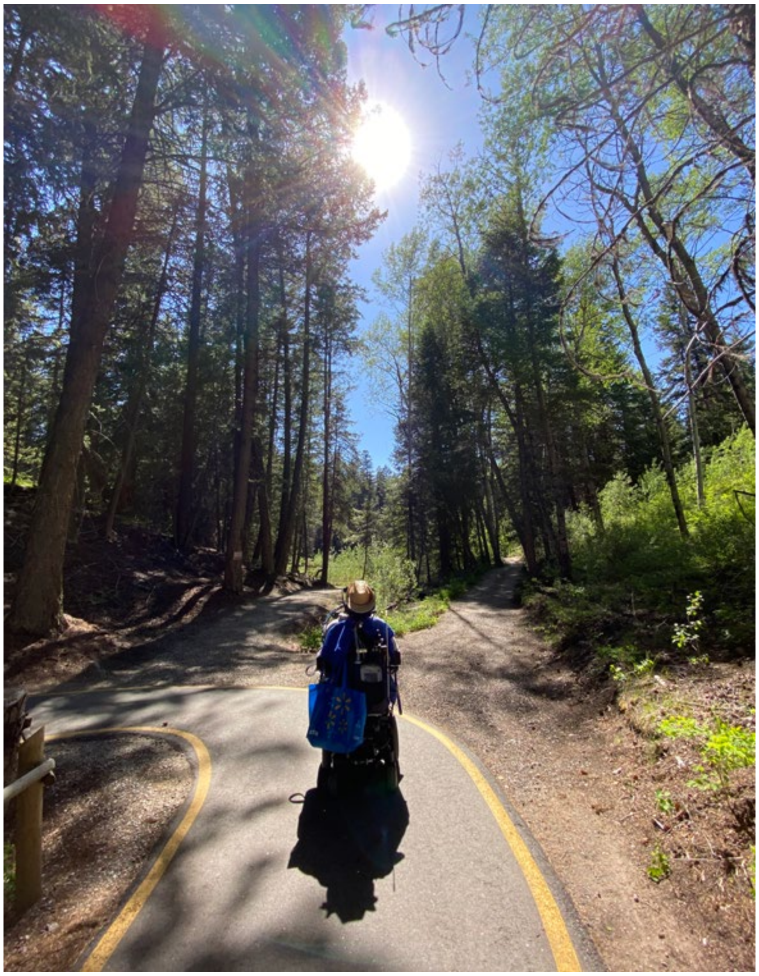
Ean described the campground as deeply accessible—from the paved trails and thoughtful signage to cabins equipped with ceiling lifts, hospital beds, and roll-in showers. He pointed out that each of the three cabins can host up to six guests, with hospital beds in the bedrooms and pull-out couches that convert to double beds in the living areas, creating a home-like atmosphere rather than a clinical setting. The cabins include features like baseboard heaters, commodes, accessible barbecues, and an outdoor gazebo with a fridge. They come fully furnished with spacious designs that accommodate even the largest wheelchairs, complete with grab bars, roll-under sinks, and fully equipped kitchens featuring full-sized appliances and everything needed for meal preparation. The recent addition of 24/7 generator power was a game-changer, allowing continuous use of ventilators and wheelchair charging overnight.

> **"For many people, camping is just not on the table anymore. But Agur Lake puts it back in reach." — Ean Price**

One of Ean's favourite memories was celebrating his 40th birthday at Agur Lake, where he rented all three cabins for a weekend of connection with friends and nature. "No cell service, no internet, no TV—just birds, crickets, and the sound of a paddle sliding through lily pads. It's pure nature." He also noted the stocked fishing dock, accessible watercraft, and wide, paved paths that connect the entire site. "For many people, camping is just not on the table anymore. But Agur Lake puts it back in reach."

From Athlete to Advocate

Evan Murtrie, based in Kamloops, shares a similar appreciation for the site's balance of remoteness and ease. A former football player for the Kamloops Broncos, Evan became paralyzed from the neck down in 2014 due to enterovirus D68. Today, he's a dedicated coach and scout with the Broncos organization and Community Advisor at TFL.



On his first visit to Agur Lake, Evan was struck by the care taken to make everything functional and accessible. “It feels remote, but still workable,” he said. “The cabins are laid out thoughtfully, and the paved paths—even with some steep sections—make it manageable for different mobility devices.” About 80% of the trails are paved, with the remaining paths featuring hard-packed surfaces that most wheelchairs and power chairs can navigate without difficulty. A fully accessible wooden boardwalk meanders through the marsh, though visitors should note that the trail up from the lake is the steepest at the camp. The site was accessible enough to handle large wheelchair vans and even a full-sized school bus, thanks to improved road-access.

Evan spoke of time spent listening to music with friends on the dock, enjoying the peaceful pace of life after the intensity of the COVID years. Wildlife sightings added to the charm—deer, squirrels, and even a turtle laying eggs near the path. “There aren't many places like this,” he reflected. “You feel welcome and supported.”

“We focus so much on housing, transportation, and healthcare—but Agur Lake reminds us how essential joy and connection are, too.” — Evan Murtrie

He emphasized that for many people living with disabilities, especially those with high care needs, recreation often gets left out of the equation. “We focus so much on housing, transportation, and healthcare—but Agur Lake reminds us how essential joy and connection are, too.”

Planning Your Agur Lake Visit

Agur Lake currently offers three fully accessible cabins, five RV or tenting spots, paved trails down to and around the lake, an adaptive fishing and water sports dock, dirt trails for exploration, and an accessible picnic area complete with BBQ, fire pit, and a gazebo. There's no internet or cell service—just the invitation to unplug, recharge, and reconnect with nature.

For those planning a visit, the camp generally operates from June 1 to September 15, though dates can vary each year due to the higher mountain elevation and longer winters. A minimum two-night stay is required (three nights on long weekends). Guests should bring linens, food, and personal care items, while the camp provides 24/7 generator power, walkie-talkies for communication, fishing equipment, and can arrange manual wheelchairs, power chairs, or scooters upon request. Only registered service dogs are permitted at the camp—registration certificates must be provided when booking, dogs must remain leashed, and owners are responsible for cleanup. Reservations can be made by visiting www.agurlakecamp.ca.

Whether it's fishing, barbecuing, kayaking, or simply relaxing beneath the trees, Agur Lake offers something rare and restorative: a chance to be in nature without barriers.

At Agur Lake, nature belongs to everyone.

Annual General Meeting

🗓️ Sept. 18, 2025 ⏰ 6:00 - 7:00 PM 💻 Virtual via Zoom

All required AGM documentation, including the Meeting Agenda, Meeting Minutes and the Independent Auditor's Report are publicly available on technologyforliving.org on the "ABOUT" page.

There will be a special presentation by our Peer Team as they share highlights from their work over the past year.

For technical support before or during the meeting please contact: tiltechs@technologyforliving.org or 604.326.0175

Register Now:

https://tinyurl.com/TFLAGM2025

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