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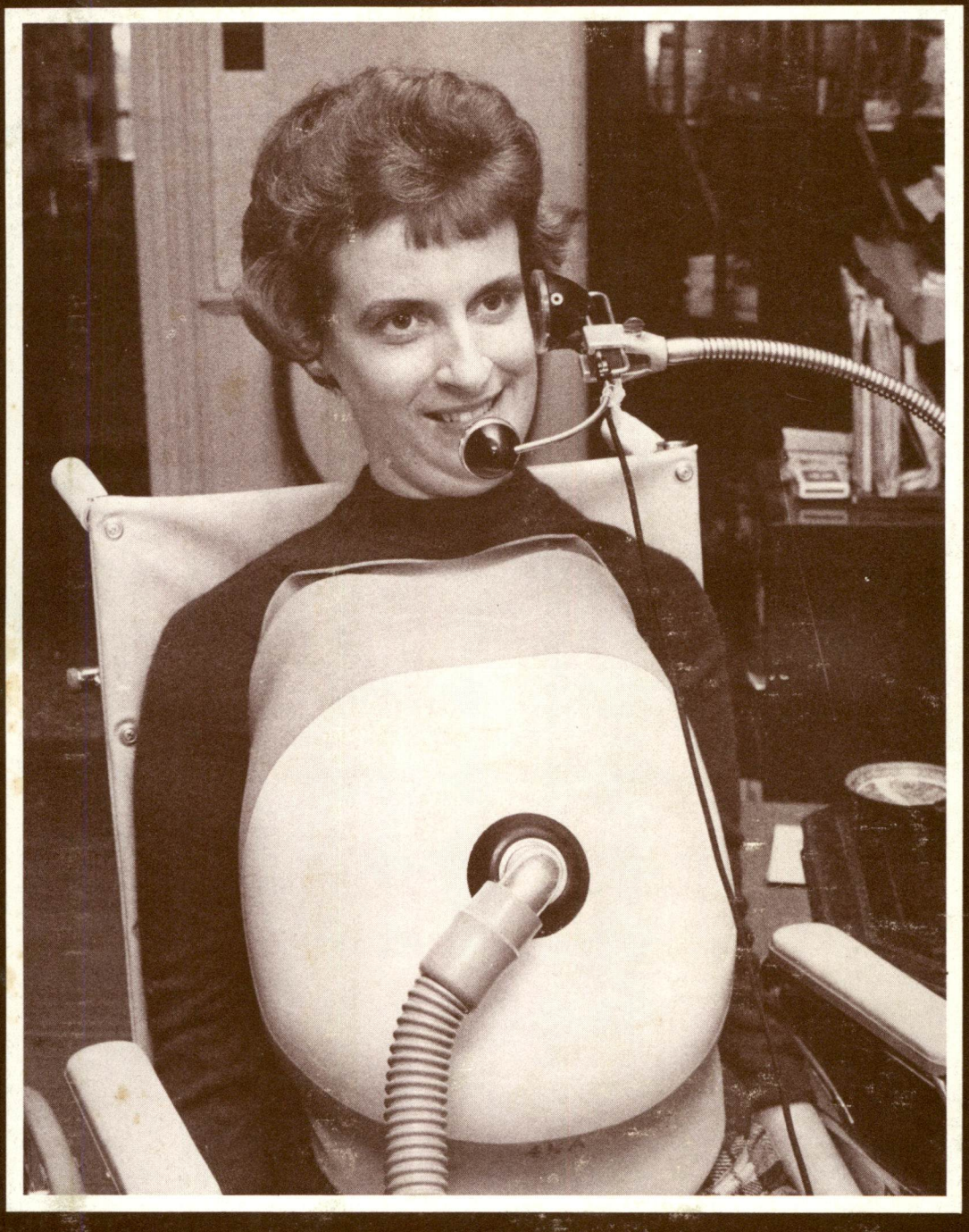

Experiences of Disabled Women • Rehabilitation in the Navajo Nation • Wheelchair Lifts • Design Your own Vehicle

INTERNATIONAL JOURNAL AND INFORMATION SERVICE FOR THE DISABLED

Thank you for waiting for this issue *which is many months behind schedule. In October 1977, Joe and I were zooming along with the 1977 issue — rushing to make up for the time lost during the summer when we had been wandering on several long camping trips en route to various meetings. Our plans were suddenly changed when the sight of one of Joe's eyes became blurred and he discovered that he had a detached retina. The immediate surgery was very successful but recuperation took a while. So the '77 issue of the* Gazette *sat in its files until Joe was OK and we could go at it again. Ironically, because of the long delay, we gathered too much material for one issue. We decided to create two separate issues .*

G.L.

$$$ or $$$$$. May we delicately remind you that the 1977 and the 1978 *Gazettes* are separate volumes and that you should send a remittance of $3 for each copy if you are disabled, or $5 for each copy if you are not disabled.

Donations are tax-deductible if they are made payable to Rehabilitation Gazette, Inc. They are most welcome, for the *Gazette* is staffed by volunteers and entirely supported by its readers and friends.

Thanks to Ted Smith, graphics designer, for volunteering his expertise and talent to do the layout.

And thanks to Kem Mahan and Judy Raymond, who drove to St. Louis from Cleveland for two week-long visits to help with proofing and editing.

Next-door neighbors. Alas, our neighbor, Willie Bjorkman, who has been proofreading for years, moved with her husband to Texas. Fortuitously, they sold their house to Art and Gayla Hoffman, who are both in the public relations field, so again we have neighbors experienced in proofing and printing.

Purr! We are delighted with the reviews of Gini's book, *Housing and Home Services for the Disabled,* which Harper & Row published in early 1977. We want to share the reviews and comments by our readers so you will find a few very brief excerpts, as well as other information on the book, on pages 24, 25, and 30. If you want to read it but not buy it, ask your local public library to get a copy for you in print or as a Talking Book.

Congratulations to our good friend, Elmer Bartels, a C4-5 quad, who was named Commissioner of the Massachusetts Rehabilitation Commission by Governor Dukakis on February 1, 1977. In his first year in office, over 40,000 people were served with rehabilitation services and 6500 were rehabilitated to gainful employment — a 13% increase in services provided to individuals over the previous year.

English representative. Jo Sandiford is continuing to help the *Gazette* in England. You may send payment for your copies of the *Gazette* by cheque or Postal Order to Mrs. J.D. Sandiford, 55A South Street, Havant, Hants., England. Tel. (07012 area code) Havant 75937.

On tape and records. Copies of the *Rehabilitation Gazette* on either open reel or cassette are available to any blind or physically handicapped person requesting them from Johanna Bureau for the Blind and Physically Handicapped, Inc., 22 West Madison Street, Chicago, Illinois 60602. (Phone: 312/332-6075). Also, contact your local public library or the Division for the Blind and Physically Handicapped, Library of Congress, Washington, DC 20540.

Japanese translation. Dr. Masao Nagai, a C5-7 quad, has the *Gazette* translated by the Red Cross Language Volunteers under his supervision. For a copy, write to him at 29, Kitamachi, Shinjuku, Tokyo 162, Japan.

Glossary of SCI terms. *Paraplegic* — a person whose legs and a part of whose trunk or torso are paralyzed as a result of spinal cord injury (SCI) or disease. *Quadriplegic* (more correctly, *tetraplegic*) — a person whose legs and a part of whose trunk are paralyzed and whose hands and arms are partially paralyzed. The level of injury to the spinal column is indicated by letters and numbers. For example, C5-6 means the injury occurred at the level of the fifth and sixth vertebrae of the neck, T2 at the second vertebra in the thoracic or chest area, and L3 at the third vertebra in the lumbar or lower back area. Usually, there is loss of function below the level of injury.

Plegia is the Greek word for "strike," *para* the Greek for "side," *tetra* the Greek for "referring to four," and *quadri* the Latin for "consisting of four." Thus *quadriplegia* is a mixture of Latin and Greek and *tetraplegia* is all Greek. The adjectives are paraplegic, quadriplegic, and tetraplegic. The nouns are paraplegia, quadriplegia, and tetraplegia. The abbreviated forms are "paras" and "quads."

G&J

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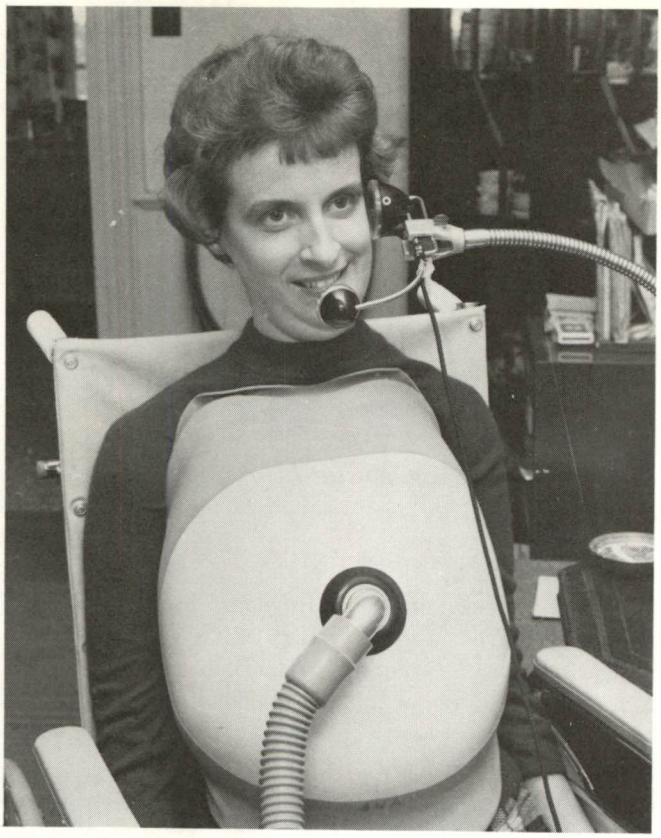

Photo: Ray Matjasic, "Plain Dealer"

Ave atque vale. *In mid-April of 1978, shortly after we had given this issue to the printer, Donna McGwinn, our darling friend and treasured* Gazette *writer, died suddenly of a perforated ulcer. We and her legion of friends were shattered by the news. She seemed timeless. We expected her to live on and on.*

We knew Donna since she was first disabled by polio in 1953, when she was 17. We glowed with pride over her writing successes and over her maturing as a distinctive, loving, and warm individual. It was our joy to love her as if she were our daughter.

She epitomized the spirit of the Rehabilitation Gazette. *Polio left her with the use of her feet but with no use of her hands and with paralyzed breathing muscles. For 25 years she was totally dependent upon respirators and an aspirator. Yet she was in complete control of her life and her needs were met through directing the hands of attendants, friends, and neighbors.*

After her father died in 1967, she lived on alone — with a live-in attendant — in their house in a small village in northern Ohio. For power emergencies, she had a generator and a bell that rang throughout the neighborhood. She typed, wrote, and dialed the phone with her feet. She turned pages with a mouthstick. She had neither an electric wheelchair nor a remote control system. She managed her household and her attendant with dignity and efficiency. She was always immaculately and smartly groomed. She had a charming home. She entertained graciously. She had a wealth of friends. She loved. She was loved. She lived a full, independent, and productive life.

As book editor and feature writer of the Gazette, *she was very important to it and to its readers. She studied writing by correspondence with the University of Chicago and she was a successful freelance writer. She wrote the two chapters on independent living and attendants in my book,* Housing and Home Services for the Disabled.

She was always ready to share her expertise and experiences with other readers. May we suggest that her mother and sister would appreciate hearing from Gazette *readers around the world? Their address is Mrs. Dean McGwinn and Mrs. Betsy Sanders, 250 Riverside Drive, New York City, New York 10025.*

Ave atque vale!

G&J

Rehabilitation Gazette

International Journal and Information Service for the Disabled

Volume XX **1977**

Rehabilitation Gazette (formerly the "Toomey j Gazette") is published once a year by a volunteer staff. Its aim is to reach, to inform, and to dignify the disabled throughout the world

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Cover: *Donna McGwinn†*

*Disabled
†Deceased

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A Compendium of Employment Experiences of 25 Disabled Women

by Gini Laurie

The 1975 issue of *Rehabilitation Gazette* featured the employment experiences of 101 quadriplegics; the 1976 issue featured 21 more quadriplegics. The series is varied in this issue by limiting the compendium to women. Nevertheless, it may be coordinated with the other two since the same system of categorizing occupations is used.

Here are 25 delightful characters, with a kaleidoscopic variety of backgrounds, education, tastes, experiences, feelings, talents, occupations, hobbies, personalities, and patterns of coping.

One of the women, Clair Jo Schnitz, sums up their feelings when she says, "I think today's disabled woman has the advantage of choosing from both female worlds — she can select the role of feminine dependency because of her very real physical dependency, or she can opt to seek independence because she is a female in an age of women's struggle for equality, or she can find her own satisfactory balance between the two."

The International Women's Year convention in 1977 in Houston was attended by disabled delegates who submitted resolutions for improved conditions for disabled women. The majority of the resolutions derived from the White House Conference on Handicapped Individuals and Section 504 of the Rehabilitation Act of 1973. In addition, there was formulated a National Plan of Action to include all women with disabilities and to eliminate architectural and communication barriers.

Disabled women who "opt to seek independence" should become involved with nondisabled women at the local level and make their needs and rights part of the grassroots planning for all women.

Disabled women face the same problems able-bodied women face; however, disabled women carry the double burden of being female and disabled. Only by working together will the problems of all people who are female be resolved.

All disabled women should become informed about their rights and potential by reading about what other women are doing and thinking. At the close of this compendium, there is a very useful selection of books compiled by Judy Raymond, librarian of the Twinsburg Public Library in Ohio and a longtime volunteer on the *Gazette*. "I've tried," says Judy, "to stay away from the straight feminist approach and sheer philosophy, and so have included many practical titles."

Many of the states have useful guidebooks. Missouri, for instance, has an excellent publication, *A Handbook on Women and the Law in Missouri,* which covers legislation, services, and organizations relating to women. The 64-page publication is available for $1.25 from Missouri Public Interest Research Group Foundation, P.O. Box 8276, St. Louis, Missouri 63156.

Most of the studies and publications relating to sexual problems, options, feelings, and techniques of the disabled have been male-oriented. But times are changing. A selection of recent literature on sexuality and the disabled woman is listed in the August, 1977, newssheet, *Research,* of the Regional Rehabilitation Research Institute on Attitudinal, Legal, and Leisure Barriers (RRRI-ALLB), George Washington University, 1828 L Street, NW, Suite 704, Washington, DC 20036. Further, the organization has available an extensive annotated bibliography on sexuality for the price of copying. Donna McGwinn reviewed several relevant books in the Book Review section of this issue, and there are additional references in the Potpourri Section, under the heading of Sex.

A publication especially helpful in the area of sex discrimination is *PEER,* which is available from 1029 Vermont Avenue, NW, Washington, DC 20005. This Project on Equal Education Rights is made possible through the NOW Legal Defense and Education Fund, financed by the Ford Foundation. Another valuable source is the ACLU Women's Right Project, 22 East 40th Street, New York, NY 10016.

The U.S. Printing Office, Superintendent of Documents, Washington, DC 20402, has a comprehensive and fascinating list of publications. Request the free bibliography list #SB-111, dated September 14, 1977, titled "Women." Of particular interest are the volumes on *Exploratory Study of Women in Health Profession Schools* and *The Legal Status of Homemakers.* The latter publications are individually titled by state and typically discuss revisions in the law, statutes affecting divorce, widowhood, and employment, and decisions on support, property ownership, credit, disability, and rape.

If this compendium triggers other readers around the world to write about their experiences as women, we shall be happy to share them in the next *Gazette.*

Gini Laurie, editor and founder of the Rehabilitation Gazette *(formerly* Toomey j Gazette*), has been working as a volunteer with persons who are severely disabled since 1949.*

Artists

ARTIST/REGISTERED NURSE. (Quad because of multiple sclerosis since 1954 at age 28.) *"Through the expansion of my personality as a person with MS, I am firmly rooted in my past, fully living in the present, and planning a great future. I am at one with myself."* Patricia Karn, RN, 4575 Niagara Avenue, San Diego, California 92107.

"In 1947 I acquired an RN and worked briefly in the Nurse Corps at various duty stations and eventually was ordered aboard the US Navy Hospital Ship Benevolence, which was on its way to Korea. On a shake-down cruise, in August 1950, another ship rammed us and we sank within 20 minutes. I received a letter of commendation and a medal pendant for saving two lives. Four to six months later, I boarded another hospital ship, the US Navy Hospital Ship Repose, and made it to Korea. After completion of sea duty, I was issued orders to San Diego Naval Hospital.

"When I experienced double vision in April 1954, I saw a neurologist and he diagnosed multiple sclerosis within 20 minutes. I was held in sick bay until a medical board determined my status. The medical board assessed my disability as temporary and re-examination was ordered yearly for five years.

"In spite of terrible insecurity, I launched into a B.A. program at San Diego State, while experiencing some remission of symptoms. Along with a radical change in lifestyle came a re-examination of my values. I found the arts of more substance than the sciences. The detail that delighted me as a perfectionist in nursing was even more impressive as I solved aesthetic problems through design, composition, and an exploration of the hidden harmonies in our environment. In 1959, I graduated from college and received full retirement status, after rebutting the medical board's first decision.

"For the subsequent 11 years, I worked part time as a nurse for the county at Juvenile Hall, maintained my home and garden, and remained physically and socially active.

"In 1970, I was invited to attend a class for multiple sclerosis patients sponsored by San Diego Community Colleges. The time was right, as I was beginning to adjust to being in a wheelchair and had mellowed with the years. I joined the group and learned to be aware of a new community of the disabled. We are a richly diverse group. Humor, love, and the joy of being alive are our only common denominators. We share in the practical, the philosophical, and the fanciful with equanimity. Through the expansion of my personality as a person with MS, I am firmly rooted in my past, fully living in the present, and planning a great future. I am at one with myself.

"I am at one with myself, but not alone. Besides my mother, I have a friend, who is a vital link in a now progressive outcome. My friend facilitates business, social, educational, and rehabilitative activities at an accelerated rate. At present, I am driving an adapted car, resuming my love of the arts, and having lots of fun, due to the objectivity of a helping relationship. I am waiting for a grant for house adaptation and expect to be doing more and more things for myself again.

"I am now 54 years old and just beginning a rehabilitation process that will involve me the rest of my life. The international network of the *Rehabilitation Gazette* is a fine way for us all to keep in touch about what is important. It is important that we have each other to realize our highest potential."

Homemakers

Editor: State vocational rehabilitation agencies are authorized to recognize the social and economic values of homemaking and are empowered to assist the disabled homemaker to do her work in her kitchen. This may include the financing of equipment and adaptations. Contact your state vocational rehabilitation agency for more information.

HOMEMAKER/ARTIST. (C-4 quad from a sledding accident in 1954 at age 16.) *"Legislation providing for the needs and care of the severely disabled, especially married women, is desperately needed."* Patti Burke, 386 Gardiners Avenue, Levittown, New York 11756.

"After being hospitalized for two years at IPMR Bellevue in New York City, I went home to live with my parents on Long Island. It was shortly thereafter that my seemingly bleak future started to change.

"A local newspaper article asked young people in my area to visit and wish me happy birthday. In this way I met my husband. Our courtship was quite ordinary with lots of exciting dates, such as drive-in movies, stock car races, and Broadway shows. Joe and I were married in 1958. While my husband was in the Air Force, I attended Hofstra University.

"My college career was quickly terminated when we discovered that my degree in social work would soon be changed to a degree in motherhood. Joe Jr. was born in June 1959. As the years went by we became involved in PTA, scouting (as a den mother), and other family activities.

"As my son grew older I had time for hobbies. I began to paint by holding a brush in my mouth. I took an adult education course in oil painting at our community high school and I now paint on jewelry and enjoy doing miniatures and ceramics.

"A Bible study group has met in my home once a week for the past five years. I also read to the blind. I get around in an electric wheelchair and type with a mouthstick. My husband and I are Scrabble addicts. We love to travel and we hope to purchase a van.

"Because I have been blessed with a loving family, friends, and a strong faith in God, I can face each new day with a spirit of challenge. I do feel, however, that legislation providing for the needs and care of the severely disabled, especially married women, is desperately needed."

HOMEMAKER/VOLUNTEER. (Respiratory polio quad since 1954 at age 26.) *"I thank the Lord for giving me these 23½ years although I'm still on the rocking bed and paralyzed from my neck down."* Kathy Alcorn, 1235 West 20th Street, Merced, California 95340.

"After almost a year in hospitals (Merced County and Rancho Los Amigos), I returned to my home, to a room especially built by the members of the local Elks Club, to be re-united with my husband and my two sons. Bill Junior, now 29, is married and lives two doors down from my home with his wife and daughter. My younger son, Bob, is 25 and lives here at home.

"I was co-chairman for the March of Dimes campaign drives for a couple of years. I've made a little extra spending money by selling greeting cards. I do a lot of reading, watching TV, and visiting here in my home and on the telephone. I collect cups and saucers and small plates. I don't get out often, only for special occasions when everyone tries to be helpful and they make me feel wanted and very special.

"I taught Catholic Christian doctrine for two years and for several years my nurse would dial the phone numbers and I would make appointments for our priest to visit parishioners. I found both teaching and calling very rewarding as I made many lasting friends with both young and old.

"On Monday evenings, two men from the Presbyterian Church come over and we do Navigator Bible lessons. On Wednesday evenings, two friends from the Catholic Church come over and we say the rosary. Usually on Saturday nights the people from the Mennonite Church come to visit.

"I thank the Lord for giving me these 23½ years although I'm still on the rocking bed and paralyzed from the neck on down. He has given me many blessings."

HOMEMAKER. (Respiratory polio quad since 1956.) *"Fortunately, I have a comfortable home and a beautiful garden, and a dear husband."* Shirley Means, 1808 South Eagleson Road, Boise, Idaho 83705.

"I have use of two good legs and feet, very little else. I read, type, write, and phone with mouthsticks, and draw with my toes. I use respiratory aids 24 hours a day: nights a chest cuirass; days a rocking bed and a foot-operated positive pressure bellows on my wheelchair; G.P. breathing sustains me while walking for short periods.

"The foot-operated positive pressure pump was devised for me by an ingenious occupational therapist and her physicist husband. The idea for the bellows was at first rejected because it had been tried before unsuccessfully. The doctors finally approved (probably to shut me up) and my most cherished possession evolved, freeing me from the immobility of cuirass and motor when in my wheelchair.

"There are no sidewalks in the area where I live and the streets are so bad that when I do go for a wheelchair walk it feels as if every nut, bolt, and screw will vibrate out of my chair and all the teeth will fall out of my head. Also, my chair does not fold because of the bellows under the seat so I cannot fit into a sedan or a taxi.

"Since I am not on welfare or live within a certain area of the city, I do not qualify for the bus service that transports wheelchairs. Fortunately, I have a comfortable home and a beautiful garden, and a dear husband who takes time off from work to take me to unavoidable appointments in our pick-up.

"As wages keep going up, my hours of attendant care keep going down. Lack of transportation prevents me from seeing the Elk's occupational therapist, and the county OT was dropped in the middle of a project. A search for a private therapist has been in vain.

"I tried to add a few pennies to our coffer by typing but one hour of good typing each day was followed by jaws cramping and errors prevailing. Not talented as an artist, nor imaginative or self-confident enough to start a business, I unabashedly enjoy the talents and efforts of others who 'can' and 'do.' "

Office Managers/Workers

ACCOUNTING CLERK/ATTENDING COLLEGE. (Quad because of Werdnig-Hoffman disease since birth.) *"I feel that it helps people to understand that we disabled also enjoy the 'good life' when they see me fishing, swimming, or just plain relaxing and enjoying the outdoors at the different campgrounds."* Bethany S. Ladd, 11431 SW 83 Terrace, Miami, Florida 33173.

"I am attending Miami Dade Community College-South Campus and working in the Central Accounting Office. I have taken courses at night and on my lunch hour. Now I attend classes from 7-8 a.m. and work from 8 a.m. to 4:30 p.m. I'm three credits away from my Associate Art degree and I am planning for my Bachelor's in business administration.

"I have been elected secretary of the committee working to remove architectural and attitudinal barriers on campus and in the community.

"My favorite past-time is camping, and this past summer my parents and I had a super trip from Miami to Canada in our mini-motor home especially designed for a wheelchair. I feel that it helps people understand that we disabled also enjoy the 'good life' when they see me fishing, swimming, or just plain relaxing and enjoying the outdoors at the different campgrounds.

"When I'm not busy studying or camping I can usually be found playing the organ, working on various crafts, organizing my stamps and postcards for my collections, or making an occasional trip to the horse races.

"Even though my electric wheelchair offers me some independence, I live with my parents and I still depend a great deal on them for personal physical care, and I have had no luck in finding an attendant/companion. Finding a companion and completing my B.A. degree are my immediate goals."

Rehabilitation Careers

SOCIAL WORKER/DOCTORAL CANDIDATE IN ART EDUCATION. (Polio quad since 1949 at age 12; insulin-dependent diabetic.) *"We are different only in that we can't move our arms and legs so well. In spite of the inconveniences of our immobility, we laugh, we cry, and we make love."* Bev Baer, Apt. 3, 445 West 8th Avenue, Columbus, Ohio 43201.

"As I think about being a woman living in a wheelchair, I find it difficult to put my thoughts into perspective, because I have never been especially preoccupied with the idea of being female.

"In looking back at my childhood, my impression is that my parents must have raised me sensibly, because I was never type-cast in a so-called female role. I had one doll that fascinated me because she was a "wetsy" doll. My favorite toys were chemistry and erector sets. Although females traditionally are supposed to be afraid of mice, toads, and snakes, these pets were often a precious part of my menagerie. At twelve, I aspired to become either a veterinarian or a concert pianist.

"At that age, I also had polio and have since been a quadriplegic, with use of my hands and biceps. My paralysis has shaped my life immeasurably. I might have been completely unsocialized were it not for polio. I believe that I would have had a life-style similar to Thoreau, if the physical dependence imposed by my disability had not drawn me toward people.

"I am also an insulin-dependent diabetic. It is very difficult to tell others what it is like to be multiply disabled. Quads cannot completely understand. Diabetics cannot fully appreciate my situation. Many aspects of my physical conditions are unpleasant, and I prefer not to think about them unless it is necessary. It is much more fulfilling to go about the business of living than it is to think about insulin shots, urine checks, meals on time, well-balanced meals, doing without calorie-filled goodies, and staying off my rear end to prevent sores that do not heal.

"Because I am female, my parents might have been too protective, but they were not, and I am thankful that they always expected me to live life to the fullest, and to do all of the things that are done by non-disabled people. I went to public high school and college in the fifties, long before the word 'accessible' became popular. My classmates carried my wheelchair and me up and down two and three flights of stairs to class. I lived away from home in the dorm with roommate-attendants.

"The days between then and now have been beautiful and challenging, as well as full of hurtful experiences, bumps, bruises, narrow escapes, and a few near disasters. In spite of the countless times that I felt like quitting, I would not trade my experiences for anything, because they truly have been unique, expansive, and abundant. For a female living in a wheelchair before the 'age of advocacy,' there were no role-models to follow or imitate. I thus inevitably became a free spirit.

"I think that living with two disabilities has enabled me to grow more than I otherwise would have. My circumstances have at times been so intolerable that I have had to search for a higher level of existence — Universal Truth, God, the Force of Star Wars, or whatever else one might want to call it — in order to remain alive.

"My adversities have almost imperceptibly led me to a career that I would not have chosen in a million years, and would not trade for anything. It is, in fact, only within the last year that many of the myriad pieces of the puzzle of my life have begun to fall into place. For three years, I have worked as a social worker with the Ohio State University (OSU) Cancer Rehabilitation Project, which ended in June because it was not refunded. Winter quarter at OSU, I am going to begin to work on my doctorate in art education. I feel most grateful that, even though Ohio BVR would not provide funds for my proposal, OSU granted me a fellowship that will help me pay almost all of my expenses. My ultimate goal is to establish a program for cancer patients and their families, in which I can combine my counseling skills as a social worker with art therapy techniques to enable patients and significant others to develop outlets for self-expression. I feel most fortunate that my work is not only my interest, but also my pleasure.

"I feel that what I do with my life as a woman is critical, because I represent part of the mirror-image of disability, as well as womanhood, that is envisioned by society. I believe that it is essential for those of us who are disabled to overcome our fears, anxieties, and inhibitions and get out and live life, so that our disabilities will become minimized, and our examples will thus teach society that we are made of the same stuff as they. We are different only in that we can't move our arms and legs so well. In spite of the inconveniences of our immobility, we laugh, we cry, and we make love. We have hopes, aspirations, successes, and failures. We go to school, work, take vacations, raise families, and make our contributions to society."

WORK ADJUSTMENT COUNSELOR. (Disabled by a genetic neurological disease since birth.) *"I'm a disabled woman, but I'm also a woman who is satisfied and secure with the progress I'm making at reaching my potential."* Sharon Claunch, 4220-A Galliano Lane, St. Louis, Missouri 63129.

"I have a B.S. degree in rehabilitation services from the University of Missouri, Columbia. I'm employed as a work adjustment counselor by Goodwill Industries. Roger and I have been married for a year and a half. My age is 26.

"I am a woman who is disabled, a woman who is in love, and a woman who is fortunate enough to have that love returned.

"The relationship we share doesn't allow for my disability to hinder its growth. I feel that perhaps it provides us with a unique perspective that touches upon all aspects of what we experience, from disagreements to making love.

"Yes, I'm a disabled woman, but I'm also a woman

who is satisfied and secure with the progress I'm making at reaching my potential. For that I'm grateful and proud."

COUNSELOR IN REHAB WORKSHOP. (Quad because of dermatomyositis since 1955 at age six.) *"When I went to college I realized I had as much right to pursue happiness as one of my peers . . . . As a disabled person I feel the same responsibilities that many people feel. I am responsible for my self-growth and creativity . . . . I strive for more love and compassion."* Victoria Conley, 2230 Marquette, Alton, Illinois 62002.

"I was born in 1949. At the age of six I contracted my disability, dermatomyositis, a bone and muscle disorder. I was able to walk until the age of 13. Since then I have been in a chair.

"In 1974 I received my Bachelors degree in humanities, majoring in Spanish and minoring in art and Italian. I received my Masters degree in counseling in 1976. I am presently employed at Specialized Services in Alton as a counselor. It is a rehab workshop for the intellectually impaired, physically disabled, and emotionally disturbed.

"Until I went to college I was quite introverted and meek. My self-concept was one of being a burden to everyone. But when I went to college, I realized I had as much right to pursue happiness as one of my peers.

"It was also during this time that I became aware of the Disabled Movement. After putting up with ridiculous architectural barriers for four years at Southern Illinois University at Edwardsville, I decided to do some loud complaining. I joined with other students and formed the Disabled Students Association. We approached the administration, which worked with us to make SIU one of the most accessible campuses in the nation.

"After I graduated, I became chairperson of the Madison County Committee on Rights for the Disabled. We are advocates and we watch-dog new construction. We also do speaking engagements on barriers.

Victoria Conley, rehab counselor, driving her newly converted van, "I am responsible for my growth and creativity."

"The fact that I am a woman and disabled is obvious and irrefutable. But these are only labels and tell only a partial story.

"I am me and comprised of many labels: single, counselor, driver, daughter, sister, aunt, friend, peer, feminist, shy, assertive, educated (but needing more), woman, disabled. And this is only a partial list.

"I do know that I do not feel asexual and I usually do not allow an impression of this kind to be made of me. Though I realize that often disabled persons will feel asexual because of their own self-perceptions and possibly because society may see them this way, I have overcome these feelings.

"As a disabled person, I feel the same responsibilities that many people feel. I am responsible for my self-growth and creativity; I grope for better understanding and sensitivity of life around me; and I strive for more love and compassion for my fellow man.

"These things and more are my make-up. Being a woman who is disabled are only two of my many titles."

SOCIAL WORK CONSULTANT AT A NURSING HOME. (Respiratory polio quad since 1952 when a junior high student.) *"Being a quadriplegic is not a tragedy, but an inconvenience perpetuated by architectural barriers and societal attitudes."* Carole Ann Parsons, Elmwood Terrace, Apt. 106, 1270 Wisconsin Street, Lake Geneva, Wisconsin 53147.

"After receiving a B.A. degree in psychology at the University of Wisconsin in 1970, I earned a Master of Science degree in social work at the same university in 1972. After I returned home, I completed a work experience program as a student counselor at our local high school, a position arranged through the Wisconsin Department of Vocational Rehabilitation.

"The following year I volunteered as a social worker at a nearby nursing home. Since February 1977, I have been employed as a social work consultant at the Lake Geneva Nursing Home. Since working there I have become aware of a correlation between the elderly and myself. Life doesn't cease because a person is old or disabled. I believe very emphatically, very definitively, and very fervently that being alive is a beautiful experience, whether confronted by a physical disability or the normal process of aging.

"I live with my parents. My respiratory and other aids include a rocking bed, hydraulic splint, ball-bearing feeder, and mouthstick. My interests include watercolor painting and writing poetry. In 1975 I received an honorable mention at the Sister Kenny International Art Show by Disabled Artists and recently I had my first one-woman art show. In the same year, my first book, *Beyond a Tear,* was privately published.

"My basic philosophy toward physical disability is that being a quadriplegic is not a tragedy, but an inconvenience perpetuated by architectural barriers and societal attitudes."

DIRECTOR, SERVICES FOR DISABLED STUDENTS. (Muscular dystrophy quad.) *"Life has been very good to me, and my physical disability has opened untold avenues of endeavor rather than creating unsurmountable barriers."* Tedde (Kast) Scharf, 1925 Montview Drive, Greeley, Colorado 80631.

"My parents have always encouraged a creative, positive attitude toward my disability, people, and all situations which I might encounter in a lifetime. Thus, my life has been, and is, a series of adventures and surprises. I have attended public schools, high schools, and colleges, culminating in an Associate of Arts in textile design from the Fashion Institute of Technology, New York City, a B.S. in special education, and an M.A. in counseling from the U. of Northern Colorado.

"Employment experiences have been varied as follows: textile designing in New York City, free-lance artist, Amway distributorship, weekly columnist for *Estes Park Trail-Gazette*, and director, Office of Resources for Disabled Students, U. of Northern Colorado (1974-present).

"My current job involves coordinating services and resources for approximately 120 disabled students at the University. The resources include admissions, financial assistance, housing facilities, campus accessibility, academic advising, personal and vocational counseling, faculty in-service training programs, and extracurricular activities, as well as supervising three full-time staff members.

"In the past four years, I have also been active as a member of the Colorado Governor's Advisory Council on the Handicapped (1973-1976), codirector of the Colorado White House Conference on Handicapped Individuals (1975-present), and a national vice-president of the Muscular Dystrophy Associations of America (1976-present).

"In 1973, I met a young man, Daniel M. Scharf, who became my husband in September of 1974! Dan (a quadriplegic — spinal cord injury in 1968) and I are pursuing new adventures together. My husband recently completed his Ed.D. in psychology, counseling, and guidance at the University of Northern Colorado and is presently employed as Coordinator for the Office of Disabled Citizens in the City of Greeley.

"We are both active in community projects involving disabled and able-bodied; we love to travel, dance, attend concerts, and entertain. We are often asked to speak to various civic and educational groups on the social, psychological, and sexual aspects of disability.

"In my spare time, I enjoy cooking, reading, and playing the organ (specially adapted with slings hung from a hook in the ceiling to hold my hands over the keyboards).

"My husband and I employ a young couple, Jonnie and Loyd Spencer, to help us with getting up and going to bed, dressing, bathing, housekeeping, laundry, and driving. Beyond the personal care assistance, we are entirely independent in our electric wheelchairs. Our kitchen is specially adapted so that we do our own cooking and cleaning up! It is obvious that life has been very good to me, and my physical disability has opened untold avenues of endeavor rather than creating insurmountable barriers."

Sales, Store-Based

OWNER, TOY STORE. (Respiratory polio quad since 1954.) *"From those long past days of slumping in a hospital wheelchair to owning my own toy store today has been a 23-year odyssey of surprises . . . . The children are grown up and my 30-year marriage is flowing along as smoothly as always."* Mary Ann Hamilton, 1185 South Williams, Denver, Colorado 80210.

"I suppose the 'empty nest syndrome' spurs even a disabled mother into dreams of stepping outside her family and into the world. After years of scripting possible dreams for my husband and our four children, I find myself like so many women my age facing the future on the far side of a grown family.

"From those long past days of slumping in a Colorado General Hospital wheelchair, dejectedly pondering a dismal future (where the late 'empress of polio,' Anna Brown, admonished, 'What the hell are you blubbering for? You've got a husband and four kids wanting you to come home!'), to owning my own toy store today has been a 23-year odyssey of surprises.

"One deeply buried surprise is an inkling of belief that this polio, this handicap my family has shared with me, is a blessing disguised as a catastrophe. I must admit, however, that if the pointing finger of God punched through the clouds and His voice boomed, 'Listen, kid, I'm going to do you a big favor and strike you with polio today,' I'd be the first to exclaim again ad nauseum, 'Why me?'

Mary Ann Hamilton, toy store owner, with a grandchild, "The 'empty nest syndrome' spurs even a disabled mother into dreams."

"As I look back now from this pinnacle of survival, I see my husband, children, and I have maneuvered through an era of turmoil that destroyed many families. Perhaps we survived and flourished because my polio was a buffer, an object of intense concern, that served as an adhesive to hold our family together, keeping our ideas of what is important simple.

"It's been years since I worried about being an inadequate mother because I can't wash and iron clothes . . . fix dinner . . . tidy the house. Since I'm what some refer to as an 'upside-down' polio, I can truthfully admit I haven't lifted a finger in 23 years to help my family. I know now my time was distilled into watching and listening, guarding and guiding, into loving them with the drudgery removed.

"The children are grown up and my 30-year marriage is flowing along as smoothly as always. Why did I spill so many tears ululating my failure as a wife and mother? Once my spirit was scraped off my toes, I discovered a bunch of people who needed to believe I had courage. Once that belief is established, it's darn near impossible to be a disappointment to those who love you.

"If I couldn't wash and scorch clothes or whip up a cake failure anymore, what could I do with my 'extra' time? Watching mildew spread and dust balls grow loses its attraction after awhile, so I turned to entering contests (25 words or less — not beauty contests). I mouthsticked away at my typewriter and won my oldest son a trip to Europe. More typing and the mailman delivering prizes became a common event.

"One day, a local writer, a neighbor of ours, made the effort to transport me, body, and Monaghan respirator, to a writer's conference. I dropped the contests and started to read every book in the library about how to write. The day the first check arrived for an article I'd written, something out of my own thoughts, I felt a sense of accomplishment I couldn't describe. I saw in the eyes of my husband and children that they knew how I felt. 'Ehhhh! Who needs to bake a perfect pie?' I took them out to dinner and my heart sang, 'I don't care if I have to be fed. I'm a writer!'

"The years roll by and the odyssey of surprises continues. If somebody had told me I'd live long enough to see my children safely grown, if somebody had told me I'd live to see three (soon to be four) grandchildren, I might not have prayed as hard and been buried. What a treat to share a soggy cookie shoved into my mouth by a pudgy little hand belonging to one of my grandbabies. Once more my heartache creeps out of its tuck when I cannot touch those tousled heads, but I can still sing a lullaby and they like my croak.

"If husbands of old polios do not get into heaven automatically then there is something wrong with God's system. My patient husband for years has cheerfully tolerated my overactive mind, acknowledging my money-making schemes without belting me for expressing them prior to dawn. He realizes the schemes I dream up are mental calisthentics, brain exercises to ward off atrophy of the mind. It's so easy to sit in bed in the morning, waiting for someone to unstrap my 'shell' and strap on the brace, and visualize a business venture. A venture to fill the void now that the nest is empty.

"There must be a positive force in dreaming improbable dreams. The last venture I thought of is now a reality, and my days are busy and eventful. Last April, my daughters and I opened a used toy store we named, 'Grandma's Toy Haven.' We buy and sell quality used toys, an idea that came to me when grandchildren started arriving and I discovered the skyrocketing cost of toys.

"Getting out of the house and into the stream of business after years and years of peeking at the world behind other's experiences has been exhilarating. When one of my daughters pulls into the driveway, I still cannot believe it's really me going to work with my brown-bag lunch and my portable Bantam respirator.

"My world has expanded, fragile and beautiful like a bubble. A world I could not hope to change for the better. Can any woman, even a handicapped wife and mother, cry for what might have been when her family so obviously cares about her? Sure, I'd enjoy independence, do my own thing by myself once in awhile, but I snuff that desire by quickly asserting what I do have: a family forged together by pure love that surfaced through a catastrophe.

"On August 30th, Ed and I celebrated our 30th wedding anniversary. Among the gifts and cards was a short note that meant more than all the gifts we've gathered through the years. It was a message written on the outside of an anniversary card. It read: 'Happy 30th, Mom and Dad, We love you a lot, so please accept our congratulations, and thank you for being such an inspiration with your years of love. All our love, Your Crew.'

"As the song goes, 'Who could ask for anything more?' "

Services, Home-Based

INCOME TAX SERVICE. (Polio quad since 1955 at age 16.) *"But as far as the things I absolutely can't do, I don't dwell on them except to re-evaluate them from time to time. Times do change and things are possible today that I wouldn't have thought possible 10 years ago. Who knows what the next 10 years will bring?"* Toni Gaffney, 1407 North Hewett Street, Neillsville, Wisconsin 54456.

"I finished two years of high school by tutor and did two years of a three-year law correspondence course. Also, I took the H&R Block tax course. Now I sell wedding invitations and prepare income taxes. I live with my mother and work at home.

"I serve as volunteer treasurer of the Social Services Santa Claus Shop, which provides Christmas gifts to needy children of the county. I am a member of the Wisconsin Wawbeek Associated Activity Club.

"I use a wheelchair, handsplints, feeders, a foot-operated cable system to open and close hands, and a mouthstick. I can turn the water off and on in the sink by extensions on the water faucets. I can open letters with a battery-operated letter-opener. I turn the buttons on the

CB with my mouthstick.

To use the telephone: I have a moveable arm, called the Third Arm, that holds the receiver in position; an attachment over the button allows me to lift it up or click it down; I dial with a short mouthstick.

"With a mouthstick and a left hand piece, I type 20 to 25 words per minute. I put the paper in myself with a mouthstick and slight use of my left hand. I turn TV on and off with a mouthstick. I operate the aerial, which is on the floor, with my foot. I turn the lights on with my foot and off with my mouthstick. I open and close our front door with an attachment to the door knob, a Dow-Knob, which I just got recently.

"I use spray perfume by pushing down with my chin. I comb my hair, wash my face, apply cream and take it off, and use sachet or perfume.

"I have now listed just about everything I am able to do. I was somewhat amazed myself when I just started writing down everything I could do, small and big things. I guess I feel particularly good, because without my equipment I cannot do even one thing that I have listed. So look what is possible if a person has the right adaptive equipment. You don't really need many muscles in your arms or hands, as I have very few, and the ones I have aren't very useful.

"I try to think more about the things I am able to do, as well as devising ways of doing things that could be a possibility for me. But as far as the things I absolutely can't do, I don't dwell on them except to re-evaluate them from time to time. Times do change and things are possible today that I wouldn't have thought possible 10 years ago. Who knows what the next 10 years will bring?"

TELEPHONE INTERVIEWER/TV MONITOR. (Disabled by rheumatoid arthritis since childhood.) *"Inquiries made to professionals concerning problems as an adult disabled person have been quite negative."* Joan Younger, 3939 Roland Avenue, Apt. 517, Baltimore, Maryland 21211.

"Hospital stays from ages seven to twelve provided only unhappiness and confusion. Family life was nothing but 'uprooting' constantly.

"After high school I went to business school. I worked as a secretary and cashier until transportation became a nuisance.

"I founded the American Society for the Physically Handicapped, Inc. in Philadelphia to furnish counseling and referral services. I moved to Baltimore and lived alone in an apartment. I worked for an insurance broker. After two years I married a disabled man who works for the Automobile Club.

"I worked as a job trainer and interviewer until skin ulcers forced me to begin finding jobs at home. Each job has been found on my own initiative since DVR here does not get involved with homebound work. I have trained other homebound to work with me on interviewing and monitoring.

"At times inquiries made to professionals concerning problems as an adult disabled person have been quite negative. I was told not to worry because they knew I would work it out or, after listening attentively and then making light of the situation, they would leave, making me think I had given them material for a paper, while I was left with nothing more than disgust."

Teachers

ART TEACHER/ANSWERING SERVICE. (Respiratory polio quad since 1944 at age 24.) *"The last twenty years have been great! . . . This creativity has made life tolerable. I feel art therapy should be stressed . . . . I think it's time we joined the rest of the world."* Theda A. Carle, 531 Bellevue East, #107, Seattle, Washington 98102.

"The twenty years of the *Gazette* parallel the twenty best years of my life. The ten years prior were spent in the hospital in an iron lung.

"The next three involved re-entering society alone with two sons, a primitive respirator, and no money.

"The last twenty years have been great! Still no money. When my sons were through college I resumed my education, changing from fine arts to commercial art. I found I could not compete in the market place. I sew, spin, weave, and teach instead. This creativity has made life tolerable. I feel art therapy should be stressed. I am the answering service for this year's International Toastmistress Clubs.

"My talent is minding other people's business. I was interviewed for the books, *Toward Intimacy* and *Within Reach,* done by the Task Force on Concerns of Physically Disabled Women. I was the subject of an educational TV film on living alone in the *Faces of the City* series.

"I use OT students as household helpers. This gives me sensitive help and them increased awareness. I use a Huxley respirator and Thompson shell about 10-12 hours

Theda Carle, art teacher, "Creativity has made life tolerable."

a day. I use a wheelchair and do some standing.

"We bulbar polios here are actively exploring group homes, a Center for Independent Living, and problems of aging disabled. The medical and paramedical schools could offer much help in these areas. There is much movement with the disabled in the Northwest. I think it's time we joined the rest of the world."

BIBLE STUDY TEACHER AT STATE PRISON. (Disabled by rheumatoid arthritis since 1942.) *"Over three years ago I accepted Christ and then some two years ago He brought me a husband."* Hannah Clark, 2175 Liberty Street, N.E., Salem, Oregon 97303.

"I have just had both hips and one knee joint replaced. I use a wheelchair, platform walker, and leg splints. My arms aren't strong. I am trying to get back to walking.

"I was tutored through high school and attended college with my parents' help. I have B.A.'s in German and philosophy from Willamette University.

"Over three years ago I accepted Christ and then some two years ago He brought me a husband. Kenny and I met in a singles Bible study class. He was an Oregon State Prison electrician and he is now retired on disability. We live in our own house.

"We now want to serve the Lord. We are teaching a Bible study class at the State Prison, plus we have a counseling course there and we have taught Sunday school classes in our church.

"We both share a joy in the outdoors, in nature, in collecting rocks, and in photography. I enjoy also reading, painting, and drawing."

ART/NEEDLEWORK TEACHER. (Polio para since 1950 at age 25.) *"I started to write my story, 'Sex on Wheels,' to illustrate how a disabled gal at age 49 went about the 'dating game' on wheels."* Ursula G. Day, Route 2, Box 478, Buckeye, Arizona 85326.

"I was born in Berlin, Germany, in 1924. My father was a fervent anti-Nazi and anti-Communist. He was a Social Democrat. Somehow, I survived World War II. I spent a year in a labor camp for refusing to join the teen-age Nazi party. Out of the camp, I was drafted into the air force as a civilian.

"In 1944 I spent six months in a hospital with osteomyelitis. I had two leg operations and almost lost my right leg. During the American military occupation, I met the man who sent for me in 1947 to come to the United States as a German war bride. Three years later I became disabled with polio. I was 25 years old and had a two-year-old daughter. In 1957 my husband died of a heart attack. I was left, in a wheelchair, without money, a mortgaged house, and a nine-year-old daughter to raise.

"Social security and veterans pensions were just enough for fixed expenses, nothing more. But, somehow I managed. By chance I fell into part-time teaching of art and needlework on adult education programs. Though it was difficult because of architectural barriers in the schools, teaching was ambrosia to me.

Ursula G. Day, art/needlework teacher, "I started to write my story, 'Sex on Wheels,' to illustrate . . . the 'dating game' on wheels."

"For the next ten years, I devoted myself to working and getting my kid through school and into college. I did not have any dates though I was looking. I found that a disabled woman had a harder time meeting eligible males and my insulated attitude did not help.

"In the summer of 1970, I went as a delegate to a national disabled convention in California. By this time, I had given up looking. So I was minding my own business when I met this charming older man in a wheelchair from Phoenix, Arizona, and he really 'bowled' me over. That fall I visited him for ten days and we became engaged. My daughter was graduating from the University of Minnesota and was planning to be married. She was doing well and I felt I had done my parental duties and was free to 'do my own thing.'

"Our marriage did not work out for a variety of reasons and ended in divorce — to my great sorrow and much pain — in 1974.

"Now a new challenge presented itself to me. I learned to live alone in an apartment. After sitting in that apartment complex for the elderly and disabled bemoaning my sorry fate, I joined a local dating service, went to divorce adjustment classes, and took a course in communications (people-to-people) from Arizona State University. I started to write my story, 'Sex on Wheels,' to illustrate how a disabled gal at age 49 went about the 'dating game' on wheels.

"After all those dateless years and being 'older' it was sometimes scary, other times very educational, and, all in all, a great learning cycle. Then I settled down to a 'going-steady' man. But his almost fatal heart attack and his religious problem ended our arrangement and I went back and cast out a new line.

"By July of 1975 I had almost given up finding someone nice and honest who did not take me out because it was a new experience to date a woman in a wheelchair. Then I met a quiet, tall, lean, and lanky guy. We had a different relationship from the beginning. He lived way out of town on the desert with a teenage son and daughter. His house has no city utilities, no TV or phone, no visible people neighbors. But it has a lot of nature and peace.

"I started spending my weekends out here and, since my heart attack last November, I am spending all my time here. The son has moved. L.E.E. and I drive to town each day to work. On weekends we work on the house. I need to retire because of my health. Out in the desert I can regain some of my strength and finally some peace of mind.

"It has been an eventful first half century of life!

"My biggest problem: I am a doer! When others procrastinate and I have to sit and wait or see them doing it all wrong according to my ways, I want to charge in and do it!

"Before polio, I used to walk off, work off, and wear off my extra energy and my frustrations. My temperament came with an extra built-in supply. I don't know how to turn off or tune down. How do other disabled work off or wear off their extra energy and find some relief? Please share!"

PART-TIME ENGLISH TEACHER/VOLUNTEER. (Polio quad since 1954 at age nine.) *"I did not make enough money teaching part time to support my expenses, but I made too much while working to receive any aid. If I did not work, I still would not receive enough aid to pay my expenses . . . . But I could receive enough money to live in an institution."* Cass Irvin, 1604 Beechwood Avenue, Louisville, Kentucky 40204.

"I graduated from college in 1968 with a B.A. in English. In 1973 I moved from my parent's home into an apartment of my own, with a companion/attendant. I received my M.A. in English in 1974 and began my present work as a part-time instructor of English at Jefferson Community College.

"During the summer of 1975, my radicalization started to happen. I began to realize that no matter how hard I worked, I could never work hard enough to become economically self-sufficient. I do not have the physical stamina to work enough hours to totally support myself and related expenses (i.e., companion, special transportation, equipment, etc.). My family will always have to pay many of my bills and they are trying to provide financial security for me after they are gone.

"This all began to anger me. This and the realization that it took so long to find a companion — my only solution to independent living. (How odd to depend one's entire life on another and call it independence!)

"I was lucky enough to find an older apartment that is accessible and a companion who is congenial. Once settled into my financial (thanks to my family) and socially (thanks to me!) independent life, I decided to look for alternative financial aids. My father was about to retire and, although he could continue to support me, that kind of a lifetime expense is not easy. My luck began to backfire. I found that I did not make enough money teaching parttime to support my expenses, but I made too much while working to receive any aid. If I did not work, I still would not receive enough aid to pay my expenses. But what I did find out was that I could receive enough money to live in an institution!

"These inconsistencies seemed irrational to me, so I searched for some rational answers. I also sought out groups of people to work with. The more I became involved, the more inconsistent I found matters: buses that route you across town and take an hour and a half to get you to a job four blocks from your home; homemaker services (to relieve your companion) that cost $6 an hour; state employment offices with specialists in disabled counseling that have inaccessible bathrooms.

"I decided to become involved. I became a member of the board of directors of the Action League for Handicapped Adults (ALPHA, Inc.). Eventually, I resigned because I found myself continually frustrated because there was so much that needs to be done in the area of handicapped civil rights that the organization took on too many responsibilities and became ineffectual.

"I helped plan and organize Prime Movers, Inc., a consulting organization which focuses on the physically handicapped situation as experienced here in Louisville. I am presently vice-president of the board. We are in the process of starting a media resource library to provide a suitable research base for community planning and decision making.

"I taught a class through the Continuing Education Department at Jefferson Community College entitled: 'The Missing American; or the Necessity for a Handicapped Movement.'

"The very last straw: I realized 'the fight was mine and the cause was just' because if disabled people are discriminated against, anyone can be: tall people, short people, fat people, skinny people, people with seven children. How absurd in this land of liberty, equality, and justice! That is why I am radical; that is why I fight. To use a rather trite expression: 'If I am not a part of the solution — am I not a part of the problem?' "

TUTOR AT COLLEGE LEVEL. (Respiratory polio quad since 1954 at age 11.) *"In relating my life's experiences and my identity as a disabled woman, I find my feelings somewhat ambiguous."* Clair Jo Schnitz, 2114 Arizona Avenue, El Paso, Texas 79930.

