

Podcast with Ron Buliung recorded March 10, 2017 transcribed

**[brief music interlude]**

**Ron Buliung (RB):** We also could be doing a better job of looking across forms of disability whether or not it's children or adults, and thinking about eliminating barriers, whether they're material, like doorways, or institutional. An example of this came to mind early on in Asha's diagnosis because her primary issue is an issue of strength, muscular strength. Okay, so we have doors that will open automatically when you push the button. But what if you don't have the strength to push the button?

**Carla DeMarco (CD):** A daughter and a doorway. This is a little snippet of today's episode with our guest on View to the U podcast, Professor Ron Buliung, who will discuss what is driving his transportation-geography research these days.

**[Theme music fade-in]**

He also talks about his personal connection with accessibility for children with disabilities, especially as it relates to travel to and from school.

And I have to say, after speaking with him, I just can't help but look at public spaces differently and think about the accessibility of places for people, but also reflecting on some things I take for granted, like walking my own daughter to school...

**[Theme music]**

**CD:** Hello, and welcome to View to the U: An eye on UTM research. I'm Carla DeMarco at U of T Mississauga.

View to the U is a monthly podcast that will feature UTM faculty members from a range of disciplines who will illuminate some of the inner-workings of the science labs and enlighten the social sciences and humanities hubs at UTM.

**[Music fades out]**

Professor Ron Buliung has been a faculty member in UTM's Department of Geography and in Geography & Planning at UofT since 2006. His research focuses on transportation geography, transportation planning, and population health, but over the course of the last few years, he has focused more extensively on accessibility as it relates to children with disabilities.

Also, in relation to UTM's 50<sup>th</sup> anniversary and having worked on the campus for over a decade, Ron will speak to some of the changes he's observed at UTM over his time here, and, not surprisingly, because he is a geographer after all, he reflects on Mississauga's urban development, but also as someone who leads an active lifestyle,

expresses his appreciation for nice spaces to work out in like UTM's Recreation and Athletic Wellness Centre, or the RAWC, as we call it.

**CD:** You work in a few areas including transportation geography and population health, focusing more these days on accessibility and how it relates to transportation, and I just wondered if you could give me an overview of your current research program and perhaps some of the findings that you've uncovered so far.

**RB:** I've focused my research on looking at issues around children's lives and cities, specifically looking at children's mobility, urban design, school travel and things of that nature. One of the things driving that research agenda really was considering what it's like for some of the most vulnerable people in our society to live in our cities, live in our region, and so on, and figure out ways to maybe improve everyday life for children and their households.

But also we know that there's, or we've identified a decline in the use of active modes of transportation like walking and biking and so on, a process that started early 20<sup>th</sup> century with commercialization of automobility. So I sort of became interested in that process and in why it's happened and what's happening now, and in what are the environmental and social factors that might be driving the current state of children's transport, which is largely dominated by driving our children everywhere for everything, if you happen to live in a household with access to a vehicle.

In that work we've partnered with organizations like Metrolinx, the City of Toronto and others, who actually have in their mandate and in their long-range plans statements about where they'd like to see children's transport, particularly to school, over the next 25-30 years. So my work is sort of developing an evidence base to support planning as it pertains to children's lives and cities.

More recently, however, I kind of changed my focus to look more closely at disability in childhood and access to education. So not really looking at transportation specifically but transportation as part of that conversation. And so while we have a lot of research findings and so on related to this other piece of work that we've been doing, I am really pretty interested in focusing our conversation today on the most recent work.

And that work is currently supported by a SSHRC [Social Sciences and Humanities Research Council of Canada] Insight Development Grant, which I was successful in getting last year, but we're also partnered with Toronto's Hospital for Sick Children where we have some funding from what's called the Norman Saunders Complex Care Initiative, and we just won a small summer research award for one of my students who's working on the project from the Centre for Healthy Active Kids at the Hospital for Sick Children. And it's actually kind of interesting, because if you think about, I mean, even the words "active kids," the first thing that comes to mind

isn't necessarily, in society, a child in a wheelchair. Like, how do we conceptualize being active when you have some mobility challenges that limited the way in which you perform being active?

