

# Guideability



Image Description: A group of nine people, including women and gender diverse folks. Each representing various visible and non-visible disabilities.

*It's important to understand that disability is a natural part of the human experience and that people with disabilities deserve equal rights, opportunities and respect. I wish people outside the disability community understood the significance of inclusive practices and the value of diverse perspectives in all aspects of life.*

– Dr. Yvette Pegues

## Introduction

Understanding and embracing accessibility, inclusion and belonging is vital in a diverse and connected world. Every individual action can help create spaces where everyone feels valued and respected.

As an organization committed to diversity, equity, inclusion and accessibility, we strive to ensure that all members and volunteers, with or without disabilities, have equitable opportunities to thrive.

Disability covers a wide range of conditions, including impairments, activity limitations and participation restrictions. Examples include developmental (autism, ADHD), health (diabetes, cancer), learning (dyslexia), mental health (depression, anxiety), physical (cerebral palsy, amputation) and sensory (hearing, vision loss).

Guiding is for everyone. Accessibility is more than removing barriers – it's about creating spaces where every member can participate fully, feel safe and grow with confidence. Together, GGC representatives can make this possible.

Use this resource to explore ways to foster inclusion and accessibility for girls and youth with disabilities. **Remember, Guideability offers practical tools – it's not expert advice, a diagnostic assessment or replacement for the formal Duty to Accommodate Policy.**



## **Girl Guides of Canada land acknowledgement**

Girl Guides of Canada (GGC) acknowledges that our work takes place on the traditional and treaty territories of hundreds of distinct and sovereign First Nations, Inuit and Métis communities across what is now called Canada. These lands and waters have long connected GGC members, volunteers and staff through our shared work in Guiding. We recognize that these same lands have been home to Indigenous peoples since time immemorial and remain central to their identities, cultures and governance.

As an organization with settler-colonial foundations and practices, we acknowledge the ongoing impacts of colonization and our responsibility to learn, unlearn and act in ways that honour Indigenous sovereignty, voices and futures.

We are committed to reconciliation and to building relationships rooted in respect, accountability and the meaningful inclusion of Indigenous perspectives in all areas of our work.

## **Diversity, equity, inclusion and accessibility at Girl Guides**

GGC is committed to creating safe and inclusive spaces where all girls and youth are empowered to be themselves fully. As a girl- and youth-led organization, we provide opportunities for members to use their voices and take action and spark change, while building friendships, having fun and feeling a sense of belonging, no matter their background and identity. With over 100 years of history, we are committed to growing and embracing inclusivity.

Diversity, including race, sexual orientation, abilities, income, religion, age and more, enriches everything we do. Equity ensures everyone has access to the resources needed to succeed, recognizing that not everyone starts from the same place. Inclusion means actively creating spaces where diverse experiences are valued and everyone can participate without barriers. Accessibility removes obstacles so every member, including those with disabilities, can belong and contribute and thrive.

Focusing on diversity, equity, inclusion and accessibility makes Guiding stronger, ensuring all members and volunteers feel valued, connected and empowered to make a difference.

## Evolving language for accessibility

Language shapes understanding and daily interactions. To promote inclusion, listen to disabled individuals, both visible and invisible, and value their voices. Avoid assumptions, approach conversations with curiosity and open-mindedness. Ask respectful questions, reflect on biases and demonstrate genuine interest. Acknowledge that discussions about language and disability can be challenging; mistakes happen. What matters is a willingness to learn, grow and respectfully adapt to honour diverse experiences.

An important place to start is to avoid outdated or oppressive terms that create barriers and reinforce stereotypes, such as the R-word (retard or retarded), handicap, crippled, psycho or insane which reinforces harm and social exclusion.

**Special needs** is not a disability community term; people with disabilities are not special. Everyone has support needs; labeling them as special is othering.

- **Othering** is using language and/or behaviour that makes a person or group feel inferior or like they do not belong.



Treat all with dignity and respect. Use respectful language such as accessible or barrier-free instead of handicap.

Inclusive language respects diverse experiences through empathetic listening and clear communication – not political correctness. It fosters respect and reduces prejudice, especially around disability and accessibility.

In disability communities, disabled and disability are empowering and descriptive terms. Use person-first language (person with a disability) or identity-first language (disabled, Deaf). Always ask individuals their preferred terminology and respect their choices.

## Planning and preparation

As volunteers, you have the power and responsibility to create meaningful and positive Guiding experiences for other members. By thoughtfully organizing meetings and activities, you ensure all girls and youth are included and feel valued. Here are some helpful suggestions to guide your preparation and planning.

### Start conversations early with disabled members and their caregivers to understand their needs and make their voices heard.

Ask thoughtful questions to prevent issues and plan accommodations proactively, fostering an inclusive environment. Be mindful to only ask for information necessary to support inclusion. Avoid asking sensitive or medical details unless they are shared voluntarily. Handle all personal information in accordance with GGC's privacy policy.

*"We are excited to have \_\_\_\_\_ in our unit. As part of Guiding, we want to ensure that your child is supported, feels valued and has great experiences."*

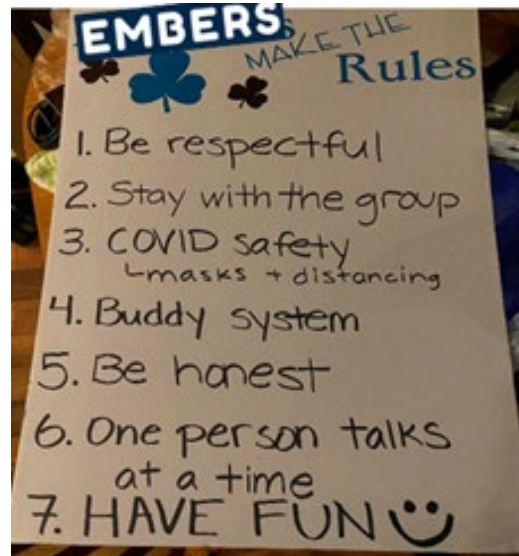
- *"What is your child most looking forward to about Guiding?"*
- *"What are things your child enjoys or might find challenging?"*
- *"Are there concerns you or your child may have?"*
- *"Are there any environmental adaptations that would help support your child?"*

Consider physical barriers, sensory factors such as lighting, noise levels, or other sources of overstimulation.

**Communicate your needs and support as co-leaders to ensure success.** Recognize the unique value each leader brings in empowering girls, youth, and women across Canada. Foster inclusive communication by encouraging every voice, promoting understanding and clarity.

- *"What are some of your strengths and where would you like to grow?"*
- *"How do you feel valued on a team?"*
- *"How are responsibilities distributed?"*
- *"How do you engage when responding to challenging situations?"*
- *"How do you demonstrate and implement GGC values together?"*

**Create community guidelines with your unit and co-leaders,** involving everyone in setting age-appropriate expectations for GGC activities. Use discussions and activities (e.g., [Building Peace](#), [Rally for Rights](#), [Pieces of Peace](#)) to help members establish boundaries. This fosters a respectful environment where everyone has a voice, enhancing both enjoyment and understanding.



Here is an example of community guidelines set and created with an Embers unit during COVID-19, outlining age-appropriate rules for their Guiding space.

**Maintain regular communication with caregivers and guardians** to keep everyone informed and supported. Share updates on the child's progress, celebrate achievements and encourage questions and feedback. Use meaningful prompts to facilitate engagement. If changes to the physical space, schedule or supervision structure are being considered, ensure that they align with Safe Guide.