"I have spent most of my life saddled by a chest respirator and supported by a reclining wheelchair. This physical reality comprises a structural framework that occasionally creates annoying barriers, but that in no real way limits my spiritual, emotional, and intellectual development — except when I'm foolish enough to allow it.

"After almost a year of hospitalization and rehabilitation

in Houston, I returned home to adjust to my paralysis, finishing my elementary and secondary education through homebound study and vicariously participating in the growing-up experiences of my brothers and sisters. With a high school diploma as my life's most outstanding achievement, I then withdrew into my little corner, day-dreamed, absorbed myself in my books, and waited for the world to come to me. I wasted eight damn years that way!

"Fortunately, I was gently prodded into action by a concerned rehabilitation counselor. I began crawling out of my shell (I use the term figuratively, of course!) in 1966. I started with television survey work by telephone. After a couple of years at that work, I decided that I'd try preparing myself to tutor small children, so I began my university studies by telephone intercom, initially with the idea of acquiring enough credit hours to qualify me for the school district's tutoring directory.

"I made that decision nine years ago, and here I am — six credits away from a degree in English. While concentrating on my last few courses, I also tutor English (primarily composition skills). Most of my students are college freshmen and sophomores. Besides tutoring English, I'm trying to branch out into other subjects — Spanish for native speakers of English and remedial reading.

"I live with my parents and for the last three years have had full-time, live-in attendants (my father pays their salaries). Since Spanish-speaking household help is more readily available here, I studied the language through correspondence courses from the University of Texas at Austin; I'm almost bi-lingual now.

Clair Jo Schnitz, college tutor, "Today's disabled woman has the advantage of choosing from both female worlds."

"Having attendant care has had enormous influence in helping me mature and develop emotionally. For so many years my marvelous mother either took care of me herself or was directly responsible for my care; now I take on that responsibility. In fact, I've discovered all kinds of new independence, and the change is promoting a wonderful growth in the relationship between my parents and me.

"In addition to my studies and tutoring work, I have recently started mouth-painting with watercolors — great fun, but so far limited to sprays of roses. I also write occasionally although I find it extremely difficult. It is physically and emotionally exhausting, and rejection slips depress me unduly.

"Strange as it sounds, the accomplishment of which I am most proud in the last couple of years is the ability to sign my own checks (self-taught), to maintain the checkbook register, and to pay bills without delegating the authority to someone else. I do all my banking by phone or mail. I have established my own credit rating and have a major credit card.

"In relating my life's experiences and my identity as a disabled woman, I find my feelings somewhat ambiguous. My physical dependency causes me numerous problems, especially with parents who tend to be overprotective, but I don't view this difficulty as insurmountable. As a woman, I sometimes encounter resistance from older, male students, but the problem is definitely prejudice against my sex, rather than against my handicapped condition. With a little time, I usually overcome such teaching barriers quite easily.

"Frankly, I think today's disabled woman has the advantage of choosing from both female worlds — she can select the role of feminine dependency because of her very real physical dependency, or she can opt to seek independence because she is a female in an age of women's struggle for equality, or she can find her own satisfactory balance between the two."

Volunteers

SECRETARY/EDITOR. (C4-5 quad since a trampoline accident in 1968 at age 13.) *"It is essential to face life and facts as they are and to make the utmost of what is left."* Chantal Fouche, 112 Fifth Street, LINDEN 2195, Johannesburg, Republic of South Africa.

"Life as a quad can sometimes be hard to digest, and acceptance is a word which I don't count as part of my vocabulary. Nevertheless, I feel that it is essential to face life and facts as they are and to make the utmost of what is left.

"I am at present the Public Relations Secretary of the Quadriplegic Association of South Africa. I'm also on the Public Relations subcommittee which is responsible for the publishing of a three-monthly newsletter. The approximate membership is now 400 able-bodied and 200 quad members."

VOLUNTEER ADMINISTRATOR. (Para because of cerebral palsy.) *"I have had good experiences and bad experiences in this lifelong inconvenience of mine. I suppose the worst one is attitudinal."* Lois Sachs Johnson (Mrs. R.W.), 328 Cumnor Avenue, Glen Ellyn, Illinois 60137.

"In a definite order, I am first *me,* Lois Sachs Johnson. I am a daughter, a sister, a wife, a mother, a possessor of two degrees, a friend, a sometimes very angry woman, a wild traveler, a music lover, and voracious reader. I eat too much, don't smoke because I don't know how to inhale, and usually enjoy anything and everything except pettiness and bureaucracies. I am, to borrow another person's word, inconvenienced. The inconvenience is cerebral palsy.

"We have in our over 20 years of married life adopted an 8-week-old daughter from a licensed private agency, lived in and adapted three apartments and two homes, traveled separately and together, fought and made up and grown — each in our own way. I can adapt to the growing — my husband finds it slightly impossible.

"I do not belong to, nor will have any part of, any organization run by the handicapped. I am on three different boards and chairperson of our county's Governor's Committee for the Handicapped. I only join a board or organization if I feel I can effectively work for it. If I can't — they don't need me.

"In the past 20 years, I have appeared on television and radio; have been interviewed by newspapers; have given speeches to five people or 500.

"As a member and now vice president of the board of Ray Graham Association for the Handicapped in Addison, I have had the pleasure and delight of being a part of and watching an organization, which had primarily served only the retarded four years ago, develop into a full-service association, serving the baby, child, adolescent, and adult who is handicapped and/or retarded or emotionally disturbed. RGA delivers services to over 600 persons per day for a minimum of five to six hours to a full-time 24 hour basis. In the middle of October, 1977, we broke ground for our first Center for Independent Living, which will house in a series of seven apartments primarily the orthopedically handicapped cerebral palsied adults. Because this has been put together from grants from HUD to the Illinois Housing Development Authority and then turned over to a private agency to run and program, it is a first in the United States.

"I have had good experiences and bad experiences in this lifelong inconvenience of mine. I suppose the worst one is attitudinal. I have held jobs in my profession (sociology, rehabilitation, administration) and out of it. I certainly can put up with and understand the individual who says literally, 'You frighten me' or 'Is it catching?' The person who hides his fear becomes a much bigger threat and it is this person who is dangerous to me and to us. I have found that it is my own attitude and it *has to be* which will open doors and get people to see me — not because of my disability, but because of what I am, have done, and can do.

"I have also found that the medical profession is oriented towards one thing — cure — and shies away from and on the whole tries to avoid the people they cannot cure. There is also terrific undocumented unwarranted prejudice in the field of insurance, from medical to life to auto to being a homeowner. There are certain fields that are virgin when it comes to hiring of the handicapped and these include radio, television, large corporate companies, and such. All of these things must be attended to . . . some day.

"Being a disabled woman probably has gotten me into many places much faster (how about a private tour of King Tut), put me on planes earlier, and involved me in that mad White House Conference in May. Being a disabled woman is also frustrating, time consuming, irritating, and something I would recommend that anybody do without."

VOLUNTEER CLUB WORKER/BABYSITTING GRANDMOTHER. (Quad following surgery at age 49.) *"I lived with my daughter for three years and am now a member of my son's family . . . . Our local Able-Disabled organization has become my prime endeavor."* Gay Lineberry, RN, 2335 Dorn Road, Augusta, Georgia 30906.

"I became a quadriplegic (incomplete) following a third surgery for removal of a second benign tumor and a second cyst at C-7 to T-2 with involvement of C-6. Until then I'd worked as a registered nurse.

"I have two caring, wonderful children and four delightful 'grands.' I lived with my daughter for three years and am now a member of my son's family. His loving and understanding wife supports my activities. Naturally, babysitting comes first and has always been a joy in both homes.

"Reading, letterwriting, and an ever-increasing interest in the handicapped spurred me, with the help of twelve others, to start our local Able-Disabled organization in 1973. With the help of family and many others, I served as organizer, president for two years, and newsletter editor for a now very active group. A-D sends out a four-page newsletter monthly to 300 people. As a member of the board of directors, program chairman, newsletter advisor, and mailing coordinator, I keep busy.

"A-D has become my prime endeavor (a volunteer one). We work to correct architectural and attitudinal barriers. Our slogan is, 'Don't think handicapped, think ABLE-Disabled.' "

Writers

POET. (Quad for 30 years because of cerebral palsy.) *"Don't be hurt because people look at you. You are their equal. You have worth because of your own self, and perhaps they watch you with admiration because they have never seen a person like you who goes out and lives life as they do."* Gabriela Brimmer, Alfonso Caso 36 Bis/Casa C, Antes: Las Flores, Tlacopac, San Angel, Mexico 20 D.F., Mexico.

"Fluttering in my mind is the memory of something my father said when we were traveling and had to stop to eat. Everyone in the restaurant watched me because I was in a wheelchair and had to be fed, as I could not feed myself. When I saw that people were looking at me with a mixture of curiosity and compassion, all I could think of to do was to stop eating. My father, who was very observant, noticed that I had stopped eating and, after asking me what was wrong, said, 'Daughter, don't be hurt because people look at you. You are their equal. You have worth because of your own self, and perhaps they watch you with admiration because they have never seen a person like you who goes out and lives life as they do.' Caressing my head, he urged me to finish my meal.

"My father's words have stayed with me, and I think of them whenever I doubt myself.

"For all of us disabled women, life is difficult, but it is necessary to try to make it less unpleasant and less difficult, for our own good and for those around us. How? By facing life with courage. By concerning ourselves with others. By insisting that our families do not limit us by overprotecting us. By doing the things we can do, no matter how small. By joining with other disabled for our common good. By requiring that society acknowledge our rights. By demonstrating that physically disabled women are as important as everyone else. I know from my own experience that the drive to attain fulfillment sometimes fails before the limits that life places on us, but who today does not have limits? 'The daily struggle gives us honor, and poor is the person who has nothing to struggle for.' "

"En mi memoria revolotean como bellas aves, unas palabras dichas por mi padre un día que salimos a Tepotzotlán y que tuvimos que comer en un restaurante en donde todos se me quedaron viendo porque iba en silla de ruedas y me daban de comer en la boca. Al verme observada por toda la gente con esa mirada entre curiosa y compasiva, lo único que se me ocurrió hacer era dejar de comer. Mi papá que era muy observador, vió mi tonta actitud y después de preguntarme qué pasaba conmigo, me dijo lo sigiente: 'Hija, no te apenes porque la gente te mire, tu vales igual que ellos, tu vales por ti misma y ellos quizás te miran por admiración, porque nunca se han visto una persona en tus condiciones que sale and se comporta como ellos.' Y acariciandome la cabeza, me instó a que siguiera comiendo.

"Esas palabras de mi padre, me acompañan siempre que dudo de mi misma.

"Ahora bien, para cada una nosotras mujeres lisiadas, la vida es dura pero hay que tratar de no hacerla tan desagradable y dura por el bien de nosotras mismas y de los que nos rodean. ¿Como? Encontrandole a la vida su valor. Interesandonos por los problemas de los demás. Luchando para que no nos marginen nuestras familias. Activandonos dentro de las cosas que nosotras podemos hacer por pequeña que sea. Uniendonos a grupos positivos para nosotras. Exigerle a la sociedad que tome en cuenta nuestras necesidades. Demonstrandole que también nosotras mujeres impedidas físicamente valemos tanto como los demás seres humanos. Sé, por propia experiencia, que el animo para intentar nuestra realización propia a veces decae ante los limites que nos puso la vida, pero ¿quién hoy diá no tiene limites? 'La lucha diaria nos honra y pobre de aquel ser humano que no tenga que luchar por algo.' "

FREE-LANCE WRITER/RETIRED BUSINESS WOMAN. (Quad because of polio in 1956 at age 40.) *"Polio or any other similar handicapping illness is not all downhill, and I have found many compensations . . . . Sitting on the sidelines of life, as it were, one sees more of the game."* Enid de Groot, P.O. Box 2394, Bulawayo, Rhodesia.

"I had the dubious distinction, in 1956, of being the oldest and the last person in Rhodesia to contract poliomyelitis before the introduction of the new Salk vaccine. Less than a month after I was admitted in a dying condition to Bulawayo's infectious diseases hospital, the first shipment of the vaccine arrived — too late for me but in time for my five children, who had so far escaped the dread illness. My husband had died two years before and I was the sole support of the children, four of whom were in school, the fifth, only three years old, at nursery school.

"I was left with severe paralysis of both buttocks and hips, the right arm, and the left leg. In those days, the only treatment consisted of a thirty-minute massage daily, followed by exercises in canvas slings supported from a couple of Balkan beams. Attempts were made to get me walking, but as I had only one working arm, the use of crutches was impossible.

"It is difficult for a 40-year-old to adapt to severe handicaps, and I often marvelled at the seeming ease with which the six-year-olds took to calipers and crutches. Having the use of only one arm, I was also unable to propel myself in a wheelchair, so I found myself very much on the sidelines of life.

"After some six months in hospital and a further four in bed at home, with brief agonising periods of attempting to move about like an injured crab, I began using my left hand to type. I had been a freelance journalist and short story writer before getting ill, in addition to my full-time work as store manager, and I was keen to do something useful again. The local welfare society as well as countless good friends were keeping our home going, but I wanted to be really independent again and earn a living.

"Having all the time in the world, I decided I might as well attempt a full-length book. It took me three months to write *It Can't Happen To Me,* the light-hearted account of my polio days. It was published in South Africa, but did not become a bestseller as both my publisher and I had hoped. Meanwhile, I had advertised in the local newspaper for typing to do at home and was soon getting private jobs to do. It was arduous at first, especially when one customer asked for five carbon copies of each page of his accounts. It was a nightmare trying to get all those

sheets of carbon and paper flimsies straight and into the machine with one hand and I shed quite a few tears onto the keys of my typewriter. But eventually I got the hang of it. Like everything else, it is a question of patience and the ability to keep trying!

"A wonderful friend made me a gift of a duplicating machine and a box of stencils, and soon I began getting orders from local business houses to supply them with mimeographed price lists and advertising pamphlets. This was much more profitable than typing and soon I was earning useful money. I began building up a small but thriving copying business in my own home.

"So far I had been working from my home. I had a good and faithful woman as house servant, and she was able to help me to the toilet on urgent occasions. Otherwise, I trained my bladder to wait for seven hours until my eldest daughter returned from her office in the city. In a few months, I was getting so much work that it became obvious I needed to move into the business section of Bulawayo. With much inner trembling I rented a small shop, had the windows sign-written in gold letters "Enid Foster Business Services" and opened up for business. More and more work poured in and although I suspected that, in the beginning, sympathy played a big part, it soon grew obvious that my standard of work was responsible for all the orders I was getting.

"However, work is not all, and in spite of having my five lovely and understanding children, inwardly I longed for a companion of my own generation. I missed my husband dreadfully, while at the same time being immensely thankful that he had not lived to see me so utterly handicapped. I missed, too, the time that all mothers of daughters possibly take for granted — going shopping with them, helping them to develop a taste in dress and grooming. When my second daughter married on her eighteenth birthday, I had the bitter experience of sitting and watching other people do for her what I longed to do — arranging the wedding party, visiting the dressmaker for the fitting of her fairytale wedding gown, and the dozens of other pleasant duties that a mother can do only once in her daughter's lifetime.

"In 1960, I met and married the man who has proved to be a tower of loving strength in every way. When he retired from his own job, he came into the copying business and together we built up a really worthwhile business, branching out into litho-printing and photo-copying. In 1975, we were able to sell it and retire, thus enabling me, belatedly, to return to my first love — writing.

"I have often been asked what hit me most of all when I found myself a physical wreck. There were several things. One of the saddest was, as I have indicated above, having to watch my children grow up virtually unaided. I missed my music making. I had been the timpanist and percussionist in our local symphony orchestra. My late husband had been principal clarinet and my eldest daughter played second trombone. It had been great fun when all three of us used to drive off once a week for rehearsals. Now, my seventeen-year-old daughter is the only member of our family left in the orchestra.

"Physically, the toilet nuisance was a real bind. I used to wish the good Lord had devised a better way for females and envied the male paraplegics I knew who must have found the process much easier!

"Incidentally, after much pressuring by our paraplegic association, our City Council built a few ramps onto city sidewalks. We are hoping they will carry on building them in every street!

"Polio or any other similar handicapping illness is not all downhill, and I have found many compensations. For instance, I should never have had the time to write a book if I had not had polio, nor would I have had the courage to start a business of my own. Sitting on the sidelines of life, as it were, one sees more of the game. Certainly, one is often appalled or amused, as the case merits, at the amount of energy the average normal human being wastes rushing about from here to there and back, getting into flaps over small matters because they have not the patience either to wait or to think things out to a logical conclusion. One thing all we paras and quads have learned over the years, willingly or not, is patience!"

FREE-LANCE WRITER. (Para because of multiple sclerosis at age 57 in 1972.) *"I had to re-evaluate my life and even my friends . . . Sometimes I could handle my malady better than I could my friends."* Lucille Heckle, 1708 Arrowhead Trail NE, Atlanta, Georgia 30345.

"I was 57 years old, nearly five years ago, when my off-balance, weakening of some muscles, and impaired coordination was diagnosed as multiple sclerosis, but I continued to work as a legal secretary for six months.

"My eyes are not affected, and I have emotional stamina and my sense of humor. Since my condition worsened in 1975, I have been inseparable from my cane, and the walls and furniture brace and serve me. I am a free-lance writer, and I had always maintained an office in my home. I cannot type long at a time for my fingers stop functioning.

"I live alone and have learned to budget my legs as well as my income. I hope I can remain in my home as long as possible. At first it seemed that the world was passing me by and I had to re-evaluate my life and even my friends, for there are those who would tell me to be more active and those who were too solicitous. Sometimes I could handle my malady better than I could my friends.

"The transition from an active life to forced retirement has not been hard, but I had to make three decisions: 1) Stay happy. I put up a front to my friends for any depression would worry them, and as a result I am happier. 2) Stay busy. Writing has been good therapy for my fingers and my mind. 3) Stay in the present, forget the past, and look to the future. It is important to watch nutrition, get plenty of rest, avoid colds and fatigue, and use moist heat.

"I do have a crutch — a human crutch. She is my sister, who is also my booster and confidante. I can always lean on her."

FREE-LANCE WRITER. (Respiratory polio quad since 1953 at age 17.) *"To have to be still and unable to escape taught me to interact on a basic level . . . Aside from patronizing and rejecting attitudes, my greatest problem is being able to afford all the people I need to get things done."* Donna McGwinn.*

"The greatest satisfactions for me of being a disabled woman are the same as those of being a disabled person, the awakening of my mind and the death of that part of my personal camouflage that was reliant on physical ability and action. Although it was devastating to have so much of my independence and self-expression vanish in paralysis, the loss plus my new ability to think forced me to confront and be and relate as I truly was. To have to be still and unable to escape people and situations, to be constantly available, taught me to interact on a basic, mundane, honest level rather than an artificial, idealized one. Perhaps the changing role of women and the continually developing knowledge about human behavior and relationships would have brought me to the same point had I remained an able-bodied person. Disability afforded a short cut, if not the only route.

"Other satisfactions include a craft that is multiply rewarding, one I would not have undertaken had I not been disabled; an acceptable, believable excuse from formal, customary socializing and availability, something that brings far more enrichment than imposition.

"My craft is free-lance writing. The necessary talent would probably never have been discovered or expressed without the impetus of wanting to work and having few other choices.

"Adjusting to a new form of social life — a free flow of invited or uninvited visitors and few excursions away from home because of monumental fears that my respirators would stop — was an interesting process. With my new rationality I analyzed social customs and intercourse and decided that much of it was uninteresting to me. Definitely nice, but easily dispensable. I did not mind being out of the formal social mainstream. Many who are disabled do mind and rightly and understandably so. I just happen to find certain satisfactions in having a so-far acceptable excuse for not participating in most social activity.

"I found that my other noted satisfaction, availability, gives me the pleasures of sociability without a lot of the pressures. People always know where to find me and I am generally receptive when they call or come over. This involves a lot of time, but there is great satisfaction in being available when someone needs me, getting closer to people through need and contact, having the assistance for tasks and errands that people dropping in provide, and having a wide range of information sources, very valuable when one's business is writing. The state of nearly constant availability produces more spontaneous meetings than does prearranged access and thus greater insight into the many facets of people.

"Then there are the problem areas. For me, the most frustrating are the condescending attitudes that relegate me to fifth class status, the combination of second class as a woman and third class as a quad. Frequently people want to know who runs everything for me (I do), assume I have no romance or sex in my life (sometimes I do not, but usually for the same reasons that able-bodied people sometimes do not), sympathize with or envy my not being able to do anything but sit or lie around (who do they think writes the articles I sell, manages the functioning of my home, makes and pays the bills, makes sure that my body is clean, clothed, and protected, etc.), and criticize me for making demands on people (since when do only the able-bodied have that right). Aside from patronizing or rejecting attitudes, my greatest problem is being able to afford all the people I need to get things done, such as my personal care and protection (I use 24-hour respiratory assistance) and the other manifestations of the expression of my life."

Donna died of a perforated ulcer on April 9, 1978.

Practical Books for Women

by Judy Raymond

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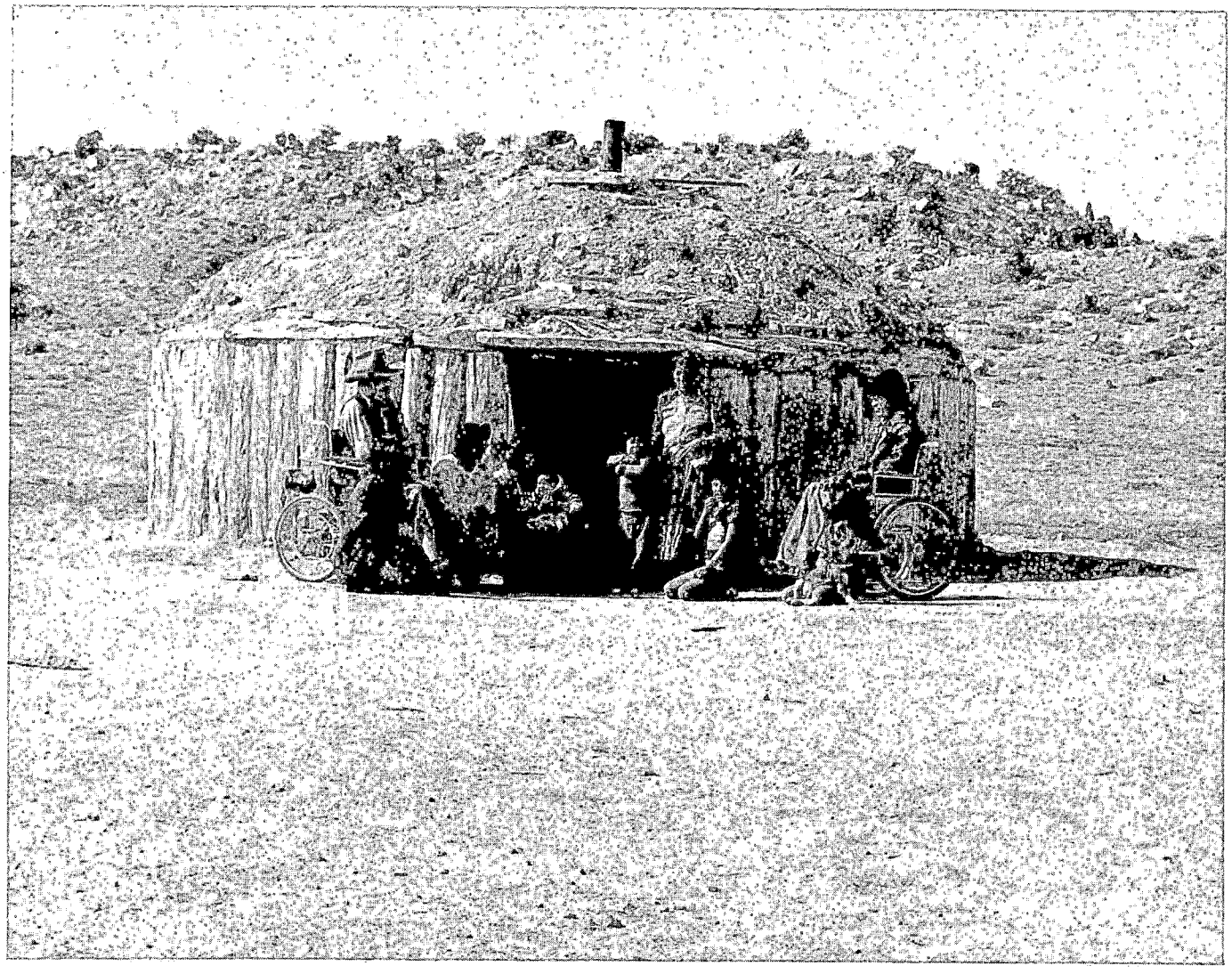

The hogan is a traditional Navajo home, often used for sacred ceremonies. Bob Mora (in wheelchair left) and his wife, Janis (to his left), visit with friends as Susie holds their son, Andrew.

TOCSIN Rehabilitation Program in the Navajo Nation

by Bob Mora de H

The setting is among the four sacred mountains of the Navajo: Sisnaajiní (Mt. Blanca), sacred mountain of the East; Tsoodzil (Mt. Taylor), sacred mountain of the South; Doko'ooslííd (San Francisco Peaks), sacred mountain of the West; and Dibéntsaa (Mt. Hesperus), sacred mountain of the North. This is the sacred land of the "Dineh," the Navajo people. It has once again become a Nation. The Navajo Nation Reservation is the largest in the United States, expanding into Arizona, Utah, New Mexico, and touching Colorado. Between 140,000 to 150,000 Navajos life on this 25,000-square-mile arid but geographically beautiful varied land.

PERSONAL ADJUSTMENTS. After seven years of married life in sunny California, Janis and I moved here during the snowy winter of January, 1977. Culturally, it was quite a change in our life but one that was to offer me a very meaningful experience as director of the TOCSIN rehabilitation program (Toyei Opportunity Center and Sheltered Industries) for the Navajo Nation.

There were many adjustments to make with regard to working and living conditions in this isolated rural environment. We live in a compound called "Toyei." There are no stores, gas stations, movies, or other public facilities. Our compound consists of acres of Mother Earth that

Andrew Robert Mora, one of the latest additions to the reservation, is learning the Navajo culture and language.

nests our rehabilitation center and Toyei Boarding School facilities. One relief is the Steamboat Trading Post, which offers some limited supplies, and is only approximately six miles away.

Before moving here I went out and bought every part I could think of that I would need for my electric and manual wheelchairs. It is a good thing I did because I have used them. I did the same for my small camper and even added a small electric refrigerator. It sure comes in handy! That is what we use to bring home our perishable food items when we go for groceries, which takes 1-½ hours one way in travel time alone.

I have always had a strong attachment for rural life. Having lived in such environments, I had to learn to take care of myself because of a quadriplegic condition, which was due to congenital nerve damage. I have trained myself not to depend too much on doctors, nurses, or health agencies for my care, for these services were not always readily available to me in the past.

The situation is not too different here. My greatest concern over this was in June 1977 when my wife delivered our son, Andrew Robert. At about 12:30 A.M., I drove her to the hospital on the reservation where we were planning to have our baby. After examining her, they decided that they did not want to handle the case because prematurity was suspected. We finally made it to another hospital by 6:00 A.M. and by 8:00 A.M., on June 8, a screaming healthy boy was born!

TOCSIN REHABILITATION PROGRAM. TOCSIN is located in picturesque high desert and surrounded by sage brush, green cedar trees, wild grass, colorful wild flowers, rock canyons, and sunsets that put the sky afire. The establishment of this unique program was made possible through grants by the Arizona DES-Bureau of Vocational Rehabilitation (BVR), Bureau of Indian Affairs (BIA), Comprehensive Employment Training Act (CETA), with matching funds put up by the Navajo Tribe.

The program is aimed at admitting disabled Navajo residents for rehabilitation services in order to increase/improve their ability to function more independently on the reservation. The services offered consist of vocational training, work adjustment, prevocational training, social employment, recreation therapy, and training in residential living. The vocational training areas consist of silversmithing, wool carding/spinning, audio-visual/small appliance repair, janitorial/maintenance, woodworking, food service, and clerical. Rehabilitation services, which are Anglo in origin, must be delivered in a way that does not conflict with the Navajo way.

THE NAVAJO WAY. The Navajo way, according to Carl Gorman, director of Native Healing Sciences for the Navajo Health Authority, is "keeping one's feet (and thoughts) on the Corn Pollen Path of Beauty — the only way to preserve harmony. Harmony is health, beauty, and happiness." To the Navajo, religious concerns deal with life on earth, not necessarily life after death.

The Navajo are well integrated culturally. The traditional beliefs and teachings have a great influence on the lives of the people. A large percentage of Navajos live in much the same manner as their forefathers. Many speak only the Navajo language. A striking characteristic of the Navajo is their adaptability. They have historically and currently taken the best from other cultures, while retaining the traditional elements of their own.

TREATING THE WHOLE PERSON. The emphasis in the native healing practices is in treating the whole person in an effort to bring harmony with Nature. Referrals to diagnosticians (hand tremblers and star gazers) and Medicine Men are common.

Diagnosis and treatment in the Navajo traditional manner are not free. Ceremonies last for several days and the family of the "patient" is not only required to pay a fee (monetary or in-kind) and purchase required ceremonial materials, but must feed all the family and friends who participate. This kind of "treatment" received is a valid cost in the rehabilitation process.

HARMONY AND INTERDEPENDENCE. In order to understand the Navajo's perception of himself in relation to the Universe, certain abstract criteria must be explored: man must live in harmony with all living and non-living things; man shares basic patterns of life with all things; each living being is unique and has a special purpose in the total scheme; the purpose of life is to develop that uniqueness; all natural and living things have beauty and symbolize the characteristics of man; man exists by a willingness to take risks, by acting with a purpose; man must accept the

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"Bob" Mora de H., a quad since birth, is of Spanish decent. He received his Master of Science degree from San Francisco University. He has worked in California at a variety of rehabilitation facilities and was a member of a developmental disabilities board. He is director of the Toyei Opportunity Center and Sheltered Industries (TOCSIN), a rehabilitation program in the Navajo Nation Reservation, and president of the Dineh Chapter Council for Exceptional Children. Address: Toyei Oportunity Center, The Navajo Nation, Ganada, Arizona 86505.

Local Navajo trainees carding and spinning recently sheared wool.

right of each man's vision; man originated with and from Mother Earth; the Sun is the Father, source of all life.

There is further emphasis in Navajo teachings on the interdependence of man with all living and non-living things, that change is always occuring, and that man, in order to survive, must also change.

THE GOAL IS LIVELIHOOD. Though the concept of rehabilitation is new to the Navajo, the "rehabilitation" aspect has always been viewed as part of the process of being in harmony with Nature.

The end goal of the *vocational* rehabilitation process is to rehabilitate a disabled person to the point where he is placed on a job, thus becoming a contributing member of society. This is partially based on the "Protestant work ethic." In the Navajo view, there is no moral compulsion to "work for work's sake." There is no institutionalizing of work as in the dominant society. One does what must be done to survive or to insure his "livelihood."

Neither do traditional Navajos place an emphasis on the acquisition of wealth. In fact, this is discouraged. Since "livelihood" is emphasized over a "work ethic," the end goal of the rehabilitation process might be to assist the disabled person to find a purpose and meaning in his life. This may mean gainful employment in business, government, or industry, or it may mean assisting him to function better in his home environment as a contributing member in the family economic unit.

The Navajo people care for the disabled with a great amount of compassion and empathy. There is always the hope that the disabled will "get well;" whereas, the dominant society is hoping the person will be "better."

PROBLEMS AND CHALLENGES. The problems and challenges facing the Navajo appear infinite and the Navajo advance with caution "lest in the quest for change their treasured values vanish as the wind wipes footprints from the sand." Unemployment is at 60% and the symptoms that go with it are expressed in poverty, sickness, and malnutrition. The infant death rate is about twice the United States average; 50 to 60% of the homes have no running water; only one-fourth of all the roads are paved. The fertility of the soil for commercial crops is poor.

Added to this, the young Navajo, whether disabled or not, must find his way between two sets of standards. He is in a tug of war between those standards of his tribal elders and those of the "belagaana" (whites). His history consists of life spans of broken treaties, exploitation, and neglect. Yet he must still continue to cope with prejudice and unemployment.

Many manage to adjust with their belief that the world holds a balance of good and evil. There are also those that are overwhelmed by a sense of aimlessness and alienation. For some of the fortunate ones, TOCSIN will help them to help themselves get back on the "Corn Pollen Path of Beauty" and to restore "Harmony."

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Navajo Division of Education — Navajo Vocational Program, Director: Jud Cunningham; Associate Director: Caleb Roanhorse.

Instructor Phil Peterson (left) teaching trainee Richard Brown, a paraplegic, how to produce traditional Navajo jewelry.

Short-Changed by Your State Vocational Rehabilitation Agency

by Jack Martin

I was asked by a congressman what I thought was needed by the disabled in the way of federal action. He was thinking in terms of new legislation. I suggested to him that first we should enforce the existing federal legislation.

As an example, I pointed out the discrepancy between the federal intent in the Rehabilitation Act of 1973, as described in the regulations, and what was actually getting to the recipients through the State vocational rehabilitation establishments.

Are you aware that 80% of the money paid by your State agency for rehabilitation services comes from federal tax dollars?

To be eligible for these federal tax dollars, the State agency must provide certain minimum services. The services provided by the federal regulations are the kinds of solutions we are looking to new legislation to solve.

There exists a fixed number of federal dollars available to the States. If they use those federal dollars to satisfy their obligations to their less severely disabled residents, those dollars are not available to the primary targets of the Rehabilitation Act of 1973 — the most severely disabled.

The Rehabilitation Act of 1973, among other things, provided emphasis for the most severely disabled:

1361.31 (b) In establishing the order of selection for services, the State plan shall provide for selecting the most severely handicapped individuals for the provision of vocational rehabilitation services prior to any other handicapped individuals who have applied for such services.

The federal regulations state the basic eligibility requirements:

*1361.33 (b) The State plan shall provide that eligibility shall be based **only** upon:*

(1) The presence of a physical or mental disability which for the individual constitutes or results in a substantial handicap to employment; and

*(2) A reasonable expectation that vocational rehabilitation services may **benefit** the individual in terms of employability.*

Jack Martin (C5-6 quad) organized the Disabled Students Association of the University of Washington, Disabled in Action of Washington, and the Northwest Paralyzed Veterans. He was a member of the board of the American Coalition of Citizens with Disabilities and started the Washington Coalition of Citizens with Disabilities. He is now a law student at Washington University in St. Louis. Address: Towne House, Apt 22-F, 4400 Lindell Boulevard, St. Louis, Missouri 63108.

The federal regulations define employability in terms of vocational rehabilitation services that are likely to *enable an individual to enter or return to employment consistent with his capabilities and abilities.* This means that if you have the ability and the capability, you are entitled to assistance in graduate school, law school, etc — contrary to the practice of most State vocational rehabilitation agencies which limit academic support to undergraduate degrees.

The federal regulations prohibit any residence requirement and require no upper or lower age limit. All that is necessary is the presence of your body in the State.

If you meet these basic eligibility requirements, then the State must provide you with a thorough diagnostic study:

1361.35 (a) The State plan shall provide that, as appropriate in each case, there will be a thorough diagnostic study which will determine the nature and scope of services needed by the individual, and which will consist of a comprehensive evaluation of pertinent medical, psychological, vocational, educational, and other related factors which bear on the individual's handicap to employment and rehabilitation needs.

The following services are required to be available to eligible individuals by these federal regulations:

1361.40 (a) (1) Evaluation of rehabilitation potential, including diagnostic and related services incidental to the determination of eligibility for, and the nature and scope of services to be provided.

(2) Counseling and guidance, including personal adjustment counseling, to maintain a counseling relationship throughout a handicapped individual's program of services; and referral necessary to help handicapped individuals secure needed services from other agencies when such services are not available under the Act;

(3) Physical and mental restoration services

1361.1 (r) those services which are necessary to correct or substantially modify within a reasonable period of time a physical or mental condition which is stable or slowly progressive, and includes:

(1) Medical or corrective surgical treatment;

(2) Diagnosis and treatment for mental or emotional disorders by a physician skilled in the diagnosis and treatment of such disorders or by a psychologist licensed or certified in accordance with State laws and regulations;

(3) Dentistry;

(4) Nursing services;

(5) Necessary hospitalization (either inpatient or

outpatient care) in connection with surgery or treatment and clinic services;

(6) Convalescent or nursing home care;

(7) Drugs and supplies;

(8) Prosthetic, orthotic or other assistive devices essential to obtaining or retaining employment;

(9) Eyeglasses and visual services;

(10) Podiatry;

(11) Physical therapy;

(12) Occupational therapy;

(13) Speech or hearing therapy;

(14) Psychological services;

(15) Medical or medically related social work services;

(16) Treatment of either acute or chronic medical complications and emergencies which are associated with or arise out of the provision of physical and mental restoration services; or are inherent in the condition under treatment;

(17) Special services for the treatment of individuals suffering from end-stage renal disease, including transplantation, dialysis, artificial kidneys, and supplies; and

(18) Other medical or medically related rehabilitation services. (The provision that the condition is stable or slowly progressive does not apply when physical and mental restoration services are provided under an extended evaluation of rehabilitation potential.)

(4) Vocational and other training services, including personal and vocational adjustment, books, tools and other training materials;

(5) Maintenance;

(6) Transportation;

(7) Services to members of a handicapped individual's family when such services are necessary to the adjustment or rehabilitation of the handicapped individual;

(8) Interpreter services for the deaf;

(9) Reader services, rehabilitation teaching services, and orientation and mobility services for the blind;

(10) Telecommunications, sensory and other technological aids and devices;

(11) Recruitment and training services to provide new employment opportunities in the fields of rehabilitation, health, welfare, public safety, law enforcement and other appropriate public service employment;

(12) Placement in suitable employment;

(13) Post-employment services, necessary to assist handicapped individuals to maintain suitable employment;

(14) Occupational licenses, tools, equipment, initial stocks (including livestock) and supplies; and

(15) Other goods and services which can reasonably be expected to benefit a handicapped individual in terms of employability.

These are the services that should be available. The question of to whom they are available has already been answered by the priority of 1361.31 (b) which states that *the order of selection of services shall provide for selecting the most severely handicapped individuals first.*

Are these services available to you? Your State Agency must develop with you an individualized written rehabilitation program. Each program must provide long-range employment goals and intermediate rehabilitation objectives that are established **by you** with your counselor. **Your views** concerning these goals and objectives must be included. You must also be informed of your rights and the means by which you may express your dissatisfactions.

According to these federal regulations: *1361.45 (a) (1) There is no Federal requirement that the financial need of a handicapped individual be considered in the provision of any vocational rehabilitation service. (2) If the State elects to consider the financial need . . . the State agency shall establish in writing and maintain policies . . . The policies so established shall be reasonable and shall be applied uniformly . . . (3) . . . no economic needs test will be applied as a condition for furnishing . . . (i) evaluation of rehabilitation potential . . . (ii) counseling, guidance, and referral services; and (iii) placement.*

The best way to improve services is to consult with those who are consumers of those services. Does your State agency take into consideration the views of the recipients of their services and of organizations representing the disabled of the State in matters of *general policy development and implementation?* The federal regulations **require** your agency not only to consult with the disabled community in your State, but to keep on record a *description of the methods to be used to obtain and consider such views on policy development and implementation.*

Administrative review and "fair" hearings are your agency's internal mechanism for dealing with any dissatisfaction regarding the furnishing or denial of services. According to federal regulations, every client has access to this review procedure. Unfortunately, too often, those doing the reviewing are the ones that approved the action under review. Few people are aware that they should continue the complaint process to the federal agency providing the funds. The only prospect for a really fair hearing is through a complaint filed with your regional Rehabilitation Services Administration (RSA). (For the address of your regional office, call your Federal Information Center or write to Commissioner, RSA, Office of Human Development, Switzer Building, 330 C Street, SW, Washington, DC 20201 — 202-245-8492.)

If you are interested in studying a copy of these federal regulations, contact your regional RSA office and ask for a copy of the Rules and Regulations Governing the State Vocational Program (Title 45-CFR Part 1361.)

Housing and Home Services 1977 Supplement

by Gini Laurie

In the months since my book, *Housing and Home Services for the Disabled,* was published by Harper & Row, I have received many inquiries about independent living arrangements, services, and housing projects. In our travels last summer, we visited more housing projects from California to Massachusetts. The inquiries and these visits have so intensified my convictions that I wish to reiterate some of the feelings about housing and services that I expressed in my book.

BASIC HOUSING RIGHTS. Of first importance is the right to freedom of choice to live as normal a life as possible within the community — either through one's own impetus or with the supportive services of appropriate independent living and other community programs.

SEGREGATION IS UNNORMAL. Harmonious group living is extremely difficult for even the most homogenous, with a common bond such as religious vocations. It is relatively impossible for groups with nothing in common except the dubious bonds of disability and low income.

The unnormal grouping of people in segregated special buildings creates mini institutions. Buildings by themselves cannot solve the vital problems that can be solved only by services — the problems of information, adaptations, attendants, income, employment, and transportation.

Segregated special buildings put too much emphasis on heights of toilets and kitchen counters and too little on human differences, potential, adaptability, and motivation. They inhibit normal movement from one location to another. They make it more difficult to convince the general public that people who are disabled are not different and special and that they can blend into the community if a proportion of all housing is accessible.

SPECIALIZATION IS EXPENSIVE. The build-a-building-for-the-disabled approach to housing is too costly and serves too few people. A Michigan university made a comparative study of the costs of special facilities and independent living within the community. The study estimated that for the cost of an 8-unit apartment building especially for the disabled, 80 disabled individuals could have apartments and homes adapted so that they could live independently.

HUD. In May 1977, HUD's Secretary Patricia Roberts Harris established the Office of Independent Living for the Disabled. The director of the new office reports directly to the Assistant Secretary of Housing. The director, David Williamson, is a paraplegic because of polio. By establishing the office, Secretary Harris separated housing for the disabled from housing for the elderly — a big forward step. HUD set the goal that 5% of all new public housing and Section 8 units be designed for the disabled.

We applaud Secretary Harris' policy directions that all persons shall be provided freedom of choice in housing. However, there will not be real freedom of choice in housing for the disabled until a proportion of all housing is accessible.

To achieve a proportion of accessible housing, we recommend that HUD

(1) Desegregate the 202 programs and prohibit segregated residential projects of more than 16 human beings.
(2) Actively enforce the new ANSI standards.
(3) Amend the Minimum Property Standards to include the disabled. Start immediately by outlawing the too-narrow 24" bathroom door, which is as segregating, humiliating, and frustrating as the old white/colored signs.
(4) Require that **all** Section 8 housing, new and remodeled, be accessible.
(5) Require that 5% of the units in hotels, motels, and apartments with 20 or more units be accessible and usable.
(6) Require that all accessible units be proportionately distributed throughout all types of units.
(7) Reward developers who build accessible private homes and work towards national legislation along the line of that being tried in Michigan.
(8) Require that all HUD offices are accessible.
(9) Hire at least one qualified disabled individual in each of the ten regional HUD offices.
(10) Create, without further delay, the proposed advisory committee of individuals with knowledge and experience in housing and services for the disabled.

HUD'S WHITE ELEPHANTS. David Williamson, the director of HUD's new Office of Independent Living for the Disabled, describes the old, large HUD-sponsored housing complexes as "White Elephants," and states that they will not be repeated. After visiting most of them, we agree with him. We saw boredom, apathy, pettiness, and dreariness. We learned of serious problems with alcoholism and drug addiction.

Yet, there are still large segregated projects in the planning stage around the country. Some of the present "in process" projects have been ebbing and flowing for a decade. Most of them were first dreamed up by a strong-minded disabled individual who was institutionalized.

Though times have changed and ways of independence have been accomplished, though the original dreamer may have departed this world or moved into the community, the outdated torch for large segregated projects is still carried by zealots. Representatives of any group that is planning a large, segregated project should be required to spend at least ten days in one of the existing, large segregated projects and to visit and study one of the centers for independent living, preferably the one in Berkeley. The expenses of these study visits should be funded by HUD.

INDEPENDENT LIVING PROGRAMS. Recent experiences demonstrate that the best adjustments to life in the community are made by those who have utilized the services of centers for independent living, directed and staffed largely by other disabled individuals. HEW's million-dollar comprehensive needs study recommends such centers as the most economical and efficient way to total rehabilitation.

Centers for independent living are largely financed by HEW State-federal Innovation and Expansion (I&E) vocational rehabilitation grants and HUD Community Development Block grants. They are rapidly expanding around the country. All follow the general pattern of the original model which was started in Berkeley, California, and which is detailed at length in my book. All have evolved with local variations. There are now more than a dozen centers in California and another dozen in New England, Texas, and Michigan. (A selection of addresses is included in the listings following, under "Independent Living Centers.")

The range of services is wide. They include lists of accessible houses and apartments, consultation on modifications, screening and registration of attendants, advocacy and employment counseling, teaching of the basics of living independently, such as cooking, shopping, and budgeting, transportation, wheelchair repair, SSI expertise, and — the most important — peer counseling and models.

PRIORITIES. There is growing realization that segregation causes problems for both the physically disabled and the mentally retarded. The following priorities of the American Association on Mental Deficiency (AAMD) are valuable guidelines for both groups. In the summer of 1977, AAMD sent a letter to the governors of all states asking for a moratorium on residential and service space in segregated settings of more than 16 human beings.

It also resolved that *the following priorities should be used and that each should be exhausted before the next alternative is considered:*

(1) *Support, don't supplant, the family in their natural home.*
(2) *Use individual foster parent or existing family alternative nearest the natural home, not group living.*
(3) *Lease or rent living arrangements, don't buy.*
(4) *Buy existing dwellings, don't build.*
(5) *Build typical, not specialized.*
(6) *Build special in the center of the population, not isolated.*

SERVICES AND UNIVERSAL ACCESSIBILITY. Finally, to solve the housing and services problems of young, physically disabled individuals, consider the following suggestions:

- Start with a program of supportive services.
- Don't start by planning a specialized building.
- Don't expect any program or project to be THE solution for everyone.
- Use as a model the Center for Independent Living in Berkeley and the other centers which are developing around the country — all directed by disabled individuals.
- Assist individuals to live in existing apartments with their own live-in attendants. Start by placing one or two individuals and use them as role models for further successes.
- If there is any grouping, limit it to three or four individuals, with shared attendants.
- Concentrate on influencing the design, legislation, and attitudes of the future so more and more people can live as they choose.
- Concentrate on helping the most people, with the least money, to live the most normally, with the most freedom of choice!

a new book from Harper & Row

Housing and Home Services for the Disabled

Guidelines and Experiences in Independent Living

by Gini Laurie, Editor/Publisher and Founder, "Rehabilitation Gazette," with contributions by Donna McGwinn, Book Editor, and Joseph Scott Laurie, Co-Editor. Cartoons by Robert E. Tanton, Jr., Art Editor. Preface by Isabel P. Robinault, Ph.D., Supervisor, Research Utilization Laboratory, ICD Rehabilitation and Research Center. 415 pages and index. 131 illus. 9 cartoons. $20. Published in 1977.

HARPER & ROW, Publishers, Inc., Medical Department, 2350 Virginia Avenue, Hagerstown, Maryland 21740. (Phone: 301-733-2700. Ask for Mrs. Taylor.)

Attendant Care

New York City Home Attendant Program. Program created by using Title XIX (Medicaid) and Title XX funds. Attendants provide personal care and chore services for over 20 hours per week to Medicaid-eligible. Services include shopping, cooking, cleaning, bathing, and toileting. Attendants assigned or chosen by disabled individual. Immediate family members may not be employed as Attendants. Visiting Nurse Service supervises attendants with an initial visit and a six-month assessment.

New York City Attendant Care Referral Program. New York Metropolitan Chapter of the National Paraplegia Foundation received an I&E grant to staff an office, recruit a roster, and orient prospective attendants. Office of Vocational Rehabilitation funded $63,000; NPF chapte funded 10%. The office, directed by Mr. Pat Figueroa, is located at 432 Park Avenue South, New York, NY 10016. Chapter plans to seek additional grants for programs involving housing, advocacy, and peer counseling to make independent living a possibility.

In December 1977, the State of Washington cut chore service payments from $350 to $325 per month and changed payments from a prepaid to a post-paid basis, meaning recipients must wait two months for checks.

Hennepin County (Minnesota) Attendant Care Program. Created through efforts of United Handicapped Federation. Effective July 19, 1977. Started with 50 persons who require at least 24 hours of care per week. Recipients have control of hiring, firing, training, and paying attendants at average cost of $22 per day or can have these services provided by a private vendor at an average cost of $50 per day. Funded by any one or a combination of Title XIX, Title XX, and county services. Details available from United Handicapped Federation, 1951 University Avenue, St. Paul, Minnesota 55104.

Attendant care at Karabis Apartments, 201 South Park Street, Madison, Wisconsin 53715 funded from "home care allowance" of Dane County Social Services. Maximum is $450 per month. HUD determined that attendant's income is not included in family income when determining eligibility. In essence, this means that the attendant may live there rent-free. Details from Madison Housing Authority, Management Office, P.O. Box 1785, Madison, Wisconsin 53701. Phone: 608-266-4380. (Karabis Apartments: 20 units — 2 one-bedroom $294, 16 two-bedroom $338, and 2 three-bedroom $388. Section 8. Specially designed. Located across from Madison General Hospital. Transportation available.)

Home Health Care. Report on the Regional Public Hearings of September 20-October 1, 1976. DHEW Publication No. 76-135. Department of Health, Education, and Welfare, Washington, DC 20201.

Bathrooms

English adjustable shower seat and wash bowl. Frames of nylon-coated steel bolt to the wall. Stainless steel vertical rods and locking handles for easy height adjustment. Details from John Beaumont, Dansk Pressalit UK, Wharfe View, Beamsley, Bolton Abbey, Nr. Skipton, Yorkshire, England (Seeking USA agents.)

Closomat Automatic Toilet. New and exclusive manufacturer for the U.S., Canada, and Europe is Joseph Müller Corporation, 8006 Zurich, Switzerland 7, "No hands" toilet cleanses and dries with warm water and air.

Building Codes/Standards

Illinois. *Draft-Accessibility Standards, Illustrated*. By Michael A. Jones, Research Architect for the Handicapped. Request from Capital Development Board, State Office Building, 401 South Spring Street, Springfield, Illinois 62706. 150 pages. 1977.

Illinois. *Report on Testimony Received by Capital Development Board on Draft-Accessibility Standards*. Report by Michael A. Jones, AIA, ARIBA, includes testimony following publication of the Draft-Accessibility Standards, Illustrated. Request from address above.

Massachusetts. *Rules and Regulations of the Architectural Barriers Board*. Bookstore, Room 116, State House, Boston, Massachusetts 02133. $1.70 including postage.

Texas. *Senate Bill No. 111 — Guidelines* and *An Illustrated Manual of the Article 678g*. Request from Edgar Farrera, State Building Commission, P.O. Box 12427, Austin, Texas 78711.

Maryland, Prince George's County. Bill #CB-49-1976. Available from Office of Handicapped Services, County Service Building, 5012 Rhode Island Avenue, Hyattsville, Maryland 20781. A comprehensive law that includes swimming pools, library stacks, etc.

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HUD, CD Block Grants

P.L. 95-128. *Housing and Community Development Act of 1977* was signed into law on October 12, 1977. The act requires nondiscrimination, citizen participation, surveys of housing needs of disabled, etc. Copies may be requested from your senator or representative.

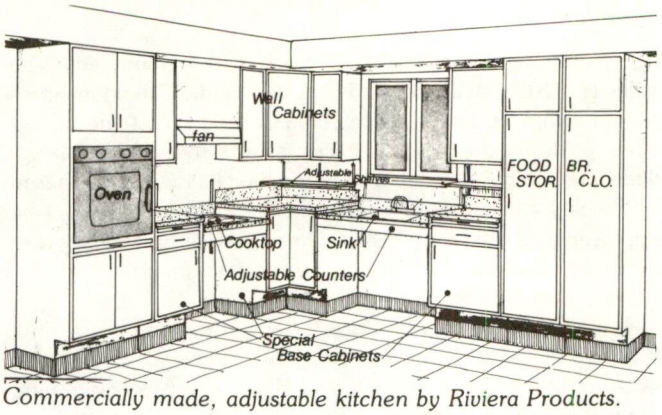
On October 25, 1977, HUD issued proposed regulations implementing the CD program. Note especially the specification that centers for the handicapped are a clearly stated public facility eligible for funding. "Center for the handicapped shall mean any single or multi-purpose facility which seeks to assist persons with physical, mental, developmental and/or emotional impairments to become more functional members of the community by providing programs or services which may include, but are not limited to, recreation, education, health care, social development, independent living, physical rehabilitation and vocational rehabilitation; but excluding any facility, the primary function of which is to provide residential care on a 24-hour basis."

Independent Living Programs

The BCIL Report. By Frederick A. Fay, Ph.D. Comprehensive and valuable source of information. Of particular interest is the finding that quads, who moved into a two-bedroom apartment with a night-time attendant in exchange for rent and services, appeared to adjust more rapidly than those who lived in cluster housing. In fact, they seemed to have their lives under control in half the time. Available from Regional Medical Rehabilitation Research and Training Center No. 7, Tufts/New England Medical Center, 185 Harrison Avenue, Boston, Massachusetts 02111.