To take a step back, one might ask, well what motivated me to look at this issue of disability in childhood? Admittedly, I was one of these people, who was roaming around and living out my life, and having children, and building a family, and thinking that nothing could necessarily go wrong in that process. And when my third daughter was born, we had no indication that there were any problems, but a little bit later, she started to fall short of achieving some of her gross-motor milestones, and it turns out that she has a neuro, genetic neuromuscular disease called spinal muscular atrophy [SMA] type 2. And, you know, a little shout-out to our friends in the SMA community. There's a Canada-wide organization called Families of Spinal Muscular Atrophy, who does a lot of work in helping families deal with many of the challenges associated with SMA, and they were one of the first groups that I reached out to, literally on day two of the diagnosis.

When the healthcare system kind of cut us loose, and said 'okay, here's your diagnosis, go and figure it out.'

**CD:** How did you even find them, though? Like, did you...?

**RB:** Oh, just searching online.

**CD:** Okay. [Laughs]

**RB:** I'm a researcher. I do research. [Laughs]

**CD:** That's right. I forgot!

**RB:** I should apply those skills in my everyday life now that we're in crisis. So, ah, that's been ah, you know, I don't often like to use the word "journey" because it's overused, but it really [chuckles] has been a journey from diagnosis to today, where my five year old is in, ah, senior kindergarten, and that *process* of getting from diagnosis to her being in SK was fraught with myriad challenges and amazing life-changing experiences, but we came up against but also sometimes in a *collaborative* way with the healthcare system, city planning, in the sense that we need to redevelop the front of our house to make it accessible and that process took two years because there's no...disability is not codified in the institutional thinking and planning around making it work.

So, and then also with the school board, and we all know school boards are stretched, however we are passionate advocates for our daughter having access to education. In her case, she has no comorbidity; her primary problem is, um, muscular, so she requires an electric wheelchair to move around. She's five years

old and she drives a 300-pound electric wheelchair, which she's been doing on her own for a few years now, and travels to school by herself on a bus.

**CD:** But cognitively, she's sort of at the same level as, like, her counterparts in the same grade?

**RB:** Yeah, I mean, if you look at her track developmentally from an intellectual perspective, she's reading at the level, if not, above the level.

With her particular type of disease, there's some thinking in the medical community that these children tend to compensate in other parts of their development. There's, like, stereotypical comments, about kids with SMA that they're very social, much more so than other children and so on, and they're using those people skills to get everything that they want.

So, the advocacy piece, I can honestly say, it took about two years for me to actually mentally prepare myself enough to start thinking about bringing these everyday experiences of our household into my professional space because really, I mean, the professional space has kind of protected me in some ways from dealing with all of that emotional stuff and all of the struggle in another sphere. I could just continue on, and...

But I realize that, um, at the university, being a professor, it's an incredibly privileged position, not just in terms of our ability to, on a daily basis, invest time and energy into things we're curious about, but also in terms of income, but also in terms of benefits, but also in terms of flexibility. And my partner, she's a physician, and so we're sitting here in this situation where we're dealing with the challenges of spinal muscular atrophy, but we're a household that has a very high income, and one person with an extremely flexible schedule. So I believe that I have a responsibility to do this kind of work, to try to figure out how to make things easier for all families who have these types of challenges, not just SMA families, but any type of additional challenge in childhood.

And so the most recent work is really about, first of all identifying and, I don't know, getting on my soapbox and basically saying 'look, in transportation geography and transportation planning, we're kind of thinking about disability, but by and large we're thinking about disability in the context of the aging population. In terms of people of my parent's generation, who are in general the wealthiest generation in the history of the world, right? And so a lot of the focus in disability research and mobility research is on that particular population, so I'm really interested in looking at disability in childhood and early childhood in particular because of my experience, but also because it's not *really* part of our discourse in transportation planning and geography in any really meaningful way.

So, we've started off this work by basically developing a paper that systematically criticizes the literature for not having disability present within it in a large way.

**CD:** Why do you think that is, though, that there's this gap when it relates to disability? Is it just that disability, as you were mentioning before, is hard to define? Or, like, why has it been left out?