*"We are happy to have \_\_\_\_\_ in our unit. We want to ensure that they have a great time in Guiding and have noticed they have difficulty \_\_\_\_\_. Are there strategies used at school or home that we can use here to support them?"*

*"We appreciate how enthusiastic and creative your child is. We notice that they're becoming more comfortable in the unit, sharing their voice and eagerly partnering with their peers. We love to see it!"*

**Rethink your meeting goals:** focus on skill development, personal growth and community building. Guiding is much more than task completion and perfect badge work. Empower girls and youth to build self-esteem, acquire skills, grow socially and have fun.

Your Guides enjoyed making Lavender Sachets. Not everyone finished theirs, not everyone learned how to sew. But everyone was able to gain confidence, explore new skills and have fun with friends. The Junior Leader felt good helping a Guide get back on track and supporting the developmental growth of unit members. Guiders viewed noise as a form of social engagement, not frustration and fostered collaboration when distractions occurred.

**Meet people where they are at** by acknowledging their realities and providing support tailored to their individual needs. Listen without judgment to understand their abilities and goals. This fosters a sense of agency, belonging, and creates a safe space for connection, learning, and growth.

Your Ranger unit is at an indoor rally with other local units. You see that a Ranger with autism is withdrawing and starting to cry. You recognize this may signal an impending meltdown. You support by:

- Adjust environment (earplugs, dim lighting, quiet space).
- Offer 2-3 structured choices (different activity, walk, sensory toy, water).
- Minimize words, avoid telling them to calm down and guide them to a safe and quiet space.
- Respect their space, avoid touching unless invited and keep others away.
- Remain calm and patient.
- After calming, provide familiar, soothing activities to aid recovery.

**Be proactive with accessibility practices and disability inclusion** in Guiding activities and spaces. Actively seek member input, prepare accommodations and ensure full participation to support your unit and adapt to changes.

Your Pathfinder unit is planning an overnight camp in the city. One Pathfinder is a wheelchair user. As a group, you intentionally organize the camp and GGC activities to ensure no one is excluded and every member can participate. This includes ensuring locations are physically accessible to enter, e.g. a ramp or elevator; space to move around; accessible bathrooms; travel distances are minimized and additional time is planned for transitions. Activity accommodations and modifications are outlined in advance during the activity brainstorming.



**Create a quiet and cozy space in your meeting area** as a positive alternative to time-outs, helping unit members process emotions safely. This area is not a punishment tool – it is a safe space that fosters emotional regulation, teaching that feelings are valid, but certain reactions to those feelings are not. It supports learning from mistakes and addresses the root of misbehaviour –difficulty regulating emotions.

To provide a secure environment for de-stressing and self-regulation, you can get creative with:

- Soft lighting and reduced noise (e.g. bring your own headphones)
- Comfortable seating (e.g. foam tiles, cushion)
- Sensory tools (e.g. fidget toys, colouring sheets)
- Calming colours and textures (e.g. fluffy mat)
- Safe movement options (e.g. stretching, bouncing, dancing)
- Easy set-up and take-down
- Unit boundaries of the cozy space:
  - “We use this space when we are feeling...”.
  - “It’s okay to have these strong emotions. Would you like to go to the cozy corner with me for a moment?”
  - “I’d like to share with everyone our new cozy space. Let’s talk about what this space is for and the Junior Leader will write it down.”
  - Invite and validate unit members taking time in the cozy space when they need it and offer support.

**Ensure all tools (e.g., fidgets, seating) are age-appropriate, non-hazardous and comply with Safe Guide.**

- Secure storage for small items.
- Use of non-toxic materials.
- Avoid materials that could pose choking, fire or mobility risks.

**Have a plan, not a reaction.** Thoughtful preparation promotes understanding and respect; reactive responses can reinforce biases, create barriers and harm relationships. Pause, reflect and choose inclusive solutions.

Enrollment is coming up, and one of the members advancing is Hard of Hearing (HoH). While organizing, you realize that both Guiders will be engaged in guiding the ceremony, unit members and their caregivers. Knowing this, you connect with your Area Commissioner for support accessing an ASL interpreter to attend with the unit member. Rather than reacting at the time of enrollment, hoping to include them, you are prepared to respond to this situation ensuring the member is included and appropriately supported.

**Provide flexible communication methods as necessary**, such as language interpreters, large or dyslexia-friendly fonts, Braille, closed captions, to minimize barriers and ensure inclusive participation. Be mindful to handle personal information sensitively and confidentially, in line with GGC’s privacy guidelines.

**Lead by example.** Model inclusive, accessible and safe practices for your unit. Guide discussions on inclusion, address members’ questions and demonstrate behaviors that foster belonging. Your leadership sets the tone, reduces risks and prevents unintentional harm or escalation.

## Assistive devices, service animals and support persons

Assistive devices/technology are tools that enhance the daily lives of people with disabilities across communication, mobility, cognition, hearing, vision and self-care. Devices often reflect personal identity. Respecting them fosters inclusion and belonging within Guiding.

**Examples:** Wheelchairs, braces, canes, listening aids, Smartphones with assistive apps, Speech generators, Magnification tools, Specialized computers etc.

- Ask permission before touching someone's device.
- If a device is used for medical or emergency purposes (e.g., seizure alert device), ask the member and caregiver for safety instructions or contact protocols – only if relevant to the member's participation or wellbeing
- If unsure, ask if assistance is needed.
- Focus on the person, not just their device – it's about them and their Guiding experience.

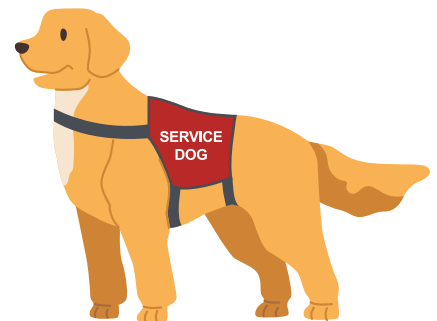


**Service animals** are specially trained animals that assist individuals with disabilities by performing specific tasks such as guiding, alerting to sounds or medical changes, prompting medication, aiding mobility or retrieving objects. They are certified and trained by accredited organizations.

- **Registered service animals are permitted in public Guiding spaces.** Do not ask for proof of disability or explanation of the member's need. It is enough that the service animal meets public access standards.
- To prepare your unit, remember that service animals are not pets. Do not distract or touch them without permission. Promote awareness and respect and allow handlers to share their experiences. With understanding, service animals can be integrated smoothly into the unit.

**Emotional support animals (ESAs)** are different from service animals. An emotional support animal (ESA, non-registered service animals, also referred to as a therapy animal) is any animal that brings comfort and support to people with mental, emotional, psychological and sometimes physical disabilities. ESAs do not receive specialized training and do not have the same access to public spaces across Canada as service animals.

- GGC units are not required to accept ESAs in spaces where animals are not otherwise permitted.



**A support person** assists individuals with disabilities or support needs in communication, mobility, personal care, medical needs or accessing services. They can be paid, volunteer, family or friends and do not need special training. Include them in planning to best support the unit member. You can also ask your Council about financial assistance.

- Support persons are not expected to lead or supervise youth. Their presence does not replace the need for required Guiders under Safe Guide. For more information, see the [Guidelines for Members Accompanied by a Support Person](#).



## General best practices

### **Listening to disabled members and valuing their voices is essential to meaningful inclusion.**

Disabilities are diverse, visible and invisible, experienced by people of all ages. By intentionally engaging girls, youth and volunteers with disabilities, we foster genuine inclusion and care. Ensure that member voices are heard in age-appropriate ways and documented respectfully, if accommodations are discussed. Do not share personal information with others unless absolutely necessary for safety or inclusion purposes.