Access to Independence, Inc., which directed the development of Karabis Apartments, 20 South Park Street, Madison, Wisconsin 53715, is preparing to go into the business of providing services county-wide to the disabled who wish to live independently.

Euline (Corki) McCorkle, director, Ann Arbor Center for Independent Living. Photo by Larry E. Wright, THE ANN ARBOR NEWS.



Commercially made, adjustable kitchen by Riviera Products.

Independent Living Centers

Addresses of a few typical centers are listed below. The original model is the Center for Independent Living, Inc., 2539 Telegraph Avenue, Berkeley, California 94704. Director: Phil Draper. There are more than two dozen throughout the country.

For addresses of other independent living projects in California, contact Dr. Louis Hunt, California Association of Rehabilitation Facilities, P.O. Box 684, Napa, California 94558 or Mr. Michael Vader, State Personnel Board, 801 Capitol Mall, Sacremento, California 95814.

Ann Arbor Center for Independent Living, 2463 East Stadium, Ann Arbor, Michigan 48104. Director: Corki McCorkle. Accessible housing and attendants rosters. Training peer counselors to work in community. Assistance with Section 8 placements. Advocacy.

Lansing Center for Independent Living, 5624 Hughes Road Lansing, Michigan 48910. Director: Leonard Sawisch. Training for peer outreach. Attendants and housing rosters. Advocacy.

Lex Frieden, Texas Institute for Rehabilitation and Research, 1333 Moursund Avenue, Houston, Texas 77025, has been involved in the creation of most of the projects in Houston.

Kitchens

Commercially-made, adjustable kitchens manufactured by Riviera Products, a division of Evans Products Company, 1034 Lafond Avenue, St. Paul, Minnesota 55104 and available from dealers throughout the country. The plans illustrated are sold by Driscoll Weber Associates, 201 Rowland Street, Springfield, Massachusetts 01107. Shelves, base cabinets, and counters are adjustable; oven has a special right- or left-hinged door and a pull-out shelf. Extra kickspace.

Mobile/Modular Homes

Mobile Homes. Alternative Housing for the Handicapped. The final report of HUD's $200,000 study by Dr. Rodger W. Decker at St. Andrews Presbyterian College. Excellent! Useful guide to new or remodeled kitchens and bathrooms in all homes and apartments. Free single copy from Deborah Greenstein, Room 8142, HUD, Washington, DC 20410.

USRY Freedom Home, P.O. Box 27463, 1415 Chamberlayne

Avenue, Richmond, Virginia 23261. Barrier-free modular homes.

R-Anell Homes, Route 2, Box 71, Maxton, North Carolina 28364. 14' x 60' barrier-free mobile homes.

Resource Guides

Access for All: An Illustrated Handbook of Barrier Free Design in Ohio. Handsome and comprehensive. Guide to interior and exterior design of public and private buildings. Includes costs vs benefits and modifications of existing buildings. $2.75 from Ohio Governor's Committee on Employment of the Handicapped, 4656 Heaton Road, Columbus, Ohio 43229.

Housing and Handicapped People. By Marie McGuire Thompson. Free from The President's Committee on Employment of the Handicapped, Washington, DC 20210. 1976. 128 pages. Clear and concise summary of programs, legislation, and problems. Author recommends that HEW, HUD, and Congress develop services as well as housing in order to provide a variety of options in community-based housing.

Housing for the Handicapped and Disabled. A Guide for Local Action. By Marie McGuire Thompson. (2nd printing) $5 from NAHRO Publications, 2600 Virginia Avenue, NW, Suite 404, Washington, DC 20037. 176 pages. 1977. Author's expertise is augmented by very competent advisory panel. Should be a required reference for any local group planning a housing project. Detailed material on Karabis apartments (Madison, Wisconsin) and other examples are especially helpful.

Services, Innovative

League of Human Dignity, 118 Sharp Building, Lincoln, Nebraska 68508, received a grant in 1977 to start a "clearing house" operation to help solve housing problems through remodelling or relocation.

Great Plains Chapter of Paralyzed Veterans of America, 518 South 86th Street, Omaha, Nebraska 68114, working on a project to utilize city-federal funds for the renovation of repossessed FHA housing for accessibility and use of Section 8.

The National Paraplegia Foundation's chapter in Rhode Island has initiated a program at a building trades school to train its students by building an accessible home. Then, through a trust fund the house is rented, with Section 8 to pay off the mortgage. More information from Mrs. R.W. Littell, 233 Maplewood Drive, East Greenwich, Rhode Island 02818.

Friends Around the World

In mid-1978, my wife and I will embark on a project to upgrade existing services to amputees and other orthopedically disabled in Mindanao. Under the auspices of the Northern Mindanao Chapter of the Philippine Band of Mercy, a non-profit organization, we will go to Cagayan de Oro City to fabricate artificial limbs and braces.

"We have been in the U.S. since 1974, preparing for this task. For seven years, I worked in Papua, New Guinea, in the field of economic development. I am a recent graduate of the Orthotic and Prosthetic Technology program at Delgado College, New Orleans. Presently, I am employed as a prosthetic technician at J.E. Hanger, Inc. in St. Louis.

"My wife, Norma Sihay, a graduate of Lourdes College, comes from Jasaan, a town of Northern Mindanao. She taught high school before coming to the U.S.

"When we go back we will work together to hire amputees, train them in the varied crafts of a prosthetist, and create jobs so that the disabled can live independently. Eventually, we will procure machinery and make our own parts. Meanwhile, we will salvage usable parts from discarded artificial limbs donated to our organization. Hundreds of artificial limbs are discarded monthly in the U.S. and most of them could yield parts of use in the Philippines where it is estimated there are 40,000 amputees.

"The World Rehabilitation Fund will help by shipping our equipment and supplies. Anyone who would like to help us can get in touch with us through my father, *Mr. R.F. Keinzle, Sr., 133 Bellerive Road, Springfield, Illinois 62704."* Ralph F. Kienzle, Jr.

"I am a 32-year-old CP (diplegia), and I would like to correspond with disabled people all over the world. I work in the Stockholm Immigrant Service as a Social Worker and Interpreter of Greek and Swedish language. I can also write English, German, and a little French." *Rosie Kihlblom, Valhallavägen 152 B, S-115 24 Stockholm, Sweden.*

"Our Association has been recently created in order to provide its members with all the information they may require in the various fields related to the rehabilitation of disabled persons. Most of our members are paralysed as a result of injury or disease of the spinal cord (paraplegics

and tetraplegics). For this reason, we are interested in getting all relevant information." *Association des Paraplegiques de Verdaich, Gaillac-Toulza, 31550 Cintegabelle, France.*

"The Australian Lobby for Physically Handicapped Adults (ALPHA) is a new and enthusiastic group of disabled people aiming to become a pressure group for the unified action toward the removal of social and architectural barriers. One of our first members, Max Rawson, gave ALPHA a copy of the *Rehabilitation Gazette*. We are very impressed and enlightened by the journal and were unaware that such a magazine was available — whilst reading from cover to cover the world became a larger community." *Miss Deanne Windmill, Secretary, A.L.P.H.A., 3 Burcote Street, North Blackburn. 3130. Victoria, Australia.*

"We are beginning to create a library for our paras and quads." *Miss Phyllis D. Aldridge, Welfare Officer, Bahamas Paraplegic Association, P.O. Box N 4252, Nassau, Bahamas.*

"I have to tell you about that strange coincidence that happened to me in April. After more than 10 years of correspondence I was able to visit my pen pal, Dr. Josef Cada, in Prague, Czechoslovakia. You might perhaps remember that he got hold of me somehow through the *Gazette* back in '67. While I was there staying with him and his wife in their Prague home he received the '76 *Gazette!* . . . This fall I'm going to formulate a research proposal for a study on renewing the inner cities (unlike in the U.S., the inner cities here are desirable residential locations) with complete accessibility in housing and employment of the handicapped population." *Adolf Ratzka, Professorsslingan 39/002, 104 05 Stockholm, Sweden.*

Hari Kisun, Secretary, the Fiji Island Paraplegic and Quadriplegic Association with two of his friends.

"In 1973 we formed the Paraplegic and Quadriplegic Association to build a hostel-workshop-gymnasium complex and to aid those who are in their villages bedridden as a result of not having proper nursing attention and modern equipment for their rehabilitation. . . . We have a total population of about 600,000; we estimate that there are about 180 paraplegics and 20 quadriplegics. . . . We have encouraged sporting activities among the physically disabled and last year our country sent five paraplegics to the Paralympics in Canada. . . . We would welcome donations for our complex. . . . As we do not have a group photo, I'm kindly sending my own with two friends. I'm a C-6 quadriplegic." *Hari Kisun, Secretary, The Paraplegic and Quadriplegic Association, P.O. Box 249, Lautoka, Fiji Islands.*

"The Vietnamese are struggling to expand their rehabilitation services. Decades of war have left Vietnam with tens of thousands of war injured in addition to the thousands of persons disabled by accident, disease, and developmental problems.

"The Vietnamese are anxious to learn more about the work that has been done in other countries. Dr. Nguyen Quy Hung, director of the rehabilitation program in Vietnam, has made a special request for up-to-date medical textbooks in all fields, but especially in rehabilitation work.

"Professionals and other medical personnel who would like to contribute books or establish contact with their counterparts in Vietnam are invited to write to Ed Cooperman, Department of Physics, California State University, Fullerton, California 92634, or Francoise d'Heurle, Spring Valley Road, Ossining, New York 10562.

"Others, including the disabled, may also wish to consider whether they have publications, plans, or drawings of equipment, or even sample devices which might be useful under the conditions existing in Vietnam." *Albert Holloway, 5580 Woodsdale Road, Hanoverton, Ohio 44423.*

"I would like to inform you that we are working towards the organization of the Brazilian version of the *Rehabilitation Gazette* and we hope to have the first number out in March/April, 1978. . . . I am very busy studying. I am trying to enter the university. . . . Here are some facts on the A.A.C.D. Rehabilitation Center and a potpourri of information by Romeo Sassaki, counselor of rehabilitation.

"A.C.C.D. — In 1944, Dr. Renato da Costa Bonfim had the opportunity to visit many rehabilitation centers in the United States. When he returned, he founded the Associação de Assistência a Criança Defeituosa (A.A.C.D.), which has received generous aid from people in São Paulo. In 1973 the present Center was inaugurated. It is the most complete in Latin America, and in 1972 it was amplified and designated by World Rehabilitation Fund to be the Regional Center to train technicians for all Latin America. Since 1972 the Profes-

sional Orientation and Employment Department has been functioning and its main objective is to offer to rehabilitated chances of jobs. Though rehabilitation work progresses slowly, the idea has taken on and similar organizations have been started in many Brazilian states.

"Study Group on Rehabilitation — Since 1973, social workers representing every rehabilitation center and facility in the Greater São Paulo area meet once a month during working hours to promote coordination of services, implement legislation, interest employers, and organize a data system of community resources.

"Industrial Rehabilitation — Mercedes Benz offers vocational rehabilitation services to its workers who become disabled through accident.

"Rehabilitation Counseling Program — Every other year a program is offered to various professionals who want to become counselors or who are seeking new knowledge and experiences.

"Barrier-free Design — The new International Airport of Rio de Janeiro was planned to be barrier-free. An architecture student in São Paulo has prepared a research paper on the elimination of barriers as partial fulfillment of the requirements for her degree." *Marisa do Nascimento Paro, Rua Joao Remalho, 145, apto 102, Perdizes-05008-São Paulo, São Paulo, Brazil.*

"The Fraternidad Cristiana de Enfermos is a movement whose objective is the integral promotion of people that are physically disabled in Mexico. It is a non-profit civil association. . . . Our bulletin, *Fraternidad*, comes out every three months with articles on the life of the movement and everything that contributes to guide disabled or their parents on rehabilitation in general." *Fr. Salvador Rivera Garcia, OCD, Fraternidad Cristiana de Enfermos, Apeninos Num. 1152, S.L. Guadalajara, Jalisco, Mexico.*

"I have to pick myself up from the floor again after the arrival of every *Gazette*, as well as my ego, for when I read how and what other disabled are doing with their lives as compared to what yours truly is achieving . . . well, to put an optimistic assessment on it, it is a good exercise in humility!" *Erich Krell, 15 Tester Drive, Blackwood, South Australia 5051, Australia.*

"I would like to have used religious Christmas cards and postage stamps for my work with children." *Father M.M. Mathew, S.J., Christ Hall, Calicut 673009, Kerala, India.*

"I would like to start a regular exchange of letters and 'disabled' magazines with someone in the U.S.A. The person should be wheelchair-bound, male, in the 50-70 age group. I was in the RAF on fighters for 20 years and I also served in the navy. At the time of becoming a tetraplegic (quadriplegic) resulting from polyneuritis, I was a teacher of geology and a Borough Councillor. I write a weekly column in our local newspaper for the disabled and I am chairman of our Sports Association for the disabled." *(Mr.) Pat Saunders, 78 Ferndale, Waterlooville, Hants PO7 7PA, England.*

"I am an inmate physical therapist at McCain Prison Unit. Before I came to McCain, I worked in Central Prison and I had two years experience in surgery, one year in X-ray, and two years in physical therapy. I have completed a G.E.D. for my high school diploma.

"My patient load at present consists of nine paraplegics, three amputees, and one hip replacement. These men are on exercise programs and general recreation. I work with them 12 to 14 hours a day and I am advised by a physical therapist who comes twice a week to evaluate the treatment programs.

"Unfortunately, we do not have enough equipment. We would welcome donations of any used equipment. Specifically, we need pulley weights, a medicine ball, a heat lamp, more stable parallel bars, and a larger whirlpool but we can make use of almost any equipment we can get.

"I'm an active member and past president of the Central Tarhill Jaycees at Central Prison. Presently, I'm the editor of the *J.C. Newsletter* and I'm a local director of the chapter of South Sandhills Jaycees. Personally, I enjoy art, weight lifting, swimming, controlled exercise programs, and working with people. I plan to continue in physical therapy after I'm paroled. If there is any way that I could work on this now it would mean a great deal to me. *James Lloyd Young, P.O. Box 58, McCain, North Carolina 28361.*

"If anyone is interested in corresponding with someone who lives in another country or in the U.S., please write to me." *Dick Dobes, 2525 North Broadway, #304, Fargo, North Dakota 58102.*

"My husband and I are both disabled from spastic paralysis at birth. Robert works for the Goodwill Industries as a cashier. I'm just a homemaker. We've been married since October, 1960. We do not have a family, just a Brittany spaniel. Robert is 48 years of age, 5'5" tall. I am 42 years of age, 4'11" tall. Our hobbies are music, games, reading, writing pen pals, and having fun. I love to cook, bake, and try recipes. I do liquid embroidery. We get so very lonesome, as we don't go out much. We would really like to make friends because mail and friends mean so much." *Jimae Trantham, Jr., 1916 East Cole Avenue, Sherman, Texas 75090.*

"Jack E. Conry, Certified Orthotist, passed away in August after a long illness. Jack had worked at the Warm Springs Foundation, Rancho Los Amigos Hospital, and the Hot Springs Rehabilitation Center. Many handicapped throughout the country with whom he had worked will remember the quiet, unassuming, and encouraging way he helped them. The special devices which he built made it possible for them to live more normal lives." *Sarah L. Gephardt, OTR, Chief, Occupational Therapist, Hot Springs Rehabilitation Center.*

"I plan to edit and publish a free monthly newsletter for the disabled in New Jersey. This idea was born after being involved for the past five years with my son who is rehabilitating from a coma and brain damage. I need disabled persons who want to become involved." *Dorothy Landvater, 77 Holly Glen Lane South, Berkeley Heights, New Jersey 07922.*

"I would like to correspond with other handicapped persons and those with multiple sclerosis. Also, I need an electric rocking bed and will pay for crating and postage. I solved my attendant care problem by sponsoring a Vietnamese family. We have had a good two years together. My hobbies are collecting catalogs and Chinese cutouts, decorating stationery, and drawing cartoons. I would love many pen pals and will answer all who write." *Anne Koontz, 58 West Highland, Sierra Madre, California 91024.*

"Thank you for your great magazine and all the obvious effort and love you have put into it. I only wish I had known about its existence 10 years ago. . . . I would like to correspond with other polios, paras, and quads. I have come a long way in the last 10 years from really rather a basket case to a fairly mobile person. I wear 3/4 body braces and a partial arm and hand brace on my left side. Although I use a chair to get around grad school, I can get around on crutches when necessary." *Jim Hentschel, P.O. Box 10534, Santa Ana, California 92711.*

"The highlight of the 1977 annual meeting of the National Paraplegia Foundation in Boston was my reunion with the great Dr. Howard A. Rusk, who had treated me when I was a child in San Antonio." Dan Palmer, Route 1, Box 116, Bridgewater, Virginia 22812.

"I've found the auto-hypnotic relaxation exercises from Dr. Emmett Miller's book, *Selective Awareness*, probably as helpful as anything for spastic muscle relaxation. (I've concentrated mostly on smooth, of course.) It is slow going and requires a lot of practice for many, but can pay off. His address: Emmett Miller, M.D. 1230 University Drive, Menlo Park, California 94025." *Frances Dickey, R.N., 3889 Middlefield Road, Palo Alto, California 94303.*

"Finally got my copy of *Housing and Home Services for the Disabled* and it's even better than I expected: the absolutely indispensable, long-needed book. . . . Practical, very clearly written, packed with common sense ideas and so much information that I didn't know. And bibliography and addresses for more details, aids, suppliers. . . . And no mawkish chin-up sentiment of the sort that cloys the pages of so many books and journals about the disabled. I don't think there's a line or word wasted in the book, and every illustration provides information, not decoration. If one word can describe the book, it's 'useful' or 'service.' With this book and the *Gazette*, you've done more than anyone else I can think of. As one who has benefited a lot, let me say 'Thanks, Gini!!" *Ronald J. Dickson, P.O. Box 46-58, Taipei 104, Taiwan (Formosa) Republic of China.*

"Sincere congratulations on this landmark volume. May all your work, effort, and interest now be translated into good living environments. I'm sure that will be your major reward." *Marie McGuire Thompson, Housing Specialist, International Center for Social Gerontology, Inc., Suite 350, 425 13th Street, NW, Washington, DC 20004.*

"It is a stupendous book. It sells for $20, but it is priceless. Government and private agencies have spent — and are still spending — millions of dollars and millions of tons of paper on housing for the disabled material of dubious value. Mrs. Laurie has compiled this unique material at no expense to anyone but herself." *C.J. Lampos, editor,* Achievement, *925 NE 122nd Street, North Miami, Florida 33101.*

"What a wonderful book you have produced. . . . It will bring help to many people and organisations all around the globe." *Miss D.J. Forward, Flat 77, Barwell Court, 50 Sydney Street, Glenside, South Australia 5065, Australia.*

Equipment/Readers' Ideas

The Rehabilitation Gazette *does not accept any advertising. The gadgets and devices presented here were gleaned by the editors from readers' letters and other sources. They are presented as ideas for the readers to pursue on their own by sending for brochures and latest prices. The* Gazette *does not specifically endorse any product nor accept responsibility for any approximate price listed.*

Wheelchair Lifts

by Joe Laurie

The Veterans Administration recognized the need for quality control of wheelchair lifts and appointed Dean D. Duncan, PhD, of New Mexico State University and Make McDermott, Jr., PhD, PE, of Texas A&M University to establish standards for testing wheelchair lifts.

After these standards have been published in the Federal Register for public comment, commercial lifts will be tested for compliance with these standards. A list of the lifts approved by the VA is scheduled to be released by the VA Prosthetics Center, 252 Seventh Avenue, New York, NY 10001, by midsummer 1978.

After a review of the proposed *VA Standard Design and Test Criteria for Safety and Quality of Automatic Wheelchair Lift Systems for Passenger Motor Vehicles (VAPC-A-7708-3)*, dated June 28, 1977, it has become quite obvious that the consumer will have much safer lifts after the final VA standards have been adopted. Then, if manufacturers do not meet the VA standards, their equipment will not be certified for use by veterans.

The proposed standards, among other details, specify that wheelchair lifts should be powered by a dual battery system, which could be charged by the vehicle's battery charging system; maximum total weights that the lift can handle are spelled out; and the design of equipment will be rigidly checked. Although the standards state that manual operation should be incorporated in case of failure of the system, no specific details are mentioned, except to state that "a back-up mode of lift operation is highly desirable."

Inspection of the various components of the lifting mechanism will be scrutinized in accordance with standards established by American National Standards Institute (ANSI), American Society for Testing and Materials (ASTM), American Welding Society (AWS), and the Society of Automotive Engineers (SAE).

So, finally, quality control is coming to an industry which has been expanding so rapidly that many of the products sold to the disabled were not as good as they should have been.

Meanwhile, the opportunity has presented itself to add to the information on wheelchair lifts which we have published in recent issues. Within the past six months we have had the pleasure of meeting two delightful couples with whom we have corresponded for many a year. Rivington and Pauline Stone, both wheelchaired by polio, came to St. Louis from New Mexico, to attend a church conference. Bob McCown, wheelchaired by polio, and Ranna, celebrated New Year's Eve with us on their way home to Alabama after spending the Christmas holidays with their families in Nebraska and South Dakota. During their visits, both expressed their concerns about the wheelchair lifts currently on the market, and both offered to share their personal experiences and expertise in the *Rehabilitation Gazette*.

We are most fortunate to have the following two articles written by professional men of vast experience. Rivington Stone has surveyed the major commercial wheelchair lifts. Bob McCown tells how they had their unique house on wheels created.

Joe Laurie, BA Amherst College '31. For twenty years a sales engineer with Barry-Wehmiller Machinery Co., he has been volunteering as co-editor and majordomo of the Rehabilitation Gazette *since retiring several years ago.*

Survey of Wheelchair Lifts

Some Considerations for the Selection of a Van Entry System for Use by the Disabled Vehicle Operator

by Rivington Stone, Prof. Eng. (Ret.)

In the last few years the "van" body style vehicle has become the basic vehicle for a rapid development in the art of transportation of the physically disabled, both as driver and as passenger.

As was to be expected, there have been many different designs of passenger lifts offered for sale. Many have worked satisfactorily, some have not. Some have been so badly designed and fabricated as to be an embarrassment to manufacturer and user alike. There has resulted a winnowing process in which the poorly designed and executed models have caused the unwary and trusting users considerable cost and frustration.

Inevitably, the number of suppliers of van lifts has been reduced to those whose products were based on sound basic engineering design; parts properly selected for the functions and loads actually imposed on the lift in use; electric motors designed for the specific purpose of long, trouble-free service and last but not least, adequate quality control of the completed lift assemblies before delivery to, and installation in the customer's vehicle.

All van entry systems of the completely automatic type depend ultimately on an electric battery. This usually is the regular vehicle battery, although some lift suppliers can provide a second battery, charged by the vehicle alternator, and isolated from the vehicle battery. An electric motor operates the door or doors; another motor drives the lift mechanism either through a hydraulic pump and cylinder(s), or through a gear reducer which is coupled to the lift by a chain or chains, flexible steel cables, belts, or directly by a mechanical screw drive.

It should be obvious that it is more important to the user that the system selected by the manufacturer be well designed and built, than the particular system details. The comparative merits of electro-mechanical versus electro-hydraulic designs are, in the end, more a matter of technical preference on the part of the supplier, based on his particular design and production facilities.

A van wheelchair lift presently costs about $2000, installed and with electric door operators. This is roughly 25% of the original cost of the van. Once installed, it must be used by the owner in the manner described by the builder. Among other things, this means that friendly passengers should not be allowed to use the lift platform as a jumping on or off platform. Extra heavy articles of furniture, etc. should only be raised on the lift when the operator is sure that the manufacturer's design load limits will not be exceeded.

While a well designed and built lift should require a minimum of service, some service is required on all lifts. If the lift user will remember his or her degree of dependence on the lift for access to the van, a more serious approach to van lift care and service will result.

In effect, the lift user is a potential prisoner of the lift system. Accidents will happen to all vehicles, lift equipped vans included. In the writer's opinion, too little consideration has been given to: (1) emergency operation of the van doors and lift from inside the vehicles by the operator and, (2) emergency entry into the van from outside (in the case of an accident which incapacitates the handicapped driver). Unless major body damage occurs to the lift entry door(s) it should *not* be necessary for outside helpers to severely damage the vehicle in order to remove the handicapped driver.

The truly independent handicapped driver should consider safe departure from a slightly damaged vehicle as just as reasonable and necessary as it is in the case of an undamaged but stalled van.

It appears to the author that the cost of a wheelchair lift to the user is unusually high considering the typical lift structure, power drive system, and associated controls.

One possible reason for this larger cost is the relatively great amount per lift system of product liability insurance. At least one potential wheelchair lift manufacturer has decided not to enter this market because they calculate that product liability insurance per unit will cost them about $800. This cost is passed on to the buyer.

If this figure quoted is anywhere nearly correct, then lift manufacturers have one of several choices. First choice is to set up their sales company with minimum assets and to go out of business if faced with a product liability suit. Second choice is to self-insure, by reserving a large portion of the sales price with which to pay for the costs of product liability suits. And the third choice is to purchase product liability insurance from an insurance company. In all cases, this insurance cost must be a part of the manufacturer's sales price.

This is not to argue that customers be denied product liability protection. Improved performance records by lift manufacturers should result in lower total system cost.

Rivington Stone, former senior staff engineer, Johns Hopkins University. Retired in 1965. He has 20 patents on auto driving controls, hydraulic components and systems, and others. Attended Princeton University; received honorary Degree of Mechanical Engineer from Stevens Institute. Member of SAE, ASME, ASTM, and other professional organizations. His avocation is mobile radio communication. He holds a first class radio telephone license. He and his wife, Pauline, reside at 1309 Bryan Circle, Carlsbad, New Mexico 88220.

Survey Results

Lift Design Survey Made For Rehabilitation Gazette by R. Stone, 9-77.

	1			2				2			3		3			4		
				(1)				(2)			a		b	c	a	b	c	
Lift Manufacturer	**a**	**b**	**c**	**a**	**b**	**c**	**d**	**a**	**b**	**c**	**1**	**2**						**Distinctive Features of Design**
1. The Braun Corp		x						x		x		x			x			
2. Collins Industries, Inc.		x							x			x			x			
3. Crow River Industries, Inc.				x								x			x			
4. Double D Industries		x			x						x							
5. Drive Master Corp		x		x							x							Platform Swings Into Van
6. Electro Van Lift, Inc.		x					x							x				Platform Swings Into Van
7. Handicaps, Inc.			x				x					x					x	
8. Helper Industries, Inc.		x		x											x			
9. Lance Enterprises, Inc.		x						x				x						
10. Para Industries, Ltd.		x						x			x				x	x		
11. Ricon Corp. Inc.		x				x						x			x			
12. R-J Chair Lift Co., Inc.		x						x				x	x		x	x		
13. Royce International, Ltd.	Van Side Doors Modified to Form Draw Bridge. Electro-Mech. Drive Using Pair of Nylon Belts																	
14. Safety Van Lift									x					x				Platform Swings Into Van.
15. Fred Scott & Sons		x			x	x		x			x	x	x					Hydraulic & Mech. Lifts Made
16. Sherry Products Co.		x								x	x				x			Dynamic Brake on Lift Motor
17. Speedy Wagon Sales Co.		x			x						x				x			

Legend:

1. a. Door Operators: Mechanical.
   b. Door Operators: Electro-Mechanical.
   c. Door Operators: Other.

2. Lift Platform
   (1) a. Electro-Mechanical, Direct Drive.
   b. Electro-Mechanical, Cable Drive.
   c. Electro-Mechanical, Chain Drive.
   d. Electro-Mechanical, Other.

2. (2) a. Electro-Hydraulic, Single Cylinder.
   b. Electro-Hydraulic, Dual Cylinder.
   c. Electro-Hydraulic, Other.

3. a. 1. Platform Fold, Electro-Mechanical, Part of Lift Sequence.
   2. Platform Fold, Electro-Mechanical, Separate Function.
   b. Platform Fold, Mechanical
   c. Platform Fold, Other.

4. a. Emergency Operation, From Inside.
   b. Emergency Operation, From Outside.

Summary of Data from Van Lift Manufacturers Questionnaire

Seventeen original manufacturers products analyzed in this survey.

1. a No manufacturer supplied mechanical door mechanisms.
1. b Thirteen manufacturers offer electro-mechanical door.
1. c One manufacturer incorporates door into structure of lift itself.
2. (1)a Three manufacturers supply direct drive electro-mechanical lift platform systems.
   (1)b Three manufacturers supply cable drive electro-mechanical lift platform systems.
   (1)c Two manufacturers supply chain electro-mechanical lift platform systems.
   (1)d Two manufacturers supply other means for electro-mechanical lift platform systems.
   (2)a Five manufacturers supply single cylinder hydraulic lift platform systems.
   (2)b Two manufacturers supply dual cylinder hydraulic lift platform systems.
   (2)c Two manufacturers supply other platform lift drive systems.
3. (A)1. Six manufacturers supply electro-mechanical drive lift-fold, part of lift sequence.
   (A)2. Eight manufacturers supply electro-mechanical drive lift-fold systems independent of platform lift function.
   (B) Two manufacturers supply mechanical platform fold as a separate function.
   (C) Two manufacturers supply other platform fold systems.
4. a Nine manufacturers supply emergency lift operation from inside vehicle.
   b Three manufacturers supply emergency lift operation from outside vehicle.

Design Your Own Vehicle

by R.B. McCown, PhD, and R. Christenson, MD.

Last year our specially modified van died and had to be replaced. Because we were living in an area without any companies specializing in modifying vans for the disabled, we felt lost. Our panic led us to try something frighteningly different — we designed our own, and paid less than a standard van costs.

We realized that expensive motor homes, which are constructed much like campers, are mounted on pickup trucks. If a camper could be connected to the cab by cutting off the back of the cab then the camper-pickup combination would become a "van." We located several companies within two hours' drive of Huntsville, Alabama, which built campers. The manager of one company was quite willing to work with us in designing and building our new camper-pickup.

We wanted a vehicle which would be driven by an able-bodied driver and would have the following features: hydraulic wheelchair lift; clear vision of the road from a wheelchair inside; width no wider than the pickup bed for easy driving in traffic; height sufficient for comfortable standing; adequate insulation and heating (preferably to Alaskan standards); integral wheelchair tie downs and floor-mounted wheelchair seat belt; steel roll bars for safety; and adequate ventilation for hot summers with no air conditioning.

After three visits to the camper company and several discarded sketches, we completed the design. A few weeks later, we delivered a three-quarter ton long-bed pickup truck to the company, along with enough steel tubing for the roll bars, and an uninstalled and unmodified Tommy Gate hydraulic lift. The bench seat in the truck was replaced with two bucket seats before delivery.

Five days later we picked up the completed van. The camper company had hired a welder to assemble the roll bars, and make the extension and the gravity-operated tilt plate for the lift. This was billed separately. Total camper cost, including roll bars, was just under $2000, excluding tailgate.

We suggest designing any vehicle with the following standards: windows centered to eyeball height of the disabled passenger; a high-capacity engine-coolant-operated heater; padded seating and seat belts for camper passengers; inside and outside lighting for night-time loading; an intercom system for easy driver-to-passenger communication. The rear door should be on the left rear end of the camper, hinged on the right, and with a hook to hold the door open. A rear window should

Bob McCown's special vehicle and Tommy Gate hydraulic lift. "We modified the lift for wheelchair use by bolting on an extension with a tilt plate to keep the wheelchair from rolling off the back end."

Bob McCown, 1954 respiratory post-polio quadriplegic, received his BA at Hastings College, Hastings, Nebraska, and his MS and PhD in physics at Stanford University. He is currently Assistant Professor of Physics at the U. of South Alabama, Mobile, Alabama. Ranna Christenson received her BS at Stanford University and her MD at the U. of Alabama. She is currently a resident in Obstetrics and Gynecology at the U. of South Alabama Medical Center, Mobile, Alabama. Their address: 5663 Vanderbilt Drive South, Mobile, Alabama 36608. Bob and Ranna were married August 4, 1973, and now have two cats.

be in the camper for the driver's use. The truck should have wide-vision externally mounted rear view mirrors on both sides, possible with curved mirrors added.

Our roll bars were welded from schedule 10 stainless steel tubing, type 304, 1½ inch diameter. We recommend the use of stainless steel only where there are welders competent in working with this tricky technique. Otherwise, consult your local welder for possible substitutions.

Advantages: custom design; may be moved to new truck; clear view through windows; rear lift usable in all parking areas; safety increased with roll bars; low cost; easy access for able-bodied assistants; smaller than many vans; less expensive maintenance and repair; and available anywhere campers are made.

Disadvantages: cannot be driven by disabled; lift must be at rear; height limits parking (ours is 9' high); less floor area than van; disabled must sit behind driver; and gas mileage poor for truck.

We gratefully acknowledge the down-home aid and assistance provided by Mr. Jimmy Stewart of Kimberly Kampers, 309 Columbia Avenue, Lawrenceburg, Tennessee, in scratching his head thoughtfully over bizarre designs and building a jeweled masterpiece despite us.

Tommy Gate hydraulic lift is made by Woodbine Manufacturing Company, Woodbine, Iowa 51579. Phone: (712) 647-2050. This commercial gate with 1000 lb. capacity is not intended for disabled use. The major moving parts are standard hydraulic seals and cables available at any airport, allowing repair almost anywhere in the world. It is extremely durable. In five years of daily use we had no problems of any kind. We modified it for wheelchair use by bolting on an extension with a tilt plate to keep the wheelchair from rolling off the back end. Tommy Gate models are available for any van, pickup, or delivery truck manufactured. The gate is rear-mounted only, folds manually, and should be ordered with a spring assist. We have seen custom-mounted electric motors which folded and unfolded the gate for a disabled driver. Our Tommy Gate was ordered direct from the factory, and, including shipping charges, installation, and the extension, the cost was under $700.

Miscellaneous Readers' Ideas

AN IMPROVED BATTERY CHARGER. "Bob used to go through about one battery charger a year, and a battery every six to nine months. With batteries about $50 and chargers about $30, that gets expensive. He finally ordered a Heathkit battery charger after running through almost every other brand available, to see if it were any different. It was called the Automatic Battery Charger, Heathkit Model GP 21, 10 Amp-12 volt. A friend assembled it (even a housewife can assemble a Heathkit, since that's who builds all their test-market products to insure that the instructions are foolproof).

"This charger works on a different principle than most. Most chargers apply a voltage continuously to the battery and continue doing so after the battery is fully charged. This wastes energy and boils the water off the battery faster, damaging the battery slightly with each charge. The Heathkit adjusts the input voltage as it charges, lowering it progressively in response to the amount of charge detected in the battery, so that by the time the battery is charged, the input voltage is zero. More or less, the charger keeps asking the battery how much charge it has in it now, every 60th of a second or so, and adjusts its filling rate to charge more slowly and gently as the charge increases, then sighs to a halt.

"Another nice feature is that if the battery is hooked up backwards, neither the battery nor charger is affected. The charger realizes a mistake has been made and politely waits for it to be corrected, doing absolutely nothing. If the charger leads touch when the charger is on, nothing happens. (It used to be like the Fourth of July with some brands. A lot of attendants were terrorized by our previous chargers.)

"All in all, the battery's life is longer, about 25% we estimate, and we have not had to replace the charger in *four years*. We also do not need to fill the battery with water as often, since the new method of charging doesn't boil it off. We believe this charger is a significant improvement over all other types to date. It charges in the same amount of time as the others — six to eight hours for a nearly depleted battery. It packs well for trips, being about 8" x 6" x 4". Information can be obtained by writing to the Heath Company, Benton Harbor, Michigan 49022; phone: (616) 983-3961. There are other models of chargers, but Bob, a physicist, says this is the best." *Ranna Christenson, MD, and Bob McCown, PhD., 5663 Vanderbilt Drive South, Mobile, Alabama 36608.*

MOUTHSTICK HOLDER. "I paint with my mouth by using a casing from a ball point pen as a holder for a paint brush or pencil. I make the casing comfortable and soft by slip-covering it with a piece of tubing. *Leo Lucas, 250 Winter Street, Hyannis, Massachusetts 02601.*

ART FOAM FOR DECUBITUS. "After 20 years of wrestling with a saddle (pressure) sore that refused to heal I tried art foam pinned to the inside of my unmentionables, where it was directly against the sore. Art foam is a thin foam craft material available in most craft or department stores. I found a double thickness comfortable and effective. In two months, the sore was healed and has not returned." *Ms. Edna Thorson, Box 255, Grand Meadow, Minnesota 55936.*

ALARM DEVICES. Very loud boat horn with push button; $10 for 15 oz. can. Refills available. Marine Products Division, Penguin Industries, Inc., P.O. Box 97, Parkes-

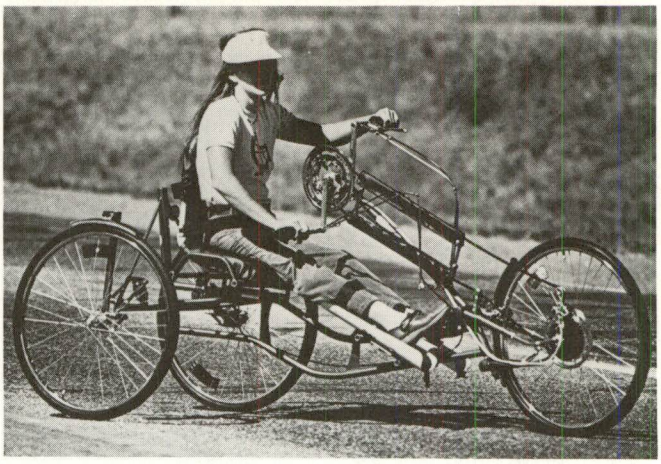
burg, Pennsylvania 19365. . . . Siren with tilt top that can be pushed or pulled; $8 for 2 oz. palm-size container. Invento Products, Long Island City, New York 11104.

INTERNATIONAL DISABLED EXPO. The Paralyzed Veterans of America sponsored a very successful exhibit in 1977. Over 150 manufacturers of products for the disabled exhibited. Nearly 10,000 professionals and disabled individuals attended the show. Put the 1978 EXPO dates on your calendar: August 10-12 at O'Hare Trade & Exhibition Center. For information, *International Disabled Expo, 32 West Randolph Street, Chicago, Illinois 60601.*

FEEDING MACHINE. Twelve preloaded food bars hold 48 spoonfuls of mouth-ready food which are borne to the mouth of the CP or SCI consumer by a motor-powered spoon. Invented by *Garland S. Sydnor, Westminster Canterbury House, 1600 Westbrook Avenue, Apt. 820, Richmond, Virginia 23227.*

SELF-OPERATING ELECTRIC HOIST. "In 1955 I married Edie Danaberg, who had been in a wheelchair from a losing bout with polio for eleven years. I am mildly disabled from cerebral palsy. . . . I designed our house for Edie's needs and I got her in and out of bed with a Porto-Lift. . . . For awhile, I was also confined to a wheelchair after I injured my spine and had to undergo surgery and it was a chore to use the lift from a wheelchair. We dreamed of an electrical ceiling lift and drew up the plans, which an engineer friend built and installed. Now it works back and forth across the ceiling of our bedroom over our hospital beds and Edie can put herself to bed by just pressing the buttons in the small control box, which rides along with the person in the lift." *Earl F. Ransom, 413 Willow Street, Scranton, Pennsylvania 18505.*

Edith Ransom can put herself to bed with her electric hoist.



Hand-operated adult tricycle has five speeds, dual braking system, rear suspension, and adjustable seat and leg rests. Available from Tri World Industries, 16015 West 5th Avenue, Golden, Colorado 80401.

Wheelchairs

INFORMATION AND STANDARDS. If you want to be hep to the wheelchair market, get a copy of *Medical Devices and Equipment for the Disabled: An Examination.* By Daniel Clearfield. $3 from Disability Rights Center, Inc., 1346 Connecticut Avenue, N.W., Suite 1124, Washington, DC 20036. For details on wheelchair standards, ask your congressman to get you a copy of the Federal Register for Tuesday, December 13, 1977, Volume 42, #239, pages 62589-62591.

TRANSPARENT WHEELCHAIR TRAY. Medical Equipment Distributors, Inc. (MED), 1215 South Harlem Avenue, Forest Park, Illinois 60130.

NATIONAL WHEELCHAIR. Electrically reclining back and elevating leg-rest. Medical Care Products, 1615 University Boulevard West, Jacksonville, Florida 32217.

DAY INSERT TRAVEL-CHAIR. Fits on seat of public transportation vehicles or theatres; made with carrying handles. YAD, Inc., Route 2, Box 78, Ladson, South Carolina 29456.

WHEELCHAIR TIE-DOWNS. The CIL tie-down system is basically a heavy-duty commercial tie-down. The belts, guaranteed to hold 5000 lbs., have a self-tightening feature so that they can be set loosely over the frame of a wheelchair and the buckle snapped shut to take up all the slack. The belts are attached to metal rails which bolt onto the floor of a van and are easily removable. Rails are available in 10-foot lengths and rise up ¼" from the floor. If only one chair is to be secured, a single 10-foot rail can be cut in two, one section for each side of the chair. Two belts should be used per chair. Center for Independent Living, Inc. (CIL), 2539 Telegraph Avenue, Berkeley, California 94704.

WORKSHOP. *Personal Licensed Vehicles for the Disabled.* A Report of a Workshop, June 14-17, 1976, held at the Skyline Inn, Washington, DC. Organized by Moss Rehabilitation Hospital. Workshop reviewed existing vehicles (vans and heavy outdoor wheelchairs), public transportation, driver education, and government plans for research and development. Disabilities considered: quadriplegia, hemiplegia, paraplegia, and amputation.

WHEELCHAIR LOADER. The EZ-1 is designed to load and unload a chair from a trunk with minimum effort. Send make and year of car for additional information. The Wheelchair Carrier Corporation, P.O. Box 9328, Phoenix, Arizona 85068.

ROMANTIC SHEEPSKINS. (1) Irish Galbally lambskin. About 36" x 24". $21 plus $9.19 by airmail or $3.95 by surface. Use American Express or Mastercharge Credit card if you wish to hurry the transaction. Ask for a catalog. Shannon Mail Order, Shannon International Airport, Ireland. (2) Merino Bolivian sheepskin. About 32" x 22". $17.95 plus $2.50 postage. Joan Cook, P.O. Box 21628, Ft. Lauderdale, Florida 33335. (3) Bean's "electrified" or medical sheepskin. About 1 square yard. $28. Postpaid. Ask for catalog. L.L. Bean, Inc., Freeport, Maine 04033.

ENGLISH BOOKLET. Another in the continuing series is titled, *Wheelchairs*, and is available for 5 pounds plus postage and packing from Equipment for the Disabled, 2 Foredown Drive, Portslade, Sussex BN4 2BB, England.

SHOCK ABSORBERS. Add comfort even on cobblestones. National Handicrafters, Inc., P.O. Box 1513, Decatur, Georgia 30031.

NEW JAPANESE ELECTRIC WHEELCHAIR. Sony Corp. and Japanese Sun Industries have designed a new chair which is manufactured by severely disabled workers. It will mount a 2-3/8" (6 cm.) curb. Information from Japanese Sun Industries, Kamegawa, Beppu City, Japan.

Australian Travel Wheelchair. Rollers on the seat base engage in the door channel and the skid base on the car floor so that the seat and occupant may be slid into the passenger's side by closing the door; leg supports are retractable. Made by Crozier Chairs Pty. Ltd., P.O. Box 188, Wangaratta, Victoria, Australia 3677.

GUIDE TO CHOOSING. *Wheelchair Selection: More Than Choosing a Chair With Wheels.* Revised edition. 1977. 58 pages. $3.75 ($1 handling charge if order less than $5). Publications, A/V Dept., Sister Kenny Institute, Chicago Avenue at 27th Street, Minneapolis, Minnesota 55407.

Books

Entitled To Love

*by Donna McGwinn**

By Wendy Greengross. Malaby Press Ltd., Aldine House, 27 Albemarle Street, London W1X 4QY, England. 1976. 1 pound, 95 p. ($4.25 including postage.) A masterpiece of sensitivity, realism, and frankness, this book should be read by everyone who is interested in human sexuality and even those who are not. It deals specifically with the sexual and emotional needs and problems of the disabled. For too long those who are disabled have been thought of as sexless or their participation in sex ridiculous and perverted. This author helps us all realize that the disabled too have sexual needs and rights.

Dr. Greengross is a general practitioner, marriage guidance counselor, and member of the committee on Sexual Problems of the Disabled. She explores with understanding all the common problems and beliefs that

*Donna died of a perforated ulcer on April 9, 1978.

can affect sexual expression. The normalcy of masturbation for both male and female; the sexual teaching role of parents with disabled children; reasons for societal attitudes that reject sex for the disabled; how parents and attendants can provide encouragement and privacy; contraceptive devices; mechanical aids such as vibrators and dildoes; experiences of fulfillment and failure where both partners are disabled, and where one is disabled and the other able-bodied; understanding and acceptance of homosexuality as a rewarding expression of caring; the use of a third person to assist disabled couples with positioning for lovemaking; some common motivations of able-bodied persons who become intimately involved with disabled persons — all discussed simply and sensitively by Dr. Greengross.

Greengross's feeling is that "Sex is in many ways as good as a tonic from the doctor for most people; it gives a feeling of well-being. . . . And this boost is particularly valuable for those with a disablement. It is not only the physical pleasure of orgasm that's so important. Equally valuable is the pleasure that comes from giving pleasure, the psychic boost of being acknowledged as a lover and feeling the satisfied response of a loved partner. This is a real basis of femininity and masculinity."

Don't Die On My Shift

By William F. Sayers. Major Books, 21335 Roscoe Boulevard, Canoga Park, California 91304. 1977. $1.95. This book had an incredible impact on me. With a few variations, it was like my own experience in the hospital after getting polio. The horror and fear of not being able to breathe, the inefficient and painful "care" given by certain staff members, the surroundings of severe illness and its resulting depression, despair, desertion, and frustration, the pain, worry, and loneliness, but also the caring, loyalty, and love of those who make our lives worth the effort are all there.

Sayers' transformation from able-bodied to severely disabled by polio happened when he was twenty years old and a husband of only three months. He becomes totally paralyzed and dependent on respirators. After a few visits, his wife comes no more and eventually files for divorce. His elderly parents continue to visit regularly and bring him the only food he will eat. They are unable to care for him at home, and so he remains in the hospital for sixteen years. During the later years of his hospitalization, Sayers' parents die within months of each other.

The fact that Sayers made me vividly relive the hospital days I'd rather forget is a tribute to his writing skill. The execution of his writing and his liberation from the hospital are tributes to the devoted love of the woman who becomes his second wife. Theirs is a super love story that demonstrates again how love can overcome most obstacles.

Sayers is a succinct writer who captures in a few words some abstracts we have all felt. On the departure of a friend from his life: "This was not an open, vindictive renunciation of friendship, but a pulling back, a self-preservation tactic of the healthy when confronted by the abnormal." His characters come to life and every reader is bound to recognize a couple of the personality types usually found in hospitals. Typed by mouthstick, this book has succeeded in its author's attempt to "speak up for all the others suffering in places like this."

My Second Twenty Years

By Richard P. Brickner. Basic Books, Inc., 10 East 53rd Street, New York, NY 10019. 1976. $7.95. Our physical form with its abilities and limitations determines the direction, style, and tempo of our life enough to guarantee that any bodily change means correlative psychological and emotional change. So drastic was the change in Richard Brickner's life after an automobile accident that he felt as though he were starting life all over again. He wrote this autobiography when he was forty and had experienced twenty years of life in each form, able-bodied and disabled. Much of it concerns his sexual relationships and his maturation as a professional editor and writer.

Brickner may have derived his expertise at analyzing human behavior from his parents, who are both psychiatrists. His bittersweet portrayal of them endeared them to this reader. Typical of his observation and style is this excerpt: "I am judged, far more than I live, in terms of incapacity. Because of my obvious unusualness, strangers, acquaintances, friends when anxious, transpose what is ordinary for me, easy for me, into difficulty, achievement. One of the ways I am minimized is to be commended for nothing." Readers who are disabled will find many private parts of themselves in Brickner's second twenty years.

Starting Over

By Ernest A. Hirsch. Christopher Publishing House, 53 Billings Road, North Quincy, Massachusetts 02171. 1977. $6.95. Dr. Hirsch is a psychologist who at age 32 discovers he has multiple sclerosis. After twenty years of experiencing the ebb and flow of the disease, he writes of the changes in his body, feelings, and thoughts. One can feel with Hirsch and know the man and what it is like for him to have MS. He enlightens the reader about the disease and reveals some beliefs connected with it to be myths. One is that functions lost can never be regained, and another that absence of sexual expression causes major personality changes.

Dynamics of his relationships with professional associates, friends, helpers, and his mother are well understood and described. The evolvement of his feelings in reaction to those of others can be true for all readers who are disabled. " . . . while helplessness and dependency may have undermined self-esteem at the beginning of my illness, it seems to do so much less nowadays . . . dignity can be maintained because it depends on my frame of mind, rather than on an external happening or situation. So long as I'm certain of my own worth, there's little that can be done to me which will spoil the feeling of value in

which I hold myself."

Hirsch even touches on those paradoxes that baffle us all, such as the difficulty of accepting passivity and at the same time maintaining autonomy and the lessening along with the increase of the sense of life urgency. It is an excellent book for those given to human analysis.

Toward Intimacy

Family Planning and Sexuality Concerns of Physically Disabled Women. By Planned Parenthood of Snohomish County, Task Force on Concerns of Physically Disabled Women. Second printing: Human Sciences Press, 72 Fifth Avenue, New York, NY 10011. April 1978. A simple, clearly written booklet on the sexual relating of women who are disabled. Positioning and contraceptives with regard to specific disabilities are discussed and sketched. With the same consideration for different types of disability, a chart includes information on sexual expression problems and abilities and reproductive functioning. The text is interspersed with anonymous quotes from some of the 50 disabled women who were interviewed. One's self-relationship is also explored. The study concludes:

"Sexuality is an integral part of living. It involves the total person in a loving, giving, and receiving relationship. The expression of love can involve touching, and not necessarily sex. There are ways of expressing sex without having physical agility. I would emphasize sex as a part of the self-concept, but not the only or most important aspect."

Within Reach

Providing Family Planning Services to Physically Disabled Women. By Planned Parenthood of Snohomish County, Task Force on Concerns of Physically Disabled Women. Second Printing: Human Sciences Press, 72 Fifth Avenue, New York, NY 10011. April 1978. Addressed mainly to health service providers, this booklet explains the needs and experiences of disabled women so that better service, architecturally, physically, and attitudinally, can be given. Includes the same chart mentioned in *Toward Intimacy* as well as descriptions of the nervous and musculoskeletal systems and the disabilities that occur most frequently among women of childbearing age.

Potpourri

by Gini Laurie

Advocacy

Handbook of Advocacy Strategies. The booklet summarizes specific advocacy projects that were undertaken in six different states. $1 from: The National Easter Seal Society for Crippled Children and Adults, 2023 West Odgen Avenue, Chicago, Illinois 60612.

Eastern Missouri Citizens Advocacy Office, sponsored by the Knights of Columbus, is one of 144 Citizens Advocacy offices in 10 states across the country. Trained volunteers are matched on a one-to-one basis with developmentally disabled individuals. The two individuals continue the relationship in the community as they wish. Contact: Katherine Merritt, 4331 Lindell Boulevard, St. Louis, Missouri 63108.

Art

A hand-controlled potter's wheel, with an adjustable height for the wheelchaired is available from Soldner Pottery Equipment, Inc., 316 South Mills Avenue, Claremont, California 91711.

Barriers, Architectural

The new executive director of the Architectural and Transportation Barriers Compliance Board is Robert M. Johnson. He succeeded James F. Jeffers, a paraplegic, who became the director of the Illinois State Vocational Rehabilitation Service. The address of A&TBCB is Washington, DC 20201.

Be an access watchdog! File a complaint if you see a violation! Most federal buildings or federally funded facilities must at least meet the federal minimum standards for accessibility and usability. This means they must have audible and visual warning signals to aid blind and deaf people. There must be ramps, wide restroom doorways, and lower switches for those in wheelchairs.

It is simple to file a complaint. Just give your name and address (it will not be disclosed without your consent), the location, a summary of the problem, name and address of person responsible for the facility, and the federal agency involved. Send to A&TBCB, Washington, DC 20201.

Building Without Barriers For The Disabled. By Sarah P. Harkness and James N. Groom, Jr. The American Institute of Architects, 1735 New York Avenue, NW, Washington, DC 20006. A treasure of a publication! A definitive guide for architects and builders. 80 pages. Illustrated. $10.95.

Tax deduction for costs of removing architectural barriers. The Tax Reform Act of 1976 permits deductions of up to $25,000 per year beginning after December 31, 1976 and before January 1, 1980. The deductions cover barriers in

any facility or public transportation vehicle owned or leased for use in a trade or business. More information from the Legislation and Regulations Division, Office of the Chief Counsel, Internal Revenue Service, 1111 Constitution Avenue, NW, Washington, DC 20224.

Business at the Yankee Silversmith Inn at Wallingford, Connecticut, has boomed since the proprietor built a ramp, made the restroom facilities accessible, and printed the five-page menu in Braille.

Access California Project was initiated in February 1978 with a $474,960 federal grant by the Community Services Administration to the Department of Rehabilitation and the State Office of Economic Opportunity. Six Community Action Programs will be set up to remove barriers in local communities. The project's office number in Sacramento is 916-322-1095.