**RB:** Well, I think it's kind of interesting. So, when I started working on child and youth transportation, it became abundantly clear to me that there were really only a few of us in North America, and even globally, really a handful of scholars, who were taking it seriously. And my feeling is, when do you gain the tacit knowledge with regard to moving around your neighbourhood? Most people learn to ride a bike and walk and so on in childhood. In Toronto, for example, we have the child-friendly TTC policy, where if you're 12 or under you ride for free, and they're showing *massive* increase in ridership for among children and youth. If that becomes part of your experience, like moving in a way that doesn't involve the automobile, if that becomes normalized, then, as you age, you realize that those tools are part of your toolkit for moving around the city and maybe you'll think about continuing to do that, or moving to a place where you don't necessarily have to drive everywhere, if you can afford to. I mean that's the other issue, like, income is a big deal with regard to residential choice and mobility.

Um, so, we saw or I saw and, you know, all of the child-youth scholars will say okay, well children don't have a large presence in – it doesn't matter what literature or what discipline you're looking at, it could be geography, sociology, planning, and *each* of those groups has a group within it that's working on child issues. So then, um, well if children aren't well represented, then certainly children with disabilities are going to have less presence in that literature.

And, you know, sort of like looking at the vulnerable within the vulnerable, um, but vulnerability, also this is not necessarily a good way to describe because these children are also incredibly powerful. They have a lot of agency, a lot of strength. Where there may be limitations in one way, there are incredible strengths in other ways. Um, nevertheless, this absent kind of presence of disability in the literature sort of drove the academic work in this area.

**CD:** And I know you mentioned Metrolinx, which you have an ongoing relationship with them, they're a partnership, they're a funder of some of your research, and so I was just wondering are they as committed to accessibility issues as you are in your research?

**RB:** Well, Metrolinx actually funded a small project where we...well, it turned out not to be very small. It culminated with four pretty large reports where we were looking at sort of the state of accessibility and transportation-related accessibility within education across the greater Toronto and Hamilton area, kind of looking at best practices here and elsewhere and so on. Also we developed a review article for Metrolinx where we summarized the different ways to theorize disability; to think about disability and then provided some examples to help them see how you could

apply a different theoretical approach to thinking about planning in particular a service.

So we have terrific partners there, and this also includes a forum called the Greater Toronto and Hamilton Area Active School Transportation Hub, where I'll be presenting some of this work in April. And that hub includes practitioners, even registered nurses and RPNs, and so on, who work at the school level, to members of school boards, to just interested, engaged citizens, transportation planners, and other people from government, um, in a conversation about children's transportation, particularly as it relates to school. Um, and so, I've been poking away from the side on this disability piece. I had worked with them extensively on...I guess last year we released a report where we looked at children's school travel over 25 years across the region in cities and municipalities. They're a terrific partner and are working to get some of what we're saying plugged into the regional transportation planning review, which is currently underway. So they have staff dedicated to the accessibility issue.

**CD:** I don't know if this is a fair question, but are you also concerned with childhood obesity rates in your work as well, or...?

**RB:** I'm concerned with inactivity in childhood, the rise of sedentary activity. I've had an active lifestyle from childhood to the present day.

**CD:** I've heard that you cycle into the Mississauga campus some days from Toronto!

**RB:** Yeah, actually, in the first semester of this year, I drove here twice, and I was teaching two courses, so I was riding here and back, it's like 60 kilometers round trip, but it's amazing, you know, along the Lakeshore is the western waterfront path, and so on; it's terrific. But I believe a lot of this stuff, like how you construct a lifestyle and all of this, begins in childhood and early childhood. I guess I would say *now* because I've changed my focus toward the disability piece, I'm less concerned with obesity and overweight. We have a lot of people out there who are working on those issues.

We had a project that was funded by CIHR [Canadian Institutes of Health Research] starting in 2008 called the Built Environment and Active Transportation Project where we looked at this question as it related to school travel. We looked at whether or not children who actively travelled to school had a better BMI [body mass index] than others or were less likely to be overweight and obese. Children who travelled to school generally had higher rates of physical activity participation, and there was some subtle evidence with regard to the connection to the BMI piece.