### **Avoid using stereotypes and generalizations when referring to people with disabilities.**

Disabilities are diverse, with varying severities and expressions. Challenge assumptions about what disability looks like. Understand that disability inclusion recognizes individuals as full, complex human beings with unique strengths and challenges.

**Do not solely focus on a person's disability.** Respect all members as individuals, not just their disabilities. Focus on GGC goals and offer positive reinforcement to everyone. Disability is just one aspect of identity, never a flaw.

**Challenging behaviour can be a form of communicating unmet needs.** Behaviours of concern can be displayed as disrupting activities, not following instructions, irritability, throwing or breaking objects, biting, hitting and withdrawal or isolation. However, these behaviours often have underlying causes, including:

- Unmet basic needs (e.g. being hungry, tired, needing sensory input or sensory overwhelm)
- Environmental factors (e.g. loud or unpredictable settings, sensory overload)
- Difficulty communicating or expressing themselves (e.g. unable to convey need for assistance)
- Difficulty understanding social cues and context (e.g. easily interrupting, need clarity to apologize for a mistake)
- Modeled behaviour at home or school being mimicked
- Life circumstances (e.g. health, disability, access to necessary supports, change in routine)
  - Current or past trauma, which does not look, feel or sound the same for everyone
  - Kids in our care may have experienced trauma

Understanding the underlying causes of behaviours of concern helps you develop effective strategies to address and manage them. If challenging behaviour presents a safety concern, Guiders must document the incident, follow GGC reporting protocols and may need to consult Safe Guide. **Volunteers should never provide clinical advice or attempt to manage trauma-related responses beyond basic first-aid or calm presence. Refer to Safe Guide and escalate if unsure.** Guiding practices are informed by the goal of providing a safe space and preventing further harm.

**Be patient, it's okay to slow down.** Patience and flexibility with yourself, co-leaders and members benefit everyone. Respect members' processing and learning styles –avoid rushing or interrupting those who need time to share.

**If you make a mistake, apologize genuinely, correct yourself and move forward respectfully.** We all make mistakes and can unintentionally cause harm. Come to each conversation with good intentions, curiosity and an openness to learning and growing.

**Examine how you approach and interact with others.** Model kindness, empathy, acceptance and inclusion in your interactions within Guiding spaces. Your tone, facial expressions, body language and proximity significantly influence situations. As a Guider, exemplify GGC values and respectful treatment, especially during challenges. Avoid raising your voice or looming over others, instead, maintain neutral body language, calm tone and aim for understanding and resolution.

## **Understanding the Canadian Human Rights Act – Duty to accommodate**

At Girl Guides of Canada, we are committed to making Guiding accessible and removing barriers to full participation. The duty to accommodate is a legal obligation under the Canadian Human Rights Act, which protects against discrimination based on factors such as race, national or ethnic origin, colour, religion, age, sex, sexual orientation, gender identity or expression, marital status, family status, genetic characteristics, disability, or conviction for an offence for which a pardon or record suspension has been granted.

This means we must identify and address barriers that may negatively affect members, staff or volunteers and take steps to support their full participation.

### **Our responsibilities include:**

- Identify barriers that might affect the person requesting the accommodation.
- Explore options for removing these barriers, up to the point of undue hardship as defined by applicable human rights legislation.
- Ensure that information requests are constructive and respectful of privacy and confidentiality.

## How accommodation works:

- Make arrangements in a timely way.
- Work together to find solutions, understanding that the preferred option may not always be possible.
- Protect dignity, privacy, and self-esteem at every step by handling any personal information related to accommodation requests in compliance with the Privacy Act and GGC's internal privacy policy.

## Limits to accommodation

Undue hardship describes the limit of an employer's obligation to accommodate an employee. When all reasonable possibilities for accommodation are exhausted, sometimes accommodation is not possible due to risk factors such as safety, health or cost. The concept of undue hardship is unique in each situation and should be assessed individually, determining accommodation according to the specific context. Under applicable federal or provincial human rights legislation, the duty to accommodate continues until the point of undue hardship. GGC staff and volunteers play an important role in fostering inclusive spaces and memorable Guiding experiences by modelling exemplary leadership and creating a respectful, diverse and barrier-free environment.

## Relevant Policies and Legislation:

[Accommodation - Canada.ca](#)

[Directive on the Duty to Accommodate- Canada.ca](#)

[Accessible Canada Act](#)

[Canadian Human Rights Act](#)

[Canada Labour Code Part II](#)

[Privacy Act](#)

[Policy on People Management](#)

**For activities and employment under provincial jurisdiction, relevant provincial human rights codes and accessibility laws will apply (e.g. Ontario Human Rights Code, BC Human Rights Code).**

## Getting support

We value the dedication of Guiders and volunteers in creating fun, positive and life-changing experiences. As role models, your knowledge, care and openness shape our communities and make GGC special. Remember, it's okay to ask for help – support and resources are available to back you up every step of the way.

**Utilize and collaborate with your co-Guiders and Junior Leaders.** Your team is here to facilitate activities, navigate challenging conversations with caregivers and provide additional support. Dependability fosters confidence and strong relationships, benefiting everyone involved. Guiders, Junior Leaders, volunteers and role models alike should enjoy a positive and rewarding Guiding experience.

Ensure that one Guider takes the lead on documenting key decisions or accommodation plans discussed with families. This helps prevent gaps in communication or accountability later.

**For support with accessibility and disability accommodations, and DEIA-related matters contact your provincial DEIA Adviser.** They can guide you through questions, challenges and support throughout your Guiding experience. If your provincial council is working to establish a DEIA Adviser, reach out to your Deputy Provincial Commissioners (DPC) for additional support or to escalate needs.

For more information, you can also refer to the Safe Guide, Privacy Policy and Guiding is for Everyone Handbook or reach out to your Provincial Commissioner (PC). Each council is supported by the National DEIA Specialist designated to your province.

<b>Alberta (ANY) Council</b>	
For Guiding in Alberta, Northwest Territories and Yukon	
DEIA Adviser	any-deia@girlguides.ca
Deputy Provincial Commissioner 1	any-dpc1@girlguides.ca
Deputy Provincial Commissioner 2	any-dpc2@girlguides.ca
Provincial Commissioner	any-pc@girlguides.ca

<b>British Columbia (BC) Council</b>	
For Guiding in British Columbia	
DEIA Adviser	bc-deia@girlguides.ca
Deputy Provincial Commissioner 1	bc-dpc1@girlguides.ca
Deputy Provincial Commissioner 2	bc-dpc2@girlguides.ca
Provincial Commissioner	bc-pc@girlguides.ca

### Manitoba (MB) Council

For Guiding in Manitoba

Deputy Provincial Commissioner 1	mb-dpc1@girlguides.ca
Deputy Provincial Commissioner 2	mb-dpc2@girlguides.ca
Provincial Commissioner	mb-pc@girlguides.ca

### New Brunswick (NB) Council

For Guiding in New Brunswick and Prince Edward Island

DEIA Adviser	nb-deia@girlguides.ca
Deputy Provincial Commissioner 1	nb-dpc1@girlguides.ca
Deputy Provincial Commissioner 2	nb-dpc2@girlguides.ca
Provincial Commissioner	nb-pc@girlguides.ca

### Newfoundland and Labrador (NL) Council

For Guiding in Newfoundland and Labrador

DEIA Adviser	nl-deia@girlguides.ca
Deputy Provincial Commissioner 1	nl-dpc1@girlguides.ca
Deputy Provincial Commissioner 2	nl-dpc2@girlguides.ca
Provincial Commissioner 1	nl-pc1@girlguides.ca
Provincial Commissioner 2	nl-pc2@girlguides.ca