"Tooling Up For Accessibility" seminars will focus on government regulations requiring accessibility and will be directed to architects, rehabilitation personnel, and school administrators. Two-day programs will be held in June and July, 1978, in Atlanta, GA, Kansas City, MO, Cambridge, MA, and Oakland, CA. $75 registration. Coordinating the seminars is Rita McGaughey, Coordinator of Education and Training, National Easter Seal Society for Crippled Children and Adults, 2023 West Ogden Avenue, Chicago, Illinois 60612.

Barriers, Attitudinal

Institute on Attitudinal, Legal, and Leisure Barriers, George Washington University, 1828 L Street, NW, Suite 704, Washington, DC 20036. The following publications are scheduled for 1978: *Employment Rights Handbook; Attitudes Towards Transportation for the Disabled; Selected Bibliography on Attitudes and Disability* (covering literature from 1975 through 1977); *Bibliography on Sexuality and Disability* (literature 1975 through 1977).

Blind

Reading Machines for the Blind. Blind People in the Teaching Profession. Library Services to the Blind and Physically Handicapped. Architectural Barriers. Closed Circuit Television Devices for the Visually Handicapped. Added Entries, Summer 1977. All of these bibliographies, articles, and reports are part of the superb services available free from Reference Section, Division for the Blind and Physically Handicapped, Library of Congress, Washington, DC 20542.

International Guide to Aids and Appliances for the Blind and Visually Impaired Persons. 255 pages. $3 from American Foundation for the Blind, 15 West 16th Street, New York, NY 10011.

Cooking with Betty Crocker Mixes is available in Braille from the Communication Center, State Services for the Blind, 1775 University Avenue, St. Paul, Minnesota 55104. $1.70.

1978 Braille Catholic calendar free from Xavier Society for the Blind, 154 East 23rd Street, New York, NY 10010. Ask about other free services in Braille, large print, and tape.

Easy 'n Thrifty Recipes for 2. Free pamphlet of rice recipes is available in Braille as well as regular print. Write Rice Council of America, P.O. Box 22802, Houston, Texas 77027. Specify whether the booklet is for a blind or a visually handicapped person.

Clothing

Physically Handicapped. Aids to self help in homemaking, grooming & clothing. Request from: Extension Service, U.S. Department of Agriculture, North Carolina State University at Raleigh, State University Station, Raleigh, North Carolina 27607.

Clothing for the Handicapped. Fashion Adaptations for Adults and Children. 40-page booklet provides patterns, including some adapted from McCall's and Vogue, and hints on fittings and alterations. Illustrated. $2.40. (There is a $1 charge on orders of less than $5.) Order from: Publications A/V Dept. #280, Sister Kenny Institute, Chicago Avenue at 27th Street, Minneapolis, Minnesota 55407.

Coalitions, National

American Coalition of Citizens with Disabilities, Room 817, 1346 Connecticut Avenue, NW, Washington, DC 20036. Executive Director: Frank G. Bowe, PhD.

The ACCD, created and directed by people who are disabled, is an organization of 60 national, state, and local member organizations, representing virtually all categories of disability. The ACCD has assumed a major role in promoting equal opportunity and civil rights for citizens with disabilities.

ACCD's annual Delegate Assembly was held in Washington, DC, April 30 to May 2. All individuals and organizations concerned with the needs of citizens with disabilities were invited to attend.

Consumer Information

The following publications are available without charge from Consumer Information Center, Pueblo, Colorado 81009: *Consumer Information,* a catalog of federal publications relating to diet, health, housing, travel, children, medicine, and drugs; *Information para el Consumidor* is a similar catalog in Spanish; *Mixing Medicines — Have a Care; On Reading Prescriptions.* Both of these latter pamphlets were prepared by the Food and Drug Administration. *Directory of Federal Consumer Offices.*

Consumer Survival Kit booklets are tied into the Public Broadcasting Service Network. Request a list of the booklets from Consumer Survival Kit, P.O. Box 1975, Owings Mills, Maryland 21117.

Deaf

Deaf Evaluation and Adjustment Feasibility: Guidelines for the Vocational Evaluation of Deaf Clients. $5.50 + $1 handling from National Association for the Deaf, Publications Department, 814 Thayer Avenue, Silver Springs, Maryland 20910.

The God of the Deaf Adolescent. By Rev. Anthony Russo. The study is based on four years of observation by the author of the conception of God by deaf adolescents of all denominations. 278 pages. Paulist Press, 400 Sette Drive, Paramus, New Jersey 07652. $6.95.

Our Way, a publication for Jewish deaf is available without charge by writing to Our Way, National Conference of Synagogue Youth, 116 East 27th Street, New York, NY 10016. Please specify whether you are an adult or a student. Each issue includes laws, customs, and

other items of Jewish interest.

Disabilities, Miscellaneous

Voluntary Health Agencies Working to Combat Neurological and Communicative Disorders. A 16-page booklet free from Public Health Service, Department of Health, Education, and Welfare, Bethesda, Maryland 20014.

The Commission for the Control of Epilepsy and Its Consequences has completed its four volume *National Plan and Report,* which contains over 400 recommendations. Data: 1% or 2 million Americans have active epilepsy; of these, 77,000 live in institutions and an additional estimated 68,000 are severely disabled. Unemployment of people with epilepsy is twice the national rate.

Education

The National Science Teachers Association has planned a conference in April 1978 on science education for students of normal intelligence in K-12, with visual, auditory, or orthopedic disabilities. Details from Dr. John Akey, Conference Director, National Science Teachers Association, 1742 Connecticut Avenue, NW, Washington, DC 20009.

Free University Network (FUN) coordinates nationwide programs, publishes a newsletter, issues a directory of free universities and learning exchanges, and sponsors regional and national conferences. $6 for directory and newsletter. Write Free U Network, University for Man, 1221 Thurston, Manhattan, Kansas 66502.

The Learning Exchange. A manual on how to start an educational network in a city. $6 (including postage) from: The Learning Exchange, Box 920, Evanston, Illinois 60204.

Employment

According to columnist Sylvia Porter, *"For every $1,000 our nation invests in rehabilitation of the disabled, our economy gets back $9,000."*

Future guidance counselor? Before choosing a university check out these books: *Counselor Education Directory* by J. Hollis and R. Wantz. $13.45 from Accelerated Development, Inc., 2515 West Jackson, Muncie, Indiana 47305; and two published by Houghton Mifflin Co.: *Careers in Counseling and Guidance* by B. Shertzer and S. Stone and *Vocational Guidance and Human Development* edited by E.L. Herr.

Occupational Outlook Handbook 1976-77 Edition Vocational guidance information. Handbook produced every two years by the Bureau of Labor Statistics. 781 pages. $7. Order #123H from Superintendent of Documents, U.S. Government Printing Office, Washington, DC 20402.

Employment: Help Wanted

Television checkers wanted. If you enjoy watching TV, regularly watch a good deal, and would like to do TV checking, send your name, address, and phone number, TV stations received, and video or audio tape recording owned or available to Robert A. Damers, Lynch Transcription Service, 86 Terry Road, Smithtown, Long Island, New York 11787. He will contact you when there is a requirement in your city. For straight monitoring, he pays a minimum of $3 per hour program.

TV and radio monitors wanted. ASCAP (The American Society of Composers, Authors & Publishers) is screening applications for part-time temporary monitoring assignments, which may include the logging and identification of music on radio, TV, and in other entertainment media. Application forms available from Louis Braille Foundation, 215 Park Avenue, South, New York, NY 10003.

Salesperson wanted. D.R. Cunningham would like to contact other disabled people who would like to sell travel certificates or advertising novelties and specialities. Write African Trading Corp. of Wisconsin, Main Street, Box 294, Camp Douglas, Wisconsin 54618.

ROHO, P.O. Box 658, Belleville, Illinois, has openings for sales representatives around the country who are disabled and who would like to sell ROHO balloon cushions.

Films

A Family of Friends. A documentary film that looks into the everyday lives of mentally retarded young adults living in a group home. 16mm, color/sound. 25 minutes. Rental: $30. Sale: $240. Richfield Production Services, Inc., 8006 Takoma Avenue, Silver Spring, Maryland 20910.

General

T-Shirt, emblazoned with "DO IT IN A WHEELCHAIR," available in all sizes and in blue, yellow, or orange. $4.50 including mailing. Mile High Marauders, 525 Meadowlark Drive, Lakewood, Colorado 80226.

A Guide To Seeking Funds From CETA: A Booklet to Assist Individuals and Organizations to Learn How to Apply for CETA Monies. This 24-page booklet, published in 1977, tells how to find out who controls CETA funds in your area, and how to apply. $1.30 from Public Documents Distribution Center, Department Z, Pueblo, Colorado 81009. Make check payable to Superintendent of Documents and request #1072.

To avoid the possibility of incompatible prescription & non-prescription drugs and foods, several pharmacists have compiled a glossary indicating the possible effects of mixing them. $3.45 (including postage) from: Drug Awareness, P.O. Box 28649, St. Louis, Missouri 63141.

Handling the Handicapped. A guide to the lifting and movement of disabled people. Illustrated professional methods of transfer. 144 pages. £1.95 from: Woodhead-Faulkner Publishers, Ltd., 7 Rose Crescent, Cambridge CB2 3LL, England. $6.05 from Springer Publishing Co., Inc., 200 Park Avenue, South, New York, NY 10003.

Disabled Americans: A History. The November-December 1976/January 1977 issue of *Performance* was devoted to this delightfully informative review of history. Free from The President's Committee on Employment of the Handicapped, Washington, DC 20210.

HEW

Secretary Joseph A. Califano, Jr.: "I am asking everyone who has encountered a rule that has perverse effects, a confusing form, an unfair requirement to write me at Operation Common Sense, HEW, Box 536, Washington, DC 20044, and tell me what should be changed."

Secretary Califano announced significant changes in HEW in the Spring of 1977. For details, request *Fact Sheet on HEW Reorganization* from Office of the Secretary, DHEW, 200 Independence Avenue, SW, Washington, DC 20201.

Programs generally related to disability and rehabilitation were placed in a newly formed Administration for Handicapped Individuals (AHI). The programs within AHI are: Rehabilitation Services Administration, Developmental Disabilities Office, Architectural and Transportation Barriers Compliance Board, President's Committee on Mental Retardation, Office on Handicapped Individuals, and the White House Conference on Handicapped Individuals. Named as Commissioner of AHI was Robert R. Humphreys, who had been Special Counsel to the U.S. Senate Committee on Human Resources and involved in drafting the 1973 Rehabilitation Act and the Randolph-Sheppard Act Amendments. Mr. Humphreys will direct the nearly $1 billion State-Federal Vocational Rehabilitation program which services about 1.2 million disabled a year.

Effective February 12, 1978, Eunice Fiorito, director of the New York City Mayor's Office on the Handicapped and President of the American Coalition of Citizens with Disabilities, was named a Special Assistant to Commissioner Humphreys. Because of possible conflict of interests, Eunice resigned from the presidency of the ACCD immediately upon her appointment to AHI.

Assistant Secretary Arabella Martinez heads The Office for Human Development Services (formerly Office for Human Development). According to Ms. Martinez, "Human Development Services are intended to complement income assistance and health insurance programs by supporting independence and self-sufficiency of individuals and by strengthening families and communities."

Information Services/Sources

Some telephone companies are now adding a charge for directory assistance. If you cannot use a directory because of physical or visual problems, you may be exempted from the charge by contacting your local telephone business office and arranging for exemption.

Toll-Free Digest. A directory of over 14,000 telephone listings. Most are hotels, motels, or airline companies, but some would be of special interest: M.S. Society 1-800-243-6000. Public and Consumer Information 1-800-424-9312. People Transient (long distance car pool) 1-800-547-0833. Action (Peace Corps, VISTA, Foster Grandparents) 1-800-424-8580. If you want to find out whether an agency or company has a toll-free number, call 1-800-555-1212. The directory, in paperback, costs $2.25 from Toll-Free Digest Co., Inc., Box 800, Claverack, New York 12513.

For specific information on federal programs, call the Federal Information Center which is listed in the phone books of 77 cities.

Mea culpa! Mrs. Donna Rae Cintora, Librarian of the National Spinal Cord Injury Data Research Center at the Good Samaritan Hospital in Phoenix, informs us that the 1976 *Gazette* goofed in listing the Congressional Research Service for the publication, *Key Facts on the Handicapped,* by E.R. Klebe. If anyone locates another source, please advise.

Rehabilitation International in Germany publishes excellent listings of its latest acquisitions. Request from Rehabilitation International, Information Service, c/o Stiftung Rehabilitation, 69 Heidelberg 1, P.O. Box 101 409, Federal Republic of Germany.

Accent on Living Buyer's Guide lists the names and addresses of the manufacturers of products for the disabled as well as related publications. The 70-page booklet is available for $10 from Accent Special Publications, Box 700, Bloomington, Illinois 61701.

Compliance with Section 503 relating to affirmative action in employment: Mainstream, Inc., a non-profit organization, operates a hotline service which acts as a bridge — taking telephone questions on Section 503 and referring them to experts at the Department of Labor. The number is: (202) 833-1139.

Parent Information Centers are funded by HEW's Bureau of Education for the Handicapped. The five coalitions across the country provide information and referral to parents, individuals, and groups concerned. The coalitions, all associated with Closer Look, the National Information Center, are: (1) Coordinating Council for Handicapped Children, 407 South Dearborn, Room 1070, Chicago, Illinois 60605. (2) Federation for Children with Special Needs, Inc., 120 Boylston Street, Suite 338, Boston, Massachusetts 02116. (3) New Hampshire Coalition for Handicapped Citizens, Inc., Box 1255 Concord, New Hampshire 03301. (4) Southwestern Ohio Coalition for Handicapped Children, 3024 Burnet Avenue, Cincinnati, Ohio 45219. (5) Task Force on Education for Handicapped Children, 1005 East LaSalle Street, South Bend, Indiana 46617.

Closer Look, National Information Center for the Handicapped, P.O. Box 1492, Washington, DC 20013. As great a discovery as its box number (#1492). Information on education rights, organizations, publications, local resources, and disabilities.

International

G.L.A.D. Directory of Clubs. Guide to facilities for disabled people in 700 clubs and organizations. 64 pence, including postage and packing. Order from Greater London Association for the Disabled, 1 Thorpe Close, London W10 5XL, England.

The Disabled Person in the Community Who cares? Symposium papers, presented on May 25, 1977, by the Greater London Association for the Disabled, 1 Thorpe Close, London W10 5XL, England. 50 pence.

1979: 6th Pan-Pacific Conference on Rehabilitation, Seoul, Republic of Korea, May/June. Information from Rehabilitation International, 122 East 23rd Street, New York, NY 10010.

1980: Rehabilitation International's 14th World Congress. In June in Winnipeg, Manitoba, Canada. Information from Canadian Rehabilitation Council for the Disabled, Suite 2110, One Yonge Street, Toronto, Ontario M5E 1EB, Canada.

1981: International Year for Disabled Persons. The aims, declared by the UN General Assembly, are to help disabled people adjust to society; promote efforts to provide assistance, care, training, guidance, and work; encourage the study of access to buildings and transportation; educate the public about the rights of disabled people; and ensure social integration.

Social Barriers to the Integration of Disabled Persons into Community Life. 33-page report of an Expert Group Meeting in Geneva, 28 June to 5 July 1976. Published in 1977 by United Nations, New York, NY 10017. Price: $3.

The Royal Association for Disability and Rehabilitation, 25 Mortimer Street, London W1N 8AB, England, is the new organization created through merging the British Council for the Rehabilitation of the Disabled and the Central Council for the Disabled.

Legislation

Federal Tax Law passed in September 1976, includes a section "Barriers to the Handicapped" which provides a deduction of up to $25,000 a year to businesses incurring expenses for removal of architectural and transportation barriers to the handicapped and elderly, including the deaf and the blind.

Next step: states will follow with legislation similar to California's which was signed into law on September 28, 1977. This bill allows taxpayers to deduct on state income tax returns up to $25,000 in the year of contraction, of the cost of repairing or remodeling homes, buildings, or vehicles which facilitate use by physically handicapped individuals.

A Summary of Selected Legislation Relating to the Handicapped, 1975-1976. Published in 1977, this 42-page booklet summarizes legislation enacted by the 94th Congress. 70 cents from Public Document Distribution Center, Department Z, Pueblo, Colorado 81009. Make check to Superintendent of Documents and request #49Z.

Library Services

The standards for the library services to the blind and physically handicapped are in the process of being reviewed by a committee chaired by Katherine Prescott, who pioneered service in Ohio. She would like to have suggestions from the physically disabled users. Contact your Regional Librarian or write to Miss Prescott at the Health and Rehabilitative Library Division, American Library Association, 50 East Huron Street, Chicago, Illinois 60611.

Mental Retardation

Parenting Handicapped Children: Earliest Experiences. 22-minute slide/sound module, $85; user's manual, $1; descriptive paper, 50 cents. Materials Division, Rehabilitation Research and Training Center in Mental Retardation, 2nd floor, Clinical Services Building, University of Oregon, Eugene, Oregon 97403.

The President's Committee on Mental Retardation has a limited supply of the following publications, which will be sent without charge, either singly or in small quantities: *Mental Retardation: Century of Decision; Hello World!; Silent Minority; A Friend in Washington;* and *The Goal is Freedom.*

Inventory of Rehabilitation Programs for Mentally Retarded Adults. 600-page curriculum guide. Write Portland Rehabilitation Center, 3829 S.E. 74th Avenue, Portland, Oregon 97206. $25.95.

In December 1977, in Philadelphia, U.S. District Judge Raymond Broderick ruled, in a 72-page decision, that it is discriminatory to segregate retarded persons from the rest of the population by placing them in institutions.

New Periodicals

Voluntary Action Leadership. A former free publication, this useful quarterly is now $8 per year from National Center for Voluntary Action, 1214 16th Street, NW, Washington, DC 20036.

"I plan to edit and publish a free monthly newsletter for the physically handicapped in New Jersey. For the past five years I have been involved with my son who was in a car accident. His recovery from a coma and brain damage appears in my book, *David.* I need physically handicapped persons to become involved. Write Dorothy Landvater, 77 Holly Glen Lane South, Berkeley Heights, New Jersey 07922.

Communication Outlook. Quarterly newsletter focusing on the application of new aids and techniques relating to severe communication disabilities from CP, stroke, or brain injury. The newsletter is published by a group of centers and edited by the TRACE center at the U of Wisconsin and the ALL center at Michigan State U. $8 from: Artificial Language Laboratory, Computer Science Dept., Michigan State U., East Lansing, Michigan 48824.

Monitor, the publication of the Center for Community Change which functions as its Federal Programs Information Service. The Center assists local community development organizations in low-income urban and rural areas. $10 for six copies a year. Free to local non-profit community organizations with limited budgets. Center for Community Change, 1000 Wisconsin Avenue NW, Washington, DC 20007.

Developmental Disabilities Now. A very attractive and informative quarterly edited by Harvey Stein. $2.75 per issue, $10 per year from 5667 Westcreek Drive, Dayton, Ohio 45426.

Mainstream. 1200 15th Street, NW, Washington, DC 20005. Quarterly. Provides public information on the progress of affirmative action programs for disabled.

Rights

Legal Rights of Persons with Epilepsy. This new edition lists all the latest laws by states. Write: Suzanne Turner, Epilepsy Foundation of America, 1828 L Street, NW, Washington, DC 20036.

Untapped Resources, Inc., 60 First Avenue, New York, NY 10009, is a public-interest law firm devoted to advocacy for the disabled. It is directed by Curtis Brewer, an attorney, who has been a quad from transverse myelitis for 20 years. It provides free legal service.

The League of Women Voters of The U.S., Publication Department, 1730 M Street, NW, Washington, DC 20036 or your local League office distributes two excellent brochures for 25 cents each: *Going to Court in the Public Interest* and *The Verdict Is In: A Look at Public Interest Litigation.*

Self Defense

The League of Human Dignity, 1118 Sharp Building, Lincoln, Nebraska 58508, made arrangements with the head instructor of the Tac-Kwan-Do Karate School to accept disabled students in his regular classes.

Sex

Tut! Tut! . . . The following appeared in

the newsletter of the Quadriplegic Association of South Africa: "In the Government Gazette of July 22, 1977, it was announced that *Sexual Options for Paraplegics and Quadriplegics* has been found to be undesirable by the Directorate of Publications. This means that it is now an offence to import and/or distribute this book."

Sex & Disability. Selected Annotated Bibliography on Sexuality and Disability: 1975-1977. Compiled and annotated by Sophia Panieczko, Debra Cornelius, and Wendy Frank. Comprehensive coverage of general disabilities, arthritis, visual impairment, cardiac, CP, elderly, mental retardation, and spinal cord injury. $1.25 from R.R.R.I.A.L.L.B., George Washington U., 1828 L. Street, NW, Suite 704, Washington, DC 20036.

Sexuality and Disability. A new journal devoted to the study of sex in physical and mental illness. Editor: Ami Sha'ked, Ph.D., Purdue U School of Science. $15 per year, individuals; $35, institutions. Human Sciences Press, 72 Fifth Avenue, New York, NY 10011.

A model for sexual adjustment counseling services for the disabled is being developed on a one-year HEW grant. The project, directed by Dr. Susan M. Daniels, will write five manuals to assist with the provision of services. For information, write Sex & Disability Project, 1828 L Street, NW, Suite 704, Washington, DC 20036.

Sexuality and the Disabled: Proceedings of a Workshop, held in Ottawa, April 28-30, 1976. The 90-page publication is available from The Sex Information and Education Council of Canada, 432 Castlefield Avenue, Toronto, Ontario M5N 1L4, Canada. Price: $2.50.

Social Security

The disabled are caught in a "Catch-22" dilemma regarding social security disability payments and income from work. As an example, look at an individual in California who receives $296 monthly in disability payments, Medi-Cal, and homemaker chore services. If he takes a job, he loses these benefits. If he loses that job, he would not qualify for disability because he would now be classified as employable.

People applying for Supplemental Security Income (SSI) no longer have to include the value of their homes in their resources. Previously, it had included the value of an applicant's home over $25,000.

Sports and Recreation

Eugene Hedley, Human Resources Center, I.U. Willets Road, Albertson, New York 11507 is interested in books, articles, programs, or personal experiences about recreational boating.

1977 Recreational and Competitive Wheelchair Sports summarizes qualifications and classifications. Free from Paralyzed Veterans of America, 7315 Wisconsin Avenue, Suite 301W, Washington, DC 20014.

The 1978 National Wheelchair Marathon will be held in conjunction with the running of the 82nd Boston Marathon on April 17, 1978. Details from 1978 National Wheelchair Marathon, P.O. Box 116, Newton Upper Falls, Massachusetts 02164.

Horseback riding. If you would like to locate a center or start one, write Mr. Leonard Warner, North American Riding for the Handicapped Association, Box 100, Ashburn, Virginia 22011.

Statistics

Work Disability in the United States. Published by the Social Security Administration, this publication summarizes recent findings on the economic, socioeconomic, and medical status of disabled adults. Stock #017-070-00302-8. Cost: $1.60. Order from Superintendent of Documents, U.S. Government Printing Office, Washington, DC 20402.

Disability demographics in the U.S. Libraries, agencies, and individuals may receive continuing disability research data of regular surveys by sending a request to Publications Staff, Office of Research and Statistics, Social Security Administration, Department of HEW, 1875 Connecticut Avenue, NW, Washington, DC 20009.

Therapy, Art and Music

Moss Rehabilitation Hospital, 12th Street and Tabor Road, Philadelphia, Pennsylvania 19141, has initiated a program of therapeutic music instruction for the disabled in cooperation with the Settlement Music School.

American Journal of Art Therapy is a superb publication, a starting point for anyone in the field or considering it. Quarterly. $10 year. 6010 Broad Branch Road, Washington, DC 20015.

Music Therapy Index. Volume 1, 1976. An International Interdisciplinary Index to the Literature of the Psychology, Psychophysiology, Psychophysics, and Sociology of Music. $19.95 from National Association for Music Therapy, Inc., P.O. Box 610, Lawrence, Kansas 66044.

Transportation, Public

We Will Ride is a handsome and informative brochure that could be a model for other cities. Prepared by the United Handicapped Federation, it is available from National Center for Handicapped Transportation, 360 Wabasha, St. Paul, Minnesota 55102. Phone: 612-227-2668 or 2559.

Transportation and the Elderly & Handicapped — A Literature Capsule. This well organized 83-page publication of the U.S. Department of Transportation is an essential resource for any group planning public transportation for either elderly or handicapped. It includes summaries of existing programs and comprehensive annotated bibliographies. Available from R.V. (Bud) Giangrande, Chief, Technology Sharing Program, Transportation Systems Center, Kendall Square, Cambridge, Massachusetts 02142.

Transportation in Canada: A guide for the Disadvantaged. Published by Transport, Canada, the bilingual guide summarizes the policies of airlines, railroads, and buses in dealing with disabled passengers. It includes wheelchair transportation services in various Canadian cities. Available from member agencies of the Canadian Rehabilitation Council for the Disabled, Suite 2110, One Yonge Street, Toronto, Ontario M5E 1E8, Canada.

Transbus . . . What it Can Do For You This pamphlet was prepared by the Transbus Group, the coalition of organizations of the disabled that filed the suit which forced the Department of Trans-

portation to mandate that all new standard buses purchased with federal funds must have the Transbus specifications. If you are interested in having accessible buses on your streets as soon as possible, request the publication from The Transbus Group, 1315 Walnut Street, 16th Floor, Philadelphia, Pennsylvania 19107.

Passenger Assistance Techniques: A Training Manual for Vehicle Operators of Systems Transporting the Elderly and Handicapped. $10 from Human Resources Division, Management Services Associates, Inc., Box 3750, Austin, Texas 78764.

Access to Norway includes both land and sea travel in southern Norway. Free from Norwegian National Tourist Office, 20 Pall Mall, London SW1, England.

Access New York lists facilities in East Midtown Manhattan (between 14th and 60th Streets, Fifth Avenue to First Avenue). A monumental work by the New York Metropolitan Chapter of NPF. 81 pages. 50 cents from Publications, Institute of Rehabilitation Medicine, N.Y.U. Medical Center, 400 East 34th Street, New York, NY 10016.

The Wheelchair Traveler covers the U.S., Canada, Mexico, and Puerto Rico. The 1977 edition is $4.95 + 75 cents postage. Order from The Wheelchair Traveler, Ball Hill Road, Milford, New Hampshire 03055. An excellent guide! But use it with other guides for the current prices.

AA Guide for the Disabled. This would be a necessity for anyone planning a trip to England, Ireland, Scotland, or Wales in a wheelchair or with a guide dog. 75 pence from Publications Division, The Automobile Association, Fanum House, Basingstoke, Hampshire RG21 2EA, England.

Ready, Set, Go! Baltimore Guidebook for the Physically Disabled. Request from Maryland Information and Referral Services for the Handicapped, P.O. Box 8717, BW1, Baltimore, Maryland 21240.

Guide to Victoria for the Handicapped. Free from: Victoria Junior Chamber of Commerce, 3880 Quadra Street, Victoria, British Columbia V8X 118, Canada.

Park Motel, Lac La Hache, British Columbia VOK 110, Canada has two family-size units, with special facilities for paras or quads. A large sun deck overlooks the lake and hills, with fishing, swimming, and boating available by ramp. (About 250 miles north of Vancouver on Highway 97.)

For information about programs in the national parks, call the toll-free number of the U.S. Travel Service: 800-243-2372.

Vagabond Tours of the Deaf, 611 South State Road 7, Margate, Florida 33068. TTY 305-971-6905.

Travel Tips for the Handicapped. Consumer Guide Series, United States Travel Service, Department of Commerce, Washington DC 20230.

Britain: Information for the Disabled. British Tourist Authority, 680 Fifth Avenue, New York, NY 10019.

International Travel Programs for the Disabled. Report of a meeting of Rehabilitation International, 432 Park Avenue South, Room 705, New York City, NY 10016.

Veterans

Check with your local VA if you did not receive an increase in your pension as of January 1, 1978. New legislation gives 2.5 million veterans, widows, and orphans a 6.5% increase in their pensions. It raises the maximum pension for a veteran from $185 to $197 a month; the minimum remains $5. The legislation also is designed to ensure that no one will lose a VA pension solely because of this year's increase in social security benefits.

Monthly payments for veterans going to school under the GI Bill were increased by 6.6% as of December 1, 1977, and retroactive to October 1, 1977. The new law raised the ceiling on education loans to $2500 a year. The monthly payments of a veteran with no dependents going to school full time increased from $292 to $311; with one dependent, from $347 to $370; and with two, from $395 to $422.

White House Conference

Congress extended funding to enable the Planning and Advisory Council to complete the Implementation Plan, which is directed toward insuring action by Congress and the federal agencies concerned with the recommendations adopted at the conference in May, 1977.

The Final Report summarizes the background, topics covered, demographic analysis of voting, and an appendix of the recommendations and resolutions. $16.50 from White House Conference on Handicapped Individuals, 1832 M Street, NW, Suite 801, Washington, DC 20036.

Summaries of the major findings of the 25 areas covered at the conference are available from each State's Governor's Committee on Employment of the Handicapped.

Senator Jennings Randolph of West Virginia introduced a bill to establish a National Center for the Handicapped within the Department of HEW. In addition to serving as the central coordinating office for all services to the disabled, it would develop ways of implementing the White House Conference on Handicapped Individuals.

Eat thine heart out, Ulysses!

by Erich HG Krell

My trip as the Australian representative to the tri-annual Convention of the International Association of Mouth- and Foot-Painting Artists in Sweden turned out to be, in many ways, a disaster, but given the opportunity, I would do it again! — the trip, that is, just the trip.

I was accompanied by two old friends, Elisabeth, who participated in the "fun & games" for the whole trip, and a nursing sister who came for part of the way. First of the "highlights" was in Bombay where we discovered that one of our suitcases was missing, a fact which cheered us up tremendously. Through the good offices of Mrs. Nimbkar, who just happens to live in Bombay, I had been in touch with a Dr. Rama Rao, Director of All-India Institute of Physical Medicine and Rehabilitation, who had kindly placed the Institute's only ambulance at my disposal. There was just one snag to the whole thing, for, and not that I'm a giant but a mere 5' 10" weakling, I wasn't able to fit into the thing! However, and after the motto that "the impossible just takes a little bit longer," it was somehow accomplished to squeeze my 11½-stone frailness into the ambulance. Considering, too, that the Indian people are, on the whole, a kind of small and delicate people, I suffered a distinct touch of the "Gulliver's" and a feeling that by their efforts to get me into the ambulance they, the four of 'em, tended to rush off with varying parts of my anatomy into differing bearings of the compass.

Once safely "enthroned" above everybody else, in the back of the ambulance with my friends very close on either side to keep me upright, my angle of vision was so restricted that I have become a world-authority on Indian footpaths, ankles, and footwear. When returning to our hotel after 1-½ hours of having "broken in" the new driver for the ambulance — some driver! — and I went back onto my listening post on my mattress, I had the added bonus of a fully blown bloodblister where it hurts a quad most. The result was that my first fortnight in Berlin was spent in bed, healing off what had turned into a sore. My stay in Berlin had been arranged at the spinal unit there since 1972. However, when we arrived there after being on the air from Bombay — by then some 14 hours in all — nobody seemed to know who I was or what my questioning of a room was all about. After all, I had come only from as far as Australia, nothing to it, big deal, everybody seemed to intimate.

To put it in a nut shell, they didn't have a bed, nor did they have a room and I had only been knocking my typewriter silly over a period of FIVE years to arrange my

Erich HG Krell (C4-5 quad), artist, writer, and global wayfarer.

"first" coming! After 2-3 hours, having alienated all the staff during the first hour, a mutual agreement was reached that I would probably be a subversive influence on the other patients and, as I had also not expressed my appreciation to the apparent Hitlerian totalitarianism exhibited by some of the staff — peeved, no doubt, that a quad couldn't click his heels any longer — the concensus was (as arrived at by me) that World War III would have to be abandoned for the time being and that I had better look elsewhere for more competent — for one — and more congenial accommodations.

But instead of doing the wise thing and going into the hotel and hang the expense — one only lives once — I was idiotic enough to agree, upon the insistence of one of my sisters plus hubby, that theirs was the only suitable place in town to be domiciled for the duration of my 6-week stay: on the first floor of an apartmentblock, a two-roomed flat, no lift, and a mere 27 stairs to negotiate requiring the agility of a mule — happy days! There, intermittently, I spent the next 3-½ weeks in bed due to the developing decubitus ex-Bombay, the nastiest cold I had had for a decade and, finally, something undetermined by the medical fraternity that put me firmly back to

bed five days prior to my departure for the convention! All I remember is that I ran a sudden temperature running at 104° F, and that I didn't feel and look my radiant best.

To round off: Staying with my folks proved an absolute disaster; Bombay was terrific; the convention of our Association was an absolute "humdinger." The saga of our "good fortune" continued on our hastily arranged return journey. First, we cancelled our intended second holiday period in India on account of my delicate constitution and recklessly decided that we would fly home in one long haul. In order to do that we had to go via London — London/Bombay/Perth/Adelaide — and duly got delayed through their airtraffic controllers' strike cancelling out our Adelaide connection from Perth for us.

We finally made home base two days behind our rearranged schedule but still ahead of our previously planned return date. Seeing, however, that only the good die young, since that time in Berlin I was supposed to have suffered from a severe gall-bladder disorder, pneumonia, conked out liver, possible appendix and/or glandular fever. So, please take your choice, and, incidentally, MY next trip abroad is being taken by my doctor instead. . . .

And how about the fact that between all the abbreviated happenings above I even managed to get myself engaged to be married.

Address: Erich HG Krell, 15 Tester Drive, Blackwood, South Australia 5051, Australia.

Glaciers and Icefields: A Delight in July

by Peg Leonard

How long since you last wakened to a two-inch snowfall in mid-July?

Such an experience is not at all unusual, according to Canadians who live in the northern reaches of Alberta — the locale of the Columbia Icefields. But for my husband Ed and me, the night we spent near the toe of the great Athabasca Glacier in Jasper National Park, north of Banff and Lake Louise, was an incredible adventure, and one of many highlights enjoyed during our two weeks in Glacier Park and the Canadian Rockies.

To further heighten our 2900-mile venture, we experimented with another 'first' — that of touring by motor home, a mode of travel we had wanted to try for several years. Accompanied by our good neighbor-friend (and my part-time attendant), Marguerite Spracklen, we set forth in a leased 26-foot GMC Glenbrook — the only standard motor home we have found, to date, with a doorway wide enough to accommodate a wheelchair.

By removing the dinette furniture (the table and two facing couches), we had an area perfect for my respirators, batteries, and chargers, with a double 120-volt outlet within close reach. Nearby was the control panel and read-out dials for each of the motor home's specially built systems.

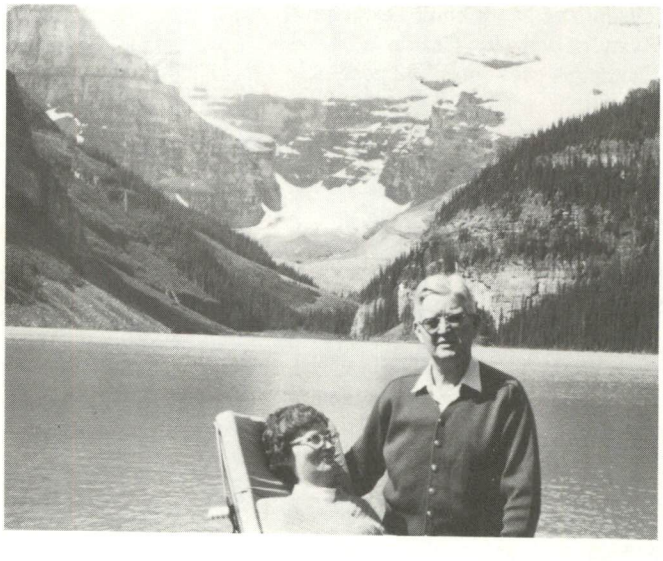
The Glenbrook's electrical systems, which we depended upon to help power my respirators, included an auxiliary generator (120-volt AC), and an auxiliary battery. When we could obtain a night reservation in a commercial campground, we used the AC line current provided us; but when such accommodations were unavailable, we used the two 12-volt batteries we had taken with us. These could be used separately, or — when tied together — they would also power my trusty 24-volt DC battery-powered unit (convertible to 12-volts AC).

As a post-polio quad of 26 years, confined to full-time use of a respirator, we were perhaps overly cautious of taking chances with equipment failure on our first 'extended' trip. Happily, we did not have a moment's anxiety with regard to power, although one unit did cease to operate while we were 1200 miles from home! Fortunately, we had stand-by units with us.

When away from home, I sleep in my 'chair bed' — an adaption made easy with my high-back, fully reclining E&J wheelchair. To facilitate personal care and dressing, we have developed a portable 'chair lift' that fits across upright supports which fit into the tubular steel 'wells' that normally hold my wheelchair's removable arm rests.

Travel by motor home is by far the most convenient way to sightsee, when one has a good deal of equipment to consider. For those who have not traveled into the spectacular glacial regions of Montana and Canada, this is a trip we heartily recommend.

Address: Peg Leonard (Mrs. E.G., Jr.), Box 681, Douglas, Wyoming 82633.



Peg and Ed Leonard on their camping trip in the Canadian Rockies.

U.S. Periodicals and Newsletters for the Disabled

Periodicals By The Disabled

ACCD Action. American Coalition of Citizens with Disabilities, 1346 Connecticut Avenue, NW, Washington, DC 20036. Monthly. $5 year membership.

Accent on Living. P.O. Box 700, Gillum Road & High Drive, Bloomington, Illinois 61701. Quarterly. $3.50 year.

Achievement. 925 N.E. 122nd Street, North Miami, Florida 33161. Quarterly. $3 year.

COPH Bulletin. 2040 Highland Avenue, Apt. 203, Birmingham, Alabama 35205. $2 year.

The Deaf American. The National Association of the Deaf, 814 Thayer Avenue, Silver Springs, Maryland 20910. Monthly. $6 year.

The Deaf Lutheran. 3743 Palm Street, St. Louis, Missouri 63107. Monthly. $3 year.

Handy-Cap Horizons, 3250 East Loretta Drive, Indianapolis, Indiana 46227. $6 year membership.

The Independent. 2539 Telegraph Avenue, Berkeley, California 94704. Quarterly occasionally. $2 year.

The Mainstream. 861 6th Avenue, Suite 610, San Diego, California 92101. Monthly. $5 year.

National Hookup. P.O. Box 878, Adelanto, California 92301. Monthly. $3 year.

New World. California Association for the Physically Handicapped, Inc., 5435 Donna, Tarzana, California 91356. Monthly. $3 year.

Paraplegia Life. National Paraplegia Foundation, 333 North Michigan Avenue, Chicago, Illinois 60601. Bimonthly. $5 membership.

Paraplegia News. 935 Coastline Drive, Seal Beach, California 90740. Monthly. $4.50 year.

Rehabilitation Gazette. 4502 Maryland Avenue, St. Louis, Missouri 63108. Yearly. $3 disabled; $5 nondisabled. (Available on tape or cassette.)

Sports 'n Spokes. 6043 N. Ninth Avenue, Phoenix, Arizona 85013. Bimonthly. $5 year.

Free Disability Group Newsletters

The AMP. National Amputation Foundation, 12-45 150th Street, Whitestone, New York 11357.

Amyotrophic Lateral Sclerosis Foundation, Inc., 2840 Adams Avenue, San Diego, California 92116.

Arthrogryposis Association, 106 Herkimer Street, North Bellmore, New York 11710.

The Braille Forum. 190 Lattimore Road, Rochester, New York 14620. Monthly. (Available in Braille, large print, cassette, open reel tape, sound sheet.)

Friedreich's Ataxia Group in America, Inc., Box 11116, Oakland, California 94611.

Little People of America, Inc., 1010 Hilltop Drive, E-1, Grapevine, Texas 76051.

Spina Bifida Association of America, 104 Festone Avenue, New Castle, Delaware 19720.

Stroke Clubs of America, 805-12th Street, Galveston, Texas 77550.

Free Periodicals for the Disabled

On Your Own. Division of Continuing Education, University of Alabama, P.O. Box 2967, University, Alabama 35486.

Amicus. National Center for Law and the Handicapped, Inc., 1235 North Eddy Street, South Bend, Indiana 46617.

Free U.S. Government Publications

Closer Look. National Information Center for the Handicapped, Box 1492, Washington, DC 20013.

Informer. Office of Human Development, Rehabilitation Services Administration, Department of Health, Education, and Welfare, Washington, DC 20201.

Programs for the Handicapped. Office for Handicapped Individuals, Room 338D, S. Portal Building, 200 Independence Avenue, SW, Washington, DC 20201.

Disabled U.S.A. (formerly *Performance*). The President's Committee on Employment of the Handicapped, Washington, DC 20201.

U.S. Government Publications

American Rehabilitation. Rehabilitation Services Administration, 330 C Street, SW, Washington, DC 20201. $11.75 year.

The Social and Rehabilitation Record. U.S. Government Printing Office, Superintendent of Documents, Washington, DC 20402. $6.40 year.

St. Louis Photos

Margaret Mary Bailor and Richard Alan Goodwin were married on November 26, 1977. Dick (C5-6 quad), vice president of the St. Louis Chapter of the National Paraplegia Foundation, is coordinator of the Work Adjustment Rehabilitation Program at Goodwill Industries.

Therapeutic Horsemanship, a nonprofit organization sponsored by Easter Seal Society of St. Louis, has been providing horseback riding lessons to people of all ages with physical and/or mental disabilities since 1975. Laura Carpenter has donated her Three Creek Farm in Weldon Springs, the horses and tack, and much of her own time. Three therapists (Susan B. McCrackin, RPT, Kathy Garrity, RPT, OTR, and Dixie Sleight, OTR) evaluate each student and assist the instructors in planning individualized lessons. Information available from Therapeutic Horsemanship, Route 1, Valley Road, Pacific, Missouri 63069.

The first wheelchair lift-equipped transit buses to be operated in regular service anywhere in the U.S. were introduced in St. Louis in August 1977. Of the 900 buses in operation, 157 were lift-equipped by December 1977. Information available from Ms. Deborah K. Phillips, Program Development — E/H Section, Bi-State Development Agency, 3869 Park Avenue, St. Louis, Missouri 63110.

In January 1978, quadriplegic Bill Davis, a resident of Harry S. Truman Restorative Center in St. Louis, enrolled in two courses by telephone with Forest Park Community College. His two professors and a counselor at the college, met with Bill to check over his remote control telephone equipment. (Left to right: Ed Helbig, PhD, Bill, Kay MacCarthy, OTR, Jim Tuscher, counselor, and Professor John J. Martin.) In 1976, Bill was injured in a sandlot football game. Benefits and drives netted nearly $50,000 which financed several months of rehabilitation at Craig Hospital, a breath-operated wheelchair, electric typewriter, television set, and remote control system. (Photo by J. Scott Laurie)

Rehabilitation Gazette
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Donation per annual copy:
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$5 from the nondisabled

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In addition to the special features listed below, all the issues contain first person accounts of the experiences of severely disabled individuals in obtaining higher education, training, or employment, reviews of books of special interest, and excerpts from readers around the world seeking pen friends.

1962. Vol. V. Experiences of quads acquiring higher education by telephone, correspondence, and attendance. Reading aids. New approaches to attendants. Voice-spondence Club. Self-aspirator.

1963. Vol. VI. Quads and their families at home, marriage, and adoption. Housing around the world. Wheelchair cushions. Australian fibre glass lung. Vacations and camping. English chair/bed.

1965. Vol. VIII. Traveling quads. Medical engineering — arm aids, foot-operated aids, multi-controls. Quad driving — foot-controlled steering, ramps, lifts, aids. Adoption. Housing. Narrowers.

1966. Vol. IX. Vocational rehabilitation. Employment experiences of quads. Wheelchairs — self-reclining, respiratory, climbing, foreign. Remote controlled typewriter. Association of Mouth and Foot Painting Artists. Housing. Reading list for quads.

1967. Vol. X. Experiences of 23 disabled college students and 35 employed quads. Citizens band radio. One-hand typing. Wheelchairs — curb-climbing, chin-controlled. Frog breathing. Portable lungs. Sex and the disabled. Alien attendants. Housing summary.

1968. Vol. XI. Tenth anniversary issue. Homemaking experiences of severely disabled individuals. Home-based businesses. Quad driving. Wheelchairs and accessories. Mouth-operated phone. Housing in Mexico and England. Rehabilitation through music. Remote controls.

1969. Vol. XII. The quad in his community. Ramps for home and car. Home care services. Housing complexities. Wheelchairs. Typing aids. Bathroom equipment. Traveling and living in Mexico. Photography.

1970. Vol. XIII. Community service projects. Independent living by quads. Mouthstick typing. Cushions. Bath lifts. Tie-downs. Hydraulic tailgates. One-armed fishing. Chess by mail. Group tours.

1972. Vol. XV. Comprehensive rehabilitation centers. Housing and home services for the disabled in the U.S. Remote controls. Ramps. Amateur radio. Art, music, and religion. Architectural barriers. Education. Employment.

1973. Vol. XVI. Social security and Medicare. Annotated bibliography of sex. Vans, lifts, and driving controls. Communications. Curb-jumping. Mouthstick controls. Family reactions to quadness. Yoga, Zen, and Sufism. Periodicals around the world relating to disability. Veterans. Housing and home services for the disabled in the U.S.

1974. Vol. XVII. Travel to Canada, Mexico, and Europe. Travel with respirators. Recreational vehicles for wheelchaired. Rehabilitation Act of 1973. Bills of rights. Coalitions. Education and employment of quads. Volunteer projects. Adjustments to spinal cord injury. Biofeedback. German breathing treatment. Charcot-Marie-Tooth syndrome. New wheelchairs. Vans and lifts. Remote controls.

1975. Vol. XVIII. Compendium of employment experiences of 101 quads. Supplementary Security Income. Multiple sclerosis. The telephone: a genie of services. IRS regulations on attendants. Quad-adapted camera. Step-vans, lifts, and ramps. New word board. Inexpensive tie-down. Bargain wheelchair narrower. ACCD. Architectural barriers milestones.

1976. Vol. XIX. Vocations. Avocations. Understanding depression — helping with grief. Teaching the blind to type. Employment experiences of quads. Housing and independent living. Tennis. Skiing. Self-help organizations. ROHO cushion. Wheelchair loader. Step Vans. Hitch-hiking through Europe in a wheelchair. GPB for high level quads.

1977. Vol. XX. Compendium of employment experiences of 25 disabled women. Rehabilitation in the Navajo Nation. Independent living programs. Wheelchair lifts for vans. Improved battery charger. Inexpensive camper-pickup with lift. Self-operating electric hoist. Your state vocational rehabilitation rights. Paraplegics in prison.

Rehabilitation Gazette/78

20th Anniversary Issue
Spinal Cord Injury Centers
Disabled in Protestant Churches
Respiration Equipment

INTERNATIONAL JOURNAL AND INFORMATION SERVICE FOR THE DISABLED

My Twenty Years in the* Gazette *Haus. *How good it is to be eager to be awake, eager to see what the day might bring and what treasures our friend, Frank the postman, might deliver to our door. And the pleasure of tackling these mail-borne problems has helped to wash away all the bitterness of that cataclysmic "early retirement" of half a score of years ago.*

My twenty years in the Gazette *Haus are actually only half that number. Though on the fringe of things, I did not really become involved until retirement. As I learned more about the magazine, and began to know more and more of its readers and contributors through our journeys to their lands, and theirs to ours, and became familiar with the inner springs of these sheets and realized the immense amount of work that Gini puts into each issue — and has been doing for more than 20 years — I know that we have come a long way. From an Ohio cat-house to a Missouri dog-house, with one dear old pussy and Beauregard Basset and Shiva Afghan, we have our umbilicus still attached to Mimi and Kybo, the Bassets, and our four-footed feline family, RU, The Duke of Zippity-Zap, Papa Chat, The Queen Mothah, and Mr. More, and the beginnings of the* Gazette *back in Chagrin Falls.*

—Joe Laurie

Congratulations to our good friends, Fred Fay and Jim Jeffers, on the well deserved awards they received in 1978! Frederick A. Fay, PhD, (C5-6 quad), a psychologist and researcher at Tufts New England Medical Center, Boston, was named one of "The Ten Outstanding Young Men of America" by the United States Jaycees. James D. Jeffers (paraplegic), director of the Illinois Division of Vocational Rehabilitation and former director of the Architectural and Transportation Barriers Compliance Board, was named Handicapped American of the Year by the President's Committee on Employment of the Handicapped.

Thanks again to Ted Smith, graphics designer, for volunteering his expertise and talent to do the layout.

And, thanks to Fred Faust, Jr. and the staff of Just Your Type, Inc. We are grateful for their patience and understanding.

Our new brochure has been edited by our neighbor, Gayla Hoffman, and designed by Phil Casper of Omnibus Studio. Thanks to both of them for volunteering their creativity and skills.

Purr! Purr! Both the reviewers and our readers have been so warm in their praise of Gini's book, *Housing and Home Services for the Disabled,* that we continue to purr as we read such descriptions as "stupendous," "useful," "priceless," "a virtual Bible." Thank you! There are details of the book in the article on housing and comments in the Friends Around The World section. If you want to read it but not buy it, ask your local public library to get a copy for you in print or as a Talking Book.

English representative. Jo Sandiford is continuing to help the *Gazette* in England. You may send payment for your copies of the *Gazette* by cheque or Postal Order to Mrs. J.D. Sandiford, 55A South Street, Havant, Hants., England. Tel. (07012 area code) Havant 75937.

Japanese translation. Dr. Masao Nagai, C5-7 quad, has the *Gazette* translated by the Red Cross Language Volunteers under his supervision. For a copy, write to him at 29, Kitamachi, Shinjuku, Tokyo 162, Japan.

On tape and records. Copies of the *Rehabilitation Gazette* on either open reel or cassette are available to any blind or physically handicapped person requesting them from Johanna Bureau for the Blind and Physically Handicapped, Inc., 22 West Madison Street, Chicago, Illinois 60602. (Phone: 312/332-6075). Also, contact your local public library or the Division for the Blind and Physically Handicapped, Library of Congress, Washington, DC 20540.

$$$ or $$$$$. May we delicately remind you that the 1977 and the 1978 *Gazettes* are separate volumes and that you should send a remittance of $3 for each copy if you are disabled, or $5 for each copy if you are not disabled.

Donations are tax-deductible if they are made payable to Rehabilitation Gazette, Inc. They are most welcome, for the *Gazette* is staffed by volunteers and entirely supported by its readers and friends.

Glossary of SCI terms. *Paraplegic* — a person whose legs and a part of whose trunk or torso are paralyzed as a result of spinal cord injury (SCI) or disease. *Quadriplegic* (more correctly, *tetraplegic*) — a person whose legs and a part of whose trunk are paralyzed and whose hands and arms are partially paralyzed. The level of injury to the spinal column is indicated by letters and numbers. For example, C5-6 means the injury occurred at the level of the fifth and sixth vertebrae of the neck, T2 at the second vertebra in the thoracic or chest area, and L3 at the third vertebra in the lumbar or lower back area. Usually, there is loss of function below the level of injury.

Plegia is the Greek word for "strike," *para* the Greek for "side," *tetra* the Greek for "referring to four," and *quadri* the Latin for "consisting of four." Thus *quadriplegia* is a mixture of Latin and Greek and *tetraplegia* is all Greek. The adjectives are paraplegic, quadriplegic, and tetraplegic. The nouns are paraplegia, quadriplegia, and tetraplegia. The abbreviated forms are "paras" and "quads."