But I have to say, that the disability piece is so massive that I really, I'm just going to dedicate my energy...I'm going to allow my passion for that to drive my research for the next several years.

This SSHRC project, what we're doing actually, in our partnering with Sick Kids is we've been recruiting families through some of the clinics that I'm involved in on a personal level with my daughter and others. I have a long-term research collaboration with Dr. Andrew Howard, who's a pediatric ortho surgeon at Sick Kids, and the work he does *clinically* is also amazing. You know, I say to people, Andrew's the guy who sometimes puts children back together who've been hit by cars. That's one of the things that he does. Like it's just...I don't know how you can do that, and not say that this is an unacceptable outcome in the modern age.

We've been working with his clinic, recruiting families who are dealing with osteogenesis imperfecta, and one of the things that's interesting about this is that kids with OI have fragile bone structure, so some of those kids end up using mobility aids just like my daughter uses a mobility aid. They have two different diseases, but the processes and the material aspects of their lives can be similar. And so they come up against similar challenges in getting to and from school, and one of the things that we've been doing with this work is what's called a *photo-voice ethnography*, so we're engaging, for brevity sake, I'm going to say parents and their children in a conversation about the school-travel experience but when we interview the children separately from the parents, so that children have their own experience of the study. And our family, I selfishly and probably smartly [laughs] used our family in the pilot project because it's not just piloting questions and all the rest of it, it's also piloting hardware.

Um, we worked with a group at Ryerson to get a mount so that we could mount onto my daughter's chair so that she could take photos using an ipod touch because she's not strong enough to even push a button on a regular digital camera, so she needs touch technology, and so she was taking photos of her trip to school, we were taking photos of that period of the day, and then the photos are used in an interview process and used as cues to get and remind the participants about that experience. So she's five years old and she's an active research participant, which is just terrific.

And one of the things that we want to do with this project, we're basically looking at the trip from literally inside the house, like from the moment the child wakes up in the morning to the school. And we break that up into, you know, what's happening in the house, what's happening from the transition from the house to the curb, and then from there are they going by bus or is there some other thing happening there, and then looking at all of those issues. And each one of those steps is almost swamped by institutional aspects, whether it's building permit to install a lift on your property or to change the slope of the drive, or all of the paperwork you have to do to ensure that you can get transportation services to get your child to school, including the downstream issue of okay, a school board decides how to allocate its disability resources, and part of that is based on how the Ministry of Education defines disability or *exceptionality*, as they call it. And so there's a network of schools, and the TDSB [Toronto District School Board] for example, some of them deal with physical issues, some of them deal with behavioural and cognitive stuff,

and some of them will deal with both, so you've got to figure out, 'well there's a network of schools, which one are we going to go to?'

**CD:** I was wondering that when you were talking about outfitting your house. It's, like, are most of the schools, though, designed for someone in a wheelchair or those sort of accessibility?

**RB:** Yeah, absolutely not. It's really frustrating.

So, I have two children who live in my household, and one of them goes to school 500 meters away, and I walk her to school each day, and that school can't accommodate her sister. It'd be really nice if my children could go to the same school. I mean this is sort of driving some of the work: why *can't* this school accommodate Asha? Well, the kindergarten's on the second floor, there's no elevator, the school was built in 1916, the TDSB can barely keep the lights on because they have severe budgetary problems, and they have *massive* capital improvement issues. They've just replaced all of these windows in her school, and each window is a custom thing because these buildings were all built custom, like one-of-a-kind sort of thing. And I get that. But if that's the case, then let's make sure that the process to locate my daughter in a school works well, and, like, if you're saying you can't serve her at the closest school, let's make it really easy. And I can tell you that it's not.

This is within, as I said at the sort of outset, this is within the context of a family situation where you have two highly educated professionals with income and flexibility, so what are the other stories out there? And that's kind of what I wanted to do with this work: get at our story, get at other stories, and if the institutions aren't going to step up, to make things easier, maybe looking at simple things that could be done informally at the school end, or even at the household end to make that school-travel process a little bit easier.