### Nova Scotia (NS) Council

For Guiding in Nova Scotia

DEIA Adviser	ns-deia@girlguides.ca
Deputy Provincial Commissioner 1	ns-dpc1@girlguides.ca
Deputy Provincial Commissioner 2	ns-dpc2@girlguides.ca
Provincial Commissioner	ns-pc@girlguides.ca

### Ontario (ON) Council

For Guiding in Ontario and Nunavut

DEIA Adviser	on-deia@girlguides.ca
Deputy Provincial Commissioner 1	on-dpc1@girlguides.ca
Deputy Provincial Commissioner 2	on-dpc2@girlguides.ca
Provincial Commissioner	on-pc@girlguides.ca

### Saskatchewan (SK) Council

For Guiding in Saskatchewan

DEIA Adviser	sk-deia@girlguides.ca
Deputy Provincial Commissioner 1	sk-dpc1@girlguides.ca
Deputy Provincial Commissioner 2	sk-dpc2@girlguides.ca
Provincial Commissioner	sk-pc@girlguides.ca

### Quebec (QC) Council

For Guiding in Quebec

DEIA Adviser	qc-deia@girlguides.ca
Deputy Provincial Commissioner 1	qc-dpc-cpa1@girlguides.ca
Deputy Provincial Commissioner 2	qc-dpc-cpa2@girlguides.ca
Provincial Commissioner	qc-pc-cp@girlguides.ca

## Glossary

This glossary offers foundational language on disability and accessibility. Always ask individuals their preferred terminology, as meanings can be nuanced and context dependent. We strive for accuracy but recognize definitions evolve.

A	
Word	Description
<b>Ability</b>	Having the mental and/or physical capacity to do a task or activity, such as walking, seeing, hearing, speaking, job functions, self-care activities, etc.
<b>Able-bodied</b>	Someone without a disability, but some disabled communities oppose it, because it suggests all disabled people lack able bodies. More neutral terms include <i>non-disabled</i> , <i>does not have a disability</i> , or <i>is not living with a disability</i> .
<b>Ableism</b>	Discrimination or exclusion based on the conscious or unconscious beliefs that people with disabilities are less valuable and less capable of contributing to society.
<b>Accessible</b>	A building, facility, structure, program, activity, resource, product, etc that is readily usable for all, including persons with a disability.
<b>Accessibility</b>	Ensuring everyone can use, experience and benefit from spaces, activities and systems. It's about creating a world where all abilities can participate fully and independently without barriers.
<b>Accommodation</b>	Adjustments to policies, programs, facilities and practices to ensure equitable access by removing barriers.
<b>Attention Deficit Hyperactive Disorder (ADHD)</b>	A chronic neurodevelopmental disorder that impacts a person's attentiveness, impulsivity, hyperactivity behaviours and can vary in frequency and severity.
<b>Allergy</b>	An immune response to substances like food, pollen, bites, pet dander, or medications, triggered by contact, inhalation, ingestion, or injection. Reactions range from mild rashes to life-threatening anaphylaxis.



Word	Description
<b>American Sign Language (ASL)</b>	ASL is a visual language used primarily by Deaf communities in the U.S. and Canada. Some individuals may require an ASL interpreter. An ASL interpreter bridges communication between deaf or hard-of-hearing individuals and speakers by translating spoken language into ASL and vice versa.
<b>Assistive devices/ technology</b>	Devices, equipment, software and hardware that people with disabilities use to assist them with tasks and activities. e.g. wheelchairs, walkers, crutches, prosthetics, hearing aids, computer-based equipment, closed captioning, braille, screen readers, etc.
<b>Asthma</b>	A chronic inflammatory disease of the airways that causes inflammation, limited airflow and difficulty breathing.
<b>Augmentative and Alternative Communication (AAC)</b>	Methods used to express and communicate outside of speech or verbal communication. This can be aided (e.g., computer-based systems that read typed words out loud, interactive touch screens) or unaided (e.g., sign language). These are frequently used by nonspeaking/nonverbal individuals.
<b>Autism Spectrum/ Autism</b>	A neurodevelopmental disorder that impacts brain development, which can include communication differences, difficulty with social interactions and a tendency to repeat specific patterns of behaviour. The term <i>spectrum</i> refers to a wide range of developmental impairments; rather than labelling someone as low or high functioning, focus on support needs. e.g. low support needs, high support needs.
<b>B</b>	
<b>Barrier</b>	Obstacles, obvious or subtle, that restrict society members from accessing or performing activities that others can easily do. They include attitudinal, communication, physical, policy, social, economic and transportation barriers.
<b>Belonging</b>	Feeling secure, supported, accepted and included as part of a group.

Word	Description
<b>Blindness</b>	Refers to vision loss that impairs daily activities, including total inability to see. It does not always mean seeing only darkness; some individuals have limited or partial vision.
<b>Brain injury</b>	An injury that affects how the brain works. Also known as a traumatic brain injury (TBI).

## C

<b>Celiac disease</b>	An autoimmune disorder where gluten intake damages the intestine and impairs nutrient absorption; distinct and separate from gluten intolerance.
<b>Cerebral palsy</b>	Refers to a number of neurological conditions that affect body movement and muscle coordination. People with CP can exhibit a variety of symptoms.
<b>Chronic illness</b>	A health condition lasting three months or longer (e.g. cancer, diabetes, multiple sclerosis, chronic pain).
<b>Cochlear implant</b>	An electronic device that can improve understanding of speech for some people who are Deaf or hard of hearing.
<b>Colorblindness</b>	Difficulty seeing colours. Also called colour vision deficiency.

## D

<b>Deafness</b>	Describes a person who is hard of hearing or has complete hearing loss. Deaf and hard of hearing are recommended to use
<b>Deaf blind</b>	Describes a person who has some loss of both vision and hearing.

Word	Description
<b>Disability</b>	<p>A broad range of medical conditions an individual can have from birth, due to an accident or developed over time, which impact an individual's ability or capacity to function.</p> <p>e.g.</p> <ul style="list-style-type: none"> <li>• Developmental disability (e.g., autism, ADHD, Down syndrome)</li> <li>• Health disability (e.g., diabetes, cancer, asthma)</li> <li>• Learning disability (e.g., dyslexia, dysnomia)</li> <li>• Mental health condition/mental illness (e.g., depression, anxiety disorder, bipolar disorder)</li> <li>• Physical disability (e.g., cerebral palsy, spinal cord injury, amputation)</li> <li>• Sensory disability (e.g., hearing or vision loss)</li> </ul>
<b>Disabled</b>	Individuals having physical, psychological or neurological differences that limit activities like walking, seeing, hearing, speaking, job functions or self-care. Many prefer to identify as disabled.
<b>Down Syndrome</b>	A common genetic disorder that can cause intellectual disability, learning disabilities and developmental delays.
<b>Duty to accommodate</b>	Employers, organizations, service providers and public institutions are legally required to provide reasonable accommodations for equitable access, balanced against their capacity without undue hardship.
<b>Dwarfism</b>	A genetic condition that results in a stature below 4'10. The terms short stature, little person and person with dwarfism are used.
<b>Dyslexia</b>	A learning disability characterized by challenges identifying speech sounds and learning how to connect them to letters and words. It includes difficulties with spelling, reading, pronunciation of words and processing auditory information.
<b>E</b>	
<b>Emotional regulation</b>	Ongoing skills learned to process, manage and cope with our emotional experiences and through difficult situations.