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Rehabilitation Gazette

International Journal and Information Service for the Disabled

Volume XXI **1978**

Rehabilitation Gazette (formerly the "Toomey j Gazette") is published once a year by a volunteer staff. Its aim is to reach, to inform, and to dignify the disabled throughout the world

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Cover: *Gini Laurie, founder and volunteer editor of the* Rehabilitation Gazette. *Photo by J. Scott Laurie*

*Disabled
†Donna died of a perforated ulcer on April 9, 1978

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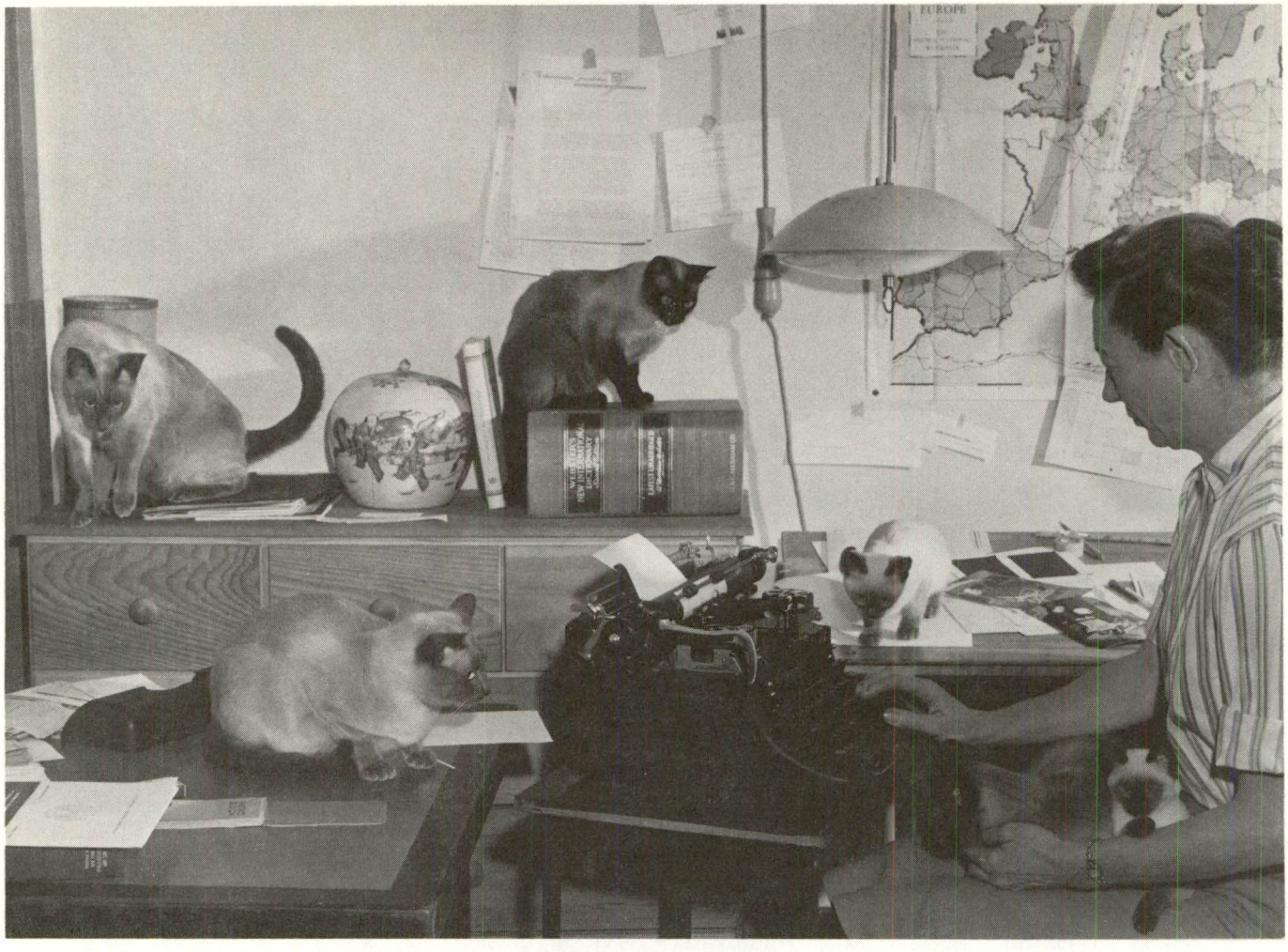


1958. "I began the Gazette with a borrowed typewriter, a dictionary, a notebook, and a volunteer staff of disabled friends."

Twenty Years In The Gazette House

by Gini Laurie

Happy 20th Birthday, *Gazette!*
This is the 20th year of the *Gazette,* the 20th year our house has been the *Gazette* House. It is a time for celebration. A time to look back and remember with long-time readers. A time to recount with new readers.

What is the *Gazette?* How has it evolved over the years? How is it financed? Who are the writers? The staff? Who makes it happen? How did it start?

The *Gazette* masthead states that it is an "International journal and information service for the disabled." It is much more than that to its readers. It is the embodiment and reflection of the imaginative, practical, down-to-earth life experiences of its severely disabled readers. For them, it is a form of group therapy by mail, an invaluable source of ideas, inventions, and adaptations that have been tried and found useful by others. For many, it is almost an exclusive club. For its nondisabled readers, it is a source of reference material and insight into the interests and needs of disabled individuals.

How did it start? Directly, the *Gazette* began in 1958 as a little newsletter in a respiratory polio center. Indirectly, it started the year before I was born, when a polio epidemic in St. Louis hit the four children in my family. Two sisters died that summer, another sister was mildly disabled, and

a brother was very severely disabled. My parents started another family immediately and I was born the next summer. From the time I was mobile, I was my brother's auxiliary arms and legs. I didn't notice how disabled he looked. I thought he was supergreat and followed him like a shadow.

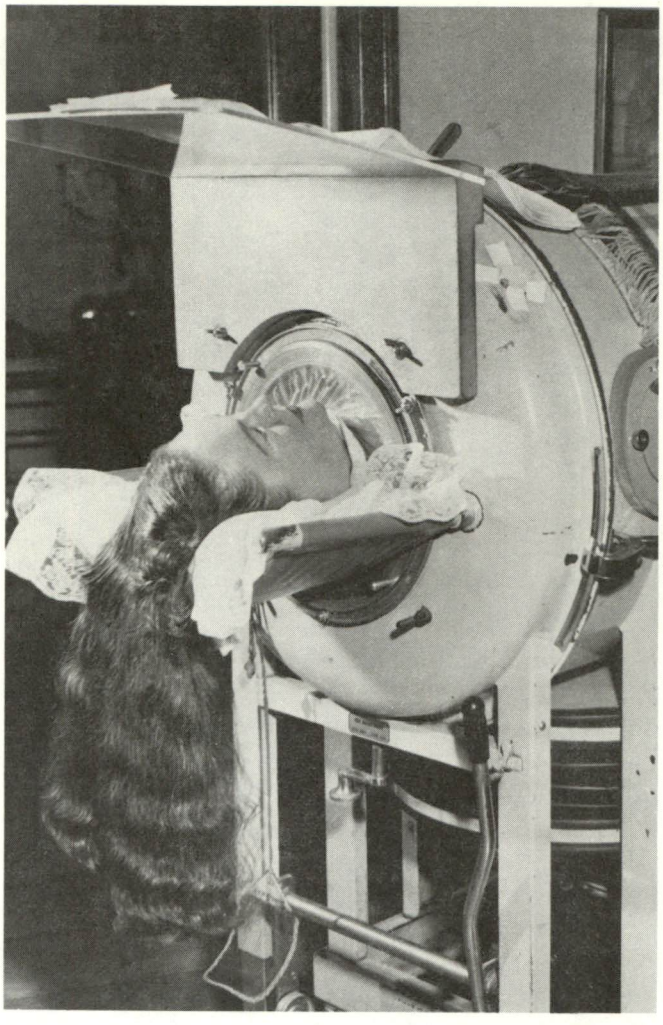
My brother died of pneumonia when he was 21 and I was 16. That experience with severe disability was never forgotten. In 1949, Joe and I moved from St. Louis to Cleveland, Ohio, for business reasons. We found an old house in the village of Chagrin Falls, a suburb east of Cleveland, and started to remodel the house, create an herb garden, and become involved in suburbia things. But these plans were slowed, for there was a ghastly polio epidemic in Cleveland that year and the newspapers were full of appeals for volunteers to help by learning to do hot packs. Naturally, I took the course, and I've never stopped volunteering with people who are disabled since.

For the next 10 years, I went once or twice a week to Cleveland City Hospital's contagious ward, the Toomey Pavilion, which became the regional respiratory polio center. I loved being with the patients. I came to know their families, their problems, and their joys. I shopped for them and ran errands. I fed, bathed, dressed, toileted, shampooed, shaved, manicured, read to, and wrote for. I did whatever needed doing and I tried to relieve the boredom and to make life as much fun as possible by giving birthday parties and decorating the wards for every holiday.

My strongest, warmest memories of my years in the Toomey Pavilion are of the close feelings of sharing and caring in the two big wards. Because of a permanent shortage of staff, the regular family visitors helped everyone and families came to know and to strengthen each other. The patients watched over each other. If someone made the major alarm sound — a "cork-popping," clicking sound (a sound that you can make by clicking your tongue against the roof of your mouth even if your trachea is unplugged and you are voiceless) — then everyone with a voice yelled, "Nurse!" I still love the sounds of the bellows of an iron lung and the pulsation of a portable respirator because I have had so many close friends attached to the swooshing and pulsing sounds.

When the patients left the hospital, they kept in touch and came to parties at our house — many became our closest friends. We ramped our house and built a small swimming pool with a hydraulic lift and heated it to a good warm temperature. Eventually, we had the annual get-togethers, the Toomey "Alumni" picnics, at our house, and the picnics grew to include not only the "old polios" but an assortment of people of all disabilities in northeastern Ohio. We had annual L.S.D. (Lick, Stick, and Dunk) parties when we readied an issue for mailing — we licked the stamps, stuck the flaps, and dunked in the pool.

By 1958, Salk and Sabin had almost eliminated polio and the wards began to empty, leaving only the few who came in for checkups, a bout of pneumonia, or to deliver

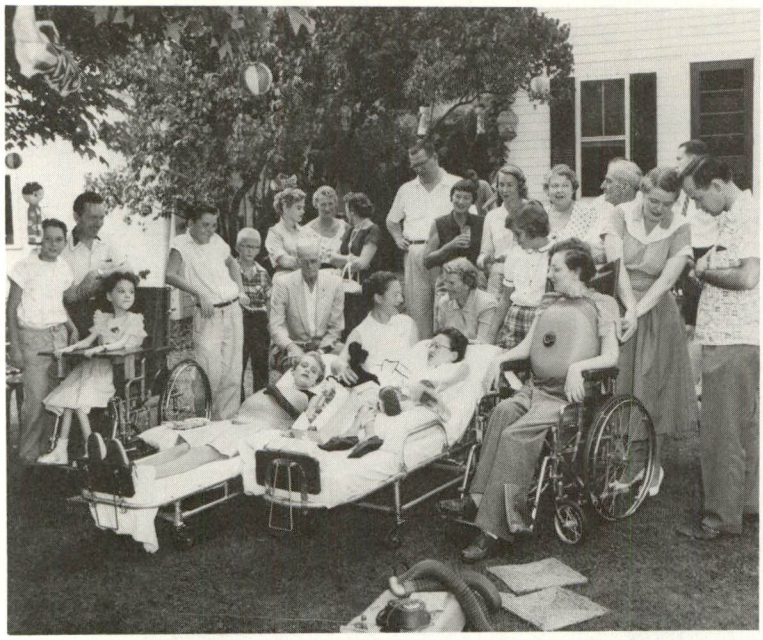


1949. "I started working as a volunteer with people in iron lungs. I've been volunteering with people who are disabled ever since."

a baby. I continued to volunteer regularly and became a peripatetic newsletter of what was going on in the lives of the "alumni." They were eager for news of each other and constantly called me or Dr. Robert Eiben, the medical director. Finally, he asked me and another volunteer, Flora Seielstad, to get in touch with the expatients and put together a little mimeographed newsletter. We created a staff of our disabled friends to report the diverse ways in which they and the other "alumni" were coping at home — with attendants, children, hobbies, home adaptations, housekeeping, families, jobs, recreation, school, and spouses — from their wheelchairs, rocking beds, chest-pieces, or iron lungs.

The first staff members were Susan Armbrecht, Ida Brinkman, Ruth Davis, Sally Russell, and Sue Williams. A few years later, they were joined by two other talented "alumni," Mickie McGraw and Donna McGwinn, then by Barbara Cory of Illinois and Bob Tanton of Alabama, then by the many other treasured people from all over the U.S. and around the world who are listed at the end of this article.

So began a little publication for the hospital staff and



1955. "When the patients left the hospital, they kept in touch and came to parties at our house — many became our closest friends."

the expatients of Toomey Pavilion. It was named the *Toomey j Gazette*, in memory of the former director, Dr. J. Toomey. It was so popular that we sent it to the 17 other respiratory polio centers in the United States. Then to the respiratory centers around the world. Then it evolved to include all types of disabilities.

The first issues were mimeographed at the hospital. When the circulation started to zoom, it had to be printed. Unfortunately, that cost money — even doing it the cheapest way, by offset, which reproduced my typing on an antique Underwood. As the circulation grew, several unique ways of raising money were discovered. I made herb vinegars to sell. We had a surplus of Siamese kittens so we exchanged them for a $25 donation to the *Gazette*. We did the same with their fathers' stud fees. I think it must be the only publication in the world that was once supported by tax-deductible cats and stud fees.

The *Gazette* was incorporated as a non-profit organization with a board of trustees that tapped a few family foundations for equipment such as typewriters and addressing machines. We stopped giving it away, except to those who could not afford it. We began to request a small donation from the disabled and a slightly larger one from the nondisabled. So we have continued. The backbone of our support comes from a few very special nondisabled friends and from many disabled individuals who have become successful in their professions or businesses or who are just extra generous. Our regular funds come from $3 donations from disabled individuals and $5 donations from libraries, hospitals, universities, rehabilitation centers, doctors, therapists, counselors, and nurses.

The secret of the *Gazette's* continuing independent existence on a shoestring is two-fold: no salaries (except occasional, part-time) and no payments for articles. Our friends — nondisabled, Toomey "alumni," and other disabled individuals — volunteer their talents as artists, graphic designers, foreign correspondents, legal counsel, newsgatherers, proofreaders, typists, and writers.

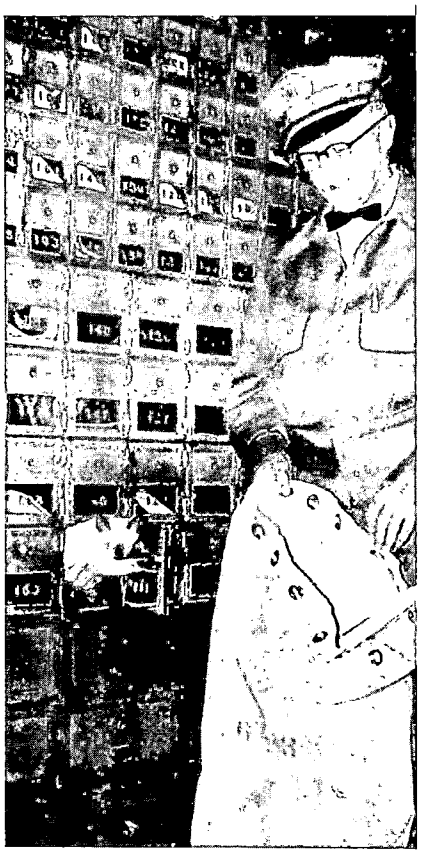
The most exciting part of the *Gazette* has been watching so many people go forward from the initial stages of disease or injury, seeing them gather their forces and cope, going back to work, or changing work, or going on to finish school, getting PhDs or MDs or MAs in engineering, psychiatry, medicine, psychology, or social work, marrying, acquiring homes and families, traveling, living it up! It has been like having a worldwide family of friends!

The twenty years of the *Gazette* mirror the history of rehabilitation. It has recorded the changes in social security. It has explained how to earn disability payments after disability and how to obtain SSI. It has reported the amendments to the Vocational Rehabilitation Acts and tracked the teething of 503 and 504. It has followed the movements of the disabled toward forming coalitions and achieving rights, both in this country and abroad.

It has been reporting developments in housing and services for the disabled since 1958 and in independent living centers since 1972. This material on housing and independent living is now compiled in my book, *Housing and Home Services for the Disabled*, which Harper & Row published in 1977.

The twenty years of the *Gazette* have been innovative. In 1960, it organized the first International Paralyzed Artists Show, then shared the names of the 70 participants with the Kenny Institute, which developed its own annual show from this nucleus. Congress was influenced to pass the Talking Book legislation to include the disabled as well as the blind because Ruby Heine, a disabled reader in Nebraska, had the idea, the *Gazette* alerted its

"During the 1960's, we had L.S.D. (Lick, Stick, and Dunk) parties in our garden to prepare an issue for mailing."



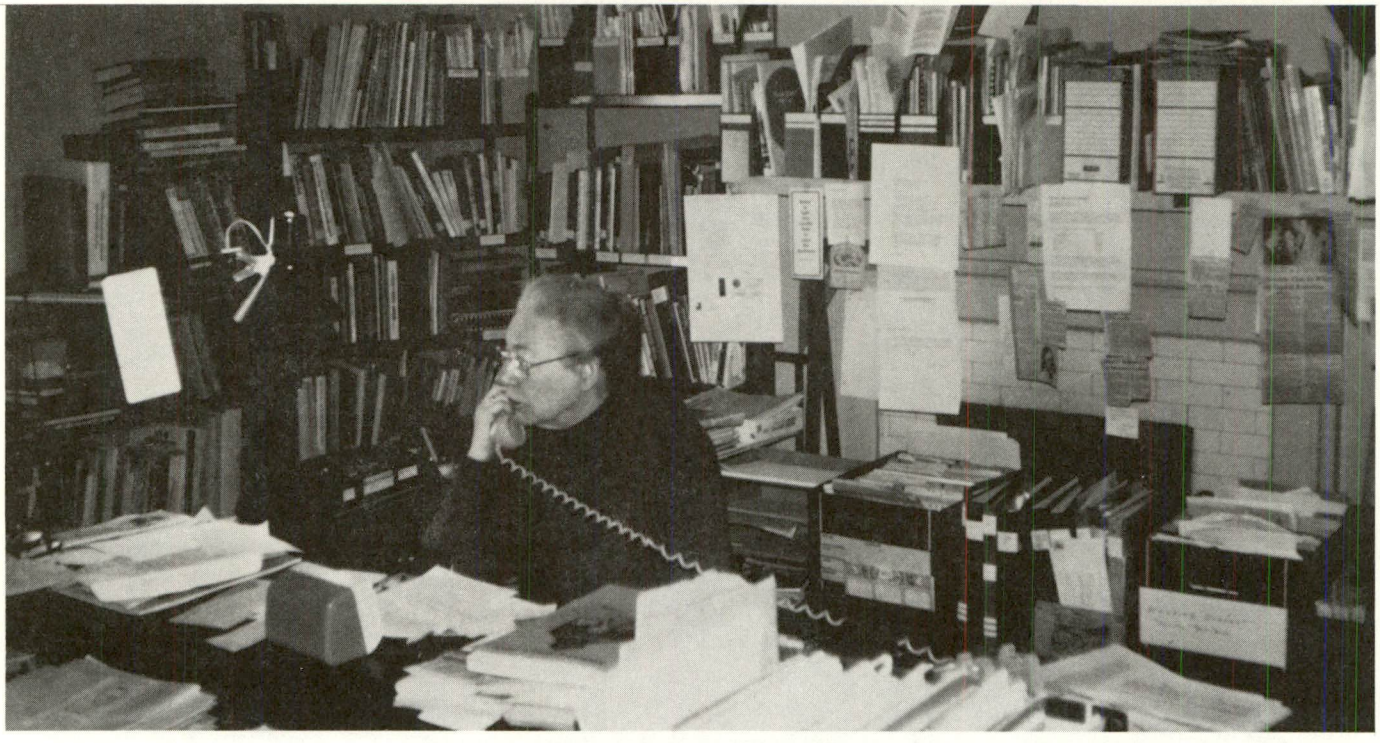
readers around the country to express their views to their congressmen, and Mrs. Cyrus S. Eaton brought the proposed bill to the attention of influential congressmen. It published one of the first articles on sex and the disabled — back in 1967, long before it became popular.

The twenty years of the *Gazette* have recorded the ingenuity and creativity of its readers in the Readers' Ideas section, which reports their unique equipment ideas. Back before "group therapy" or "role models" were bandied about, the *Gazette* readers invented their own group therapy and created their own models out of necessity. The personal life experiences and the brief

1971. "Joe retired and joined me as a volunteer. Then we left our Box 149, Chagrin Falls, and moved back to 4502 Maryland, St. Louis."

letters in the Friends Around the World section triggered other readers to emulation. "If he can do it, I can do it . . . If she can do it, I can do it" drifts out of its pages to the readers. Many now travel, work, play, enjoy hobbies, and live independently and more fully because other disabled readers have ventured beyond the expected.

Where else except in the *Gazette* can an inventor find a market for a portable iron lung or a traveler locate someone with three rocking beds or a travel agency with



1978. "My Gazette office is a library/information service of specialized publications and data collected over the last 28 years."

expertise in travel with respirators? Where else can one find others with rare diagnoses such as syringomelia or dermatomyositis or Charcot-Marie-Tooth who would like to share experiences? Where else can one find a tooth-borne telegraph transmitter? Or a race horse owned by a group of hospital patients? Or foot-controlled steering? Or ways to learn frog breathing? Or dozens of different mouthsticks? Or a special issue titled "Quads on Quadrangles?" Where else can you find "upside-down" polios? Or hundreds of employment and life experiences of quadriplegics? Or characters who use a mouthstick for deep sea fishing, or jewelrymaking, or ham radio, or driving, as well as painting, typing, and reading?

The *Gazette* has come a long way from those first mimeographed pages of twenty years ago. Now it reaches thousands and thousands of disabled persons and professionals in 83 countries. Various issues are translated into Japanese, Portuguese, Spanish, French, and German.

Along the way, the staff changed the name from *Toomey j Gazette* to *Rehabilitation Gazette*. Some readers cheered. Others felt saddened.

Then, the house changed as well as the name. Joe "retired" in 1967. In 1971, we left the snows of Chagrin Falls and moved back to our home town, St. Louis. We brought the *Gazette* with us and Joe joined me as a full-time volunteer. Here, too, we found expert once-a-year volunteers to help with proofreading and layout, but we have not found the daily typing and library volunteers who did so much work in Chagrin Falls between dips in the pool.

The editing and researching are all still centered in our house. Somehow, Joe and I keep up with all the work this entails and with the lovely daily flow of mail.

We find time for wandering, too. We have met many of our disabled friends since we acquired a van, which we equipped for camping, and discovered this relaxing and relatively inexpensive way to travel. On our way to annual meetings of the National Paraplegia Foundation and the President's Committee on Employment of the Handicapped, board meetings of the American Coalition of Citizens with Disabilities, and assorted other meetings, we have zigzagged over most of the United States, Mexico, and Canada calling on our disabled friends and studying housing projects.

We have continued to amass an extraordinary library of specialized publications, periodicals, correspondence, information, and books and this house is now bulging. We have become an information center for the world. We

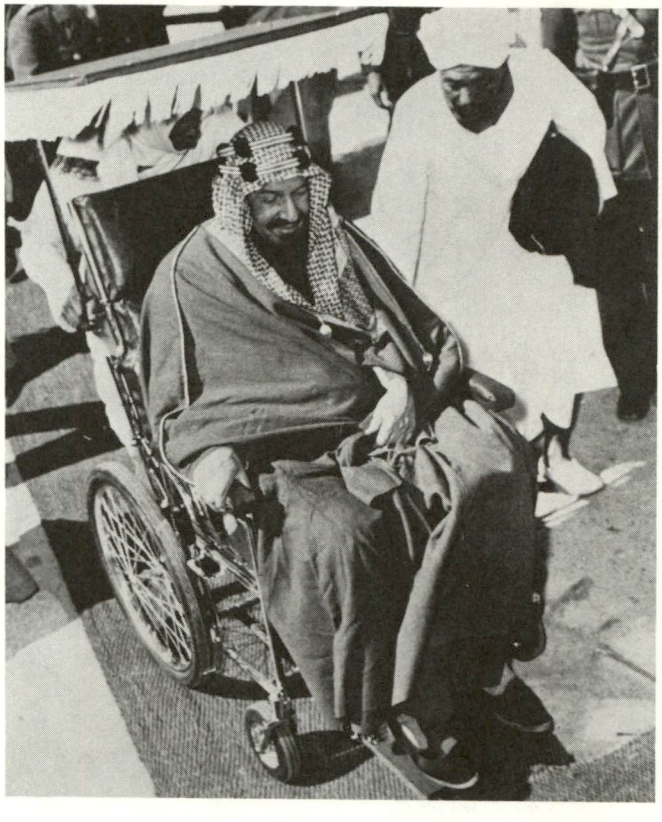
The Gazette reaches thousands of disabled individuals and professionals in 83 countries and some issues are translated into five languages.

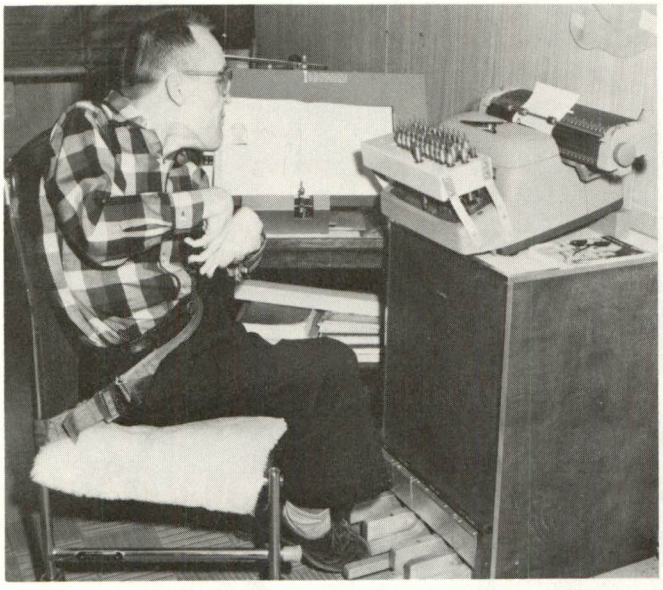
find the answer to almost any question about living with a disability in our library or back issues or by referring the questioner to another disabled individual who has solved the particular problem.

The Library of Congress records selections on records that are available through local libraries. The Johanna Bureau for the Blind and Visually Handicapped, Inc. records each new issue on tape, either open reel or cassette, and offers them to any blind or physically disabled individual who requests them.

The *Gazette's* original aim is the same: "To reach, to inform, and to dignify the disabled throughout the world." I am still the catalyst, the catcher of straws in the wind, the gatherer and giver of facts. Though the house has changed, we still have *Gazette* friends from everywhere stop by to visit. They are an excuse for a party and they meet our St. Louis friends.

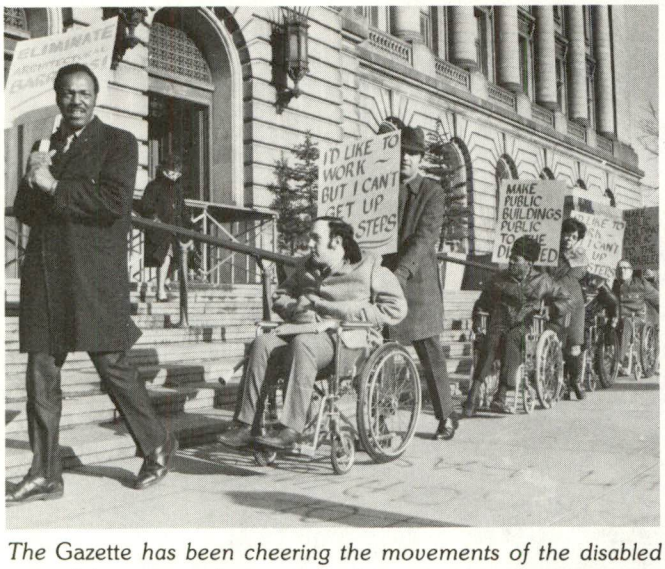
After twenty years, our house is still the *Gazette* House!



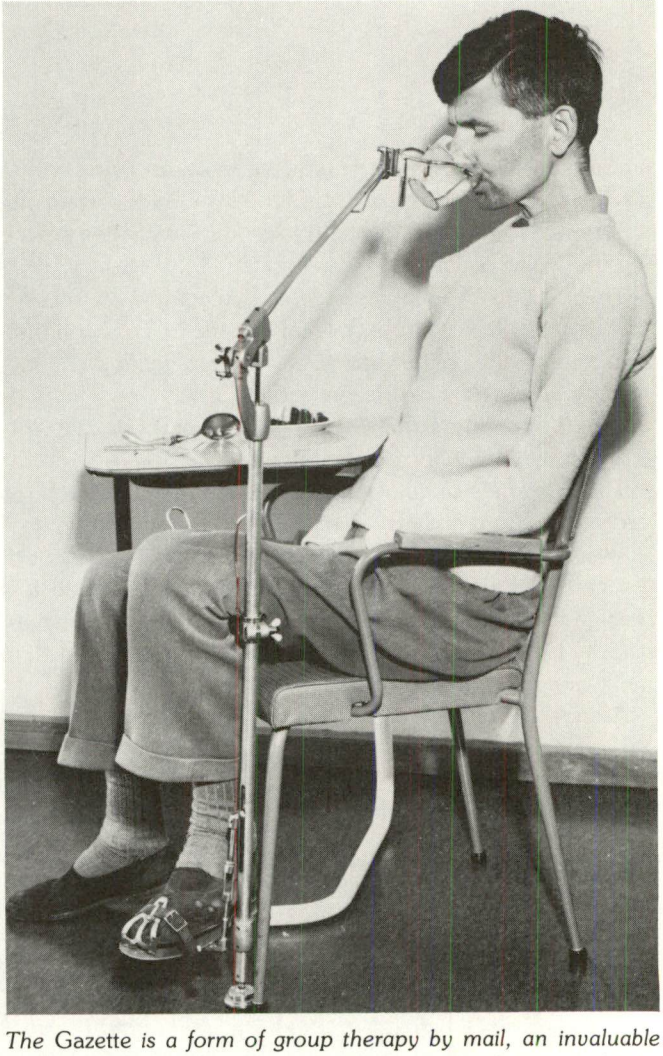


Many now travel, work, play, enjoy hobbies, and live independently because other disabled readers ventured beyond the expected.

Every issue includes the imaginative, practical, down-to-earth life experiences of its severely disabled readers.



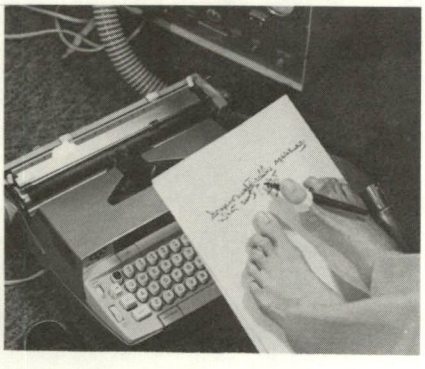
The Gazette has been cheering the movements of the disabled toward forming coalitions and achieving rights, both here and abroad.



The Gazette is a form of group therapy by mail, an invaluable source of ideas, inventions, and adaptations found useful by others.

Gazette Staff, 1958-78

Proudly and gratefully, we list the disabled and nondisabled staff members throughout the world who have worked as volunteers to give the *Gazette* its unique character. For various periods over the last 20 years, they have contributed their writings, their drawings, their office skills, or their special expertise. Some of these lovely people have departed this world. Many have gone on to their own pursuits. A treasured few are still contributing their talents, still working to create the *Rehabilitation Gazette*.



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Susan Armbrecht
Alan Arnold
Joan Barnekow
Eleanor Billmire
Bud Blitzer
Helen Bourne
Doris Brennan
Ida Brinkman
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Merle Chisholm
Jane Comstock
Betty Lou Conrad
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Mary Ellen Davis
Ruth Davis
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Blanche Goldwater
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Jack Quigley
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Helen Swanson
Bob Tanton
Betty Weisensel
Lowell Weissert
Cliff Westhead
Nancy Westman
Basil Wiley
Sue Williams

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Louise Bartholomew
Jean Bohlin
Willie Bjorkman
Ruth Carlton
The Close Family
Dorothy & Ray Davis
Junius Eddy
Rhoda English
Pearl & Paul Essert
Marion Greene
Ginny Hamann
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A Deaf Japanese Student in America

by Tetsuji (Ted) Tomikawa

At the age of nine, I became ill with meningitis, which took my hearing. Arthritis left me with a deformed leg. From 18 to 25 years of age I worked in a small electric company near Osaka as an assembler of TV and radio parts. Then, for a year, I attended the National Institute for Hearing and Speech Disorders in Tokyo to get vocational training (typing). From age 26 to 30, I worked in a printing company as a photosetter and at the Japan Charity Plate Association as a translater.

I learned English by self-education. My English textbooks were *Reader's Digest*, magazines for disabled people (the *Rehabilitation Gazette* was one of them), and reports of conferences on education, rehabilitation, and welfare of the disabled. One of the reports mentioned the name of the Center on Deafness at California State University, Northridge, California (CSUN).

I was active in the All Japanese Deaf Association, where the leaders were increasingly concerned with the lack of services for the deaf in Japanese universities. But people, both hearing and deaf, did not show much attention to my idea of establishing a campus service for the deaf in colleges and universities in Japan. So I wrote a letter to the Center on Deafness at CSUN and told them about my experiences in Japan and asked about the way the deaf students studied with the hearing students at CSUN. The person who answered my letter was Dr. Ray L. Jones, director of the Center on Deafness. Dr. Jones answered my questions with long letters and pamphlets about the program.

Gradually I began to understand what the program offered. So I consulted with Mr. Justin Dart, Jr., a good American friend of mine who was living in Japan at that time. I have known him for a number of years and have a deep respect for him. We discussed a long time and our conclusion was that I should go to Northridge to study there and write my experiences and send them back to Japan in hopes of encouraging people to develop a program of higher education for the deaf in our colleges and universities in Japan. Happily, after further correspondence with Dr. Jones, I was accepted by CSUN. To express my appreciation to Dr. Jones, I brought him the new third volume of *Japanese Sign Language* to which I added the English equivalents for each of the Japanese signs — a work of many months done with great gratitude.

I entered CSUN in the fall of 1974 as a freshman. Immediately, I met with problems. In the first place, English is a foreign language with me, so I had trouble not only with the lectures, but with reading textbooks and notes, and in communication with other people. Secondly, because I had not been prepared for college, I did not know how to study. Maybe I had as many problems as three American students put together.

Therefore, I depended on the Campus Services for the Deaf (which is a part of the Center on Deafness) probably more than any American student. One of the most important services is the provision of paid interpreters. These interpreters translate what the teacher is saying into American sign language. Unfortunately, for me, I didn't have time to translate the different words and sentences from sign language to English to Japanese, so I still didn't understand the lectures.

Another service that is offered is notetaking. Since the deaf student must concentrate on the hand movements of the interpreter, he can't look away long enough to take notes. So other students in the class are hired to do this for him. However, to make proper use of the notes, you must have understood the lecture. Since I didn't understand the lecture, the notes could not help me much.

Ted Tomikawa, pioneering deaf Japanese student at the California State University, Northridge Campus.

As the weeks went by, I became more and more confused. If things had continued like that, maybe I would have broken down completely. But, fortunately, Campus Services for the Deaf also provides counselors, who are skilled in the sign language and in dealing with the problems of deaf students. When I began to realize I couldn't follow the classroom lectures, I went to the counselors for advice each day. For me, the counseling system seemed like an oasis in the desert. Through that counseling system, I was helped and was able to get myself back up on my feet and on the road again.

Thus, a fourth service offered by Campus Services for the Deaf came to my rescue. This was the tutoring service. There are 23 tutors in the program. A retired teacher from the school for the deaf at St. Augustine, Florida, became my tutor. Each day I went to my tutor with the notes and we discussed what the notetaker had written. If I met with a problem I couldn't understand and my tutor couldn't help me, I went to my professor and asked. The professors were all glad to help me. In this way, I established methods of study.

By the time mid-term tests arrived, I was able to get a little better than average grades. I think the fact that a foreign deaf student is able to get good results in the tests shows that the well organized system developed at CSUN, consisting of tutors, counselors, interpreters, and notetakers, works well!

Now I am a senior and I hope to graduate in June, 1978. My major is psychology, which has a very good department at CSUN. My speed of reading English is still about one-fifth of American students, and my speed of writing in English is about one-tenth of my classmates. In addition to my weak English, I don't know mathematics at all. This made my study of statistics very hard. I still don't know most of American customs. This made my study of personality very difficult. Consequently, I must study three times more than American students.

I have travelled throughout the United States to study deaf education. Deaf people in America have a choice of the program they like best. If they wish to study with other deaf people, they have Gallaudet College in Washington, D.C. If they wish to study with hearing people, and take advantage of the many different courses offered in a large liberal arts college, they have CSUN. If they wish to develop their technical and vocational skills, they have the Rochester Institute of Technology or similar programs in more than two dozen colleges and technical institutes around the country.

In Japan, there are no programs at all. Recently, social services for the deaf in Japan have begun to develop and produce some good results. But the people who provide services are almost all hearing people. I think that unless deaf people can take part in the program as educators and rehabilitation specialists, we deaf people can't become truly happy. How can we become specialists? It is only education which makes this possible. College is where the specialists are trained and in the colleges no services for the deaf are offered.

I feel that the first efforts in establishing higher education opportunities for deaf people in Japan should be concentrated on the liberal arts area. What needs to be done is to develop a program in existing colleges to help prepare deaf students for university training by having them study with hearing students.

I feel that this movement must come from deaf people themselves. We have 250,000 deaf people in Japan. Some brave deaf persons must begin by studying in a regular university and complete their program of study with the provision of basic supportive services such as interpreting and/or notetaking. Their success will open the door for many others to higher education.

Address: Ted Tomikawa, c/o Charles Dirks, 9421 Lassaine Avenue, Northridge, California 91324.

Editor: Congratulations, Tetsuji, for your inclusion in the 1977-78 edition of Who's Who Among Students in American Universities and Colleges, *in the U.S. Jaycees'* 1978 Outstanding Young Men of America, *and in* The 1978 College Register!

Affirmative Action Programs in the Bell System

by Diane Schwilling

Bell System companies are committed to a long-standing policy of hiring and promoting qualified disabled people. No one is discriminated against because of mental or physical handicaps. Of course, opportunities for disabled people, as with all employees, depend on job openings and the needs of the business.

The approach to affirmative action programs in hiring the disabled differs with each Bell System company. But one company in the forefront is Michigan Bell, which is in the fourth year of its program. Dick Stone, general personnel supervisor, said the company has moved further along each year. This year, more than 5 per cent of all Michigan Bell new hires will be disabled people.

Michigan Bell has detailed the experiences of its severely disabled employees in a 23-minute film called "Everyday Champions." The film can be borrowed or purchased by contacting the Michigan Bell Audiovisual Department, 1365 Cass Avenue, Room 1900, Detroit, Michigan 48226, Attention: B.A. Tyll. Purchase price is $200. A version signed for the deaf is also available.

"One of the keystones to our program is the relationship we worked out with the State Vocational Rehabilitation Services (VRS) people," he said. "They provide us with disabled applicants and help train them both before and after employment."

The arrangement Michigan Bell and the State VRS worked out was a new approach for the agency. As a result, the VRS now has a placement service, with employees assigned fulltime to large companies in the state. Other agencies Michigan Bell works with include the Division of Blind Services, State Department of Social Services, and Goodwill Industries in Detroit.

Another Bell System unit which has made notable progress in hiring the disabled is the Arkansas Area of Southwestern Bell. Jayne Mann, area employment supervisor, attributes their success to an active recruiting program. Organizations they work with include Arkansas Enterprises for the Blind (AEB), the Federation for the Blind, schools for the blind and deaf in Little Rock, and rehabilitation agencies throughout the state.

In addition to asking their help in recruiting employees, the company gets suggestions on adapting jobs to the limitations of specific handicaps, Mann said. As an example, the company is working with AEB and the Massachusetts Institute of Technology (MIT) to test a computer which allows blind people to work as Long Distance operators.

The modern Long Distance switchboard isn't really a switchboard at all. Instead of using cords and buzzers, it is a computerized console which signals the operator with flashing lights. The computer directs calls and provides billing information.

"An AEB employee heard about the work of an MIT technologist who was developing a computer to convert light signals to Braille," Mann said. "AEB came to us and offered to put up funds for the device if we would test it. We thought it would be a good thing for the company if it worked out, and it could provide jobs for many blind people."

The computer is still being evaluated, but it has been quite successful so far. This is in part due to the hard work of Ann McDaniel, the Southwestern Bell operator who is testing the machine and who has been blind since birth. She went to AEB in 1974 for their college preparation program, but decided not to go to college. She began working the switchboard at AEB, which led to her present job.

Ann McDaniel, the first blind long distance operator, uses a computer, which converts light signals to Braille, and an abacus with which she stores telephone numbers and figure rates.

"I thought I would have to do a lot of hard work getting everybody to know me," she said. "But everybody is so nice, and the attitude toward my being blind is good. I've made friends with a lot of the other employees."

"Customers learned my operator number from stories in the newspapers and on radio and TV," she said. "Sometimes when I answer a call, the person will ask if I'm the blind operator. And a couple of customers have remembered my number and asked for me to place calls for them again, because they thought I did a good job before."

For more information, contact Diane Schwilling, Room 1212, Southwestern Bell, 1010 Pine, St. Louis, Missouri 63101.

Quad Employment in Britain
A Few Case Histories

by Roger Jefcoate

BALLET CHOREOGRAPHER. (Respirator user for over 25 years.) Elizabeth Twistington Higgins, 82 Patching Hall Lane, Chelmsford, Essex, England. Well known for her superb paintings (done with the brush held between her teeth), she has recently pioneered with her own ballet group, the Chelmsford Dancers. She was a ballet dancer before polio and now teaches with help from a high fidelity remotely controlled tape recorder and a portable voice amplifier. She is training dancers in the new technique of liturgical ballet (dancing in church). She uses a sip-operated environmental control whilst she is at home during the day and when she goes into hospital every night into her iron lung she also has a similar unit there. She recounted the story of her life in the autobiographical book, *Still Life*, which was published by Mowbrays, London. One of Britain's best known disabled people, Elizabeth and her team have frequently appeared on television and her story has been featured on radio.

COMPUTER PROGRAMMER. (Age 44, athetoid spastic.) Dick Boydell, Spastics Society's Further Education Centre, Oakwood, High Street, Kelvedon, Essex, England. With no written qualifications of any kind, he is one of Britain's pioneer computer programmers and a full member, as well as an honorary member, of the British Computer Society. The first athetoid ever to use electronic remote controlled equipment, he does it all with his right foot feeding an electronic typewriter with built-in word store which enables him, in effect, to type at speeds well above 50 words per minute. Wheelchaired, he moves around by pushing himself backwards with his right foot. His hobby is amateur radio. His story is described in a chapter of the book, *Despite Disability*, published by Educational Explorers, Reading. He has done programmes for the Ford Motor Company.

COMMUNICATION COORDINATOR/SPECIAL EDUCATION ADVISER. (Age 28, nonspeaking, athetoid spastic.) Glynn Vernon, 23 Holderness Drive, Sheffield, South Yorkshire, England. He was one of the first disabled students to graduate from the unique British Open University (where the courses and tuition come through the radio, television, and some postal services). With help from his wife, Gill, he runs the area teletype link service (deaf to hearing communication) and during the day is special education adviser to Rotherham local authority. Education of the disabled person is Glynn's great interest and the Lightwriter speech substitute device enables him to carry out this work.

OWNER/DESIGNER EQUIPMENT COMPANY. (Aged 30, severely paralysed by an undiagnosed virus condition whilst a university student.) Toby Churchill, Toby Churchill Limited, 20 Panton Street, Cambridge CB2 1HP, England. Because Toby was left without speech, wheelchaired, and with only control in his right hand, he and three friends designed and built the 'Lightwriter,' the first truly portable speech substitute device. Holding 32 characters (up to half a sentence), it resembles a lightweight manual typewriter with keys laid out in the standard pattern. The all electronic control shows the user's message on a computer-like display. Toby runs his own company, which manufactures these and other devices for disabled people.

Toby Churchill, designer and manufacturer of the 'Lightwriter.'

Robert Bowell, income tax accountant.

INCOME TAX ACCOUNTANT. (32 years old, disabled by amyotonia congenita.) Robert Bowell, Copper Beech, Parry's Close, Stoke Bishop, Bristol, England. Robert is a wheelchair user, with weak finger and arm movement; he weighs less than 40 lbs. Some years ago he set himself up as an accountant specialising in income tax affairs. He uses an electronic typewriter with a multiple splint mounted switch assembly (where the carefully mounted microswitches are set up in a three dimensional sense precisely to suit his residual ability). He was the first disabled professional to be given remote control equipment by the British Government.

Roger Jefcoate, Willowbrook, Swanbourne Road, Mursley, Milton Keynes, Bucks MK17 OJA, England, is a consultant to the British Government, UCP of New York City, and The Spastics Society on electronic aids and he conducts courses on aids and equipment for disabled children.

Don't Be Left Without Your RIGHTS!

Become informed!
The new laws and regulations offer to the disabled equal opportunity and civil rights guarantees similar to those previously extended to minorities and women.

The new laws and regulations guarantee that if you are otherwise qualified — for a job, college, welfare, or other activity or service — disability does not count.

But laws and regulations must be enforced. Each of you can help make the agencies and institutions in your community aware of the problems of the disabled. Each of you can become a watchdog to ensure that the laws are enforced. And, each of you can be ready to file a complaint if you see or experience discrimination.

Each disabled individual is important to the effectiveness of the laws. Each of you should join with other disabled individuals to become more effective. And every organization should join with other organizations to achieve strength through coalition.

The American Coalition of Citizens with Disabilities (ACCD) has assumed the major role in promoting equal opportunity and civil rights for citizens with disabilities. Last spring, ACCD led the sit-ins that resulted in the signature of the 504 regulations by HEW.

ACCD informs its members on how to achieve rights through its monthly publication, *ACCD Action.* If you want to be informed on your rights as a disabled citizen, become a member and receive this publication by sending $5 to ACCD, Room 817, 1346 Connecticut Avenue NW, Washington, DC 20036. Ask to start with the January 1978 issue. It has concise and clear statements on Sections 501 (federal employment), 503 (affirmative action), and 504 (discrimination).

The Department of Health, Education, and Welfare has worked with ACCD on booklets to explain the new laws on civil rights. Several other organizations have published guidelines. Send for all of these and watch for more:

- (1) *Accommodating Programs to People With Disabilities.* (2) *Your Rights As A Disabled Person.* (3) *Your Responsibilities to Disabled Persons as a Health Care or Social Service Administrator.* Free from Office of Public Affairs, Hubert H. Humphrey Building, 200 Independence Avenue, Washington, DC 20201. (*Your Rights As A Disabled Person* will be distributed in English, Spanish, and Braille through local social security offices.)
- Request the following free publications from Ms. Anne Beckman, Office for Civil Rights, Department of Health, Education, and Welfare, 330 Independence Avenue, SW, Washington, DC 20201: (1) *Fact Sheet. Section 504 of the Rehabilitation Act of 1973.* (2) Federal Register as of May 4, 1977 and January 13, 1978. (3) Statement by David Tatel, July 29, 1977.

The 8-page fact sheet is especially helpful. Note the deadline of June 2, 1978 for recipients of financial assistance from HEW to complete a self-evaluation process in consultation with handicapped individuals and organizations. See paragraph 84.6(c) of the Regulations. Don't wait! Contact your local Office for Civil Rights and offer consultant services.

- The Office of Civil Rights, which has responsibility for enforcing the regulations, has speakers available for groups around the country who can assure an audience of at least 15 or 20 persons. Contact Dorothy Dillard, Office of Civil Rights, HEW, 330 Independence Avenue, SW, Washington, DC 20201. Phone: 202/245-6480.
- *Rights Handbook for Handicapped Children and Adults.* Revised edition. 100 pages. $2 from Co-ordinating Council for Handicapped Children, 407 South Dearborn Street, Room 1090, Chicago, Illinois 60605.
- *A Handbook on the Legal Rights of Handicapped People.* Free from President's Committee on Employment of the Handicapped, Washington, DC 20210.
- *The Equality Issue,* a new publication of the Minnesota Department of Human Rights. Send 75 cents for the January 1978 issue, which summarizes the problems of discrimination against disabled persons and their rights under Minnesota law, to State Documents Section, 140 Centennial Office Building, St. Paul, Minnesota 55155.
- *Handicapping America.* By Frank G. Bowe, PhD, executive director, American Coalition of Citizens with Disabilities. Clear and straightforward. Details the barriers that infringe on the rights of the disabled and what is being done and is not being done to eliminate those barriers. $10.70, including postage, from Harper & Row, Publishers, 10 East 53rd Street, New York, NY 10022.

Recent Publications on Laws Relating to Barrier-Free Education

PUBLIC LAW 94-142. ALL HANDICAPPED CHILDREN ACT OF 1975. . . . *to assure that all handicapped children have available to them, within the time periods specified . . . a free appropriate education which emphasizes special education and related services designed to meet their unique needs, to assure that the rights of handicapped children and their parents or guardians are protected.*

PUBLIC LAW 93-112. REHABILITATION ACT OF 1973. SECTION 504. . . . *No otherwise qualified handicapped individual in the United States, as defined in section 7(6), shall, solely,*

by reason of his handicap, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance.

Grades I through XII

Barrier-Free School Facilities for Handicapped Students. Educational Research Service, Inc., 1800 North Kent Street, Arlington, Virginia 22209. $7. 89 pages. 1977. Brief summary of legislation and a reprint of the North Carolina State Building Code.

The Children's Defense Fund, 1520 New Hampshire Avenue, NW, Washington, DC 20036. Following publications are free: *How to Look At Your State's Plans For Educating Handicapped Children.* 21 mimeographed pages. 1975. Summary of legislation. List of States' special education departments. *Your Rights Under the Education For All Handicapped Children Act. P.L. 94-142.* 15 pages.

The Council for Exceptional Children, 1920 Association Drive, Reston, Virginia 22091. Free brochures of their publications: *Procedural Safeguards P.L. 94-142-Guide for Schools and Parents.* Soundfilmstrips, audio cassettes, booklet. $90. *Teaching Exceptional Children in All America's Schools.* $15. *Special Education Administrative Policy Manual.* $27.50. *Public Policy and the Education of Exceptional Children.* $13.95. *A Primer on Due Process — Education Decisions for Handicapped Children.* $4.95. *Financing Educational Services for the Handicapped.* $4.95. *Digest of State and Federal Laws: Education of Handicapped Children.* $15. *Legal Change for the Handicapped Through Litigation.* $3.75.

The Education for Handicapped Children Act: P.L. 94-142. Free from Bureau of Education for the Handicapped, 400 Maryland Avenue, SW, Washington, DC 20202.

Handicapped People in Society: A Curriculum Guide. Developed by Ruth-Ellen Ross and I. Robert Freelander. Governor's Committee on Employment of the Handicapped, 81 River Street, Montpelier, Vermont 05602. $6.50. 178 pages. 1977. A teacher's guide for kindergarten through high school. Empathic, comprehensive, delightfully illustrated. Excellent references and source materials.

Your Responsibilities to Disabled Persons as a School or College Administrator. Free from Office of Public Affairs, Hubert H. Humphrey Building, 200 Independence Avenue, Washington, DC 20201.

Colleges/Universities

Architectural Accessibility for the Disabled on College Campuses. By Stephen R. Cotler, R.A. and Alfred H. DeGraff. Free from Stephen Cotler, State University Construction Fund, 194 Washington Avenue, Albany, New York 12210. 133 pages. 1976. (Supplement/update being written.) Very helpful publication. Clear and attractive. Covers a wide diversity of disabilities.

"Architectural Affirmative Action: A University with a New Concept." By Eric Gentile. *Amicus.* Vol. 2, No. 4, June 1977. National Center for Law and the Handicapped, Inc., 1235 Eddy Street, South Bend, Indiana 46617. Pages 31-36. Four years experience with accessibility at Michigan State University, using Mr. Gentile's creative concepts, prove that compliance need not be a burden. He uses environmental design for greater and safer use for all people. For instance, a path ramp rather than a curb cut; a grade level approach (cost $400) rather than a ramp and handrail ($1000).

The College Guide for Students with Disabilities. By Elinor Gollay and Alwina Bennett. Abt Publications. 55 Wheeler Street, Cambridge, Massachusetts 02138. $30. (Special price to students: $18.50.) 545 pages. 1976. A detailed and comprehensive directory of the services and facilities of about 500 colleges. Lists sources of financial aid.

The Disabled Student on American Campuses: Services and the State of the Art. Handicapped Student Services, Wright State University, Dayton, Ohio 45435. 1978. In process.

Getting Through College With A Disability. A summary of services on 500 Campuses for Students With Handicapping Conditions. The President's Committee on Employment of the Handicapped, Washington, DC 20210. Free. 64 pages. 1977. Well organized information. Lists of guides to colleges and disabled students organizations included.

Guide to Implementation of Section 504 at Colleges and Universities. $2.50. 1978. Payable to George Washington University. Order from RRRI-ALLB, George Washington U., Suite 704, 1828 L Street, NW, Washington, DC 20036.

A Guidance Manual For The Physically Disabled Two Year College Applicant. State University of New York, College of Optometry, 100 East 24th Street, New York, NY 10010. Free. 104 pages. 1976. A manual for students and counselors. Covers 48 agricultural and technical schools and 38 community colleges in New York State.

Handbook of Special Information for Handicapped Students. Guide to University of Wisconsin-Oshkosh. By Jon L. Van Dyke. Free from Dean of Students Office, U. of Wisconsin-Oshkosh, Oshkosh, Wisconsin 54901. 22 pages. 1977. Well planned handbook. Good model.

National Easter Seal Society for Crippled Children and Adults, 2023 West Ogden Avenue, Chicago, Illinois 60612. Following reprints: "Barrier-Free Environments" by Margaret Milner and "Planning for Accessibility" by Rita McGaughey.

One Out Of Ten. By Larry Molloy. Educational Facilities Laboratories, 850 Third Avenue, New York, NY 10022. Free. 24 pages. 1977. Summary of the implications of the new laws.

Planning for Accessibility: A Guide to Developing and Implementing Campus Transition Plans. By Margaret Milner. Available from The Association of Physical Plant Administrators of Universities and Colleges, Suite 250, Eleven duPont Circle, Washington, DC 20036. $3. 88 pages. 1977. Illustrated manual covers accessibility requirements, recommendations, and guidelines.

The Preparation of Orientation and Mobility Maps for the Visually and Physically Handicapped. By F. Cuthbert Salmon, AIA. School of Architecture, Oklahoma State University, Stillwater, Oklahoma 74074. $3.50.

Spinal Cord Injury Centers

by Gini Laurie

At long last, it is being recognized again that regional centers are the most effective and most economical means of treating the psychological and physiological problems of catastrophic disabilities that require treatment and rehabilitation by an array of specialists.

Before looking at the new regional spinal cord injury centers, glance back at the 1950's. Then, with the support of monies contributed by the American public to the March of Dimes, a comprehensive system of 17 regional respiratory and rehabilitation centers for poliomyelitis patients was developed at teaching hospitals of medical schools, totaling over 500 beds.