Um, my PhD student, who's doing a lot of the interview work, Tim Ross, he's a PhD student in Planning. He was kind of surprised at how much families had to say about this trip, but also how emotional people who were being interviewed were getting, and I can tell you, I'm feeling right now, and I felt it when he interviewed me. And I said, 'you know, Tim, it's because people don't ask. Like, they just assume that we're figuring all this stuff out.' And there's so much work involved in that process, right? I can't even...I'm not even going to begin to go through all of that.

**CD:** No, but as you're saying, every family is unique, every disability is unique, like, there are different challenges associated with each case, right?

**RB:** Absolutely. But we also could be doing a better job of looking across forms of disability whether or not it's children or adults and thinking about eliminating barriers, whether they're material, like doorways, or institutional. An example of this came to mind early on in Asha's diagnosis because her primary issue is an issue

of strength, muscular strength. Okay, so we have doors that will open automatically when you push the button. But what if you don't have the strength to push the button? So here we've made an accommodation that doesn't work universally in an *age* where we all have touch technology on our phones. And guaranteed, I mean, you can have motion sensors, you can have touch technology for buttons, and all the rest of it, it's just, why don't we have that? You know?

Anyway, so my goal with this work is to identify even relatively straightforward things that could be implemented fairly quickly to make this daily experience of school travel a little bit easier for households and children.

It's not all bad either. I mean there are things that Asha absolutely loves about her trip to school. You know, one of my favourite parts of that is we have some neighbours down the street who had twins, and they get along so well with Asha, and they're always asking questions. And they come out and they say hi to her when she's getting on the bus, and they kind of have a little bit of social interaction. As a researcher doing this kind of work, I want to identify the problems and try to make things easier for people but the stories are not just about what's wrong.

At the end of the day, despite all the challenges, Asha is getting an education in an integrated classroom, and we're doing the best we can with the resources that we have but I think we can move the bar a little bit forward or up [laughs] in terms of doing a better job for families, obviously not just like ours, but other families, too.

**CD:** And I think you've totally touched on this so I don't even know whether I should ask, but the impact of your work – I think it's pretty apparent what the impact is, but often I ask people what they feel is the impact?

**RB:** Yeah, I mean, I think there's impact in regard to the work that I did with ambulatory children. We were plugged into the policy conversation for several years on active school travel and healthy living, and we were talking to the right people. One of the things that was really needed, at the time, was an evidence base on children's transportation that was situated within our region. So that we weren't looking at data from Atlanta or some other U.S. city where things are completely different historically, socially, ethnoculturally, and so on, and trying to make policy decisions on the basis of data from somewhere else. I mean, I am a geographer, right? [laughs]

**CD:** Yeah.

**RB:** So let's build some data for *here*. And let's plug that into the policy conversation and see what we can do. One of the things that we see in the literature more broadly, looking at differences in a way that, I'd say this in quotes, because, like, I acknowledge and subscribe to the fluidity with regard to identity and so on: secondary data indicate, quite regularly, that girls are less likely to travel actively

and independently than boys, so that brings in a whole whack of things in terms of why that's the case.

If you think about a planning organization looking at children as this homogenous entity, one of the things that I wanted to do with our work was sort of really deconstruct that for them, and say, okay, well, childhood is not the same for everyone, everywhere, and, as a result, we have differences in active travel, and as a result we have some schools that are doing really well where you don't need to do any work, and we have other schools where there are some challenges. But also there are cases where *legitimately*, and I think this is another thing that pushed me toward the disability piece, where people legitimately have to drive their kids to school, or the children have no other recourse but to be delivered by some form of automobile, like my daughter, who goes by bus because there's no other choice or I would take her in our disability van because we have one of those.

So I started getting frustrated with people talking about car-free zones around schools and all of this stuff, and I'd say, 'well, yeah, but what about children with disabilities?' And then it would be like an afterthought, like 'oh, yeah, yeah, of course,' we're gonna....No, it should be a forethought, it should be upfront.