Word	Description
<b>Emotional Support Animal (ESA)</b>	Animals that provide comfort and support to individuals with mental or emotional disabilities. Unlike service animals, ESAs do not require specialized training to perform specific tasks; their legal rights and protections differ.
<b>Epilepsy</b>	A chronic neurological and developmental condition characterized by recurrent, unprovoked seizures.
<b>Equity</b>	Where everyone is treated according to their diverse needs in a way that enables all people to participate, perform and engage fully.
<b>Exclusion</b>	The denial of access or leaving someone out either consciously or unconsciously.
<b>Executive functions</b>	Essential skills for cognitive, social and psychological development. Executive functions can include inhibition (self-control – independence and responsibility of self, resisting impulsivity), attention and cognitive inhibition (working memory) and cognitive flexibility (e.g. thinking outside the box, seeing from different perspectives and quickly and flexibly adapting to changed circumstances).
<b>F</b>	
<b>Financial accessibility</b>	The availability and affordability of products and services, including organizational programming. Financial services should be accessible to all, including people with disabilities
<b>H</b>	
<b>Hard of hearing (HoH)</b>	Someone who has hearing loss where some hearing exists and an assistive device such as a hearing aid.
<b>I</b>	
<b>Identity-first language</b>	Language that emphasizes placing the disability identity before the individual, empowering their sense of self (e.g., autistic girls and youth).

Word	Description
<b>Inclusion</b>	Fostering a culture that embraces and values diversity through mindful, equitable efforts to meet individual needs, ensuring everyone feels respected, valued and empowered to contribute fully.
<b>Invisible disabilities</b>	An umbrella term for disabilities that are not easily seen or noticed, such as dyslexia.
<b>L</b>	
<b>Learning disability</b>	A common genetic disorder that can cause intellectual disability, learning disabilities and developmental delays.
<b>M</b>	
<b>Mental illness</b>	An umbrella term for various conditions that affect how individuals act, think, perceive, feel, or experience the world. e.g., anxiety and depressive disorders and mood disorders.
<b>Mobility aid/ device</b>	Devices that assist with movement such as walking or that help a person navigate their surroundings. e.g., guide dogs, walkers, crutches, wheelchairs etc.
<b>Multiple Sclerosis (MS)</b>	A neurological disease of the central nervous system which includes the brain, spinal cord and optic nerves.
<b>Muscular Dystrophy (MD)</b>	Refers to more than 30 genetic conditions characterized by progressive weakness and degeneration of the muscles that control movement.
<b>N</b>	
<b>Neurodiversity</b>	The notion that different brains operate differently; these neurological differences are normal variations and add value to society.
<b>Neurotypical</b>	Used to describe people whose brain functions, ways of processing information and behaviours are seen to be standard.

Word	Description
<b>Non-disabled</b>	A term to refer to someone who does not have a disability. This is the preferred term when the context calls for a comparison between people with and without disabilities. Recommended use is 'non-disabled' or people without disabilities.
<b>Non-verbal/ non-speaking</b>	Someone with minimal speaking ability or who doesn't use speech to communicate. They can understand and use language, just in a different way or form of communication such as, writing, drawing, facial expressions, gestures, pointing to letters or photos and using an electronic device to generate speech.
<b>O</b>	
<b>Obsessive-Compulsive Disorder (OCD)</b>	Is characterized by intrusive thoughts and fears that repeatedly surface, often exhibiting in ritualized behaviours or compulsions.
<b>Othering</b>	Is using language and/or behaviour that makes a person or group feel inferior or like they do not belong.
<b>P</b>	
<b>Paraplegia</b>	Is the loss of movement in the lower body and torso, typically caused by a spinal cord or brain injury.
<b>People-first language</b>	Language that places emphasis on the person as an individual first and less emphasis on their disability. e.g., person with a disability instead of disabled person.
<b>Physical accessibility</b>	How readily usable a physical space is for people with physical disabilities (e.g., elevator, parking lot, building).
<b>Plain language</b>	Is communication that your audience can understand the first time they engage with it; most people who read or listen to your message will understand information easily.
<b>Post-traumatic Stress Disorder (PTSD)</b>	Is a mental health disorder that can occurs after exposure to psychological stressors during a specific, severe, psychologically traumatic event or series of events.



# S

Word	Description
<b>Seizure</b>	A sudden, uncontrolled electrical disturbance in the brain that can cause changes in your behaviours, movements or feelings and in levels of consciousness.
<b>Self regulation</b>	Learned skills to recognize and manage individual emotions and effectively respond to people, your experiences and environments.
<b>Service animal</b>	Are professionally trained animals that provide services and assistance to people with disabilities. e.g., cardiac alert dogs or seeing eye dog.
<b>Signing</b>	Communication using language created of signs or gestures done with the hands. Sign language is commonly used by people who are deaf and can also be used by people with other disabilities that affect verbal communication.
<b>Speech impediment</b>	Refers to a condition which affects speech, making it difficult for a person to communicate. This can include stuttering or other conditions that cause interruptions in speech.
<b>Support person</b>	Someone who provides service or assistance with communication, mobility, personal care, medical needs and/or to access services.

# T

<b>Tourette Syndrome</b>	A neurological condition characterized by tics, sudden, involuntary and repetitive movements or vocalizations.
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# W

<b>Wheelchair user</b>	People who use a wheelchair as a mobility equipment. Wheelchairs are often seen as a tool to liberate people, enabling empowerment and independence. Wheelchair user is the preferred term to use over wheelchair-bound or confined to a wheelchair.
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## Tip sheets for disability inclusion

The following pages have been designed to support Guiders in creating accessible and inclusive GGC environments. These reference sheets cover a non-exhaustive list of disabilities and conditions, such as developmental (autism, ADHD), health (diabetes, asthma), learning (dyslexia), mental health (depression, anxiety), physical (spinal injury, amputation) and sensory (hearing/vision loss). These sheets offer concise information and inclusion tips. **These are practical tools on inclusion and accommodation and should not be considered as expert advice or used as a diagnostic assessment for others.**

### Allergy

is a reaction of the immune system to a substance such as a food, pollens, insect bites, animal dander or medications. Allergies can be mild or severe and the fear of being exposed to an allergen can prevent someone from joining a unit or activity.

Possible characteristics	Helpful suggestions
<ul style="list-style-type: none"><li>• Skin irritation: hives, swelling (face, lips, tongue), itching, warmth, redness</li><li>• Difficulty breathing: coughing, wheezing, shortness of breath, chest pain or tightness, throat tightness, trouble swallowing</li><li>• Gastrointestinal challenges (stomach): nausea, pain or cramps, vomiting, diarrhea</li><li>• Cardiovascular (heart): paler than normal skin colour/blue colour, weak pulse, passing out, dizziness or light-headedness, shock</li><li>• Sneezing, running eyes and nose, headaches</li><li>• Anaphylactic shock.</li></ul>	<ul style="list-style-type: none"><li>• Debrief all Guiders and Junior Leaders on allergies, reactions and emergency protocols.</li><li>• Ensure the member's medication (e.g., epinephrine) is always accessible.</li><li>• Minimize exposure risks via proper label reading, food prep precautions and hygiene.</li><li>• Clearly label all food ingredients brought to GGC events.</li><li>• Adopt a unit guideline to avoid sharing food and explain its importance.</li><li>• Stay clear of insect habitats like gardens and garbage areas.</li><li>• Avoid attracting insects by refraining from perfumes, scented lotions and sprays.</li></ul>

#### Further information:

[Canadian Society of Allergy and Clinical Immunology | CSACI](#)

[Patient and School Resources | CSACI](#)

[Allergy Canada](#)

[Food Allergy Canada](#)

## Attention Deficit Hyperactivity Disorder (ADHD)

is a chronic neurodevelopmental disorder that impacts a person's attentiveness, impulsivity, hyperactivity behaviours and can vary in frequency and severity.