The centers demonstrated the tremendous value of an organized network of centers, staffed by medical and paramedical specialists.

The team approach and the munificent flow of monies enabled each center to reintegrate its patients into their communities, to work with their families, to adapt their homes, to assist with attendant care, to encourage educational and vocational rehabilitation, and to furnish a continuing source of information and support.

The centers were invaluable means of improving medical management, evolving vocational and psychological rehabilitation, utilizing group therapy, and developing new equipment.

In the 1960's, after Salk and Sabin conquered poliomyelitis, the financial support was channeled elsewhere and the centers were closed. It is tragic that the rise in the number of spinal cord injured did not coincide with the decrease in the number of polio patients for, if it had, the centers would have been a natural transition from polio to spinal cord injury (SCI). It would not have been necessary to "reinvent the wheel," to revive the center concept for SCI persons.

In 1970, the U.S. Department of Health, Education, and Welfare initiated the Regional Spinal Cord Injury Research and Demonstration System, which now includes 11 regional systems or centers. The first center, the Southwest Regional System for the Treatment of Spinal Cord Injury in Phoenix, Arizona, was established by Dr. John S. Young. He developed a National Spinal Cord Injury Data Research Center to include variables pertaining to SCI and to record accurate, actual costs. The national data center has demonstrated that the treatment of paraplegics and quadriplegics at a systems center saved 9.5% in the average length of hospitalization and an average cost of 18.8% ($6000 per case) compared to the fragmented, unsystemized care that is otherwise prevalent.

New SCI cases occur at between 8000 and 10,000 cases yearly. The total number of SCI cases in the U.S. is estimated to be between 100,000 and 125,000. In 1974, the annual cost of care was estimated at $2.4 billion, based on the average lifetime costs of a quad at $325,000 to $400,000 and of a paraplegic at $180,000 to $225,000. These costs have risen, not only because of inflation, but because SCI now live longer than previously and because the ratio of new paraplegics and quadriplegics is changing to an increasing percentage of quadriplegics.

Dr. Young estimates that the 11 established regional systems are able to accept approximately 750 new SCI referrals each year. He recommends that eventually there should be approximately 100 Regional SCI Systems in the United States. He estimates that five new model systems could be established every year and that with a national network of 100 systems the annual savings should total $48 million in initial hospitalization and $480 million in lifetime medical and social costs. "Though these are rough estimates," says Dr. Young, "they certainly support the need for development of a national network of Regional Spinal Cord Injury Systems at the earliest possible time. Not only can we afford this network, we cannot afford anything else."

Elmer Bartels, a C4-5 quadriplegic, who is Commissioner of Vocational Rehabilitation for the State of Massachusetts, emphasizes that loss in human and monetary terms as a result of poor or inappropriate care of SCI is astronomical. He advocates a system with the overriding goal that "the injured person should be able to have a future as a contributing member of society and should be able to take his or her place back in the community from which he or she came." He also advocates the rights of SCI to have questions answered honestly, to have contact with other SCI as models, and to have funds immediately available for treatment and equipment.

In the *1977 NPF Convention Journal* (901 Arcola Avenue, Wheaton, Maryland 20902), Bartels compiled a list of basic functions and/or resources that should be part of the SCI system:

1. Prevention of injury and public awareness of SCI.
2. Emergency evacuation capabilities.
3. Acute medical facilities to handle the injured within the shortest time and to serve until the acute phase is concluded.
4. At least one active SCI post-acute medical/rehabili-

tation center providing medical care, social service, physical and occupational therapy, activities of daily living, urology, surgery, orthopedics, nursing, psychology, psychiatry, and adjustment to disability.
5. Various funding mechanisms to pay for services and equipment on a lifetime plan.
6. Vocational rehabilitation services.
7. Educational facilities.
8. Transportation resources including driver training.
9. Housing facilities for disabled and their families.
10. Continuing follow-up.
11. Monitoring, documentation, and research on the performance of the system.

The proof of the value of the team/center approach is demonstrated by the successful careers of respiratory poliomyelitis quadriplegics (individuals dependent upon respirators), who have attained higher degrees and who have been successfully pursuing professional careers for twenty years and more as physicians, professors, counselors, psychologists, lawyers, and engineers, as well as those in a wide variety of other occupations, including that of homemaker.

The need for centers is demonstrated by the contrast between the number of these poliomyelitis individuals living independently and the number of traumatic quadriplegics who are shunted into nursing homes after initial hospitalization because they have not had the benefit of the team expertise of a SCI center. Neither the average general hospital nor the average rehabilitation hospital has the staff or sufficient experience with SCI to offer the creative choices and guidance that are now available in the 11 regional SCI centers and that should be available in many more centers.

Two excellent sources of material on SCI for both laymen and professionals are the National Paraplegia Foundation (NPF) and the Paralyzed Veterans of America (PVA). Everyone who is concerned with SCI should subscribe to the PVA publication, *Paraplegia News*, 935 Coastline Drive, Seal Beach, California 90740 ($4 year), and should become a member of NPF and receive its publication, *Paraplegia Life*, 333 North Michigan Avenue, Chicago, Illinois 60601. Both organizations will send a free introductory copy of their monthly/bimonthly publications and the NPF will send a list of bibliographies and other publications on SCI.

For professionals, two organizations offer specialized information. The American Spinal Injury Association is composed of specialty physicians interested in SCI clinical care and center development. The president is Dr. Paul R. Meyer, Jr. (address below). The International Medical Society of Paraplegia includes 600 physicians and other health professionals involved in SCI. Dr. R. Edward Carter (address below) is a member of the Council, the governing body of the Society. The official journal is *Paraplegia*, published by E. & S. Livingstone, 43-45 Annandale Street, Edinburgh EH7 4AT, Scotland.

Section 304(b) of the Rehabilitation Act of 1973 authorizes grants to States and public or non-profit organizations, not to exceed $250,000 per demonstration, for the purpose of paying part or all of the costs for special projects and demonstrations (and research and evaluation connected therewith) for SCI individuals.

Copies of the application and instructions may be obtained by writing to the Division of Project Grants Administration, Room 1427, MES Memorial Building, Washington, DC 20201. Technical consultation regarding application preparation, project development, and program details may be obtained from Mr. J. Paul Thomas, Executive Secretary & Project Officer, Medical Research Studies, Room 2328, MES Memorial Building, Washington, DC 20201.

Information about the SCI centers for veterans may be obtained from Emanuel Mannarino, M.D., Director, Spinal Cord Injury Service, Veterans Administration Central Office, 810 Vermont Avenue, NW, Washington DC 20420.

Additional information on the 11 existing SCI centers for civilians may be obtained from their medical directors, who were contacted for the information which is summarized on the following pages.

For both veterans and civilians, the existing SCI systems must be expanded so that all who are spinal cord injured receive acute care, rehabilitation, and lifetime follow-up at regional SCI centers.

Regional Spinal Cord Injury Systems

I. ALABAMA. Model Regional Spinal Cord Injury Center, University of Alabama in Birmingham, University Station, Birmingham, Alabama 35294. Phone: 205/934-3450. Director: Samuel L. Stover, M.D.

(1) Number of SCI beds and average cost per diem: No specific beds for SCI; 120 beds for all types of inpatient rehabilitation. Average: 20-30 paras; 20-30 quads. Average cost per diem: $262. Room = $125; doctor = $12.
(2) Apartments or facilities for independent living practice: No.
(3) Recreational facilities: Outdoor recreational area including a half basketball court.
(4) Driver training: Yes.
(5) Other services and special facilities: Affiliated with Lakeshore Hospital, which is being developed into a vocational evaluation and training center for severely disabled.

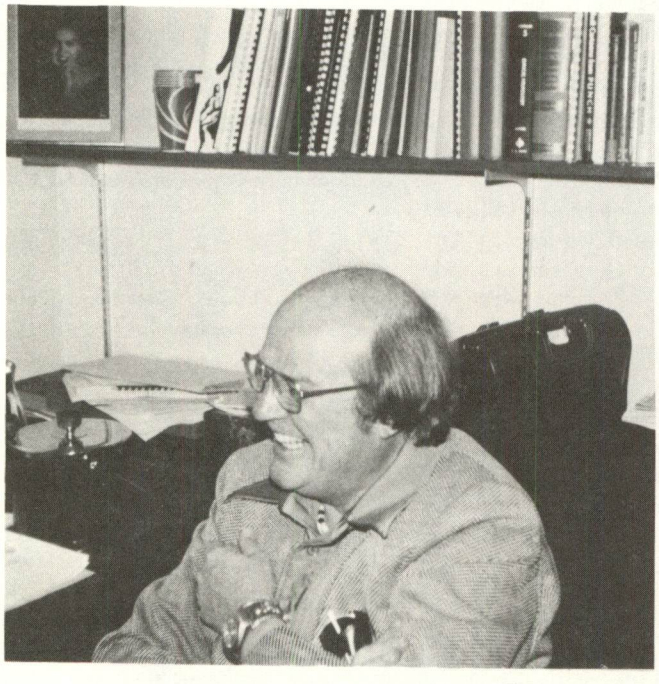
II. ARIZONA. Southwest Regional System for the Treatment of Spinal Injury, Good Samaritan Hospital, 1033 E. McDowell Road, P.O. Box 2989, Phoenix, Arizona 85062. Phones: 602/257-2000 or 602/257-4533. Director: David J.E. Cheshire, M.B.B.S. (Lond), D. Phys. Med. (Eng), D.P.R.M. (Aust).

(1) Number of SCI beds and average cost per diem: About 35 beds for SCI, but can be expanded since in close association with 700-bed general hospital. In 3-4 years will have own building and 100 beds. Average cost: $200 for room, board, nursing, and physicians. Extra for major surgery or respiratory therapy. Average stay: 120 days for paras; 140 days for quads.
(2) Apartments or facilities for independent living practice: No, but good arrangement with nearby accessible Holiday Inn.

(3) Recreational facilities: Unheated open air pool. Various programs run by recreational therapist.
(4) Driver training: Selected physical therapists do driver training on a dual-controlled, hand-controlled motor vehicle.
(5) Other services and special facilities: Arizona Medical Evacuation System uses both fixed wing and helicopter aircraft. Good Samaritan Hospital has its own air ambulance. Counselors from Arizona Department of Vocational Rehabilitation work with local and out-of-state counselors to keep programs going.

III. CALIFORNIA. Santa Clara Valley Medical Center, Norman B. Nelson Rehabilitation Facility, 751 South Bascom Avenue, San Jose, California 95128. Phone: 408/279-5100. Director: Sheldon Berrol, M.D.
California Regional Spinal Cord Injury Care System. Director: Glenn G. Reynolds, M.D. Phone: 408/998-4554. Ext. 43.
(1) Number of SCI beds and average cost per diem: 70 beds. Cost per diem: $155 plus physician visits, therapies billed at $30 per hour, and laboratory, x-ray, pharmaceutical, and other special treatment charges.
(2) Apartments or facilities for independent living practice: No. A few in adjacent community available by select referral.
(3) Recreational facilities: Active program to include swimming, other indoor sports, crafts, and programs in community such as ball games, and cultural and recreational activities.
(4) Driver training: Recipient of a special grant from the California State Department of Rehabilitation in driver training.
(5) Other services and special facilities: Special developmental projects funded by HEW for head injury, psycho-social, vocational, urologic, and skin pressure studies.

IV. COLORADO. Rocky Mountain Regional Spinal Injury Center, Inc., Craig Hospital, 3425 South Clarkson, Englewood, Colorado 80110. Phone: 303/761-3040. Director: Robert R. Jackson, M.D.



Robert E. Jackson, M.D., director, Rocky Mountain Regional Spinal Injury Center, and president, National Paraplegia Foundation.

(1) Number of SCI beds and average cost per diem: 80-bed facility on the campus of Swedish Medical Center and a 20-bed sub-acute unit at Swedish; plus use of intensive care unit beds at Swedish. Cost per diem: $200. This includes room, board, nursing care, medications, laboratory, therapy, physicians. Individual equipment extra. Average stay: 90 days for paras; 100-110 for quads; ratio about equal now, formerly 60/40 para over quad.
(2) Apartments or facilities for independent living practice: 23-unit accessible apartment house within a block of the hospital. Used for families, re-evaluations, outpatients, and final training site. The units cost between $17 and $19 per day.
(3) Recreational facilities: Five full-time people in the department. Use bus and van for events away from hospital — football and basketball games, concerts, downhill and cross country skiiing, horse back riding, back packing and overnight camping, and kiyaking. Small recreational pool at hospital; for team events use nearby fifty meter pool.
(4) Driver training: Steering and hand control mechanism for pre-testing; use local driver's training program for specific hand control training. Expect everyone who is a C-6 last preserved segment and distal to be able to drive independently and safely.
(5) Other services and special facilities: Dr. Jackson says, "Always open to ideas . . . built-in flexibility . . . the population we serve is healthy even though disabled. The result of that is that we have taken down every trapping of sickness where we can and go on as best we can with the business of living."

V. ILLINOIS. Acute facility: Northwestern Memorial Hospital, 250 East Superior Street, Chicago, Illinois 60611. Phone: 312/649-3425. Director: Paul R. Meyer, Jr., M.D.
(1) Number of SCI beds and average cost per diem: 20 beds. Cost Pre diem: $235. Attended by Orthopaedic and Neurosurgery Departments.

Rehabilitation facility: The Rehabilitation Institute of Chicago, 345 East Superior Street, Chicago, Illinois 60611. Phone: 312/649-4728. Director: Joel S. Rosen, M.D.
(1) Number of SCI beds and average cost per diem: Approximately 50-70 beds. Cost per diem: $176.
(2) Apartments or facilities for independent living practice: Approximately 20 beds available on transition floor which simulate actual living conditions in the community.
(3) Recreational facilities: Extensive daily and weekend in-house programs as well as bi-weekly out-trips.
(4) Driver training: Full program in driver education, evaluation, and training available from two full-time instructors.
(5) Other services and special facilities: Extensive research facilities available from the R&T Center #20, as well as the Rehabilitation Engineerng Department.

VI. MASSACHUSETTS. New England Regional Spinal Cord Injury Center, University Hospital, 75 East Newton Street, Boston, Massachusetts 02118. Phone: 617/247-5124. Director: Murray M. Freed, M.D.
(1) Number of SCI beds and average cost per diem: 24 beds. Average cost per diem: $163 for semi-private room; $198 for private; plus physician's fees.
(2) Apartments or facilities for independent living practice: No apartments, but hotels are made available to the family.

(3) Recreational facilities: Swimming pool, billiards, table tennis.
(4) Driver training: Training is available.
(5) Other services and special facilities: When air transportation is indicated, Coast Guard helicopters are used.

VII. MINNESOTA. Spinal Cord Injury Center at Minnesota, Box 297 Mayo, University of Minnesota Hospitals, Minneapolis, Minnesota 55455. Phone: 612/373-8990. Director: Frederick J. Kottke, M.D.
(1) Number of SCI beds and average cost per diem: 20 beds. Average per diem cost for fiscal year 1977 — $314.
(2) Apartments or facilities for independent living practice: No, but there are facilities at Courage Center and elsewhere.
(3) Recreational facilities: Three recreational therapists provide activities for young adolescents and children with SCI. For adults, the lounge has games, stereo, TV, radio, and a pool table; recreation is provided in the community, using a special bus — shopping, athletic events, picnics, etc.
(4) Driver training: Training and equipment are provided.
(5) Other services and special facilities: Program in Human Sexuality; Renal Function Laboratory; follow-up after discharge; consultation on access to housing; arrangements for special adaptations; Inservice Training Programs provided by SCI team to other hospitals and rehabilitation agencies providing care.

VIII. NEW YORK. Spinal Cord Injury Center, New York University Medical Center, Institute of Rehabilitation Medicine, 400 East 34th Street, New York, NY 10016. Phone: 212/679-3200. Director: Edward W. Lowman, M.D.
(1) Number of SCI beds and, average cost per diem: Variable number of beds — usually 40-50. Cost per diem: $225 is the average rate and includes room, board, and all rehabilitation services.
(2) Apartments or facilities for independent living practice.
(3) Recreational facilities: Facilities of the Institute of Rehabilitation Medicine including the therapeutic pool.
(4) Driver training: Available.
(5) Other services and special facilities: Close contact is maintained with the referring physician, who is sent a complete report including recommended regimen of treatment and plans for rehabilitation program. Discharge planning includes employment, mobility, housing, and post-discharge folfow-up.

IX. TEXAS. Spinal Cord Center, Texas Institute for Rehabilitation and Research, 1333 Moursund Avenue, Houston, Texas 77025. Phone: 713/797-1440. Director: R. Edward Carter, M.D.
(1) Number of SCI beds and average cost per diem: 17 at TIRR main building and ¾ of 14 beds at Annex to TIRR. Cost per diem: $250 (inlcudes everything).
(2) Apartments or facilities for independent living practice: No apartments connected with SCI center but TIRR's staff members have been among the pioneers in facilitating independent living.
(3) Recreational facilities: On Saturdays there are in-house games, entertainments and out-trips to movies, games, ice hockey, etc.
(4) Driver training: Driver education and training available.
(5) Other services and special facilities: New Options, at TIRR Annex, is a six-week live-in program to help individuals acquire skills necessary for integration into the community.

X. VIRGINIA. Acute and rehabilitation phases: University of Virginia Spinal Cord Injury Unit, Department of Orthopedics and Rehabilitation, Towers Office Building, 1224 West Main Street, Charlottesville, Virginia 22903. Phone: 804/977-7154. Director: Warren G. Stamp, M.D.
(1) Number of SCI beds and average cost per diem: (a) Acute care, 5 beds at $111 base cost, plus $175 for services (OT, PT, x-rays, respiratory therapy, operating room, medications, and supplies); (b) Intensive Care Unit, $400 base cost; (c) Towers Rehabilitation Care Unit, 20 beds at $115 base cost, plus $75 for services (OT, PT, x-rays, medications, and supplies), total $190. Physicians fees for both acute and rehabilitation: $60 first day, $20 per day thereafter.
(2) Apartments or facilities for independent living practice: No apartments, but a nearby motel is available to the family.
(3) Recreational facilities: Recreational therapy.
(4) Driver training:
(5) Other services and special facilities: Patient and family education and training, counseling, social services, vocational counseling.

Rehabilitation facility: Woodrow Wilson Rehabilitation Center, Fisherville, Virginia 22939. Phone: 703/885-7281. Director: J. Ellies Moran.
(1) Number of SCI beds and average cost per diem: Dormitory beds (for those independent in self-care) number 400 and the cost is $22 or $23 per diem. Nursing Services Units beds number 88 and the cost is $83 or $84 per diem. 11% of clients are SCI.
(2) Apartments or facilities for independent living practice: An apartment is available as are OT and PT services; family education is provided on a regular basis and included in the per diem.
(3) Recreational facilities: heated pool with ramped access, gym, lighted tennis court, outside basketball and softball playing fields, 4-lane bowling alley, rifle and archery range, carpet golf range, pool and table tennis areas, arts and crafts, a lake with paddleboats and canoes, picnic and camping areas and an auditorium.
(4) Driver training: Three instructors (one an OTR), a car, and a van with hand controls, 12 simulators, a filmed training program, adaptive equipment, an orthorator, and a multicar driving range.
(5) Other services and special facilities: Prevocational services include vocational evaluation and work adjustment training; 23 vocational objectives are offered. Supportive services include counseling and psychological services, recreation, academic instruction, and a student intern program.

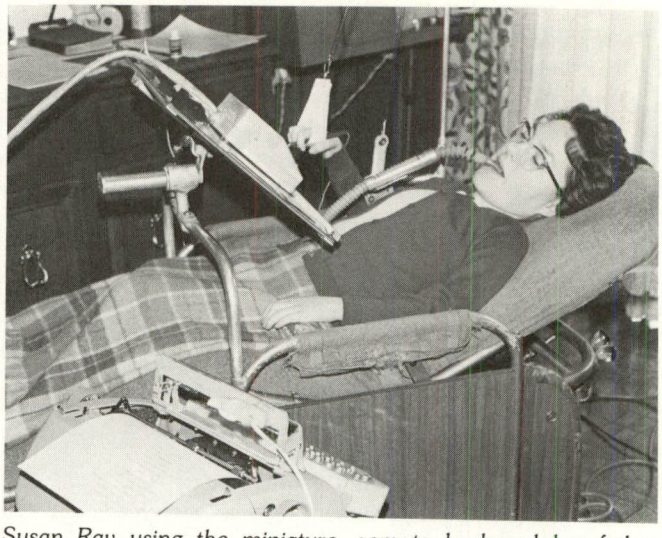
XI. WASHINGTON. Spinal Cord Injury Center, Department of Rehabilitation Medicine, CC-814 University Hospital, University of Washington, Seattle, Washington 98195. Phone: 206/543-3600. Director: Justus F. Lehmann, M.D.
(1) Number of SCI beds and average cost per diem: About 30 SCI beds. About $110 for room and nursing services; physicians' fees extra.
(2) Apartments or facilities for independent living practice: No.
(3) Recreational facilities: Recreational therapists utilize the university campus facilities, including the pool
(4) Driver training: Training includes simulators, cars, and vans.
(5) Other services and special facilities.

The Disabled in Protestant Churches

by Susan Ray

Churches, like all other institutions made up of people, are not perfect. They are not always quick to respond to the needs of disabled people, encourage their participation, make buildings accessible, or accept the disabled as leaders. Not always I say — but often. Many churches are coming to do all these things. As disabled people become more involved in all areas of life, I feel we will play a larger role in church life, too.

There are already hundreds of disabled persons who are active lay church members. This article, however, will focus on those who hold employed or ordained positions in various denominations; it is not a representative sample, only a group of persons known to myself, to Gini Laurie, and to *Gazette* readers such as Mrs. Jean Legried of Minnesota. This article will also give a few random examples of churches that are providing for the disabled, considering first the deaf, then the blind, and finally those in wheelchairs.



Susan Ray using the miniature, remote keyboard her father designed.

THE DEAF. Southern Baptists, to which I belong, have a well-established ministry with the deaf. Carter Bearden, Field Consultant for Deaf Ministries of our Home Mission Board, is a deaf man who has obtained degrees from New Orleans Baptist Seminary and Emory University. Led by the Home Mission Board, about 20 individuals or couples serve as missionaries for the deaf in half the states of the nation. They preach, counsel, conduct weddings and funerals, and train deaf Christians to be leaders in their churches. In several states, they hold religious camps or conferences for the deaf; the workers here in North Carolina produce a weekly televised devotional program, which is broadcast in a number of states. But primarily these workers encourage and help local churches to serve the deaf.

Over 600 Southern Baptist churches across the nation provide at least interpretation of the worship service or a sign-language Bible study class. Some also offer interpreters or sign-language sessions of other church activities. In a few cases, the deaf people form almost a separate congregation, providing most of their own leadership.

In 1973, the First Baptist Church in Danville, Kentucky, had 25 Sunday School classes for 250 students from the state school for the deaf. Deaf members of Haverhill Baptist Church in West Palm Beach, Florida, are part of the total church family but lead their own program of church activities. A rather unique church exists in Oregon. The Evangelical Deaf Church began in the 1940's as an interdenominational church to serve all deaf people in Portland. After meeting in several churches' facilities, they purchased a small building downtown. In 1975 the church decided to affiliate with Southern Baptists. Both the first and the present pastor are hearing, but the other church leaders are deaf.

Lutherans also have a substantial deaf ministry. *The Deaf Lutheran,* a monthly newspaper, is published by the International Lutheran Deaf Association and the Board for Missions of the Lutheran Church-Missouri Synod. A recent issue told of Rev. Kjell Omahr Mörk, a native of Norway, who had just become the first deaf graduate of Concordia Seminary in St. Louis. In June of 1977 he was installed and ordained to begin his duties as pastor. Mörk served as vicar in the metropolitan Washington D.C. Churches of the deaf as part of his theological education.

The Deaf Lutheran, captioned filmstrips, and other materials for the deaf are available from Concordia Publishing House, 3558 South Jefferson Avenue, St. Louis, Missouri 63118. Information on how to begin a deaf ministry and on available materials is offered by the Southern Baptist Home Mission Board, 1350 Spring Street, NW, Atlanta, Georgia 30309. Two booklets of Sunday School lessons with a simplified vocabulary may

Susan Ray, respiratory polio quad, has been disabled since she was four. The daughter of a Baptist preacher, she has been active in the church all of her life. In addition to teaching, she has devoted 10 years to writing Southern Baptist materials. Address: 2208 Charlotte Court, Raleigh, North Carolina 27607.

be ordered every three months from the Baptist Sunday School Board: *Sunday School Lessons Simplified* and *Simplified Bible Study*.

THE BLIND. "Southern Baptists do not have a specific, denominationally oriented ministry with the blind at the present time, and some Baptists believe it is long overdue," said a North Carolina Baptist publication. One of those urging an organized emphasis, similar to that with the deaf, is Rev. Jay Waugh, a blind evangelist in Burlington, North Carolina. After graduating from Southern Baptist Seminary in Kentucky, he founded the Kinnett Memorial Baptist Church in Burlington, which he pastored for 17 years before beginning full-time evangelistic work.

Along with encouraging churches to seek out the blind in their communities and provide transportation and Christian materials, he says churches need to be taught to offer acceptance and association. "Sighted people have a way of keeping their distance — so do the blind," says Waugh. "My personal desire is to see that kind of ministry that makes people in general aware that we who have so-called 'handicaps' are still very much people with the same longings and desires as have our peers. We want to make our contributions as do our fellows. Baptists are losing some potentially great leaders whose abilities are wasting away."

The American Bible Society, 1865 Broadway, New York, NY 10023, has Bible portions in braille and on tape or records. The whole Bible on records costs $38; in braille it costs $129. Taped Sunday School lessons and other Christian materials, most free, can be ordered from Christian Education for the Blind, Inc., Box 6399, Fort Worth, Texas 76115. Two monthly braille periodicals are available free from the Baptist Sunday School Board, 127 Ninth Avenue N, Nashville, Tennessee 37234, (Write to the Braille Editor.) Each contains Bible lessons, Christian training material, and missionary information. *The Braille Baptist* for adults comes in either braille grades 1-1/2 or 2; the *Youth Braille Baptist* comes only in grade 2.

PERSONS IN WHEELCHAIRS. Many congregations and religious organizations welcome and benefit from the service of persons in wheelchairs. Although barrier-free church buildings are still few, more are being made at least partially accessible.

In 1956, the Crusaders Chapel was begun in Fort Worth, Texas, as a unique church of and for the disabled. (For more on this chapel, see the 1972 *Rehabilitation Gazette*.) Some churches supply homebound members with tapes of worship services.

The Lutheran Church-Missouri Synod has adopted a resolution to "renew its efforts and pledge its resources to a more complete ministry with handicapped people, providing them with the opportunity to study God's Word, to experience the fellowship of believers and the stewardship of God-given gifts and talents." The resolution specifically encouraged congregations to "provide barrier-free access and handicap parking." David Beese serves as a worker/priest with the disabled for the Lutheran Metropolitan Ministry Association in Cleveland. Last fall the Southeastern Conference of the United Methodist Church sponsored three seminars in Florida to enable church leaders to "mainstream" disabled persons into their activities.

Of course, with or without special provisions, many people in wheelchairs do hold positions of leadership in Protestant churches and organizations. For example:

Larry Abbott and his wife are home missionaries under the independent Baptist Mid-Missions agency working on university campuses around Ankeny, Iowa. "A lot of our work is both with Bible study groups and personal counseling. We help local church people and their pastors in their involvement on a number of campuses."

Bob Bardwell is director of the Ironwood Springs Christian Ranch in southern Minnesota. He became a paraplegic from a construction accident just after completing his seminary work. "I have always worked with youth and enjoyed it. We are here because we love people, care where they spend eternity, what they do with their lives, how they get along with themselves and their neighbors." Goals include a retreat center for the handicapped.

Until her recent death, Bobbie June Slatten, disabled by respiratory polio, served Anglicans throughout the Oklahoma diocese as secretary for the Shepherd of the Good Mission.

Hoyle Allred, wheelchaired by a stroke, continues to serve capably as Director of Associational Missions in Gastonia, North Carolina. With his wife as driver, he helps Baptist churches of the area to upgrade their church programs and leads them in mission work. "There are days when it seems I may be in one of the most meaningful (and useful) periods of my ministry."

Robert Lovering had polio in 1946 during his last year at Northwestern Bible School in Minneapolis. After his fiancee persuaded him to go through with their marriage, they sought missionary appointment as they had planned, but in vain. He finally found his place of service as a counselor for the Christian League for the Handicapped. He also worked for United Cerebral Palsy of Greater Minneapolis and the Minnesota Society for Crippled Children and Adults, plus remodeling his own home. Now living in Phoenix, Lovering has set up a non-profit corporation, Arizona Rehabilitative Counseling Services, Inc. The Baptist minister says, "In counseling or rehabilitation work it always seemed as though the positive effects of my disability outweighed the negative."

Dr. Helen Knubel, polio paraplegic since childhood, has served for 24 years as archivist for the Lutheran Council in the USA. Since retirement, she has continued to serve as a consultant, helping to initiate an oral history collection of taped interviews with past and present Lutheran leaders.

Anita Watson, disabled with cerebral palsy, attended Schauffler College of Religious and Social Work. Intrigued with the idea of chaplaincy, she worked three

years at the Elyria Methodist Home for the Aged. For more education in the field, she then went to the Methodist Theological School in Ohio and trained at Riverside-White Cross Hospital in Columbus. As the first woman graduate of the new school, she was ordained as a Methodist Elder in 1964. However, a chaplaincy position has been hard to find. Meanwhile, she has filled in for her pastor at Cove Church in Lakewood, Ohio, and for a friend during recovery from surgery. She has helped with counseling, weddings, funerals, and has accepted invitations to preach all over Ohio, in Georgia and Florida — in fact coast to coast!

I myself had respiratory polio in 1952 at age four. I am a Baptist preacher's daughter and have been active in church all my life, except for a couple of years after having polio. For seven years I have taught children at our former church in Texas and our new one here in Raleigh, North Carolina. Both churches have given me an acceptance that let me do whatever I thought I should and could — even coping with a room full of children until I was hoarse, muddled, and exhausted! For ten years, my vocation has been writing Southern Baptist materials promoting stewardship and mission support — audio-visuals, articles, and two books. I work at home, by assignment, using a typewriter my father built with a miniature, remote keyboard.

CONCLUSION. I believe all the people named above would agree that for a disabled person contemplating a church-related vocation, the first considerations should be spiritual. Religious service should no more be thought of as "sheltered employment" for the disabled than as a refuge from the world for the able-bodied. If God calls a person, He will help in dealing with the physical limitations, either working around them or living with them.

Contrary to some folks' notion, a Christian with a disability is not automatically a "super-saint!" Neither do the disabled need a personal faith in Christ solely because they are disabled; they need it as all men do.

Let me add one more note. If you are not involved in a church but want to be, don't wait for someone to find you. Call some churches. Look around for a congregation that will meet your needs, make you feel at home, and let you be one of the family to the fullest extent.

Retreat/Conference Center

by Shirley Locker

"It's a dream come true!" wrote one camper after she attended the opening in 1977 of Inspiration Center, the retreat and conference center owned and operated by the Christian League for the Handicapped in southern Wisconsin.

The first units of the camp were completed in 1975 — six cottages which have two large rooms for four joined by a large bathroom. Each room has four comfortable (firm) beds, four dressers, and two night stands. There are two sinks in each room, and in each bathroom there are two toilets and one bathtub with shower. Beamed ceilings and panelled walls create a rustic and cozy atmosphere.

There are no steps in any of the buildings, and the doorways are wide. The various buildings are joined by level asphalt pathways 10-feet wide, good for wheelchair races or just wheeling with a friend.

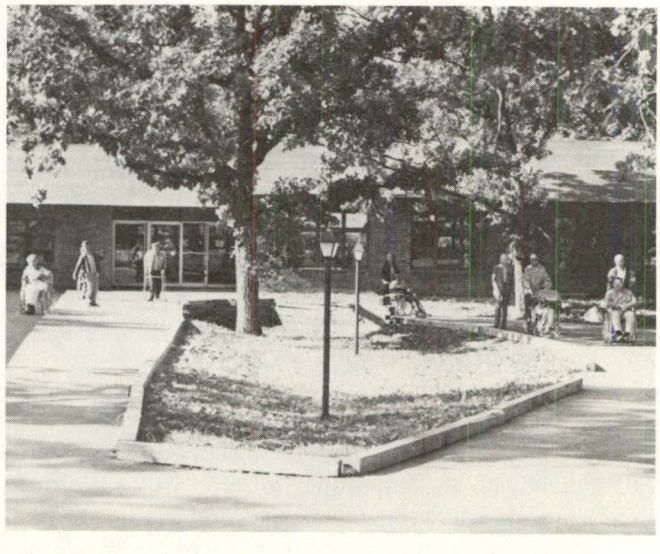
The main lodge was completed in 1975. The dining room has a large stone fireplace on one end, providing focus for an informal lounge area. The main lodge has 16 sleeping rooms, 10 of which have private baths. Inspiration Center can house 110 campers altogether. A balcony surrounds one edge of the lodge, allowing campers to wheel or walk close to the trees.

The downstairs area, serviced by an elevator, is used by the Rehabilitation Department of the Christian League, but during camp sessions, the craft activity is also centered here. The rehabilitation center has an evaluation kitchen where campers can receive some hints on independent living.

Swimming opportunities are provided in the indoor pool of the CLH Occupational Home, which is on the same acreage. In the summer, a flatbed "open-air taxi" pulled by tractor transports campers back and forth to the pool. An outdoor pool at the campsite is in the projected plans for the future.

One of the main purposes of the Christian League for the Handicapped is to meet the spiritual needs of physically handicapped people, and therefore the chapel is a focal point of the lodge and of its planned program. The room is simple in design and has panelled walls and rustic chandeliers. A single antique stained-glass window is set in the front wall.

The Christian League for the Handicapped is a non-profit corporation supported by individual and organizational gifts and grants. Many individuals have given of



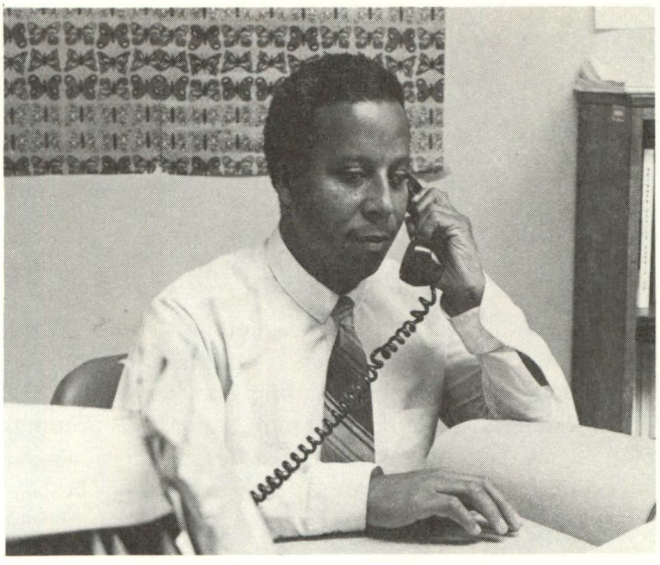
New conference and retreat center in Walworth, Wisconsin.

their time and know-how (such as the architect, who donated his services, and the men who hauled and assembled the local stone for the fireplace), and hundreds of people have contributed gifts ranging from $1 to $25,000.

Inspiration Center is located in southern Wisconsin in the Geneva Lake area. The entrance is at the corner of Highway 67 and County Road F, about one mile west of Williams Bay. The retreat center can be rented for retreats, seminars, conferences, and dinner meetings. For further details, write to Clark S. Dempsey, Camp Director, Box 98, Walworth, Wisconsin 53184.

The Ministry and the Blind

by Arthur L. Jackson



Arthur Jackson, "During my service in the Mennonite Church, I found little discrimination because of my blindness."

As a young person, I soon became aware that working opportunities would be less for me because of my minimal visual ability. After working for ten years at various occupations with modest satisfaction, I felt called to enter the ministry. I enrolled at the Philadelphia College of Bible and the following year entered the Reformed Episcopal Seminary in Philadelphia. Before graduation, I served a small mission parish. When I graduated in 1964, I was assigned two additional congregations in the Mennonite Conference. In 1966, I was asked to pastor a suburban Mennonite church in Toledo, Ohio. I remained there until my move to Chicago in 1968, where I pastored until I retired in 1972 for personal reasons.

During my years of active service in the Mennonite Church, I found little discrimination because of my blindness. Rather, I found warm acceptance of my counseling and outreach activity by those rural and urban Mennonites whom I served.

Although the salaries were modest, the sincere manner in which I was received far exceeded that of other denominations that were less favorable towards qualified ministers who are blind.

I acquired my M.S. in rehabilitation administration at Southern Illinois University and I am now employed as an instructor of the older blind at Black Hawk College in Moline, Illinois.

As I look back over my years as a minister, I feel that the ministry is a worthy field for the blind, even though it involves problems with travel and congregational politics. Now I yearn for a university campus where I might pursue my interest concerning the elderly and especially those with visual or physical impairments. Much of the peace that older persons possess can be traced to the religious peace that they may have gained in their earlier life, and much of their loneliness can be resolved by the personal nature that a religious identity can offer.

Address: Arthur L. Jackson, E4, Riverview Apartments, Rock Island, Illinois 61201.

Housing and Home Services 1978 Supplement

by Gini Laurie

The *Gazette* first published information on housing for the disabled in 1958. In virtually every issue since then it has reported developments in housing and services in the United States and abroad. The information thus accumulated is now available in a comprehensive collection in my book, *Housing and Home Services for the Disabled* — subtitled, Guidelines and Experiences in Independent Living — which Harper & Row published in 1977. Details, including the table of contents, are at the end of this article.

To keep readers of the *Gazette* and of our book up-to-date on what is happening in the fields of housing and services, we present this supplement. It is a combination of an annotated bibliography and a list of relevant bits and pieces of information. We hope that our readers will continue to keep us informed about what is going on in their communities so that we can continue this supplement in future issues.

Architects' Services

Barrier Free Environments, Inc., Suite 814, Wachovia Building, P.O. Box 53446, Fayetteville, North Carolina 28305. Architectural and design consulting firm for federal and state agencies, national organizations, and private industry.

Community Independent Living, Inc., P.O. Box 991, Monroe, Georgia 30655. Nonprofit firm composed of disabled and non-disabled social workers and architects.

Interface, Box 5688, Raleigh, North Carolina 27607. Custom-tailored home construction and modifications. Phone consultations. Advisory services. Designs for deafness awareness.

Sally Swanson Human Systems in Space, 4489 17th Street, San Francisco, California 94114. Design consulting firm. Free consultation on compliance with regulations and codes to business, industry, and schools. Construct and remodel homes for disabled. When Ed Roberts' home was remodelled, walls were opened or removed and his iron lung motorized so he could move through his environment.

Building Design Associates, P.O. Box 11954, Columbia, South Carolina 29201. Group of management specialists, architects, and engineers. Barrier removal services to public and private owners.

Design Center for the Deaf, Department of Environmental Design, Rochester Institute of Technology, College of Fine and Applied Arts, 1 Lomb Memorial Drive, Rochester, New York 14623. Provides special criteria of the hearing-impaired to architects and designers. Contains a data bank. Information by mail or phone (716/464-2653).

Bathrooms

Acrylic, one-piece shower stall. Waugh Co., P.O. Box 12264, Jacksonville, Florida 32209.

Molded fiberglass, roll-in shower. The Braun Corporation, 1014 South Monticello, Winamac, Indiana 46996.

Complete bathroom package. One-piece, fiberglass shower stall, 18" toilet, and sink with lever-type fittings. Universal-Rundle Corporation, 217 North Mill Street, New Castle, Pennsylvania 16103.

Building Codes/Standards

Accessible Architecture: An Illustrated Handbook Based on Minnesota Building Code Chapter 55. Illustrated and edited by Harold Kiewel and John Salmen. 1977. Sponsored by the City Council of Minneapolis on the Handicapped and the Advisory Committee to the Mayor.

Connecticut. Effective October 1977, most public and private buildings must be accessible. Regulations include new or renovated buildings, apartments, motels and hotels with more than four units. Public buildings include both State and municipal buildings.

New Jersey. The new regulations are available for $2 from the Barrier Design Office, Division of Building and Construction, Box 1243, Trenton, New Jersey 08625.

Universal-Rundle's complete bath for the disabled.

Michigan. *Barrier Free Design. A Design Manual Based on the Michigan Construction Code*. By Georges Selim, P.E. Order from The Office of Disabled Student Services, 2211 Michigan Union Building, University of Michigan, Ann Arbor, Michigan 48109. $8 (Payable to the U of Michigan). 180 pages. 1977.

ANSI. *Proposed: ANSI A 117.1 (1977) Specifications for Making Buildings and Facilities Accessible to and Usable by Physically Handicapped People*. $3.25 from Syracuse University, School of Architecture, Research Office, 118 Clarendon Street, Syracuse, New York 13210.

Hardware

Electric door and window openers: (1) Power Access Corporation, Box 139, Eatontown, New Jersey 07724. (2) Horton Automatics, 4242 Baldwin Boulevard, Corpus Christi, Texas 78405. (3) Prentke Romich Company, RD 2, Box 191, Shreve, Ohio 44676.

HUD

To keep informed about HUD's programs, ask to have your name put on the mailing list for program announcements by contacting Press Release Center, Room 9239, HUD, Washington, DC 20410.

HUD Programs. Request #HUD-214-3-PA from Director of New Services, Office of Public Affairs, Room 9245, HUD, Washington, DC 20410.

HUD Programs That Can Help The Handicapped. Request publication #HUD-467-NNGOCP from the Office of Independent Living for the Disabled, Room 9106, Washington, DC 20410.

Programs of HUD. Published in September 1977, this 150-page compendium contains a one-page description of HUD's program's. Single copies free from Publications Service Center, HUD, Room B-258, Washington, DC 20410.

Selected Publications Checklist. Published January 1976. Request #HUD-170-1A-(2) from HUD, Washington, DC 20410.

HUD and the Handicapped. Guide to barrier-free design, including specifics on kitchens and bathrooms. Developed by area office of HUD in Minneapolis and the Handicap Housing Service, Inc. (HHS). Free from HHS, 230 Metro Square, 7th and Robert Streets, St. Paul, Minnesota 55101. (The executive director of HHS, Mary O'Hara, wrote, "I would like to hear from others who are concerned because HUD has not issued regulations or guidelines on housing for the disabled.")

HUD, Section 8

Section 8 regulations for small group residences are available from Chief, Existing Housing Branch, Office of Assisted Housing Development, HUD, 451 Seventh Street, SW, Washington, DC 20410. An "independent group residence" is defined as "privately owned housing for the exclusive use of no more than sixteen eligible" elderly and disabled persons who require "a planned program of continuous supportive services or supervision, but do not require continuous nursing or medical care." For Section 8 purposes, residents may be considered as a family or as individuals.

Buffalo, New York, gives priority to persons who are disabled in alloting Section 8 rent subsidies. A coalition of organizations effected the priority.

Albuquerque, New Mexico. The local NPF/PVA Chapter assists with certification for Section 8.

Independent Living

Handicapped at Home. By Sydney Foott. Published by Design Council, 28 Haymarket, London SW1, England. 1.85 pounds (about $3.60 plus postage). Attractive and informative. Stresses careful planning and attention to details. Central theme is author's belief that independence is the driving force that enables a handicapped person to live a normal life. She warns against too much pampering. "It becomes fatally easy to take over from a disabled person, leaving him no responsibility for his own life . . . nothing should be dismissed as impossible or too difficult until it has been carefully considered."

Home Management. One of the *Equipment for the Disabled* series which has been revised and expanded. Contains guidelines for planning kitchen layout and equipment; suggests solutions. 5 pounds. Available from Equipment for the Disabled, 2 Foredown Drive, Portslade, Brighton BN4 2BB, England.

Independent Living by Susan S. Pflueger, with a foreword by Edward V. Roberts. Reviews pertinent legislative history, current issues, and estimates of target population. Presents major models of independent living. Free, while supply lasts, from Institute for Research Utilization, Washington Transportation Alliance, 719 Delaware Avenue, SW, Washington, DC 20024.

Independent Living Learning

United Cerebral Palsy Association, 7117 S.E. Harold Street, Portland, Oregon 97206. Apartment Living Program trains for transition from a group home or foster care to an independent situation. Two specialists give training in cooking, shopping, money management, personal hygiene, housekeeping, and leisure activities.

New Options, TIRR Annex, 105 Drew Street, Houston, Texas 77006. Six-week, live-in program includes peer counseling, field trips, psychological assessment and consultation, transportation, financial and home management, social and functional skills, sexuality, exploration of vocational and educational opportunities, and group discussions. Details from Dr. Jean Cole, Project Director.

Worcester Area Transitional Housing, 507 Main Street, Worcester, Massachusetts 01608. Director: Donald Riel. 19 residents. Small, individual rooms with shared baths. Meals in a cafeteria. Section 8. Per diem of $23.50 includes attendant care, counseling, training, transportation, room, and board. Majority from institutions. Ages 18-40.

Kitchens

Geo. A. Moore & Co. Ltd., Attention: Ian Keen, Thorp Arch

Trading Estate, Wetherby, West Yorkshire LS23 7DD, England. England's leading manufacturer of contract kitchen furniture has developed a line of flexible kitchen cupboards and worktops. Attractive brochure! (Interested in export.)

Legislation (Passed) Relating to Independent Living

California AB922. This important law, which became effective January 1978, removes disincentives by removing existing restrictions on income. As personal income increases, the State pays a smaller portion for support services, such as attendant care and Medi-Cal. Before, SSI benefits were terminated when disabled recipient earned $200 or more; this resulted in immediate cut-off of attendant care and Medi-Cal. Under the new law, funds are available to employed persons no longer receiving SSI if they require at least 20 hours of care per week in their home and if their income is insufficient to pay for the services.

New York State S.6345. "Medicaid eligible persons who are in or who qualify for a nursing home or other health care facility may receive home care services instead. If it is appropriate to their needs, Medicaid will pay for up to 75% of the average cost in their county of the institutional care for which they qualify." The new law defines home care services broadly to include homemaker, housekeeping, personal care, and chore service. To be eligible, the program must be under governmental or voluntary nonprofit auspices.

A Medicaid regulation that can be used for statewide home care has been in effect since February 1, 1970, yet few States have utilized it. The regulation, 249.10 (b) (15) (vii) states that payments can be made for "personal care services in a recipient's home rendered by an individual, not a member of the family, who is qualified to provide such services, where the services are prescribed by a physician in accordance with a plan of treatment and supervised by a registered nurse."

Legislation (Proposed) Relating to Independent Living

National: H.R. 8341. Introduced by Mario Biaggi of New York. Would provide home health aides funded by Medicaid to non-Medicaid eligible severely disabled individuals who could work or engage in gainful activity if they had such assistance.

State: H.R. 6577 introduced by the former Representative Koch of New York in April 1977. Would establish a system for promoting the creation of independent living centers within the Office of Human Development of HEW, making available $250,000 for centers in each State.

Mobile/Modular Homes

FHA loan insurance has been expanded to cover the combination of mobile homes plus their sites; mobile homes now eligible under the Section 235 Homeownership Subsidy Program.

Donnington Mobile Homes for the Handicapped, 52-60 The Broadway, Didcot, Oxfordshire, England. Sales manager and designer: Roger J. Sylvester. Standard models are 30', 36', and 43' x 10' wide.

Jafny Manufactured Homes, 2414 East F, Tacoma, Washington 98421. Mobile home called the "Barrier Breaker."

Modification Services

Robertson Custom Aids Ltd., 777 Warden Avenue, Unit 11A, Scarborough, Ontario M1L 4C3, Canada. Manufactures, installs, and services lifts and elevators (4' to 30') and makes modifications to bathrooms, doorways, entrances, and kitchens.

R.J. Chairlift Company, Inc., 715 Fifth Avenue, Maywood, Illinois 60153. Vertical and stair lifts for residences and commercial buildings. Complete package of services for mobility.

Remodeling Grants

Minnesota HF875. Provides grants up to $5000 to low income residents for rehabilitation of their homes, plus an additional $2500 for removal of architectural barriers if the resident is disabled. Grants to make one- and two-unit dwellings more accessible are available from the State-financed Accessibility Improvement Incentive Fund. $500,000 was appropriated by the 1977 Minnesota legislature. Grants are distributed through local Housing and Rehabilitation Authorities. To provide technical assistance, MHFA contracted with Handicapped Housing Services, Inc., 230 Metro Square, 7th and Robert Streets, Minneapolis, Minnesota 55101. (612/222-1813)

Resource Guides

Resource Guide to Literature on Barrier-Free Environments. With Selected Annotations. By the Architectural and Transportation Barriers Compliance Board, Washington, DC 20201. January 1977. 223 pages. Topics cover architecture, transportation, parks and recreation, standards, legislation, statistics, and human factors research. Appendices cover travel guides and periodicals and organizations related to environments or services. Very useful. Free.

Barriers and Bridges. An Overview of Vocational Services Available For Handicapped Californians. Attractive, well organized, comprehensive guide. Useful to disabled individuals and professional personnel anywhere. 149 pages. 1977. $3 from California State Department of General Services, Office of Procurement, Publications Section, P.O. Box 1015, North Highlands, California 95660.

Bibliography on Architectural Barriers. Free from Reference Section, Division for the Blind and Physically Handicapped, Library of Congress, Washington, DC 20542.

Home In A Wheelchair. By Joseph Chasin. $2.50 from the Paralyzed Veterans of America, 7315 Wisconsin Avenue, Washington, DC 20014. 1977. 32 pages. Basic and comprehensive.

Design Criteria: New Public Buildings Accessibility. 157 pages. Attractively illustrated. Clearly presented. $2.60 from Public Buildings Service, General Services Administration, 1500 East Bannister Road, Kansas City, Missouri 64131.

Open House — Preparing a Successful Home Environment for the Wheelchair User. Free from Access Chicago, Rehabilitation Institute of Chicago, 342 East Superior Street, Chicago, Illinois 60611.

Respite Care/Day Care Centers

A Community Respite Care Program for the Mentally Retarded and/or Physically Handicapped. A Handbook. By Deanna Shoob, Childcare Assistance Program for Special Children, Inc., Box 1217, Springfield, Virginia 22151. Excellent summary of a low budget community program that furnishes trained care in and out of home for disabled of all ages. Lists other respite programs around the country.

Developing A Day Center For Disabled Adults: The Kenny Experience. By Margaret Dawson. 40 Pages. Describes process of developing a center. $3.25, plus $1 on orders less than $5. Publications, A/V Dept., #280, Sister Kenny Institute, Chicago Avenue at 27th Street, Minneapolis, Minnesota 55407.

In December 1977, HEW clarified Title XX funds for day care equipment and supplies, renovations, and minor construction. Details from Mrs. Jonnie U. Brooks, Office of Policy Development, Interpretation, and Coordination, DHEW, Mary Switzer Building, 330 C Street, SW, Washington, DC 20201.

Services, Innovative

In a program called Easy Ride, ex-drug offenders receive training in driving and escorting disabled and elderly citizens on weekly errands. Program directed by Wildcat Corp., an ex-offenders' organization.

MS Chapters of the Atlantic Division, Canada, offer an annual course in home care for the relatives and friends of persons with MS. Wide range of topics, from aids to sexuality.

Self-help program of exchange of skills and talents. For details, send an addressed and stamped envelope to: Useful Services Exchange (USE), 1614 Washington Plaza, Wellborn Building, Reston, Virginia 22090.

Homebound. Hopebound. Aimed Toward A Brighter Future. 18-page booklet describes services funded by State of Alabama's program set up in 1975, including attendant care, transportation, home modification, and medical care and supplies. The program is administered by health teams of counselor, RN, PT, and secretary.

The Georgia Warm Springs Hospital, Warm Springs, Georgia 31830, has initiated a one million dollar, HEW-funded, project to research family acceptance and family involvement of the spinal cord injured. Director: Ernest L. Craft.

Access Real Estate, Richard C. Weir, Sea Realty, Montauk Highway and Mill Road, Westhampton, New York 11977. Free national central registry of wheelchair accessible homes. Transactions handled through licensed brokers at standard fees.

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a new book from Harper & Row

Housing and Home Services for the Disabled

Guidelines and Experiences in Independent Living

by Gini Laurie, Editor/Publisher and Founder, "Rehabilitation Gazette," with contributions by Donna McGwinn, Book Editor, and Joseph Scott Laurie, Co-Editor. Cartoons by Robert E. Tanton, Jr., Art Editor. Preface by Isabel P. Robinault, Ph.D., Supervisor, Research Utilization Laboratory, ICD Rehabilitation and Research Center. 415 pages and index. 131 illus. 9 cartoons. $20. Published in 1977.

HARPER & ROW, Publishers, Inc., Medical Department, 2350 Virginia Avenue, Hagerstown, Maryland 21740. (Phone: 301-733-2700. Ask for Mrs. Taylor.)

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Books

*by Donna McGwinn**

The Body is the Hero

By Ronald J. Glasser, M.D. Random House, Inc., 201 East 50th Street, New York, NY 10022. 1976. $8.95. Do you ever think about your body and all the wondrous, purposeful tumult going on within it? Ever since my body was paralyzed I have been more aware of it than before, but I was never as awed and grateful for its performance until after I read this book. This is a magnificent, importantly informative work that everyone should read.