Just to share an anecdote on that front. Asha was going to an integrated preschool, so you'd have children who had CP, SMA, autism-spectrum stuff, children who had nothing going on now. You know, I often say to my wife [laughs], we've really just front-loaded our situation with some stuff. All of these other people with children, you never know what's coming down the road. [CD laughs] Wait until they're teenagers, you know?

And we had a challenge with parking. So we'd take Asha there in our van, I would get to the school, and the disabled parking spot on the street was located nowhere near where it was needed, and then so I'd often have to park some distance away, and sometimes I would literally carry her, in the winter, also, on sort of, icy sidewalks and stuff. So, eventually, we kept at them and they said 'well, you know, the street is the domain of the city of Toronto, and the neighbourhood doesn't want spots given to disability because it takes a parking spot away from the neighbourhood.' Well, that's really nice. Thank you neighbourhood.

Um, but also the principal didn't want to engage in that process of accommodation. And why should we be accommodated? It should just really be there, especially, this is at a place that has an *integrated* preschool. So what they did was they said 'okay, what we're going to do is we're going to let you park by the dumpster,' which is closer to the entrance, but they didn't tell any of the other parents that this was the informal policy. So I still had the same problem; someone's parked in our spot, so now what do I do? So again, in a rather cynical way, I'm thinking well, we can get children walking, that's great, for the children who aren't walking, there's a laundry list of difficult issues, and that's the stuff I want to take on.

So in terms of impact, with this new work, like I said with Asha going to her school, we collaborated with EAs [Educational Assistants], and so on, to come up with some solutions, to some of her transport challenges. Like, we have a checklist of things that the EAs look at before she's sent home to minimize risk of everything from her not being buckled up to forgetting something that's really important to her at the school. A five-year-old will, like, lose their mind over, you know, 'I forgot this eraser that my best friend gave to me.' Well, I'm sorry. [laughs]

**CD:** [laughs] I've been there.

**RB:** I'm not driving back to the school. You can get it tomorrow. [laughs] Right?

I think the other thing, just briefly, when I came in this morning, and I said, well, there's this report that I want to call up to remind myself of some statistics. The Canadian Human Rights Commission has a report called *Left Out: The Treatment of Persons with Disabilities in Canada's Education System* [report is available at <http://www.chrc-ccdp.gc.ca/eng/content/left-out-challenges-faced-persons-disabilities-canadas-schools>]. Fascinating report, and some of the things that I noted in there that talk about the barriers...I look at this, and I'm like, well yeah, of course, but experiencing it. But I think it's important that the organization is putting this out there. But there's stuff like lack of disability accommodation and support, lack of services and funding and effective dispute resolution, lack of special education and disability supports on First Nations reserves, and I would add to this that I'm incredibly thankful that we live in Canada, particularly with regard to the stuff that has happened south of the border in regard to education planning, and so on, under the current administration, because it's clearly systemically set up to discriminate in a *horrible* way against children from poor families, children who experience disability, and children who are at that intersection.

Anyway, in this report, though, they talk about some other stuff, like, the thing that really upset me was can you imagine that you stopped your education early because your disability didn't fit within the system? You couldn't be accommodated? So 11% of students with disabilities report ending their education early because of their disability. And we're sitting at a university. But I think we need to ask the question: well, is that happening here? And if it is, what are we going to do about it?

And the other part of this, though, is that this report is focused on youth and adults, age 15 and older, but a lot of the processes and a lot of the stuff they talk about starts earlier. My daughter has experienced forms of bullying. And bullying is reported among...you know, one quarter of persons with disabilities report being bullied at school *because* of their disability. Like it's not just because you wore the wrong hat. This stuff is happening early. I think if you target early childhood education on the bullying front, whether it's dealing with a disability issue or something else, that's where these behaviours are learned, that's where we start to inculcate our children with ideas about what's...you know, we can broaden their perspective on what is, uh, "normal" or whatever.