Possible characteristics	Helpful suggestions
<ul style="list-style-type: none"><li>• Hyperactivity</li><li>• Difficulty with executive functions such as:<ul style="list-style-type: none"><li>◦ Inattention</li><li>◦ Organization</li><li>◦ Time management (e.g. time blindness; difficulty with time perception)</li><li>◦ Self-regulation</li><li>◦ Impulsivity</li><li>◦ Working memory</li><li>◦ Processing speed</li><li>◦ Flexibility/rigidity</li><li>◦ Difficulty regulating emotions (emotional regulation)<ul style="list-style-type: none"><li>• E.g. emotional sensitivity; extreme highs and lows</li></ul></li></ul></li><li>• Hyperfocus or daydreaming</li><li>• Sensory sensitivity</li></ul>	<ul style="list-style-type: none"><li>• Position members close for clear instructions.</li><li>• Minimize environmental distractions.</li><li>• Follow a consistent meeting routine with smooth transitions.</li><li>• Give a warning for transitions or extra time</li><li>• Assign specific tasks to keep members engaged.</li><li>• Simplify and break down instructions.</li><li>• Monitor progress and offer support.</li><li>• Encourage participation and effort.</li><li>• Provide a calm, quiet space for sensory needs.</li></ul>

### Further information:

[CADDAC: Canadian ADHD Awareness | Education | Advocacy](#)

[ADHD Information Library – CHADD](#)

[Accueil – Regroupement des Associations PANDA du Québec](#)

[Rolling With ADHD – Healthy Minds Learning](#)

[Sites web en lien avec le TDAH – Attention déficit](#)

## Asthma

is a chronic inflammatory disease of the airways that causes inflammation and narrowing of the bronchial tubes, which leads to limited airflow and difficulty breathing.

Possible characteristics	Helpful suggestions
<ul style="list-style-type: none"><li>• Shortness of breath</li><li>• Wheezing</li><li>• Chest tightness</li><li>• Increased mucus production</li><li>• Unable to take part in physical activities without breathing difficulty</li></ul>	<ul style="list-style-type: none"><li>• Identify asthma triggers with members and caregivers.</li><li>• Learn to use aero chambers and puffers.</li><li>• Establish or review an asthma action plan with caregivers and Guiders.</li><li>• Adjust activities to accommodate asthma, such as providing breaks or limiting outdoor activity in extreme temperatures.</li><li>• Ensure controller and reliever medications are accessible.</li><li>• Maintain a scent-free Guiding environment.</li></ul>

### Further information:

[Asthma Canada](#)

[Resources – Asthma Canada](#)

## Autism/Autism Spectrum Disorder

Is a neurodevelopmental disorder that impacts brain development, which can include communication difference, difficulty with social interactions and a tendency to repeat specific patterns of behaviour.

Possible characteristics	Helpful suggestions
<ul style="list-style-type: none"><li>• May avoid eye contact</li><li>• Sensory sensitivities (light, smell, sound)</li><li>• Difficulties transitioning between activities</li><li>• Repetitive behaviours (rocking, flapping, stimming)</li><li>• Reliance on routines</li><li>• Unique communication methods (writing, drawing, gestures, photos, devices)<ul style="list-style-type: none"><li>◦ May be non-verbal or non-speaking, though communicating in other ways</li></ul></li><li>• Challenges with emotional regulation:<ul style="list-style-type: none"><li>◦ Meltdowns (verbally or physically explosive) and shutdowns (internal, freeze response), can lead to being non-verbal, withdrawn, increased stimming and masking.</li><li>◦ May have difficulty understanding and using social cues</li></ul></li></ul>	<ul style="list-style-type: none"><li>• Develop a support plan with caregivers and the individual.</li><li>• Reduce distractions, including noise; suggest noise cancelling headphones.</li><li>• Offer a quiet, sensory-friendly space e.g. foam tiles or cushions, provide fidget toys, dimmed lighting, colouring pages.</li><li>• Provide one-on-one guidance when needed.</li><li>• Maintain consistent routines and smooth transitions.</li><li>• Accept and normalize self-regulating behaviours like stimming.</li><li>• Prepare for change, when possible, e.g. First Then, visual schedules</li></ul> <p>Keep in mind that people with autism have diverse experiences and support needs vary. Some people with autism may have low support needs, some may have high support needs that require more substantial support. Clarify what support is needed for each individual.</p>

### Further information:

[Autism Canada | Resources | Support | Education](#)

[Autism Junction](#)

[WHO – Autism](#)

[Understanding Autistic Meltdowns and Shutdowns](#)

## Blindness

is a general term describing vision loss that interferes with daily activities, including the total inability to see. Blindness does not necessarily mean that someone only sees complete darkness, some people may have limited vision, low vision or are partially sighted.

Possible characteristics	Helpful suggestions
<ul style="list-style-type: none"><li>• A person uses assistive technology or a mobility device, such as a white cane</li><li>• A person uses different formats of processing, such as braille, enlarged text or closed captioning</li><li>• Difficulty navigating a new or altered environment setup</li><li>• Use of mobility and/or assistive devices such as a white cane</li></ul>	<ul style="list-style-type: none"><li>• Collaborate with the member and caregiver to understand their goals and support needs.</li><li>• Use neutral, clear verbal communication to explain actions, as tone of voice is often more noticeable than nonverbals. Self-identify when engaging with the member.</li><li>• Describe activities specifically, e.g., “I’m heading to the campfire near the water; would you like to join?”</li><li>• Allow extra time for transitions and addressing unexpected barriers.</li><li>• Prioritize safety to prevent injury.</li><li>• Use assistive devices as needed.</li></ul> <p>Be mindful that blind or visually impaired individuals need the same intellectual, social, emotional, physical and autonomy supports as sighted peers.</p>

### Further information:

[CFB – Canadian Federation of the Blind](#)

[Resources - Fighting Blindness Canada \(FBC\)](#)

[Canadian-National-Standards.pdf](#)



## Celiac disease

is an autoimmune disorder where the presence of gluten in a person's diet reacts negatively, reducing the person's ability to absorb nutrients and damages the intestine. This is distinct and separate from gluten intolerance.

Possible characteristics	Helpful suggestions
<ul style="list-style-type: none"><li>• Abdominal pain</li><li>• Weight loss</li><li>• Chronic diarrhea</li><li>• Anemia</li><li>• Extreme fatigue</li><li>• Constipation</li><li>• Neurological difficulties</li></ul>	<ul style="list-style-type: none"><li>• Engage caregiver in planning accommodations and identifying food items the member can have, during meetings, camps and off-site environments.</li><li>• Provide a gluten-free option, reasonably equivalent gluten-free food options.</li><li>• Package food items in a way that prevents cross-contamination.</li><li>• Clearly labelled foods as gluten-free.</li><li>• Clean preparation areas thoroughly.</li><li>• Do not restrict access to the bathroom.</li><li>• Carefully read and review food labels when buying food items.</li><li>• These measures protect girls and youth with celiac disease as well as those with food allergies and other dietary restrictions.</li></ul>

### Further information:

[Celiac Disease - Canada.ca](#)

[Celiac Canada](#)

[Living Gluten Free Menu - Celiac Canada](#)

[Celiac Action Guidelines](#)

[Multilingual Resources](#)

## Cerebral palsy (CP)

refers to several neurological conditions that affect body movement and muscle coordination (motor skills). People with CP can exhibit a variety of symptoms.