It takes a bit of concentration to get into and flow with this book, but once you do you will find it exciting. The subject is the body's immune system, how you manage to protect yourself from constant external and internal attacks. There is suspense and drama in the story, especially in the mysteries of the body as explored by doctors who challenged prevailing medical theories to discover facts and cures that are responsible for many *Gazette* readers being alive today. These doctors persisted with their explorings despite ridicule and diatribe from their medical peers. Dozens of these fascinating human stories remind readers that the things they take for granted — moving, breathing, seeing, hearing, life itself — are possible only because of their ever-vigilant immune system and the dedicated efforts of doctors and researchers who care.

Born on the Fourth of July

By Ron Kovic. McGraw-Hill Book Company, 1221 Avenue of the Americas, New York, NY. 10020. 1976. $7.95. Quite a book. I read it in one night. A movie is being made from it. A lot of people are talking about it. It is earthy and bitter and will make a lasting impression. Throughout are the illusions and ironies of patriotism as experienced by one born on the fourth of July.

Ron Kovic makes us think again about Vietnam and what it did to him and thousands of others, to our country, our institutions, our beliefs and, indeed, our whole way of life. He begins his autobiography as a young Catholic boy with high ideals who aspires to be a Marine. This he achieves and goes to fight in Vietnam. There he discovers how glorious war can be — killing his own men in a panic, blasting off the heads and limbs of children and old men by mistake, carrying and bandaging shattered bodies and not being able to feel or move after a bullet tears through his lung and spinal cord.

After he leaves Vietnam the sobering lessons continue: hospitals are hell, people don't cheer when he rides as grand marshal in a parade, loving and lovemaking are traumatic, the war is insane, and when he protests against it he is beaten and thrown into jail. If anyone wants to know how a wounded Vietnam vet feels and how he is different from wounded vets from other conflicts, he will find the answer in this book.

Handbook for Helpers

By Lillian Petock Crowley. National Impediment Registry, Inc., Freedom Gardens, Mohegan Lake, New York 10547. 1977. $5. Crowley has undertaken to inform those who help the disabled with the everyday tasks of living of the best attitudes and procedures for that service. Her effort is appreciated, for training can be energy- and patience-draining, and Crowley makes several good points that it is important for helpers to know. Also, I like the idea of a national pool of helpers toward which book profits will go. On the other hand, my feeling is that each person's needs and wishes are so personal that it is hard to generalize in a book of this sort. It is like having a handbook for housekeepers, cooks, secretaries, and valets.

It's Hard To Leave While The Music's Playing

By I.S. Cooper, W.W. Norton & Co., Inc., 500 Fifth Avenue, New York, NY 10036. 1977. $7.95. "Carpe diem — seize the day. Grab it, each moment." This was the philosophy of Louis Morell who at age 50 discovered that he had amyotrophic lateral sclerosis, a progressive, fatal disease that paralyzes the nervous system. It is sometimes known as Lou Gehrig's disease, named for the famous baseball player who was disabled by it.

The author is an internationally renowned brain surgeon. His medical knowledge is evident throughout this story that is told from the point of view of Dr. Daniel Carter, Morell's best friend. Dr. Carter is on trial for the murder of Morell in the opening pages.

Cooper's absorbing, dramatically written novel compels the reader to think about such things as friendship, duty, morals, purpose, love, and euthanasia. Its haunting title comes from the music of life and ambition that lure Morell toward the top. He is near the peak when he realizes he is going to die.

Joni

By Joni Eareckson with Joe Musser. Zondervan Publishing House, Grand Rapids, Michigan 49506. 1976. $6.95. An athletic, high-spirited girl of 17 breaks her neck in a diving accident at which point she begins ". . . an incredible adventure which I feel compelled to share because of what I have learned." Joni shares her feelings and experiences honestly and in detail. The reader feels what it is like to be skewered to a Stryker frame with her

*Donna died of a perforated ulcer on April 9, 1978.

head shaved, to have friends shrink from her appearance, and to be frustrated in her desires to move or be held and loved.

The reader also feels Joni's change in attitude and spirit as she turns her life over to Christ and accepts the belief that there is purpose and meaning for her even though she cannot move or take care of her physical needs. Her relationships improve, she experiences the joy and sorrow of romantic love, and she develops her ability to draw and become self-supporting. A really good story, well-written, with many pictures of the author's family, friends, and art work.

Winning

By Robin F. Brancato. Alfred A. Knopf, Inc., 201 East 50th Street, New York, NY 10022. 1977. $7.95. It is hard to tell a story about life as a quad unless you've been one, lived with one, or are an empathetic, skilled novelist. Brancato is the latter and presents this fast-moving, believable experience of a high school football player who tackles hard enough to permanently injure his spinal cord and become a quad. One area of concern, and it is a large area, is untouched by the author, and that is people upon whom one depends, either family or staff, who are uncaring, hostile, or dangerously inefficient.

Gary Madden goes through the various stages of adjustment to paralysis with the help of his parents, friends, girlfriend, and English teacher. His teacher encourages him to write a journal that charts his thoughts in the hospital and later in the rehabilitation center. In this way she learns that, despite his rehabilitation progress, he despairs that he will be nothing but a burden to those who love him. At this crucial point she assures him that many people need him, including herself.

Travel

Security in Transcience

by Andrea Cappaert

When my friend, DaleAnn, and I knew that the time had come to leave our hometown in Michigan, we were ready to go within 24 hours. We threw our clothes in knapsacks, our knapsacks in Big Blue (a van borrowed from my parents that has space for my wheelchair and a backup to the car's battery for my respirator), loaded my iron lung into a rented U-Haul, found a driver on a bulletin board to share the 1200-mile drive, and set out for unknown and random New Orleans.

The next two weeks were an exhilerating struggle for survival. We moved down Airline Highway from the $18 to the $12 to the $8 motel. Our search for less expensive quarters led us next to the cavernous basement of a boarding house jokingly called "The Palace" where DaleAnn swept ten years worth of cigarette butts into a corner for a rent reduction. Finally, with our last $50 we rented a room on Carondelet Street.

Each move involved moving the iron lung (800 lbs., 7 ft. long, 3 ft. wide, and 5 ft. tall), and these moving escapades became our version of street theater. We had learned a lot standing in motel parking lots at 3 a.m. (no matter when we set out we seem to arrive at 3 a.m.) trying to recruit the three to five characters it takes to move the iron lung from a trailer into a room.

On our first move we made the error of selecting a pair of gentlemen emerging from the motel bar. By our third move, we concluded that truck drivers were our best risk. They pull in and out of motels at all hours and know how to move heavy machinery without injuring themselves.

Our next challenge, now that a place to stay was resolved, was to replace our depleted stash of money. Of the two of us, DaleAnn was the more likely to find an immediate job. She was intrigued with the topless dancing jobs on Bourbon Street and we were surprised when the first joint she tried out in accepted her.

The eight-hour job created a dilemma for the two of us. We needed cash to hire helpers for me, to relieve DaleAnn of her full-time responsibility. But the catch was that we needed helpers immediately so that she could be free for eight hours to earn that money.

We agreed that I should not stay alone in the tiny room we had rented. Besides the monotony of it, there was no way that I could contact the outside world for help if I needed it. Southern Bell Telephone phone deposits make it rare for low-income people to possess telephones and with our combined resources of 74 cents we certainly fit that category.

To keep me from going stir crazy, we needed accessible public places with outlets to plug my respirator into. (Half of the French Quarter runs on European voltage; we never knew if an outlet would carry the correct voltage for the respirator.) We needed an assortment of part-time helpers. The transient on-the-road culture of the French Quarter was conducive to finding people to hang out with. I remembered the street people I'd met while working at a runaway center in my hometown. We looked in the phone book and, sure enough, there was a similar center in New Orleans. We were lucky to come in contact with a core gang who lived in a crumbling hotel on Dumaine Street. As I observed the chain of people flowing through this hotel I began to grasp the feeling of

security within transiency and I began to understand why my seasons on the road have been my most secure periods. The settled world forgets how immediate needs can be, but the road cuts through the layers of routine leaving needs bare as it cuts through mountains revealing the layers of rock.

Address: Andrea Cappaert, 839 Oakland, Ann Arbor, Michigan 48104.

Wheelchairing Around Europe

by Eileen Van Albert

I left on May 29th and returned on July 28. I landed in Brussels, rented a Polo VW, and toured Belgium, Holland, West Germany (going through East Germany to Berlin with a three-hour bus tour through East Berlin), then via Hamburg to Denmark, Sweden, Norway, and England.

I had a great attendant with me. She is tall, blonde, strong, and so attractive in face and manner that we had all kinds of masculine help.

We took the Göta Canal boat trip from Stockholm to Göteburg. It lasted three days and two nights. I recommend it highly. People make reservations a year in advance but we were lucky and got one twelve days in advance. Of course, we had to take one of the higher-priced deck cabins. My attendant swung me from my wheelchair outside the bulkhead of our door to my lower bunk. The bathroom was down the way, so I used the waste basket.

Another tour, by bus and ferry from Oslo to Bergen, a few days in Bergen, then by train to Oslo, was as dramatic as anything I've ever seen.

We kept the Polo for five weeks, until we reached Stockholm. We used Avis rentals this time. We were advised to try Esso rentals next time because they are cheaper and the Esso and OK motels have at least one room in each place for wheelchairs.

Here in Guadalajara, I have a new guest residence for the wheelchaired and have some openings for both men and women. Ken has some space too, but he takes men only. If anyone wants to stay here, call me for reservations at 21-38-22.

Address: Eileen Van Albert, Apdo. 5-208, Guadalajara, Jalisco, Mexico.

The Galloping Wheelchair

by Selma Z. Sack

I did it! I finally did it! I rode in a public bus feeling like an ordinary commuter and not like a third-class citizen (something a handicapped person in a wheelchair is often referred to).

I have multiple sclerosis and I am in a wheelchair. I still refuse to be a shut-in. I don't have a car so I have to rely on taxis to take me here, there, and everywhere. I live in El Cajon and use the Yellow Cab Service for my transportation.

I have often said to the various cab drivers, "Too bad this Yellow Cab does not go all the way down to San Diego as there are so many interesting things I would like to see but my wheelchair is holding me back." "Really" said one driver. "Don't use a pair of wheels as an excuse. If you really want to go alone you have to make a special effort, but it can be done."

On August 23, 1977 I called the Bus Transportation Corporation of San Diego to make a definite appointment for Bus #7 to meet me the following day (this bus has a wheelchair lift). I was told to meet the bus at the starting point — 69th Street & University Avenue in San Diego at 1:00 p.m. on the following day.

On August 24, 1977 at 11:45 a.m. I called the Yellow Cab Co., requesting a cab to take me to the end of the line where I was to meet the Dial-A-Ride cab. Then the Dial-A-Ride cab of La Mesa was going to take me to meet the "Special Bus" with a wheelchair lift.

In ten minutes the Yellow Cab was in front of my home. When I entered the cab I proceeded to give the driver the fare (one yellow ticket worth 50 cents). The driver was told by his dispatcher where I was going. In ten minutes we arrived in La Mesa to find the Dial-A-Ride cab waiting for me. My driver told the other cab driver that I had a wheelchair. Before I was able to move, the two cabs parked very close to each other thus making it easier for me to transfer. I took two steps while the drivers held me by my elbows, thus I was able to enter the awaiting cab easily. My wheelchair was also transferred to the trunk of the awaiting cab.

In the Dial-A-Ride cab I asked the driver what the fare was. I was told that it would be 65 cents one way, but he would give me a transfer to be used on the bus. When we arrived at the bus stop the cab driver said he had to leave, but that the "Special Bus" would come along exactly at 1:00 p.m. (in 40 minutes).

When the bus finally arrived it stopped near the curb. The bus driver pressed a button near the steering wheel and the steps moved down (similar to an escalator). Another step shot out (similar to a drawer) and I, in my wheelchair, feeling a bit nervous, got on this small platform. I was told to close my brakes. The platform then went up to meet the floor of the bus. I then unlocked my brakes and drove into the space reserved for a wheelchair. My back wheels were locked into place on the floor of the bus plus a seatbelt was put around my waist, then off we went. This took three minutes.

I then asked the driver what the fare was. I was told that since I had a transfer from the cab there would be no charge. It's all unbelievable!

I am glad that I wore my dark sun glasses as it hid the tears. This is the first time in 10 years that I have been able to ride in a public bus.

I asked the bus driver to stop at the Zoo stop. At my

stop the bus came to a halt near the curb. The same procedure occurred, the driver pressed the button, the steps turned into an elevator, and off I went. I was told to go straight ahead for two blocks then I would come to the Zoo entrance.

When I got off the bus I was lucky to see a young couple walking in the same direction as I. He asked, "Would you like a push?" "Yes," I answered, "that would be great." He then pushed me to the entrance, I paid my admission, and rolled in.

A park guide told me that I would be able to get on the sightseeing bus. At the bus depot I bought a ticket for $1.50 and had a short wait for the next bus. When the bus arrived I was surprised at seeing the steps as I had expected to see a ramp or small elevator as the guide had told me that I would not have any trouble getting on. Two uniformed guides lifted me out of my chair and carried me on to the bus and placed me in the first seat near a window. My chair was folded and left in the office at the depot until my return. As I saw two other folded wheelchairs standing there I felt my chair would be safe.

The ride through the zoo was interesting. Many of the animals were snoozing due to the heat of the day. That bus ride lasted about 40 minutes. When I got off the bus I paid a visit to a nearby restroom. It was clean and had one large stall for a wheelchair. I ate lunch at a nearby lunch stand that had tables and chairs outdoors. A waitress brought my food over to the table. I ate slowly, looked about, relaxed, then I started the trip back home.

On the bus going home the fare was only 15 cents. I was surprised to see the driver talk into a phone to his office dispatcher. The phone was just above the driver's head. After asking me if I wanted a cab, he relayed the message to the dispatcher. When the bus returned to 69th Street and University Avenue, I had a short wait of ten minutes before the Dial-A-Ride cab showed up.

I must admit it was a very strenuous day, but it was worth it. Now that I have found that I can use the bus I intend to do so again and again.

Address: Mrs. Selma Z. Sack, 1052 Redwood Avenue, Apt. 6, El Cajon, California 92020.

Friends Around the World

How to pass time? This question came to me when I came back from S.S.K.M. Hospital, Calcutta, after a three months stay as a C5-6 spinal injured patient to my home town, Puralia, with no clear idea about my future.

"All of a sudden I thought that I will have to make some arrangement for me. But that must be done by myself only. So I started communicating with people in the line of rehabilitation in my country and abroad. I wrote to Harper & Row Medical Book Department and the publisher sent my letter to Mrs. Gini Laurie of the *Rehabilitation Gazette*. So I came to know about associations like Rehabilitation International, journals like *Rehabilitation Gazette*, and disabled persons like Dr. Masao Nagai and Dr. Mary Verghese, who are still in their profession and doing great works in the line of rehabilitation.

"At the midst of negative and semi-positive replies of my letters I received a positive reply from one gentleman, whose address I had from an issue of the *Gazette*. Yes, he is Dr. Howard A. Rusk, MD, president, World Rehabilitation Fund. He offered me a fellowship from W.R.F. and, through Prof. M. Natarajan, arranged a training programme for me in rehabilitation medicine at Government General Hospital, Madras, under Prof. T.K. Shanmugasundaram, Prof. S. Soundar Pandian, Prof. I.S. Shanmugam, and Prof. K. Janardhanam. I shall be finishing my training programme in October 1978.

"After this I want to move from one end of my country to the other end, to meet people like me and their families who think that after a man is disabled there is no other way out except for death. At this era of science, I know now that this does not stand. "But for these plans I am in need of a vehicle and finance too. It will be a great pleasure and I shall be thankful if any person or any association can help me in this.

"Lastly, no doubt it is true my family and my friends had to suffer a great deal. Without them it was not possible for me to keep my morale up and I would not have come to this present physical condition of mine.

"But I shall be lacking if I do not send my thanks through this article to the following associations and personalities: Leprosy Mission, Purulia; Harper & Row Publishers; Rehabilitation International; Spinal Injuries Association of England; Mr. Eugene J. Taylor; Mrs. Gini and Mr. Joe Laurie; Prof. M. Natarajan; Dr. W.G. Rama Rao; Mrs. Kamala V. Nimbkar; Principal, Madras Medical College; Dr. V.C. Jayram and his family; Mr. Vasudevan and his family; respected professors of Department of Orthopaedic Surgery, Physical Medicine and Rehabilitation, my trainee friends, staffs, and students of School of Physical Medicine."

Dr. Pradip Mumar Mallick, c/o Prof. I.S. Shanmugam, M.B., D.Orth., D. Phys. Med. (Lond), Department of Physical Medicine and Rehabilitation, Government General Hospital, Madras, 600 003, India.

"I have heard about the rehabilitating gazette and seen it from Dr. Mallick. I am a medical student. I met with an

accident which resulted in traumatic paraplegia. I would like to have an electrically powered wheelchair from the U.S. Will any philanthropists or any social service clubs, like Lions or Rotary Clubs, help me to get it as it is impossible for me to pay the cost along with the import and excise duties?" *M. Srinivasan, B.Sc., (M.B., B.S.), 14, J.P. East Street, Kumbakonam 612 001, India.*

"Through Mrs. Ida Daly from Seattle, we came to know about Gini Laurie's book, *Housing and Home Services for the Disabled,* and we were lucky to get a copy of it in New Delhi. We have to compliment you for this book . . . My husband and myself are about to join a training in Rehabilitation work with all kinds of disabled people with the goal later to start a new Rehabilitation centre somewhere in India." *Mrs. Doris Ngodup-Widdra, c/o Library of Tibetan Works + Archives, Ganchen Kyishong, Dharamsala, Dist. Kangra, H.P., India.*

"I wonder if any American reader would care to exchange letters with me. I will be 52 this year and live in a bedsitter with my budgerigar. I was disabled through a fall downstairs in 1966 so I walk with the aid of a stick. I miss letters from the States. I used to hear from aunts in El Paso and Asheville and an ancestor of mine opened the Broadhurst Theatre in New York." *Miss C.W.M. Broadhurst, 20 Locksley Way, North Somercotes, near Louth, Lincolnshire, LN11 7QR, England.*

"I have returned safely from Manila and Hong Kong. Thank you very much indeed for giving the names and addresses of *Gazette* friends there. Your reply was prompt as before when you gave me names for my trip to Europe (*Rehabilitation Gazette,* 1972, pages 34-35) . . . In Manila, I visited Father James B. Reuter, S.J. at an auditorium where he was conducting a stage show by the disabled . . . In Hong Kong, Colin Chan, Jenny Lung, and their able-bodied friends met me at the airport and Colin arranged everything for me and called for me at my hotel every morning. He is really wonderful, a school teacher of 36, speaking good English, driving an Austin Mini with hand control, having a lovely wife, Merlin, and lots of friends. He did his best for me . . . I visited Mr. Siu Chow Chiu in his hospital." *Naoyuki Ishizaka, Kanouzan-Jisshudai, Futtsu, Chiba 299-16, Japan.*

"Since my retirement from the Canadian Paraplegic Association, I have kept busy at a number of things without being tied down . . . The Association in Edmonton is in good hands and I am happy I made the change when I did. The Old Guard in CPA is moving on . . . My friends in the respiratory polio group continue to live life to the full. Gary McPherson is still the executive director of the Canadian Wheelchair Sports Association. He was presented to the Queen last fall when she was in Ottawa . . . The computer programmers are still active and the Pro-Data firm maintains its reputation for quality and performance . . . Henri Baril and Fred Kijek are still scholars with the International Association of Mouth and Foot Painting Artists . . . A Recreational Centre for the Disabled is being built in Edmonton under the sponsorship of the Associated Canadian Travellers . . . Finally, a group of some thirty Edmontonians (half of them disabled) travelled to Japan last February in response to a visit made here by a group of Japanese some eighteen months previous. They were very well received and enjoyed their visit tremendously." *Pierre Gariepy, 11910-87th Avenue, Edmonton, Alberta, Canada.*

"The *Rehabilitation Gazette* is an excellent, informative resource for rehabilitation. I would like you to send a copy to friends in Bangladesh who are working on the only project in that country to help traumatic paraplegics and quadriplegics: *Ms. Valerie Taylor, Volunteer Services Overseas, P.O. Box 406, Dacca, Bangladesh."* Jill Jones, 1300 Oakland Road NE, #1414, Cedar Rapids, Iowa 52402.

"I am an orthopaedically disabled person and I am 28 years old. I have been practising the chartered accoun-

"I lost my two legs in the Nigerian Civil War in 1969 . . . I started high school in 1974 . . . My wheelchair wore out, so I was forced to stop school and to confine myself indoors and pine away." Vincent Nwigwe, Champagneint House, Box 688, Uwani-Enugu, Anambra State, Nigeria.

tancy profession for the last four years . . . I would like to have a friendship through the post with other disabled persons who are auditors or CPA's." *T.A.P. Varadakutti, Chartered Accountant, 107-A, Lake View Road, West Mambalam, Madras 600033, India.*

"Just to let you know that my book, *Atlantic Rendezvous,* can be obtained through a regular outlet in the United States: Fowler, Dick & Walter, The Boston Store, 15-25 South Main Street, Wilkes-Barre, Pennsylvania 18703." *Bill Murray, Ballure, The Glen, Ramsey, Isle of Man, British Isles.*

"After 22 years, ten of us post-polio friends still continue to correspond regularly through two separate Round Robin letters. Each letter makes the rounds every three or four months, bringing news, snapshots, and clippings of mutual interest to all of those participating. It is a good way to keep in touch with old friends, with the least amount of effort.

"My personal involvement in the two Round Robin letters stems from the fact that, while in my early twenties, I spent many months on two respiratory polio wards: Colorado General Hospital in Denver (1952-54), and Rancho Los Amigos Hospital in Downey, California (1954-55). Many of my friends, both at CGH and at Rancho, indicated an interest in corresponding after their release. Thus, when I returned to my home in Wyoming in June, 1955, I spearheaded an effort to organize Round Robin letters.

While neither group, today, can boast of having all of its original members, all gaps left by those no longer participating have been quickly filled by others — friends from adjoining wards, out-patients, and volunteer workers, among them — each eager to help keep the letters flowing. The members of the Denver-based Round Robin group are Norman Winchester, Boulder; Mrs. Richard (Carol) Jensen, Columbia, Maryland; Mrs. Robert (Helena) Ritchlin, Denver; Mrs. Bart (Donna) Pekar, Denver; Mrs. Barbara Pickett, Longmont, Colorado. Those from Rancho days are Mrs. Donald (Carol) Doss, South Gate; Mrs. Mary Jane Robinson, Long Beach; Mrs. William (Ruth) Van Oosting (volunteer), Pico Rivera; and Mrs. M.K. (Daisy) Lowrimore (volunteer), Ventura.

"With one exception, all of those participating in these two Round Robin letters reside at home. Their release from institutional care came during the 1950's through a special program sponsored by the March of Dimes to return post-polios to home surroundings whenever possible.

"For the most part, our Round Robin participants have been privileged to live near-normal lives among family members and friends. Letters, therefore, are generally filled with news of latest family activities, such as reports of weekend or holiday get-togethers, or maybe word of a newly arrived grandchild! Our letters have kept our long distance friendships going although most of us have not seen each other since our days together in the respiratory wards.

"For those unfamiliar with the concept of Round Robin correspondence, the mechanics are quite simple. First, a list (complete with addresses) of those persons wishing to be included should be established. Each person, beginning with the first listed, then writes a letter and sends it to the succeeding name on the list — much the same as in a chain letter, minus the promise of monetary reward or other good fortune. Once the Round Robin has made a full round, with each letter in turn having been read by all, the person having written first removes his/her old letter and replaces it with an updated one. Then, once again, he/she sends the Round Robin on its way.

"For the ten of us, Round Robin correspondence has proved to be an excellent way to keep in touch. Otherwise, we'd probably write but once a year — and friendships reduced to such infrequent correspondence soon wither and are lost.

"Anyone wishing to discuss further the subject of Round Robin letters, write to me: *Mrs. Edward G. Leonard, Jr., P.O. Box 681, Douglas, Wyoming 82633.*

"Thank you for putting in the notice about my pen pal club, Friendship's Door, in the '76 *Gazette.* I received so many responses — most from people who live overseas! *Maxine Gabe, 2671 Emory Drive East, Apt. L, West Palm Beach, Florida 33406.*

"I feel so fortunate that I had been in Rehab Nursing for a number of years before I had a below the knee amputation. I would like to try to be of some help to some of the amputees who think they can't do things . . . I would love to hear from any amputees (in New Jersey, especially) with questions." *Louise B. Quinn, R.N., 15 Ventosa Drive, Morristown, New Jersey 07960.*

"After years of having my physical symptoms misdiagnosed by neurologists as 'nerves' and being sent off for psychiatric consultations, I learned that I have had a rare disease since birth: dystonia musculorum deformans (Ziehen-Oppenheim disease). It began to show at age 16 when I became unable to control my right leg during walking. I went to college and majored in psychology, then to a school for occupational therapy . . . All this while my bizarre gait and other symptoms increased and I saw many neurologists until I met with several at the University of Pennsylvania who made the DMD diagnosis. Subsequently, I went to the Neurological Institute at Columbia University and then to St. Barnabas in the Bronx to consult with Dr. Irving S. Cooper, a super specialist in DMD. If anyone wishes to know more of DMD, they may write to me." *Selma Ephross, 15 Juniper Drive, Doylestown, Pennsylvania 18901.*

"Recently, our respiratory polio group in the San Fernando Valley formed a Polio Survivors Foundation. One of our goals is to awaken the United States to the

need for immunization against polio . . . I am an upside-down polio and thank you for all the wonderful help you have given us through the years." *Nathalie Nelson, 4901 Escobedo Drive, Woodland Hills, California 91364.*

"I am sending for my second copy of *Housing and Home Services for the Disabled.* It's a virtual Bible." *Viola Hamby, Arthrogryposis Association, Inc., 3204 K Street, Vancouver, Washington, 98663.*

"I love your new book. I talked our local library into buying a copy. Then I liked it so well I bought a copy for myself." *Adelaide Janzen, P.O. Box 5655, San Jose, California 95150.*

"Aside from the practical ideas in the book, it does encourage one to go ahead and think about some possible solutions. Thanks for writing it; the book is fun to read as well as educational." *Al Holloway, 5580 Woodsdale Road, Hanoverton, Ohio 44423.*

"Gini's book should be a must to anyone wanting to be worth his salt as a social worker, architect, designer, draughtsman, politician. . . . They should have a copy, preferably on a chain, around their necks." *Erich Krell, 15 Tester Drive, Blackwood, South Australia 5051, Australia.*

Equipment/Reader's Ideas

The Rehabilitation Gazette *does not accept any advertising. The gadgets and devices presented here were gleaned by the editors from readers' letters and other sources. They are presented as ideas for the readers to pursue on their own by sending for brochures and latest prices. The* Gazette *does not specifically endorse any product nor accept responsibility for any approximate price listed.*

Respiration Equipment

Advancements Over the Years. Equipment Now in Use, and Most Recent Developments

by W. Sunny Weingarten

It was in 1929 that a Harvard student named Philip Drinker made the first tank-type respirator. Mr. Drinker received little in the form of monetary reward for his invention which was the forerunner to what is commonly called the "iron lung."

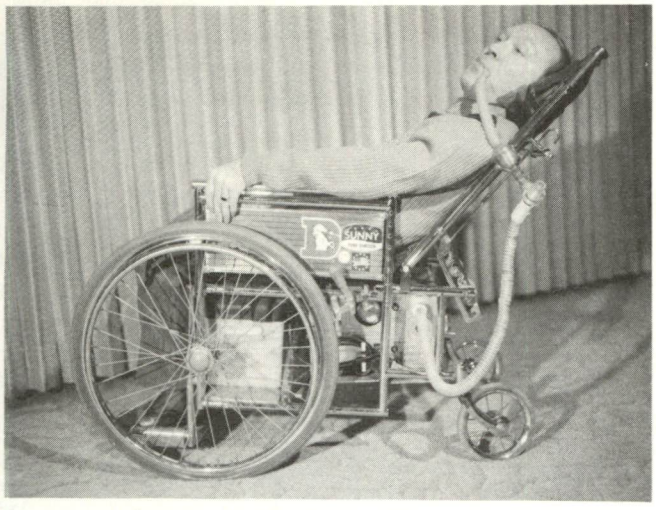
In 1937 John H. Emerson designed and had manufactured what was the first modern iron lung. Like its forerunner, the iron lung requires the patient's entire body to be enclosed, with the exception of the head, in a pressure chamber which provides both negative (pulling) and positive (pushing) pressure produced by a bellows made to work by a small electric motor.

Iron lungs provide ventilation by creating a uniform pressure over the entire chest, thorax, and abdomen, forcing the patient to inhale room air through the nose or mouth.

Iron lungs were first used during the 1930's by polio patients who had become paralyzed from the neck down, temporarily or permanently. The manufacture of iron lungs was discontinued in 1959, three years after the introduction of the "Salk" polio vaccine which eliminated the disease.

In 1949, both Huxley and Monaghan received patents on the first chest shell-type respirator. The negative and positive pressure was produced and provided by a separate pressure unit that was similar to a vacuum cleaner. The shell covered as much of the patient's chest, thorax, and abdomen as was physically possible with straps to hold it in place. The larger the area covered the better the ventilation. These respirators were more portable than the 800 lb. iron lungs, with the shell, hose assembly, and pressure unit weighing less than 100 pounds. Shortly thereafter they were adapted to run two to three hours off of a 12-volt auto battery.

During the early 1950's, several companies fabricated what was called the "rocking bed." It has been manufactured and made available by the J.H. Emerson Co. since 1953. In order to provide ventilation the bed is set with the patient in a lying 30° footdown position. When the electric motor makes the bed rock to a 30° headdown position the patient's diaphragm raises and exhalation occurs more easily. When the bed rocks back to a 30° footdown position the diaphragm lowers, with



During daytime hours W. Sunny Weingarten uses a LPS positive pressure respirator with a mouth tube. The unit will run over 24 hours on one charged auto battery and has a built-in charger.

the help of gravity, helping the patient to inhale.

In the middle 1950's, the first intermittent positive volume ventilators were used in hospitals only. These units were and still are being used by victims of pneumonia, poison, electric shock, asthma, spinal cord injury, and neurological disorders all of which can cause weakness or paralysis of the breathing muscles. The positive or blowing pressure ventilates the patient by forcing air through a surgical hole called a trachea, located in the recessed area above the collar bone. The Bennett Co. has been the chief maker of these hospital units since their introduction; the Emerson Co. came into production a little later.

In 1956, the Thompson Respirator Co. developed the first portable positive pressure respirator called the Bantam, which weighed only seventeen pounds and worked by way of trachea or mouth, providing the same ventilation as a volume ventilator. At this time Thompson also came out with its own chest shell along with the pneumobelt, pneumo meaning lung. The pneumobelt helps in ventilation and consists of an inflatable bladder enclosed inside a corset wrapped around the waist. A separate pressure unit inflates the bladder and makes it press against the stomach area, forcing the diaphragm to raise, helping the patient to exhale. When the bladder deflates, pressure is released from the stomach area and, with the help of gravity, the diaphragm lowers, which allows easier inhalation. The patient must be in an upright sitting position so that gravity can provide a maximum pulling effect on the diaphragm during inhalation, otherwise quality of ventilation will be very low.

During 1961, Thompson bought rights to all of the Huxley cuirass chest shells and pressure units, and has since made available a more modern version of the positive pressure Bantam, the Mini-lung.

At the present time, there are approximately 5000 various pieces of respiration equipment being used in the U.S. by about 2500 respiratory patients, an average of two pieces of equipment per patient. The 2500 patients are divided into the following three groups: neurological disorders, (MD, MS, etc.) 40% or 1000; polio patients, 35% or 875; spinal cord injuries, 25% or 625.

The following figures are for units used in a home-type environment, on a continuing basis, and excludes units used in a hospital-type environment on a temporary basis.

There are around 350 iron lungs in use today, mostly the Emerson type. They are used by individuals who are paralyzed due to polio, with those paralyzed by spinal cord injuries and neurological disorders using a small percentage of them.

The number of chest shell respirators currently being used has stabilized at 1000 with about 500 polio patients using them. Some patients, for the first time since becoming disabled, have gone back to the chest shell because their breathing muscles have become progressively weaker from inadequate ventilation. Also positive pressure respirators and positive volume ventilators will, no doubt, during the next decade, replace a high percentage of chest shells because they both provide a drastically higher quality of ventilation and are becoming much more portable.

Approximately 350 rocking beds are in use, mainly for polio patients with moderate breathing difficulties. These are usually used at night, during sleep.

There are about 400 pneumobelts being used equally by polio patients, the spinal cord injured, and those with neurological disorders.

There are about 2500 positive pressure respirators in use, 300 Monaghans and 2200 Thompson Bantams, all used through the trachea or mouth, and used equally by the spinal cord injured, polio patients, and patients with neurological disorders.

Positive volume ventilators in use number about 400 and are used almost entirely by patients with neurological disorders. Polio patients have been slow in discovering this excellent kind of ventilation. Positive pressure respirators *and* positive volume ventilators have about the same quality of ventilation as the iron lung, are more versatile in their applications, and more portable. Both provide identical ventilation but measure it differently. This area will definitely have the largest growth over the next ten years as more portable units are made and used for just about every kind of breathing weakness. Twenty years ago most patients with broken necks did not survive because of inadequate respiratory therapy and corrective surgery. Now it is common for high level traumatic quads, with the help of positve pressure respirators and postive volume ventilators, to not only survive but also to become highly rehabilitated and able to operate electric wheelchairs along with many other devices.

During the final three months of 1976, I had the honor of testing and using the prototype LP3 positive volume ventilator designed and developed by Life Products, Inc., of Boulder Colorado. Upon completion of the testing I purchased unit #1 which I have since used by mouth an

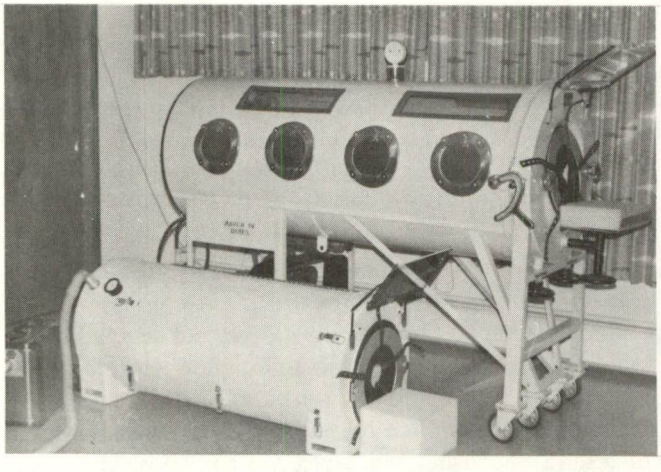
average of 35 hours per week throughout 1977. The LP3 is the first truly *portable* positive volume ventilator ever perfected. It can run over twenty-four hours on one charged auto battery, and can produce a tidal volume of 3000 c.c. It has an internal emergency battery which will run the unit for about one hour. The breath rate control is conveniently located on the front control panel. Unlike the Bantam and Monaghan 170C, the LP3 has a very natural, smooth, breathing pattern. I have used this unit exclusively on several two- and three-day trips, and have found it very adaptable. A Bennett face mask is needed for sleeping overnight along with a Bennett Cascade Humidifier, which eliminates severe dryness in the mouth and throat area. The artificial nose supplies adequate humidification for daytime use. The Sears Diehard 12 volt auto battery will last about two years in powering the LP3 and is easily mounted on a wheelchair along with the LP3.

After sleeping in the same room every night for 25 years I designed and had fabricated a mini-iron lung. I spent 30 days in testing and using it in place of the iron lung with total success. Because I have only one third of my breathing muscles, a chest shell, rocking bed, or penumobelt can't provide me with adequate ventilation. Since the iron lung is not portable and nothing was available that would provide comparable ventilation with complete pressure coverage, I designed the PortaLung.

The PortaLung is a tank type respirator without the bellows and motor found on the iron lung. The pressure, both negative and positive, is provided by a Thompson Portable or a Monaghan 170C pressure unit by way of a flex hose.

I have in just the past year traveled over 7000 miles in seven different states, including a two-week, 3600 mile trip to California, using the PortaLung without any problems. I used the PortaLung mostly at night for sleep; the LP3 while traveling and sight-seeing.

I have found the PortaLung to be equal in quality to the Emerson Iron Lung that I've used since 1949, with maximum pressure levels, 36 cm of negative and 23 cm of positive. It is portable enough to be used in a van or station wagon, weighing about 100 pounds. The shipment cost by air to anywhere in the world is about half the cost of an airline ticket, and even less when shipped by truck.



Sunny has designed and fabricated a semi-portable fiberglass "iron" lung, called the "Portalung," which he markets on a custom basis. (Photos by Harley Fehlman.)

Most of the above mentioned equipment is available through Life Care Services, 5505 Central Ave. Boulder, Colorado 80301.

For more information on the availability of Life Product's Inc., LP3 positive volume ventilator, and the PortaLung, please contact me. I will be more than happy to answer any questions concerning the applications of both respirators. Address: 401 East 80th Avenue, Denver, Colorado 80229.

W. Sunny Weingarten has been a respiratory polio quad since he was disabled in 1949 at age seven. He uses an iron lung 16 hours per day, mostly for sleep, and positive pressure during the remaining time. He sponsors and coaches Little League baseball, teaches the guitar privately at a local high school, and spends about 20 hours per week in reading and studying social work, political science, and Christian literature. He is part-owner of an advertising firm, has owned several race cars, and recently purchased a Cessna Skylane four-passenger airplane with a pilot friend.

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Editor: During the past year we have had a number of letters relating to respirators. Following are a few excerpts:

"I have slept in a tank respirator almost 30 years. Sometimes when I was sick I'd turn the pressure up a little at night. It would feel so good I'd leave it at the higher pressure. Consequently, my pressure crept up. For the first time in 28 years, I went to Rancho Los Amigos' pulmonary ward last summer. They found that I was hyperventilated. Over the three weeks, they lowered the pressure till my test was in the normal range. Other readers might be interested in knowing that you can get too much air but you will not realize it unless you go to a hospital for a check." *Patsy Wade, 420 Wynola Street, Pacific Palisades, California 90272.*

"In 1949, when a sophomore in high school, I was completely paralyzed from polio and placed in an iron lung. . . . Now at age 43 and 29 years later I use, during a 24-hour period, a rocking bed and a penumobelt powered by a Bantam protable respirator for sitting in a wheelchair. When in bed but not rocking, I use a Zephyr positive pressure blower, complete with cascade, via long hose and mouthpiece. In addition, I use emergency and maintenance frog breathing and have an extra Bentam portable for traveling. With all these means of breathing I, when ill, prefer the iron lung and Zephyr positive pressure when the lung needs to be opened. Over the years, I have returned to the lung at the hospital for bouts of flu, broken ankle, smoke inhalation, and major surgery. When I am in the iron lung, I receive the most ventilation and feel secure and calm. . . . The newer pulmonary methods may be practical for new patients, but not for us oldtimers. Since I cannot use my hands, I must be able to use my voice to communicate my needs at all times. Once a nurse attempted to put a mask over my mouth and I went into a state of panic. . . . So, I say, Iron Lung Polios of the World, unite! Persuade your hospital to keep

an iron lung available for you!" *Ruby Heine, 2885 Sharon Drive, Omaha, Nebraska 68112.*

"I am a 25-year old man and I have had muscular dystrophy all my life. Last year respiratory difficulties made it necessary for me to undergo a tracheostomy. Since that operation I have felt that the quality of my life has vastly improved. I use respiratory equipment at night and sometimes in the day and often have to resort to a suctioning machine to clear my lungs. Since the tracheostomy my health in general has improved to the point where I am able to maintain my own apartment, with the occasional help of an attendant. . . . I wish to contact other people with muscular dystrophy as well as professional people and make it clear that respiratory problems in the long term are inevitable and that they are not insurmountable and can be dealt with in a satisfactory way." *Glenn Wildenradt, 2406 Dana Street, Berkeley, California 94704.*

"I use a Monaghan 170C portable respirator connected to my trachea because of polio at age 11. I use it all night. I have a job and get around pretty good. . . . My problem is I would like to locate manufacturers of other respirators that are portable and light, have positive pressure and automatic cycling. The problem with the 170C is carbon soot from the motor brushes that I have to worry about. I just hope the filters catch most of it and not my lungs. Monaghan knows of this problem but so far cannot solve it." *Ronald Brekke, 1114 Park Ridge Boulevard, Park Ridge, Illinois 60068.*

"I would like to hear from persons who use respiratory equipment. How do most patients get and keep their respirators repaired? I, for one, am refusing to sign my equipment over to Life Care, Inc. as their rates are very expensive. . . . I repair my four pieces of equipment myself. The National Foundation used to supply me with parts from Colorado. Now I am having a hard time getting parts from the manufacturers. . . . They have made little effort to provide good service manuals and parts for the local repairmen. . . . The average home respirator is no more complicated than a washing machine. . . . Thompson Respiratoration Products has a new portable respirator called the Minilung which has a very stable rate and pressure. Operation with a car battery is 16 hours. I have used the unit on trach positive. I found the unit so quiet that I heard noises in the night that I had never heard with my Monaghan 170C's." *Jerry Daniel, Indian Lane, Langlois, Oregon 97450.*

"Sometime in the Spring of 1977 the National Foundation turned all my respirators over to a company called Life Care Services and so now Life Care bills Medicare for the rental and servicing of each piece of equipment. Medicare will permit only three pieces of equipment so I kept my rocking bed, Thompson chest respirator, and Bantam. My iron lung, which I hadn't used in a long time, was hauled away. I didn't object to parting with it, especially considering the amounts LCS charges Medicare for rental. Would you believe $66 each month for chest respirator, $64 each month for rocking bed, and $61 each month for Bantam? Plus, $9 per month for the hose from Bantam to mouthpiece and $18 per month for chestshell and hose?" *Walter Sawyer, Jr., Box 90-Austinville, R.D.1, Troy, Pennsylvania 16947.*

A lightweight "iron" lung in aluminum is made by a voluntary group of engineers, technicians, and tradesmen. Information available from *Dr. V.S. Ramsden, Technical Aid to the Disabled, 48 Fourth Avenue, Eastwood, New South Wales, Australia 2122* or *Mr. Mark Dohrman, Lincoln Institute, 625 Swanston Street, Carlton, Victoria, Australia 3053.*

"I am concerned about the safe use of gasoline powered standby generator equipment used to supply a continuous source of electricity for respirators during power failures.

"Because gasoline engines are all around us we forget the precautions that must be taken. Whenever there is liquid gasoline, there is gasoline vapor. This vapor is heavier than air and, therefore, tends to accumulate at some low spot. A small amount of this vapor can easily form a combustible mixture with the air at this low spot and then be ignited by a hot water heater pilot light or a spark from an electric fan or from an electric switch.

"These considerations, along with the well known dangers of breathing the exhaust gases (also heavier than air), make it most desirable that the engine be mounted outside the building and the generated electricity be brought inside by wiring.

"Gasoline should be stored in gasoline cans approved by Underwriters, outside the building, and in the smallest quantity that is practical." *Robert E. Hitz, 1182 Warren Road, Lakewood, Ohio 44107.*

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Editor: The Annual General Meeting and Conference of the British Polio Fellowship, which was held at Reading University on September 24, 1977, featured an address by Geoffrey T. Spencer, MB, BS, FFARCS on "Poliomyelitis and Breathing." Dr. Spencer is Consultant in Charge, Intensive Care and Respiratory Units, St. Thomas' Hospital, London. Following are excerpts from the November 1977 issue of The Bulletin of the BPF.

"Polio was the first diesase for which any attempt was made to prolong life once breathing had failed. It led to the development of artificial respiration without which no heart or chest operation would be possible today. The value of the work done on those early polios and the number of lives saved is incalculable.

"The iron lung dates back to 1930 and was first produced by a Harvard engineer named Drinker. Lord Nuffield equipped hospitals in this country with modified Drinker respirators in wartime and they were first used in the 1940s.

"The number of survivors was small. Probably the longest survivor has been in an iron lung every night since 1948 and quite a number since the early 1950s.

"In the severe Copenhagen epidemic of 1952, when they ran out of iron lungs, they called on an anaesthetist, Bjorn Ibsen, for help. He said, 'Try what we do in the theatre short-term — make a hole in the windpipe and blow air into the lungs under positive pressure.' They paid medical students 30 shillings for an 8-hour shift!

"After three months the patients who had got in first and been put in iron lungs had a mortality rate of 80%, while those who came in too late and had to put up with the medical students had a mortality of 40%.

"Respiratory insufficiency in a person who has had

polio is quite different from that which results from lung disease such as chronic bronchitis. The latter is in the lungs, the former in the mechanism — the lever power which operates the lungs.

"The lungs of a polio are essentially normal. They only become abnormal as a result of unnecessary neglect or misuse of treatment used for the respiratory difficulties of chronic bronchitis. Oxygen, which is used to treat respiratory diseases originating in the lungs, is harmful and dangerous to the polio person and will only make him worse because his breathing difficulties are due to an accumulation of carbon dioxide. A mild lack of oxygen produces a certain stimulus to breathing; take it away and the carbon dioxide rises still further.

"There are two sorts of muscles and nerves which control breathing — intrinsic and extrinsic ones. The intrinsic ones are wired in to an automatic centre in the brain which goes on functioning when you are asleep. The extrinsic muscles are not wired in to the automatic centre and cease to function while you sleep.

"If a significant number of the intrinsic muscles are not working, you can breathe by day by all sorts of tricks such as frog breathing, but you will need a bit of help at night. Without help you may have difficulty in getting off to sleep, you will wake up and not be able to get back to sleep and have a bad night followed by drowsiness and lack of concentration by day.

"Everybody's lungs change and deteriorate as they get older. In your 40's you cannot breathe as well as you could in your 20's. If you have impairment of the muscles, the normal changes due to age cause trouble.

"That is why, though the number of people having polio is going down, at the same time the number needing breathing aid at night is rising.

"You can stave off the necessity of seeking assistance with breathing at night by a variety of tricks. The most useful is frog breathing. Other simple measures are not to neglect coughs and colds and, if you can't frog breathe, to use positive pressure.

"The only way of measuring the efficiency of your breathing is to measure the carbon dioxide in the arterial blood.

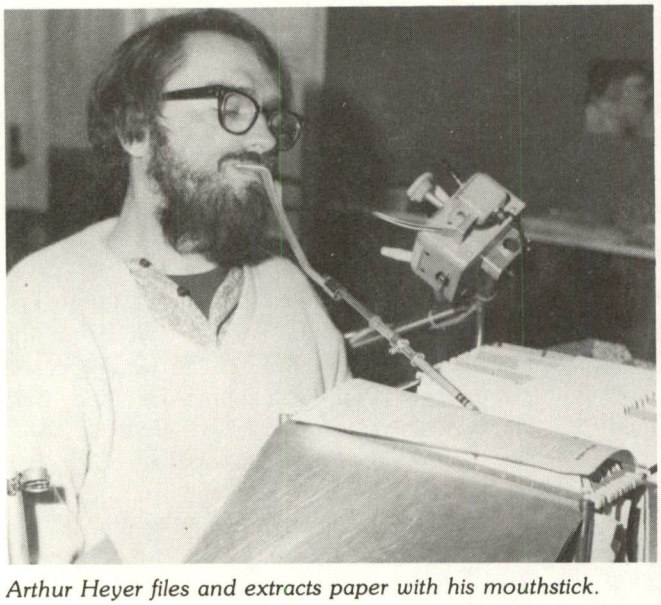
"Providing you are in the hands of people who understand the changes in physiology as a result of polio, there is no reason why surgery should involve any higher risk than to anyone else of the same age. . . . The effect of obesity on breathing problems is profound.

"Polio is still endemic in Africa, South Africa, the Far East, and round the Mediterranean. Even the World Health Organization returns underrate the true situation and the travel agencies have a vested interest in suppressing the figures and will not advise travellers to be immunised. Another good reason to go on plugging the need for immunization."

Miscellaneous Readers' Ideas

CUSTOM-DESIGNED OFFICE FOR A MOUTHSTICK USER. A.G. Garris, consultant, California Department of Rehabilitation, Rancho Los Amigos Hospital, says, "Enclosed are photos of Arthur Heyer's office which were taken by Angela Marquez, my secretary. Arthur designed everything in his office. He can function very well independently and perform necessary office activities. He designs similar things for other severely disabled patients. In our TV tape of Arthur we tell counselors that there is no magic here, just the right equipment, suitably placed, a lot of practice, and motivation to use it. This should partially answer the question, What can a person with a mouthstick do?"

Arthur has been a C3-4 quad since 1965 when he made an unfortunate dive into a waterless pool at age 17.



Arthur Heyer files and extracts paper with his mouthstick.

His typewriter is on a Lazy Susan.

Trained as a mechanical engineer in Guadalajara, Mexico, he moved to California in 1975 with his bride, Flor. He is employed by the Neuromuscular Engineering Department, Rancho Los Amigos Hospital, 500 Hut, 7601 East Imperial Highway, Downey, California 90242.

As liaison engineer, he designed a prototype house in which patients and outpatients may see and test equipment. The house is the office for his program, Project Threshold Rehabilitation Engineering Service, in which he designs equipment according to individual needs.

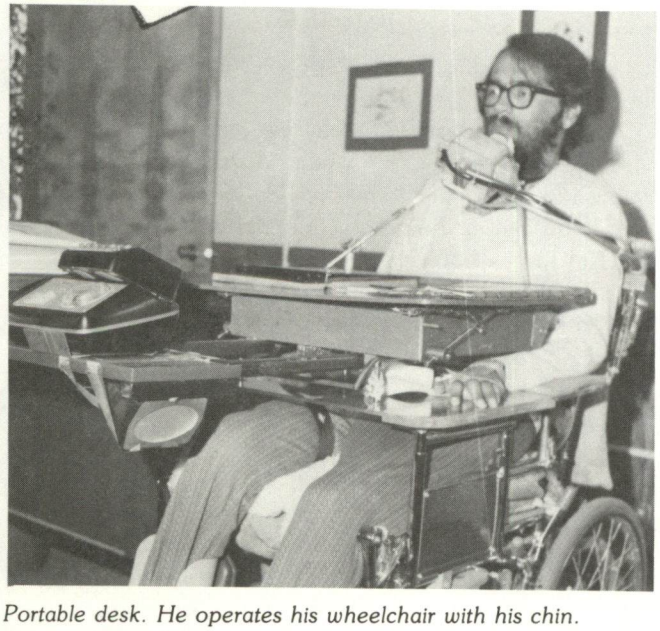
Arthur's desk, shown in the accompanying photographs, illustrates his ability to engineer his environment to meet his needs. The desk is U-shaped. His files for larger papers are located in the left wing of the "U." He files and extracts papers with his mouthstick by using a ramp.

The typewriter is located in the center section, on a Lazy Susan, which he revolves with his mouthstick. His portable desk is "parked" on the right wing of the "U," beside the telephone. He uses the top for writing and sketching and the inside for storage.

Note that his V-shaped mouthstick makes it easy for him to talk while holding it in his mouth. His mouthstick holder is attached to his wheelchair, which he guides and reclines with his chin.

PISSING CROSS COUNTRY. "I was too young when I got polio — three years old — to remember how I learned to cope with not being able to get to a bathroom whenever I needed to. Undoubtedly, I wet myself a few times, learned to hold on for a long time in spite of discomfort, learned gradually to be very good at planning ahead, worried a lot. . . .

"Very little changed in that regard until I was in my late twenties. I went on a long cross-Canada camping trip with a friend through the Western provinces. It was a long way between service stations. We developed a habit of throwing modesty aside; we would pull over to the side of the road and, while she went into the bushes, I would open the car door, lift myself to the floor, pull down my britches, and pee over the edge. I was unprepared for the sense of liberation! Only those with a long history of miserable propriety could understand.



Portable desk. He operates his wheelchair with his chin.

"Later, traveling alone, I grew bolder. . . . I pull over to the side of the road, slide forward in the seat, press a two-cup plastic measuring cup to my bottom, pee, and dump it out the car window. Over the years I have pissed along the highways of many scenic states, along the curbs of leafy suburbs, and in the parking lots of some of our finest supermarkets.

"I still feel a little uneasy about such primitive 'bad' behavior. But basically, it makes me happy. It feels a lot like stopping punishing myself." Eleanor Smith, Atlanta Rehabilitation Center, 1599 Memorial Drive, S.E., Atlanta, Georgia 30317.

EASY-FEED. The device consists of a plate, which rotates freely on a stand clamped to a table. The food is placed at the edge of the plate, which the user turns around with his mouth. 15.50 pounds. *Newton Aids Ltd., 2A Conway Street, London W1P 58E, England.*

SAAB ADAPTATIONS FOR DISABLED. Especially designed hand controls and a seat which slides out and pivots are available from SAAB-SCANIA of AMERICA, Saab Drive, Orange, Connecticut 06477 and Scancar, Ltd., 860 Progress Avenue, Scarborough, Ontario, Canada.

ARTHRITIS BOOKLETS. Contact your local Arthritis Foundation chapter for booklets such as these: *Self-Help Devices for Arthritic Patients. Living More Comfortably With Arthritis. Home Care Programs in Arthritis.*

TOILET PAPER SUBSTITUTE. My brother adapted a simple household cleaning gadget, a plastic sponge on a straight, plastic handle, that I can use with my arthritic hands. He used a "Scrub Pal" made by Hi-Ko Products Co., Bedford Heights, Ohio 44146. He bent the handle by heating it over an electric stove burner, then attached with Epoxy cement an 8" strip of thin wood (such as an old ruler) to make a cross-shaped handle. For further information, send a self-addressed, stamped envelope to Lawrence J. Meinen, Route 3, Box 268, Chippewa Falls, Wisconsin 54729.