So I think I'm in the right space. If they're focused on older kids, we're going to focus on the elementary period and early childhood, and really push and see what we can do. My long-range vision for this is, okay, we're starting out here in Toronto, and so on, but I'd like to gradually, over the remainder of my career, expand the geographical scope and look across provinces, across Canada. And you can just see, I mean, this is also aligned with a political reality where we have various levels of government taking responsibility for various aspects of the processes that I'm looking at, from the top down, from the bottom up. So, I'm aware of that and trying to plug the research into that.

[18:50 Interlude music]

**CD:** Coming up: UTM at 50. Ron talks about the shifts he's witnessed over the course of his time at UTM in the last 11 years, and, as a geographer, he reflects on the physical changes, as well as the growth of the campus.

**CD:** We're going to totally shift gears and move away from research because the first season of the podcast sort of focuses on the 50<sup>th</sup> at UTM. And so, as you mentioned you've been on campus since 2006, and I just wondered if you could speak to some of the changes that you've seen at UTM since you've been here, and maybe where you see the campus going. As we all know it's grown quite a bit and I just wondered if you could speak to that?

**RB:** Yeah. You know, I have to say, I don't know why this is coming to mind but probably because we've been talking about physical activity. I had the benefit of being, uh...of starting my position just as the RAWC was opened, the Recreation and Wellness Centre, and so this was one of the first, big infrastructure things that I, sort of, observed on campus, and it's wonderful. I like to swim, and the rest, the pool is great, but obviously the campus has been growing at leaps and bounds in terms of its buildings, particularly over the last five years or so. So I'm teaching in much nicer facilities than I was when I first started.

I mean the campus is ideally positioned within the fastest, sort of, growing part of the region, and Mississauga is a fascinating place, it's an incredibly diverse city. Someone the other day was saying to me 'oh, Mississauga has that many people'? And I was, like, yeah, it's one of Canada's largest cities. There's a *lot* going on there.

I've noticed a lot of material change on the campus. I think we've done a fairly good job of preserving our relationship with the natural environment. I've walked several times from my office to the North Building area and come across deer. I keep my eye on them. I don't know if [laughs]...I'm not keen to get too close.

But institutionally, UTM it's undergraduate population is the same, if not larger, than McMaster's was when I went there as an undergrad. I mean, we're basically a medium-sized Canadian university in our own right. We have, within my

department, and I think across the campus, departments have been growing and hiring research-focused faculty, so that's one of the changes that I've noted.

We have an incredible research portfolio here at University of Toronto Mississauga with unlimited opportunity for expansion there, and I would say the public infrastructure, including Research Services here, to support that. I've really felt incredibly supported in the process of transitioning from PhD-postdoc dependencies on others to being able to develop my own independent research program. We do what we do, and we can be successful, because of the work of others just as much as the stuff that we're doing ourselves.

The story that I was told about what used to be called Erindale campus, and I still, actually, as a geographer, I like that name because it reflects the situation [laughs] of where the campus is. But, um, you know, that we, we've been in a process of transitioning from a place of teaching only to a place that excels at teaching, but also excels at research. We are a place that is committed at the highest level to both, and I think that's to the benefit of ourselves and to our students.

**CD:** And I think that's one of the things that, sort of, drove having this podcast because I see in my seat here, at the Research Office, the amazing work going on but we want everyone else to see it, so...

I wanted to thank you so much for coming in today to speak with me about your work, and I think you've given us important issues to think about. Thank you.

**RB:** Well, and thank you for the opportunity. This is actually, officially, my first podcast [laughs], so if I'm ever asked again, I'll know what I'm up against.

[laughs from both]

**CD:** Thanks, Ron!

**RB:** Thanks.

[Wrap-up music]

**CD:** I would like to thank everyone for listening to today's show. I would like to thank my guest, Ron Buliung, for talking about his research and for sharing his very personal reasons for advocating for accessibility. A shoutout, too, to Asha for inspiring so much of your dad's work.

Thanks to Office of the Vice-Principal, Research for their support. Thank you to everyone who has been helping to promote this podcast, particularly Veronica at the Bulletin.

Special thanks to Tim Lane for all the great jams on today's show, for his audio assistance, for cutting me some slack in my attempts to do more of the audio editing myself and for pretending not to hear the mistakes.

Thank you.