Possible characteristics	Helpful suggestions
<ul style="list-style-type: none"><li>• Limited mobility</li><li>• Reduced motor skills</li><li>• Reflex movements</li><li>• Communicates slowly</li><li>• Fatigue over long periods of time</li><li>• May use a wheelchair or assistive device</li><li>• Needs support with:<ul style="list-style-type: none"><li>○ movement, adjusting posture (e.g. sitting, standing)</li><li>○ grasping objects</li><li>○ meal prep and eating</li></ul></li></ul>	<ul style="list-style-type: none"><li>• Collaborate with caregivers to understand the child's disability, support needs and accessible activities.</li><li>• Plan inclusive activities in advance, ensuring accessibility, accommodations and alternative options to promote inclusion and prevent exclusion.</li><li>• Prioritize spacious, mobility-friendly environments.</li><li>• Seek out and utilize the least restrictive, accessible spaces.</li><li>• Respect body language and non-verbal cues during interactions.</li><li>• Maintain flexible schedules, allowing extra time for transportation and task completion.</li><li>• Support the use of assistive devices and technology.</li><li>• Be aware of mobility and daily living barriers faced by individuals with CP.</li></ul>

### Further information:

[Cerebral Palsy Canada Network](#)

[CP Support Canada | Cerebral Palsy Support Community](#)

[CanChild](#)

## Deafness

describes a person who is hard of hearing or has complete hearing loss. Deaf and hard of hearing are recommended terms to use.

Possible characteristics	Helpful suggestions
<ul style="list-style-type: none"><li>• Communicates slowly</li><li>• Difficulty interpreting sounds; difficulty hearing clearly or at all, especially when there is background noise.</li><li>• Find group conversations difficult to follow.</li><li>• Frequently ask people to repeat themselves.</li><li>• May use hearing aids.</li><li>• Difficulty following instructions, especially verbal information.</li></ul>	<ul style="list-style-type: none"><li>• Engage caregivers and Guiders to develop support plans and identify resources, such as ASL interpreters.</li><li>• Minimize background noise; face and gain attention before speaking.</li><li>• Speak clearly, without eating or chewing gum; avoid rushing and reduce environmental distractions.</li><li>• Use repetition and paraphrasing as needed.</li><li>• Utilize visual aids like drawings and gestures to instruct and explain activities.</li><li>• Offer alternative communication methods for engagement in GGC programming.</li><li>• Implement a system (e.g., talking stick or bandana) to ensure only one person speaks at a time.</li><li>• Arrange seating in a circle for group discussions.</li></ul>

### Further information:

[Terminology](#)

[Canadian Association of the Deaf](#)

[Sign Language Translation and Captioning Services | Canadian Hearing Services](#)

[Canadian Hard of Hearing Association](#)

## Down Syndrome

a naturally occurring chromosomal condition that has always existed. Down syndrome is associated with chromosome 21 and known for three types: Trisomy 21, Translocation and Mosaicism.

Possible characteristics	Helpful suggestions
<ul style="list-style-type: none"><li>• May have an intellectual disability.</li><li>• Experiences a delay in development such as speech and motor skills.</li><li>• Needs extra time to process information and complete tasks.</li><li>• Can communicate slowly.</li></ul>	<ul style="list-style-type: none"><li>• Engage with caregivers to understand how you best support this member. What strategies are used in school?</li><li>• Support executive functioning (e.g. breaking tasks into small steps, monitoring completion, gentle reminders for working memory).</li><li>• Provide more time for tasks and activities to be completed.</li><li>• Have a support plan in place, which can be created in collaboration with caregivers and the unit member</li><li>• Role model inclusive behaviour, members will learn from you.</li><li>• Provide information in various ways (e.g. visual, print, demonstration, oral).</li><li>• Modify activities if you recognize the member is experiencing difficulties.</li></ul>

### Further information:

[Inclusive Education Resources | Canadian Down Syndrome Society](#)

[Education Toolkit – Down Syndrome Australia](#)

[Supporting Students with Down Syndrome - Down Syndrome Resource Foundation](#)

[DownSyndrome](#)

[Disability Supports for People with Down Syndrome](#)

## Dyslexia

a learning disability characterized by challenges identifying speech sounds and learning how to connect them to letters and words. It includes difficulties with spelling, reading, pronunciation of words and processing auditory information.

Possible characteristics	Helpful suggestions
<ul style="list-style-type: none"><li>• Difficulty reading or reading slowly.</li><li>• Difficulty with other language skills such as spelling, writing and pronouncing words.</li><li>• Difficulty learning in a typical instructional environment and remembering information.</li><li>• May need to hear or see concepts many times to learn them.</li><li>• May have difficulty processing auditory information.</li><li>• Difference in communication and social interactions, such as non-verbal communication.</li><li>• Anxiety in social situations.</li></ul>	<ul style="list-style-type: none"><li>• Ask caregivers and unit members about their daily strategies and tools.</li><li>• Allow members to progress at their own pace.</li><li>• Repeat instructions clearly, breaking down steps as needed.</li><li>• Demonstrate activities, e.g., crafts.</li><li>• Offer extra time and multiple opportunities to practice.</li><li>• Remain patient and open to alternative strategies.</li><li>• Use both verbal and visual cues – read instructions aloud and provide written materials.</li><li>• Encourage use of assistive technology.</li><li>• Simplify instructions with plain language and highlight key points.</li></ul>

### Further information:

[Dyslexia Canada](#)

[Dyslexia Handbook - International Dyslexia Association](#)

[Canada's Centre for Dyslexia: Empowering Dyslexic Learners Through Innovative Education](#)

[Classroom accommodations for dyslexia](#)

## Epilepsy

a chronic neurological and developmental condition characterized by recurrent, unprovoked seizures. A seizure is a sudden, uncontrolled electrical disturbance in the brain that can cause changes in your behaviours, movements or feelings and in levels of consciousness.

Possible characteristics	Helpful suggestions
<ul style="list-style-type: none"><li>• Difficulty breathing</li><li>• Numbness</li><li>• Arm or leg stiffening</li><li>• Unusual physical activity unlike the individual</li><li>• Uncontrolled movements such as convulsions or muscle spasms</li><li>• Brief or prolonged loss of consciousness</li><li>• Drooling</li><li>• Inability to move or speak</li><li>• Loss of bladder and/or bowel control</li><li>• Hearing loss, vision loss/blurred or flashed</li><li>• Blank stare or altered awareness</li><li>• Seizures can last anywhere from a few seconds to a few minutes</li></ul>	<ul style="list-style-type: none"><li>• Develop a support plan with caregivers and the member.</li><li>• Consider taking a Seizure First Aid course.</li><li>• Clear clutter and hazards for safety.</li><li>• Ensure medications are accessible.</li><li>• Train volunteers on seizure procedures: one stays with the member, another calls emergency services and a third engages others.</li><li>• Provide privacy to respect dignity during and after seizures.</li><li>• Give the member time to recover. Recovery time depends on the person and their own baseline.</li></ul>

### Further information:

[Epilepsy Canada Epilepsi](#)

[Canadian Epilepsy Alliance](#)



## Mental illness

an umbrella term for various conditions that affect how individuals act, think, perceive, feel, or experience the world. For example, anxiety, depression, mood and trauma disorders.