INDEPENDENCE FACTORY. "We are an all volunteer, non-profit organization which makes and designs self-help devices. Send us your special problems. There is no charge because we learn by solving problems. . . . We have a price list of the devices we make and sell and we have put many of our ideas into three manuals. Titled, *How To Make It Cheap,* Volumes I and II are $1.50 each plus 30 cents postage, Volume III is $2.50 plus 30 cents postage." Fred D. Carroll, The Independence Factory, Box 597, Middletown, Ohio 45042.

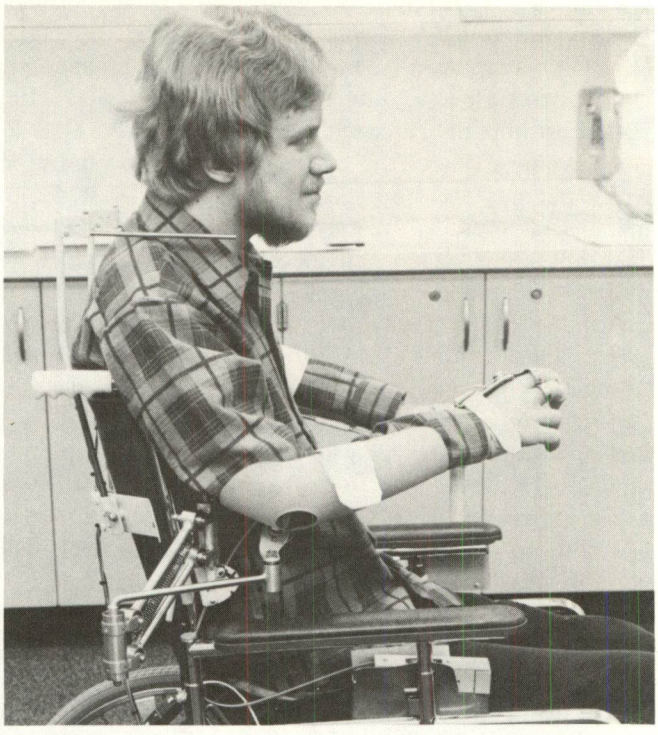
SWEDISH SUSPENSION ARMS. "The accident happened in June 1977 in northern Ontario. I struck a moose which landed on the roof of my car. The roof fell in on me and broke my neck. . . . I spent two months in Toronto General Hospital . . . I was flown to my home town, Pittsburgh, and entered Harmarville Rehabilitation Center (Box 11460, Guys Run Road, Pittsburgh, Pennsylvania 15238) for eight months of work.

"The person who helped me the most was an occupational therapist from South Africa, Miss Christa Meyer. Christa came to Harmarville to co-author a book about quads. . . . She started my therapy on Swedish Suspension Arms. As I progressed, Christa thought of new things to help me achieve independence. . . .

"Before the accident I was a senior psychology major at West Virginia University. While at Harmarville, I was able to continue my degree work by completing an independent study project under the supervision of a professor from WVU. With the help of the social service director, my personal social worker, and vocational counselor, I formulated a study about the changes of attitudes and values of patients at Harmarville. The professor from WVU came to Harmarville to see me and grade the report. I received six hours of credit for the study.

"Since I left Harmarville I have been living in a house with two other men. One cooks and the other does the dishes. Nurses come in the morning to exercise me and help get me ready for school and in the evening for general health care.

"I had hoped to return to WVU, but the campus is not accessible. I arranged to finish my studies at the University of Pittsburgh but my degree will be granted by WVU. . . .



Terry Moore, a traumatic quad, and the Swedish Suspension Arms.

It has not been easy to learn to ask for help especially from strangers. But I am learning that there is no need that cannot be met, if I open my mouth and ask." Terry Moore, 3254 South Park Road, Bethel Park, Pennsylvania 15102.

Communication

AMER-IND: INDIAN SIGN SYSTEM. Madge Skelly, PhD, a professor of speech pathology at St. Louis University and a consultant at the VA Hospital and the State Hospital, has achieved international recognition as the creator of a special method of communication. The method is based on the Indian Sign system which Dr. Skelly, now 75 years old, learned as a child from her grandfather, a member of the Onondaga tribe. Indian Hand Talk is a signal system, based on action, which was created to provide a universal communication mode among the many tribes who did not share a common language. It was well developed long before Columbus arrived and early European voyagers communicated with the natives by this means.

While no more than 10 per cent of the sign languages developed for the deaf can be guessed, 90 per cent of the Indian Signs are guessable. Amer-Ind is used by those who have impaired speech or who have lost their speech through strokes or removal of their vocal apparatus or who have failed to develop speech and language because of retardation.

Additional information may be obtained from: (1) an illustrated book by Dr. Skelly which will probably be published in June 1978 by the University Park Press, 233 Redwood Street, Baltimore, Maryland 21202; (2) Learning Resources Service, VA Hospital, St. Louis, Missouri 63125, has two series of video tapes — a video dictionary and orientation; and (3) for professionals, Dr. Skelly offers five-day workshops. Contact her at Executive House, 20-D, 4466 West Pine Boulevard, St. Louis, Missouri 63108.

VOICE-ACTIVATED TELEPHONE. "I finally have the no hands telephone of my dreams. The *Gazette* told me whom to call to get special telephone equipment but there were many detours between my first call and my final goal — a phone activated by voice command at night

from my iron lung or by touch button during noisy days.

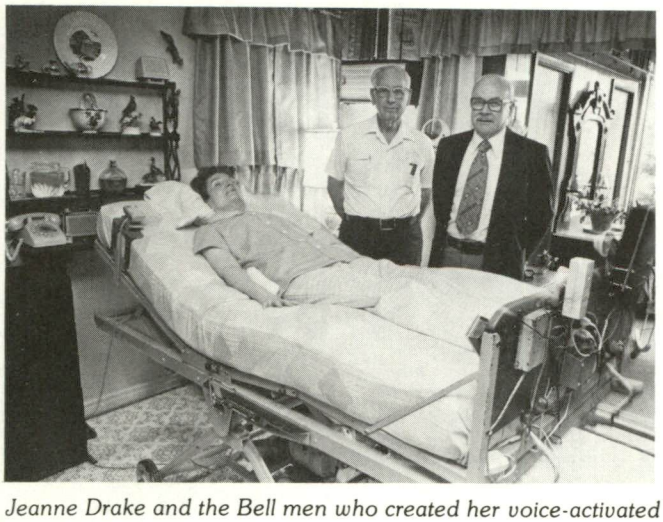
At first, the telephone company sent a series of bright young men who had neither the experience nor the time. Finally, the Project Supervising Engineer, Robert L. Glyn, heard about my request and came to see me. He worked out a special design and provided the equipment, which has given me greater independence and security. The operators show such genuine interest that they make Dallas seem like a warm home town.

Mr. Glyn told me, "St. Louis handles devices for blind and disabled people. We'll send this new design in to St. Louis. If they think there's a need for it elsewhere, they'll publish it in a book so that anyone in the Bell System will have access to the information. The book is updated every five years. In the meantime, anyone interested can get in touch with the Southwestern Bell Telephone, 500 South Ervay, Dallas, Texas 75201. If no one seems to know what you're talking about, ask for Mr. Glyn and tell him Iron Lung Jeanne sent you." Alta Jeanne Drake, 3737 Purdue Street, Dallas, Texas 75225.

A TREASURE OF BOOKS AND BOOKLETS. The Trace Research and Development Center For the Severely Communicatively Handicapped, University of Wisconsin-Madison, 922 ERB, 1500 Johnson Drive, Madison, Wisconsin 53706, has an exciting and valuable list of aids and techniques. Many of the publications, such as the list of commercial switches, are useful for all types of disabilities.

Interface Switch Profile and Annotated List of Commercial Switches. 1976. $1.25. The switches listed include push, sliding or trolley, pneumatic, breath, zero pressure, proximity, motion-detecting, eye-controlled, and optical. Other controls include joysticks, wobblesticks, air pillows, and squeeze bulbs.

Annotated Bibliography of Communication Aids. A 1974 summary of aids in the U.S., Canada, and abroad. $3.50.



Jeanne Drake and the Bell men who created her voice-activated phone.

A Portable Non-Vocal Communications Prosthesis for the Severely Physically Handicapped. 1976. 75 cents.

In addition, the Trace Center has edited transcriptions of its National Workshop Series and they are published in a 228-page book. Titled, *Non-Vocal Communication Techniques and Aids for the Severely Physically Handicapped,* it is edited by Gregg C. Vanderheiden and Kate Grilley. A major professional treatise on the subject of communication, it is available for $12.50 from Univerity Park Press, 233 Redwood Street, Baltimore, Maryland 21202.

PHONIC MIRROR HANDIVOICE. A portable, hand-held battery-operated electronic speech synthesizer that simulates the human voice. It can produce complete sentences and articulate almost every word in the English language with some inflections and tonal quality. Various models are designed to meet the range of learning ability. Information from HC Electronics, Inc., a subsidiary of the American Hospital Supply Corporation, 1740 Ridge Avenue, Evanston, Illinois 60204.

EKOMI 2. An electronic communicator which allows persons who cannot speak or write to express their thoughts by pressing the keys on the keyboard of a battery-operated device. it looks like and is about the same size as a standard pocket calculator. Manufactured in the Netherlands, it is distributed by Prentke Romich Company, RD 2, Box 191, Shreve, Ohio 44676.

MORSE CODE CONVERTED TO VIDEO. Al Ross, an electronic media producer at the University of Washington Child Development and Mental Retardation center, Seattle, Washington 98195, created a special device for a young man disabled by cerebral palsy. His device converts Morse code into letters at a rate of 8.4 words per minute and displays them on a video monitor.

DICTATION MACHINE FOR MOUTHSTICK-USERS. Sony Dictation Machine VR-35 was designed for the severely disabled. The control unit, which is actuated by voice and by a magnetic mouthstick, accepts any standard tape casette. The dictating/transcribing unit may be operated manually by touching the unit with the magnetic end of the mouthstick. Contact your nearest Sony dealer or write Business Products Division, Sony Corporation of America, 9 West 57 Street, New York, NY 10019.

INEXPENSIVE REMOTE CONTROLS. For under $20, the following companies sell small receivers which, when plugged into a wall outlet ahead of any electric appliance, will operate that appliance by a remote control switch from a distance of up to 50' from the appliance. Data-Link, Box 1145, 1282 Fayette Street, El Cajon, California 92022 and Hammacher Schlemmer, 147 East 57th Street, New York, NY 10022.

Potpourri

by Gini Laurie

Advocacy

New York State Advocate for the Disabled, Room 3712, 2 World Center, New York, NY 10047. 212-938-0186. Toll free number for rest of New York State: 800-522-4369 (except Nassau, Suffolk, and Westchester).

Nursing Homes: Citizens Action Guide. By Elma Griesel and Linda Horn. $2.95 from Beacon Press, 25 Beacon Street, Boston, Massachusetts 02108.

Art

The 15th Annual Sister Kenny Institute Art Show for Disabled Artists will be held from October 8-22, 1978. Two categories: artists who work with their mouth, foot, or forehead; or artists with disabled arms and hands. Details from Art Show Chairperson, Sister Kenny Institute, Chicago Avenue at 27th Street, Minneapolis, Minnesota 55407.

Barriers, Architectural

Barrier-Free Meetings: A guide for professional Associations. By Martha Ross Redden et al, this valuable guide sheet should be required reading for every organization. It covers all stages of planning meetings. 73 pages. $4 from American Association for the Advancement of Science, 1515 Massachusetts Avenue, NW, Washington, DC 20005.

Barrier-Free Environments. Community Development Series, Volume 33. Edited by Michael J. Bednar. A collection of essays by professionals in the fields of architecture, social work, and urban planning. The planning and design are performance-based rather than prescriptive. The emphasis of the book is on developing a philosophical approach to the integration of both physically disabled and mentally retarded persons. 278 pages, $22. 1977. Dowden, Hutchinson & Ross, Inc., Box 699, 523 Sarah Street, Stroudsburg, Pennsylvania 18360.

Update, 1977, supplement to *Access to America, 1976,* to be published by early summer 1978. *Access* is a 300-page compendium of federal and state legislation on barriers, curb cuts, license plates, and polling places. $15 from Michigan Center for a Barrier Free Environment, 6879 Heather Heath Lane, West Bloomfield, Michigan 48033.

Barriers, Attitudinal

Social Barriers to the Integration of Disabled Persons into Community Life. Report of an Expert Group Meeting in Geneva, 28 June to 5 July 1976. The 31-page booklet is available for $3 from United Nations, Sales Section, New York or Geneva.

People . . . just like you. About handicaps and handicapped people. (An Activity Guide). Free from The President's Committee on Employment of the Handicapped, Washington, DC 20210. 36 pages.

Blind

Brailled paper currency. Most Dutch and Swiss paper money is marked with Braille identification marks or dots. No U.S. paper currency has Braille dots because it is felt that the paper would not hold up under constant use. Why don't we use heavier paper?

The National Retinitis Pigmentosa Foundation, Inc., Suite 932, 393 Seventh Avenue, New York, NY 10001 urges all who have RP to contact the foundation and assist with research.

Where Do I Go From Here? A talking book for newly-blind persons. Information from Don Nold, Dialogue Magazine, 3100 Oak Park Avenue, Berwyn, Illinois 60402.

Richard J. Wright, a member of the science faculty at Valencia Community College, Box 3028, Orlando, Florida 32802, created methods by which blind students can participate in botany laboratories.

Children

A Reader's Guide For Parents of Children with Mental, Physical, or Emotional Disabilities. Comprehensive annotated bibliography and additional sources of information. 144 pages. $3 from Superintendent of Documents, U.S. Government Printing Office, Washington, DC 20402. Ask for 33X.

Early Years. By Morique Cornwell, MCSP, a physiotherapist and mother of two small children. For the disabled mother or father and their child from birth to nursery school. $2.50. From Disabled Living Foundation, 346 Kensington High Street, London W14 8NS, England.

Clothing

Adapt Your Own. A Clothing Brochure For People With Special Needs. Excellent source of ideas and further references by the creators of the *On Your Own* program. (The cover was designed by Bob Tanton, a C5-6 quad, who is one of the *Gazette's* staff artists.) $1 from Office of Independent Study, Division of Continuing Education, P.O. Box 2967, University, Alabama 35486. Make check payable to University of Alabama.

Custom-made or sew-it-yourself kits of women's wash and wear clothes. Free catalogue from C.O. Smith, 7674 Park Avenue, Lowville, New York 13367.

Coalitions, National

Coalition Building. A Report on a Feasibility Study to Develop a National Model for Cross-Disability Communication and Cooperation. By Frank G. Bowe, PhD. 66 pages. 1978. $4 from American Coalition of Citizens with Disabilities, 1346 Connecticut Avenue, NW, Washington, DC 20036.

Coalitions, State

United Handicapped Federation, 1951 University Avenue, St. Paul, Minnesota 55104. In October 1977, UHF initiated an interesting buying plan. For an annual fee, members may purchase prescription drugs, eye glasses, hearing aids, and renters' insurance at a reduced cost. A program is available at many of the local hospitals that will accept Medi-

care payments as full payment. In addition, over 100 retail stores offer a 5-20% discount to members.

Consumer Information

Medical Devices and Equipment for the Disabled: An Examination. By Daniel Clearfield. 53-pages. $3 from Disability Rights Center, Inc., 1346 Connecticut Avenue, NW, Suite 1124, Washington, DC 20036. The report, of particular value to wheelchair-users, should be read by all medical equipment manufacturers and distributors.

Consumer Warranty Law: Your Rights and How To Enforce Them. A Guide for Users of Medical Devices. By Belinda Bean and Susan Schapiro. 21 pages. $5 from Disability Rights Center, Inc., (address above).

The Best of Helpful Hints. 86-page compilation of problem-solving hints. $3.50 from Courage Center Auxiliary, Courage Center, 3915 Golden Valley Road, Golden Valley, Minnesota 55422.

Deaf

Deaf college students are eligible for a summer program in computer programming offered by IBM in California.

Speech and the Hearing-Impaired Child: Theory and Practice. By Daniel Ling. Dr. Ling of McGill University is internationally known as a consultant and research worker. The text is clearly written; the book is attractively presented. Of value to parents as well as professionals. $11.95, soft cover, from Publication Sales Department, Alexander Graham Bell Association for the Deaf, 3417 Volta Place, NW, Washington, DC 20007.

Universal Sign Language cards. International language game in 36 languages. $1 from Special Industries, World Wings International, 1600 West Armory Way, Seattle, Washington 98119.

Dentistry

Toothbrushing and Flossing. A Manual of Home Dental Care for Persons Who Are Handicapped. By Paul Casamassimo, D.D.S. Techniques, aids, and adaptations, $1.50. *Helping Handicapped Persons Clean Their Teeth.* 15 cents. Both are available from National Easter Seal Society for Crippled Children and Adults, 2023 West Ogden Avenue, Chicago, Illinois 60612.

Journal of Dentistry for The Handicapped. Published semi-annually by the Academy For Dentistry for the Handicapped, 1240 East Main Street, Springfield, Ohio 45503. $15 per year for non-members. The summer 1977 issue contains the article "Providing Office Accessibility to the Disabled Patient."

Dentistry for the Handicapped Patient. 420 pages. $29.50 from The C.V. Mosby Company, 11830 Westline Industrial Drive, St. Louis, Missouri 63141.

Disabilities, Miscellaneous

What Everyone Should Know About Cerebral Palsy. Cartoon-style booklet tells the story of CP in simple, short sentences. 10 cents a copy or $9 for 100 from: United Cerebral Palsy Associations, Inc., 66 East 34th Street, New York, NY 10016. We hope UCP chapters will buy it in bulk and distribute it gratis.

The Epilepsy Fact Book. Non-technical, concise publication. $5.50 plus postage from F.A. Davis Company, Publishers, 1915 Arch Street, Philadelphia, Pennsylvania 19103.

Legal Rights of Persons With Epilepsy. State-by-state listing of laws. Free to organizations involved with advocacy and other services from Suzanne Turner, Epilepsy Foundation of America, 1828 L Street, Washington, DC 20036.

Using Everything You've Got. By Rev. Harold H. Wilke. Explicit details of ways of coping with the necessities of living without arms and hands by using ingenuity and a pair of well directed feet and toes. A delightful book by a delightful person! Available from The National Easter Seal Society for Crippled Children and Adults, 2023 West Ogden Avenue, Chicago, Illinois 60612.

Education

Look out For Yourself! Helpful Hints For Selecting a School or College. 80 cents. 16 pages. 1977. Public Documents Distribution Center, Dept. 10, Pueblo, Colorado 81009. Make check to Superintendent of Documents.

Bibliography of Secondary Materials for Teaching Handicapped Students. Free from President's Committee on Employment of the Handicapped, Washington, DC 20010.

Vocationally Oriented School Planning for the Handicapped. Kindergarten through Grade Twelve. Developed under a Federal grant by the Windham Southeast Supervisory Union, Brattleboro, Vermont 05301. 236-page notebook.

The federal government offers five student aid programs: (1) Basic Educational Opportunity Grant up to $1400. (2) Supplemental Educational Opportunity Grant up to $1500. (3) Work-study program pays 80% of salary at a non-profit institution. (4) National Direct Student Loan up to $1500 a year; and (5) Guaranteed Student Loan Program pays interest on $1500 loan.

The Handicapped Person in the Community. Structured multi-media course, based upon texts, TV and radio, and group meetings at study centers throughout the United Kingdom. Details from Kirsty Wilson, Course Co-ordinator, The Open University, Walton Hall, Milton Keynes MK7 6AA, England.

Employment

Tax Reduction and Simplification Act of 1977 (PL 95-30). Effective May 23, 1977. Employers may claim up to $100,000 annually in credits based upon 50 percent of the first $4200 paid to a disabled employee hired in 1977 or 1978. An additional 10 percent credit limited to one-fifth of the 50 percent credit, available for employees who have received vocational rehabilitation services, including those offered to disabled veterans.

Get Yourself Going The Work-Easy Way. An Action Handbook for the Handicapped Office Worker. By Henry Mara and Penny Thrift. Charming and useful paperback. 1 pound or $2 U.S. From Disabled in the City, 40 Etherley Road, Tottenham, London N15 3AJ, England. 104 pages. (Both authors are disabled by multiple sclerosis.)

Films

Jill Kinmont's life is continued in *The Other Side of the Mountain, Part II,* telling the story of her marriage. Previous movie recounted the accident that

made a ski champion a quad, and her subsequent teaching career.

Epilepsy: The Invisible Wound. Available free from: Epilepsy Association of Ohio, 5310 East Main, Columbus, Ohio, 43213.

General

The 1978 International Disabled Expo is scheduled for August 10-12 at the O'Hare Expo Center in Chicago. The 1977 Expo was attended by 9137 professionals, disabled individuals, and exhibitors. 150 manufacturers were represented. The 1978 Expo will again be sponsored by the Paralyzed Veterans of America. Cassettes and written transcripts of the conferences are available. Information available from PVA/Expo, Box 1337, Hines, Illinois 60141.

Grantsmanship Center News Reprints, 1015 West Olympic Boulevard, Los Angeles, California 90015. *Program Planning And Proposal Writing.* 75 cents. *How to Obtain Funding from Local Governments.* 75 cents.

An anti-trust suit has been filed by the Western Law Center for the Handicapped and The American Coalition of Citizens with Disabilities against Everest & Jennings Co. The Department of Justice charges E&J with violations of the Sherman Anti-trust Act by restricting competition, denying consumers the benefit of a free market, and suppressing innovation and improvement in the design, construction, and sale of wheelchairs.

According to HEW, 16 million children under 14 years of age have not been vaccinated against polio. Current recommendations for vaccinating children against polio are: three shots at two, four, and 18 months of age. At five years — a booster.

Motherhood: How to Cope. By Morique Cornwall. Problems of mothers with physical disabilities as well as those who are blind or deaf. 2.50 pounds from Disabled Living Foundation, 346 Kensington High Street, London W14 8NS, England.

Incontinence

Incontinence: A Guide to the Understanding and Management of a Very Common Complaint. By Dorothy Mandelstam, MCSP, Dip. Soc. Sc. Illustrated by fashion designer Mrs. Brenda Naylor. Describes a wide range of appliances, clothing, methods, and gadgets. 1.75 pounds from Disabled Living Foundation, 346 Kensington High Street, London W14 8NS, England.

Adults' "dri-pants", urinals, snap-in pads, etc. are available from Piper Brace, 809 Wyandotte, Kansas City, Missouri 64105. Free catalog/price list.

DriPride underpants and disposable pads. Gerber Family Health Care, 445 State Street Fremont, Michigan 49412.

Information

Ever wonder about the National Organizations that solicit your $$? The National Information Bureau, 419 Park Avenue, South, New York, NY, 10016 will send you the rating list of philanthropic organizations, if you request it on a postcard.

Registration of Nordic Projects Relating to Disability. 1977. By the Nordic Committee on Disability, Fack, S-161 25, BROMMA, Sweden. Exciting and valuable collection, Free! Covers many disabilities and many phases of coping with disability.

National Rehabilitation Information Center, P.O. Box 136, The Catholic University of America, Washington, DC 20064, was started in September 1977 with a five-year grant from HEW's Rehabilitation Services Administration. It will provide specific information services to the rehabilitation community, including rehabilitation professionals, disabled persons, and concerned members of the public.

The California Department of Rehabilitation has hotline telephones in Sacramento and Los Angeles for individuals who wish information about its services. Sacramento: 916-322-5066 (call collect) 800-952-5544 TTY. Los Angeles: 213-620-3353 (call collect) and TTY.

National Center on Educational Media and Materials for the Handicapped, The Ohio State University, Columbus, Ohio 43210. Free catalog lists audio-visual materials and publications in special education.

Consumer Health Education. A directory. 1976. Major voluntary health organizations in the U.S. Free from DHEW, Public Health Service, Health Resources Administration, National Center for Health Services Research, 6500 Fishers Lane, Rockville, Maryland 20857.

National Health Planning Information Center, Long-Term Care Component, P.O. Box 31, Rockville, Maryland 20850.

International

A Hit-And-Miss Affair. Policies for Disabled People in Canada. By Joan C. Brown. Published in September, 1977 by The Canadian Council on Social Development, 55 Parkdale Avenue, Box 3505, Station "C", Ottawa, Ontario K1Y 4G1, Canada. 508-page study. Fascinating compilation. $1. "Everywhere is the need to establish a system that will enable disabled Canadians to take their rightful place in society. . . . What is needed is the political will to act."

Rehabilitation International, 432 Park Avenue South, New York, NY 10016 would like to have disabled individuals participate in a survey of the rehabilitation process and the involvement of the disabled.

Government Controls on the Health Care System: The Canadian Experience. 1977. 17-page summary of a lengthy report. 35 cents from Superintendent of Documents, Public Documents Distribution Center, Pueblo, Colorado 81009.

The Dimensions of Need. By Pauline Faughnan. Interesting analysis of the needs of the Irish Wheelchair Association. Guidelines for the Association to work as a provider of services, an "awareness creator," and a mobilizer of local community resources. $10 from Irish Wheelchair Association, Black Heath Drive, Clontarf, Dublin 3, Ireland.

Legislation

California's AB822 provides that costs over $200 for modifying a vehicle for use by a disabled person will be excluded from automobile license fees. The law is not retroactive, but at time of renewal a vehicle may be reappraised, excluding the cost for modifications.

The National Center for Law and the Handicapped is developing better State legislation on architectural barriers. Information on various State laws will be welcomed by Jill Robinson, NCLH, 1235 North Eddy Street, South Bend, Indiana 46617.

Minnesota SF922 imposes a $10 fine on nondisabled individuals who park in spaces reserved for the disabled.

Minnesota SF1208 provides that polling places be accessible — governing bodies must select as polling places only those which have 31" wide entry doors, curb cut near main entry, ramps, and no barriers to booth.

Consumer Warranty Law Guide. The 22-page booklet explains federal and State warranty laws and procedures to use for seeking redress, with examples taken from actual complaints. The Disability Rights Center, which is affiliated with Ralph Nader, is selling the guide for $5 per copy, with a special price of $2 for individuals who cannot afford the higher price. Available from Debby Kaplan, Disability Rights Center, Inc., 1346 Connecticut Avenue, NW, Suite 1124, Washington, DC 20036.

Library Services

Talking Books. If you are turning these pages with a mouthstick or a page turner or relatively useless hands you are eligible for Talking Books. Contact your local library or write to Division for the Blind and Physically Handicapped, Library of Congress, Washington, DC, 20540.

Libraries for College Students With Handicaps. Directory of academic library of academic resources and services in Ohio. 1976. *Libraries for People With Handicaps.* Information collected in a survey of 249 public libraries in Ohio. Both free from The State Library of Ohio, 65 South Front Street, Columbus, Ohio 43215.

The Librarian and the Patient: An Introduction to Library Services for Patients in Health Care Institutions. By Eleanor Phinney, the doyenne of special librarianship. The 352-page book is an encyclopedic compilation. 1977. $20 from the American Library Association, 50 East Huron Street, Chicago, Illinois 60611.

Periodicals, New

ALPHE. Assistance in Law for Physically Handicapped Elders, 624 University Avenue, Palo Alto, California 94303.

International Journal of Rehabilitation Research. Original articles will be published in English or German; summaries in English, German, and French. Quarterly. US $14 or DM36.00 from G. Schindele Publishers. Rheinstrasse 5, 7512, Rheinstetten 3, Federal Republic of Germany.

International Directory of Periodicals for the Handicapped. Revised edition. $1 from UCP of Tarrant County, Inc., 1300 W. Lancaster, Ft. Worth, Texas 76102.

Rehabilitation, Miscellaneous

Program Evaluation in Vocation Rehabilitation. Fascinating bulletin. Free from Institute for the Crippled and Disabled, 340 East 24th Street, New York, NY 10010.

Sheltered Workshop Study: A Nationwide Report on Sheltered Workshops and Their Employment of Handicapped Individuals. Free from the Division of Evaluation and Research, Department of Labor, Room C-3315, 200 Constitution Avenue, NW, Washington, DC 20210.

Religion

Correction: the Sisters of the Lamb of God have a new address: 1516 Parrish Avenue, Owensboro, Kentucky 42301. Addition: they will consider those with late vocations and both the disabled and nondisabled.

Scientists

Project on the Handicapped in Science. American Association for the Advancement of Science is developing a directory of scientists with handicapping conditions. All handicapped scientists and graduate students of science are urged to contact Martha Ross Redden, Project Director, AAAS, 1776 Massachusetts Avenue, NW, Washington, DC 20036.

Access to Science. New quarterly. Aimed at improving opportunities for full participation of disabled students in college and university science programs. Free from Access to Science, American Association for the Advancement of Science, Office of Opportunities in Science, 1515 Massachusetts Avenue, NW, Washington, DC 20005.

Sex

A Small Wind of Change. Report of a research project by the Committee on Sexual Problems of the Disabled; project investigated the sex problems among 212 disabled individuals. Written by William Stewart. 2 pounds from National Fund for Research into Crippling Diseases, Vincent House, 1 Springfield Road, Horsham, Sussex, England.

Association for Sexual Adjustment in Disability (ASAD) resulted from a workshop held in 1975. The project included the publication of a newsletter, *Options,* that included *Options' Resource Guide to Sexual Adjustment in Disability.* Compiled by Barry J. Rabin, PhD. Fascinating collection of references. Available from Easter Seal Society, 1545 Wilshire Boulevard, Suite 600, Los Angeles, California 90017.

Sex and the Disabled. Edited by Dr. E. Chigier. This special issue of the *Israel Rehabilitation Annual* contains 20 papers by international professionals. $8 from MERETZ, Tel Aviv, P.O. Box 344, Israel.

Sex, Society, and the Disabled. A Developmental Inquiry into Roles, Reactions, and Responsibilities. By Isabel P. Robinault, PhD. Drawings by Robert E. Tanton, Jr. 256 pages. 1978. Clear, comprehensive, well organized, attractive. Covers the life-cycle from infancy to the older ages. Harper & Row, Publishers, Inc., Medical Department, 2350 Virginia Avenue, Hagerstown, Maryland 21740.

Counseling for disabled women, individual or group sessions. Kay Harris Kreigsman is establishing a counseling practice to deal with the problems of women, especially disabled women. Ms. Kreigsman is wheelchaired by polio. Address: 5615 Ridgefield Rd., Bethesda, Maryland 20016.

Social Security

The Social Security Administration has published a number of new booklets that will be helpful. Call or write your nearest office and request: *Disability Benefits for Blind People. Vocational Rehabilitation for the Blind and Disabled. Medicare for people under 65 with permanent kid-*

ney failure. Medicare coverage of kidney dialysis and kidney transplant services. SSI for disabled or blind children. A Guide to supplemental security income. What you have to know about SSI. How SSI can help. SSI for retarded people. Social services programs under Title XX of the Social Security Act.

Keep a copy of everything you receive from Social Security and of every letter you send. Keep an exact record of all phone calls. If you receive an oral decision, ask to have it written. If you are notified that you have been overpaid, ask the Social Security District Office for a waiver of repayment because you were not at fault and it would be a hardship to repay. If you were not overpaid or if the amount is wrong, ask for a reconsideration of overpayment. File an appeal! Don't just acquiesce!

Spinal Cord Injury

Exercises and self care Activities for Quadriplegic Persons. $5.95 from New England Chapter, Paralyzed Veterans of America, West Roxbury VA Hospital, West Roxbury, Massachusetts 02132.

Spinal Cord Injury: A guide for Patients and Their Families. $2.50 from the Department of Public Relations, Northwestern Memorial Hospital, 250 East Superior Street, Chicago, Illinois 60611.

Employment Opportunities for the Spinal Cord Injured Person. Preparing yourself to Go to Work. Edited by Thomas R. Shworles and Richard J. McCauley. $1 from National Paraplegia Foundation, 333 N. Michigan Avenue, Chicago, Illinois 60601. 23 pages. 1977. This pamphlet should be required reading for spinal cord injured and all who deal with them. A wealth of information and resources. A great bargain!

How to Take Care of Your Skin. By James Smittkamp. Excellent 8-page summary of daily routines and cushions, mattresses, and other equipment used for prevention of pressure sores. $1 from National Paraplegia Foundation, 333 North Michigan Avenue, Chicago, Illinois 60601. Ask for list of NPF's other publications.

Physical Medicine and Rehabilitation Approaches in Spinal Cord Injury. Edited by John G. Cull and Richard E. Hardy. Variety of professional contributors cover psychotherapeutic, vocational, and other aspects of SCI. $15.50 from Charles C Thomas, Publisher, 301-327 E. Lawrence Avenue, Springfield, Illinois 62717.

Sports and Recreation

Radio Camp, run by the Minnesota Society for Crippled Children and Adults, offers a week in the summer of intense study for a "ham" license or an upgrade to a higher class. Information from: Courage HANDI-HAM system, 3915 Golden Valley Road, Golden Valley, Minnesota 55422.

Wheelchair Square Dancing Instructions. Available on a 30-minute cassette for $3 from: Colorado Wheelers, 525 Meadowlark Drive, Lakewood, Colorado 80226.

Tennis anyone? Jack Kenny writes, "The article about me in the '76 *Gazette* opened up contacts with rehabilitation people all over the world — New Zealand, Puerto Rico, Canada, and all over this country. . . . I have developed some new games. We have one that blind children really love. . . . The IRS just gave us tax-exempt status so we can now start fund-raising. Let me know of any programs that need equipment or games." Tamarack Foundation, Tamarack Tennis Camp, Franconia, New Hampshire 03580.

Outward Bound School. During the summer months, 10-day courses will include canoe travel in the wilderness, rockclimbing, and navigation for self-care disabled and hearing impaired individuals. Scholarships and tuition grants cover all or part of $300 per course. Brochures from Ray Uloth, Project Centre Director, Minnesota Outward Bound School, 308 Walker Avenue South, Wayzata, Minnesota 55391.

Access to Recreation. Report of a national hearing on recreation for disabled, held by A&TBCB in Boston in October 1976. 70 pages. Free from the Architectural and Transportation Barriers Compliance Board, Washington, DC 20201.

Statistics

Jobs for the Disabled. By Sar Levitan, Center of Political Studies, George Washington U., and Robert Taggart, National Council on Employment Policy. Study based on the Social Security Administration surveys of the handicapped population in 1972. The SSA survey showed that there were 7,700,000 adults between the ages of 20 and 64, based on a self-classification of being termed severely disabled if their handicaps prevented them from working regularly or not at all. 129 pages. Available for $3.50 from the John Hopkins U. Press, Baltimore, Maryland 21218.

Transportation, Public

Inter-city bus travel was made more accessible to the disabled by the rules of the Interstate Commerce Commission that went into effect on August 8, 1977. The rules prohibit carriers from denying transportation to any person on the basis of a handicap, physical disability, blindness, or because a person cannot board the bus without assistance. Carriers must provide assistance in boarding or carrying luggage.

Accessibility of stations and trains. Information available by calling toll-free 800-523-5720. Deaf travelers may use the teletypewriter free 800-523-6590. Transit authorities in Southern California, Dade County (Florida), and Southeastern Pennsylvania formed a consortium to pool their orders for the Transbus.

A Study of Wheelchair Access to the Current Transit Bus Design. Report of a study by AM General Corporation, 32500 van Born Road, Wayne, Michigan 48184 under contract with UMTA.

Travel

Guidebooks for Handicapped Travelers. Free from President's Committee on Employment of the Handicapped, Washington, DC 20201.

Parking clearance sign to hang on the inside of a car or van window: "Please leave five foot clearance. Driver of this car uses wheelchair and needs five feet between your car and this car for wheelchair to fit." $3.50, including postage, from Seton Name Plate Corp., 949 Boulevard, New Haven, Connecticut 06505. Order Sign Style SA-915.

1978 Accessible Motorcoach Vacations. Booklet describes escorted tours to Florida, California, Black Hills, Grand

Ole Opry, Yosemite, Niagara Falls, New England/Canada, and East Coast. Request from Barbara and Judd Jacobson, Flying Wheels Tours, Box 382, Owatonna, Minnesota 55060. Judd, a quad, has arrangements for '78 worldwide tours by air and cruise (Queen Elizabeth 2).

Access to the World. A travel guide for the disabled. By Louise Weiss. $7.95. Chatham Square Press, 40 Broadway, 23rd Floor, New York, NY 10013.

Dialysis World-Wide for the Traveling Patient. National Association of Patients on Hemodyalysis and Transplantation, Inc., 505 Northern Boulevard, Great Neck, New York 11021.

Access Travel: Airports. 20 pages. Lists accessibility features of airport terminals around the world. Free from Consumer Information Center, Dept. 619-F, Pueblo, Colorado 81009.

Disabled Campers Club, 28, Coote Road, Bexleyheath, Kent, DA 7 4PR, England.

Mobility International, A. Lumley, Esq., The Central Bureau for Educational Visits and Exchanges, 43 Dorset Street, London W1H 3FN, England. Information on travel and exchanges for disabled.

New English travel service run by and for disabled persons: Liberty Travel Service, 8 St. Giles Court, Dane Road, Ealing, London, W13, England.

Veterans

Affirmative Action to Employ Disabled Veterans of the Vietnam Era. Free from President's Committee on Employment of the Handicapped, Washington, DC 20210.

更生
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China's Peregrinating Polio Priest

by Ron Dickson

Unlike the blind man on the corner who sang the Beale Street Blues, the news man on the corner in Martinez, California, didn't sing much. And his problem was cerebral palsy. Or so Bob Ronald suspects, looking back on his childhood from a few decades and three continents later, after a heap of experience with the halt and the lame.

At the time, though, Bob was only aware that the news dealer was different, as a schoolmate with a flail foot was different, or as a dog with floppy ears may be different from the run-of-the-kennel mutt: Only as one grew up, it seems, did one learn to discriminate, pity, or be embarrassed by the handicapped.

When Bob grew up, he had decided to study for the priesthood, a decision motivated in part by a desire to help people, although he never dreamt that it would be a particular kind of help for a particular group of people in a particular remote part of the world.

The area came first, when the Jesuits sent him to Taiwan, China. Here he settled down for a two-year intensive program of mastering the language.

His studies were half through and he could carry on a simple conversation in Chinese — talk about the lousy weather, for example — when, in the steamy summer of 1958, Bob took a week's vacation. One lazy morning, he woke up with a sore back. The soreness persisted for a couple of days.

Then his leg buckled under him — maybe he'd strained a muscle. That night after dinner, he couldn't get up. They discovered it was polio after they got him to the hospital, where he stayed for a month. For thorough treatment, the Jesuits had him flown back to the U.S.

It was in San Francisco, California, not far from home, that therapy started on his affected muscles (and in San Jose that it continued) — both legs, both arms, one shoulder, back, abdomen, chest and assorted other spots. And it was in San Jose that the March of Dimes took over and whisked him off to Warm Springs, Georgia, for the full presidential treatment.

Over a year later, he got back to Taiwan and picked up where he'd left off, with modifications: a wheelchair and a remodeled room for sleeping quarters. There was more Chinese study, then a transfer to the Philippines for theological training.

In the Philippines, there was a major change in his awareness and his life when he met a Sister Baerts from Belgium. She helped the sick and especially the physically disabled, running a sort of one-woman counselling and rehabilitation service. Though he himself was in a wheelchair, Bob for the first time realized how much the disabled needed: physical rehabilitation, help with psychological, spiritual, vocational, housing, and other problems — problems that seemed to have been automatically taken care of for him. (Sister Baerts' activities, incidentally, have since expanded to include

housing for the disabled in and near Manila, including a projected "House Without Steps," where their families will live with the handicapped in a community of cottages.)

Realizing that his own disability would be a big advantage in rehabilitation work (the disabled would feel that he'd been that route himself, understood their problems, and really knew what he was talking about when he gave practical advice), Bob determined to become a rehabilitation counsellor.

He needed training, in techniques and goals. But where? He flew back to the U.S., following up correspondence and queries.

In California, he talked to a school official who, advising that "there's no better place for you than the University of Arizona," picked up the telephone and put through a call to his old classmate in Tucson: in three minutes, Bob was admitted to Arizona's rehabilitation counselling program.

A couple of years later, he was back in Taiwan, putting his training to use as a full-time rehabilitation counsellor at Veterans General Hospital (such extra-Ordernary employment is possible in the Order of Jesuits). This hospital, with the best staff and equipment in the country for rehabilitation purposes, was less than five minutes away, via powered wheelchair, from Bob's home and church.

As the years wheeled by, Bob realized he was serving largely an elderly clientele — stroke victims, for the most part. But he was not reaching many young adults whose needs — vocational, residential, psychological, social — were greater. Where had all the potential flowers of society gone?

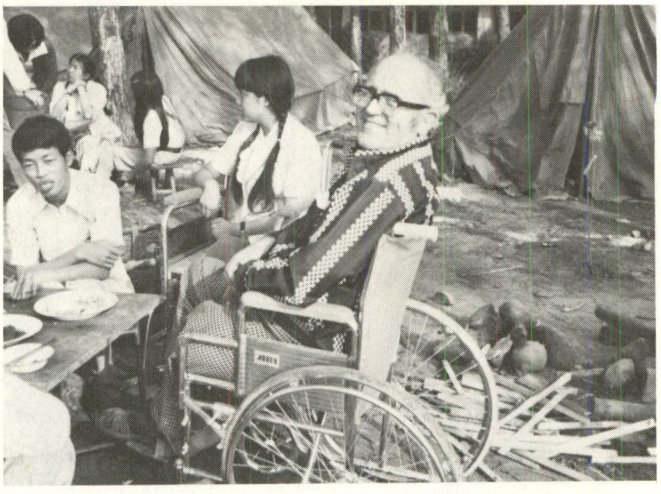
The answer lay, in part, in the family-oriented Chinese social structure; lay, so to speak, in the back bedroom of the home, where the disabled person was cared for, sheltered from the shocks of normal life, and the public view. To learn how to help him, one had to learn more about the social context. A practical approach to understanding some of his problems was to take advantage of the hospital situation: Bob was to run surveys among patients, able-bodied, and hospital personnel of all ages and sexes to discover what blocks, what openings, what detours existed on the road to rehabilitation in a tradition thousands of years old, a tradition that was being assaulted by western Levi and bubble-gum culture.

In 1972 came a chance to see how other countries were doing, when Bob flew to the 12th World Congress of Rehabilitation International, meeting that year in Sydney, Australia. He got Down Under a week early for an associated seminar on vocational rehabilitation in Adelaide. And he flew over the Outback and beyond later, reaching the Indian Ocean at Perth and casting, en route, a critical eye upon Australia's rehabilitation facilities.

His reaction to Australia?

"A good place to be sick."

But the same was not true of other places. Before going back to Taiwan, Bob made the Grand and Not-So Grand Tour of Asia, visiting the Philippines (again), Malaysia, Indonesia, Vietnam, Cambodia, Thailand,



Father Bob Ronald, S.J. (in wheelchair) arranged this unprecedented camp-out in Taiwan for over 200 disabled.

Japan; sleeping in cities like Singapore, Kuala Lumpur, Jakarta, Saigon, Phnom Penh, Bangkok in hostels, hotels, monasteries, homes of friends of acquaintances made in Australia; riding in planes, trains, buses (including one fascinating 16-hour ride through the Indonesian countryside), taxis; following an international network of church and rehabilitation people that spread to relatives, friends, associated vocations. ("Now, when you get to Bangkok, call this number and ask for Eric: his brother-in-law is an orthopedic surgeon with the right connections, might even put you up for the night, would certainly invite you to dinner. . . .") And surviving adventures like being off-loaded after midnight in a strange town in a strange land, where there was nobody to meet him and nobody spoke English or understandable Chinese.

Every country, it seemed, had a showcase rehabilitation hospital, with trained personnel and gleaming equipment. One hospital. And teeming millions of people, many of whom had never seen a doctor or even a city. Asia was not a good place to be sick, unless you lived in the right place and knew the right people. The problems were just too great, but everywhere Bob met dedicated doctors, therapists, nurses, counsellors, and other health workers fighting against pestilence, apathy, and overpopulation.

He returned, refreshed and with new ideas, new friends, and new associations, to his own problems in Taiwan. It was only when he had met Sister Baerts in the Philippines that he had become aware that the disabled needed help; now, he realized, what they really needed was a chance to help themselves.

To give them this chance, one step would be to form a club or organization, run on very informal lines, where young adults could meet, socialize, develop self-confidence, have contact with the outside world, even get leads and advice on getting jobs and developing a life, perhaps a home, independent of the overprotective family. The goal would not be to disrupt the family

system, but to help the disabled person become a productive member of the family rather than a burden.

"Operation De-Handicap," whose Chinese name is based upon a folksaying that translates roughly as "help yourself to a better life" (operation sandal strap?), was started in 1973, with a full-time able-bodied director. The Chinese name has the positive flavor Bob wanted: He viewed his own polio not as disabling but enabling him to help others help themselves.

These days, Bob needed to get around, with a thousand extra demands on his time. He worked out an arrangement with a taxicab driver and his wife, who alternated in driving Bob wherever he needed to go.

One night, coming home late from a meeting, the wife was driving. It was her last drive. When she pulled around a curve in the road, she was confronted with two sets of headlights bearing down on her at high speed. She was killed instantly when a truck, passing on the curve, smashed into Bob's car.

And Bob? — both legs fractured, a hand smashed, internal injuries. There followed eight dreary months as a patient in the hospital where he worked. But he knew the staff, and even from his bed he could train others, keep in touch with his job and with Operation De-Handicap, and get some statistical work done.

He had been hoping to get back to the States for more study; then, when he was released from the hospital, there was a chance to leave earlier and get home to California in time to have Christmas with his mother.

But there was an unexpected (though not unwelcome) delay: The government announced that Bob was one of the few who had been selected to receive the annual *Hau Ren Hau Shr* ("Good Man, Good Works") awards, in recognition of his outstanding contributions to society. The awards ceremony was scheduled for December, nudging the holiday season.

Bob just made it.

Things at home didn't work out quite as he'd expected. First, one of the fractured legs was acting up. The medical solution: amputation. Well, he thought, the leg hadn't been of any use to him anyway.

Secondly, his study took a form he hadn't anticipated. He ran into a fellow-priest whose special concern was geriatrics, as Bob's interest was rehabilitation. Moreover, he had a car at his disposal, and four free months between assignments. Why not join forces and tour rehab and old folks' facilities in the U.S. and Canada? They'd learn more that way than they could in the classroom.

So, like the wandering scholars of the Middle Ages, they set out. They criss-crossed the continent, easy riders through 30 states and three provinces, staying in church residences as well as putting up (it seemed) in more motels than Lolita and putting up with more home-cooked vittles than a circuit-riding preacher. One stop was at the home of Joe and Gini Laurie and the *Rehabilitation Gazette* (Bob rates the cuisine three-star).

There were adventures — like the twilight race to the Canadian border before it shut down for the night and left them stranded on the bleak Dakota plains; there were discoveries — like the home of the Sisters of Christ Crucified, where every Sister was disabled in one way or another; there was sightseeing — like a boat trip around Manhattan, and the first smoldering of autumn colors in New England; and there were surprises — like the time when Bob, phoning ahead to Washington, D.C. for accommodations at a Missionhurst establishment, identified himself as "Robert Ronald, from Taiwan," and was greeted with: "Hello, Bob! This is Father Paul — from Taiwan."

When Bob got back to Taiwan, Operation De-Handicap was lurching ahead, on crutches, wheelchairs, enthusiasm, and a couple of foundation grants. Part of the latter will help finance a new home base (Bob has found the ground floor of a building now under construction, which can be modified to suit and which is handily situated with bus stops near by).

Already, three other cities have offshoots, offshoots that are sprouting into independent growth: the Hsinchu branch, for example, has supplied 15 wheelchairs to those who need them, and has helped 30 people find jobs.

Before the typhoon season really got under way this year, Operation De-Handicap staged something unprecedented: a camp-out for the handicapped, many of whom had never spent a night outside of home or hospital. Busses were chartered and a pack of Cub Scouts enlisted to help with raising tents and scrounging firewood and scouring pots, and over 200 disabled took off on their great adventure.

The campground, it turned out, was near a military camp. Some off-duty soldiers wandered over to see what was going on, and pitched in with help and advice. After supper, there were songs and mosquitoes — sing-along with itch.

The next day, one of the campers told Bob: "You know, we really appreciated that. It was the first time we had a chance to do something for ourselves. Even if we made mistakes, they were *our* mistakes; even if we burned the rice, it tasted great!"

"Have you eaten rice?" or "Have you had your fill?" is a standard Chinese greeting, equivalent to the western "How are you?" This camp-out left a couple of hundred of the disabled tired but with the appetite for adventure satisfied — temporarily.

For tomorrow, says Psycho-Social and Vocational Rehabilitation Consultant Robert J. Ronald, S.J., other plots and plans are bubbling on the back burner to help China's disabled help themselves to a fuller life.

Ron Dickson, a quad from a combination of polio and an unknown disability, is a writer and a librarian. A graduate of the University of Illinois, Champaign-Urbana, he moved to Taiwan in the late sixties. He is employed as a librarian at the National Palace Museum in Taipei. Address: Box 46-58, Taipei 104, Taiwan, Republic of China.

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Available Back Issues

Donation per copy: $3 from the disabled
$5 from the non-disabled

In addition to the special features listed below, all the issues contain first person accounts of the experiences of severely disabled individuals in obtaining higher education, training, or employment, reviews of books of special interest, and excerpts from readers around the world seeking pen friends.

1962. Vol. V. Experiences of quads acquiring higher education by telephone, correspondence, and attendance. Reading aids. New approaches to attendants. Voice-spondence Club. Self-aspirator.

1963. Vol. VI. Quads and their families at home, marriage, and adoption. Housing around the world. Wheelchair cushions. Australian fibre glass lung. Vacations and camping. English chair/bed.

1965. Vol. VIII. Traveling quads. Medical engineering — arm aids, foot-operated aids, multi-controls. Quad driving — foot-controlled steering, ramps, lifts, aids. Adoption. Housing. Narrowers.

1966. Vol. IX. Vocational rehabilitation. Employment experiences of quads. Wheelchairs — self-reclining, respiratory, climbing, foreign. Remote controlled typewriter. Association of Mouth and Foot Painting Artists. Housing. Reading list for quads.

1967. Vol. X. Experiences of 23 disabled college students and 35 employed quads. Citizens band radio. One-hand typing. Wheelchairs — curb-climbing, chin-controlled. Frog breathing. Portable lungs. Sex and the disabled. Alien attendants. Housing summary.

1968. Vol. XI. Tenth anniversary issue. Homemaking experiences of severely disabled individuals. Home-based businesses. Quad driving. Wheelchairs and accessories. Mouth-operated phone. Housing in Mexico and England. Rehabilitation through music. Remote controls.

1969. Vol. XII. The quad in his community. Ramps for home and car. Home care services. Housing complexities. Wheelchairs. Typing aids. Bathroom equipment. Traveling and living in Mexico. Photography.

1970. Vol. XIII. Community service projects. Independent living by quads. Mouthstick typing. Cushions. Bath lifts. Tie-downs. Hydraulic tailgates. One-armed fishing. Chess by mail. Group tours.

1972. Vol. XV. Comprehensive rehabilitation centers. Housing and home services for the disabled in the U.S. Remote controls. Ramps. Amateur radio. Art, music, and religion. Architectural barriers. Education. Employment.

1973. Vol. XVI. Social security and Medicare. Annotated bibliography of sex. Vans, lifts, and driving controls. Communications. Curb-jumping. Mouthstick controls. Family reactions to quadness. Yoga, Zen, and Sufism. Periodicals around the world relating to disability. Veterans. Housing and home services for the disabled in the U.S.

1974. Vol. XVII. Travel to Canada, Mexico, and Europe. Travel with respirators. Recreational vehicles for wheelchaired. Rehabilitation Act of 1973. Bills of rights. Coalitions. Education and employment of quads. Volunteer projects. Adjustments to spinal cord injury. Biofeedback. German breathing treatment. Charcot-Marie-Tooth syndrome. New wheelchairs. Vans and lifts. Remote controls.

1975. Vol. XVIII. Compendium of employment experiences of 101 quads. Supplementary Security Income. Multiple sclerosis. The telephone: a genie of services. IRS regulations on attendants. Quad-adapted camera. Step-vans, lifts, and ramps. New word board. Inexpensive tie-down. Bargain wheelchair narrower. ACCD. Architectural barriers milestones.

1976. Vol. XIX. Vocations. Avocations. Understanding depression — helping with grief. Teaching the blind to type. Employment experiences of quads. Housing and independent living. Tennis. Skiing. Self-help organizations. ROHO cushion. Wheelchair loader. Step Vans. Hitch-hiking through Europe in a wheelchair. GPB for high level quads.

1977. Vol. XX. Compendium of employment experiences of 25 disabled women. Rehabilitation in the Navajo Nation. Independent living programs. Wheelchair lifts for vans. Improved battery charger. Inexpensive camper-pickup with lift. Self-operating electric hoist. Your state vocational rehabilitation rights. Paraplegics in prison.

1978. Vol. XXI. 20th anniversary of the *Rehabilitation Gazette* — a photo story. Experiences of a deaf Japanese student. Don't be left without your RIGHTS. Barrier-free education. The disabled in Protestant churches. Indian sign system. Voice-activated telephone. Latest in housing. Respiration equipment. New portable iron lung. Spinal cord injury centers.