Possible characteristics	Helpful suggestions
<ul style="list-style-type: none"><li>• Extreme worrying or fear</li><li>• Feeling excessively sad or low</li><li>• Detach or avoid friends and social activities</li><li>• Change in sleep and/or eating habits</li><li>• Mood changes such as highs and lows, feelings of euphoria</li><li>• Thoughts of suicide</li><li>• Difficulty carrying out daily activities and executive functions</li><li>• Difficulty managing daily challenges and stress</li></ul>	<ul style="list-style-type: none"><li>• Develop a tailored support plan with caregivers and the member to meet individual needs.</li><li>• Be aware of any medications required during meetings and events.</li><li>• Offer flexible engagement options, such as written input vs. spoken sharing, guiding members to choose what works best.</li><li>• Provide positive feedback and express appreciation for your team members.</li><li>• Create a quiet, sensory-friendly space for self-regulation.</li><li>• Check in regularly for new tools or preferences, like a signal for needing space or assistance.</li><li>• Collaborate with co-leaders to implement strategies and communicate support adjustments.</li></ul>

### Further information:

[Mental Illness | CAMH](#)

[Mental Health Commission of Canada](#)

[Depression | CAMH](#)

[Anxiety Disorders | CAMH](#)

[Bipolar Disorder | CAMH](#)

## Mobility aid

Devices/aids that assist with movement, such as walking or that help a person navigate their surroundings. Examples include guide dogs, walkers, crutches, wheelchairs, etc.

Possible characteristics	Helpful suggestions
<ul style="list-style-type: none"><li>• Uses a wheelchair (manual or powered), cane, crutches, scooter</li><li>• Muscle weakness</li><li>• Limited mobility for long periods of time</li><li>• Chronic pain limiting movement</li><li>• May use different mobility devices depending on the situation</li></ul>	<ul style="list-style-type: none"><li>• Connect with members and caregivers to assess support needs and applicable strategies.</li><li>• Ensure physical safety and space for mobility devices.</li><li>• Involve members with disabilities in event planning for accessibility from the start.</li><li>• Provide proactive accommodations: extra time, accessible spaces, inclusive activities and adaptable materials.</li><li>• Respect diverse movement methods, e.g., backward motion or personalized dance moves.</li><li>• Always seek permission before touching a person or their mobility device, respecting personal space and recognizing devices as extensions of the individual.</li><li>• Respect a person uses their mobility aid e.g. they may not use it all of the time</li><li>• Coordinate with caregivers for support during meetings or events, following Safe Guide and related guidelines.</li><li>• Use respectful language and preferred terms. For example, wheelchair user instead of wheelchair-bound or confined to a wheelchair.</li></ul>

### Further information:

[Canadian Wheelchair Foundation](#)

[canadianwheelchairsociety](#)

[Mobility, Flexibility and Body Structure Disabilities](#)

## Multiple Sclerosis

a neurological disease of the central nervous system which includes the brain, spinal cord and optic nerves.

Possible characteristics	Helpful suggestions
<ul style="list-style-type: none"><li>• Extreme fatigue</li><li>• Lack of coordination</li><li>• Physical weakness and/or tingling</li><li>• Impaired sensations, cognition and/or vision changes</li><li>• Bladder difficulties</li><li>• Chronic pain</li><li>• Difference in communication, such as non-verbal</li></ul>	<ul style="list-style-type: none"><li>• Develop a support plan collaboratively with caregivers and the member, focusing on individual capacities and needs.</li><li>• Implement accommodations, such as flexible bathroom policies and noise reduction.</li><li>• Allow extra time for activities and transitions.</li><li>• Integrate activity modifications into planning, involving the member's input.</li><li>• Communicate with caregivers when a support person is needed.</li><li>• Educate yourself about the member's disability to foster understanding and confidence.</li><li>• Avoid singling out the disabled member through exclusion, comparison or negative remarks.</li></ul>

### Further information:

[MS Canada](#)

[Multiple Sclerosis In Canada - Canada.ca](#)

## Paraplegia

is the loss of movement in the lower body and torso, typically caused by a spinal cord or brain injury.

Possible characteristics	Helpful suggestions
<ul style="list-style-type: none"><li>• Different motor skills and muscles tone e.g. experiences muscle weakness</li><li>• Limited mobility, may use a mobility or assistive devices, such as a wheelchair or braces</li><li>• Varying forms of paralysis e.g. from the neck or waist down</li><li>• Different or lowered hand-eye coordination</li><li>• Numbness or loss of feeling in limbs</li><li>• May require specific tools to support independence e.g. member can eat and drink on their own if they have a long, flexible straw and larger, easy grip utensils</li><li>• May need support with daily activities, alongside a support person</li></ul>	<ul style="list-style-type: none"><li>• Connect with the member and caregivers to understand support needs and apply applicable strategies.</li><li>• Ensure safety and clear space for mobility devices.</li><li>• Involve members in activity planning, encouraging their ideas and modifications.</li><li>• Proactively provide accommodations, like enlarged materials, to reflect diverse motor skills.</li><li>• Obtain permission before touching or moving mobility devices; treat them with care as extensions of the person.</li><li>• Contact caregivers if a support person is needed during meetings or events; follow established guidelines.</li><li>• Consider partnering with a leader or member to demonstrate instructions or assist in activities.</li></ul>

### Further information:

[Spinal Cord Injury Canada](#)

[Spina Bifida and Hydrocephalus Association of Canada](#)

[Supporting Students with Disabilities | Physical Disabilities](#)

## Tourette Syndrome (TS)

a neurological condition characterized by tics, sudden, involuntary and repetitive movements or vocalizations.

Possible characteristics	Helpful suggestions
<ul style="list-style-type: none"><li>• Frequent blinking of eyes</li><li>• Jerking of head or arms</li><li>• Flexing of fingers</li><li>• Darting of eyes</li><li>• Sticking out the tongue</li><li>• Using verbal phrases or sounds</li><li>• Repeating one's own words</li><li>• Repeating others' words or phrases</li></ul>	<ul style="list-style-type: none"><li>• Support individuals with TS in Guiding without judgment. Acknowledge their effort to suppress tics to foster understanding and reduce bias.</li><li>• Refrain from teasing or drawing attention to tics; treat them as normal and not deliberate.</li><li>• Know the person beyond their tics; offer supportive accommodations that promote acceptance.</li><li>• Engage with the member and caregivers to determine how best to support.</li><li>• Provide accommodations as needed and seek ongoing input from the member.</li><li>• Educate your unit about tics to build acceptance, reduce disruption and foster compassion for differences.</li></ul>

### Further information:

[Tourette Canada](#)

[Tourette Syndrome - Canadian Disability Benefits](#)

[Digital Info Package](#)

[Tourette Association, how to help](#)

## Additional Information

[Canadian Centre for Diversity and Inclusion](#)

[Resources - Canadian Accessibility Network](#)

[Supporting Students with Disabilities](#)

[NWAC Accessibility and Disability for Indigenous Women, Girls and Gender Diverse People - Accessibility-Final-Report](#)

[Nunavummi Disabilities Makinnasuaqtiit Society](#)

[Disability Organizations - Nunavummi Disabilities](#)

[Disability Language Style Guide | National Center on Disability and Journalism](#)

[Inclusive workplaces - Inclusive communication guide](#)

[Diversity, Equity, Inclusion and Belonging At Work: A 2024 Guide - AIHR](#)

[Inclusive Communication: What Is It and Why It Matters - AIHR](#)

[Words Matter - Guidelines on Using Inclusive Language in the Workplace](#)

[ICI- Inclusive Communication and Language-guide.pdf](#)

[The use of Assistive Technology in Education: A Guide for Teachers and Schools Between Friends](#)

[Neurodivergent, neurodiversity and neurotypical: a guide to the terms - The Brain Charity](#)

[10 Common Disability Stereotypes - Centre Disability Support](#)

[People First of Canada](#)

[Easterseals | Support & Education](#)

[National Organization on Disability](#)

[Center for Disability Inclusion](#)

[CDI 2024\\_calendar\\_of\\_disability\\_activities-events.pdf](#)

[Inclusion Canada, Inclusion NB](#)

[Canadian Women's Foundation](#)

[Dawn Canada](#)

[Leave-No-Girls-With-Disabilities-Behind-2021](#)

[Accessible Canada Act](#)

[StatsCan 2022 report](#)