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Fall/Winter 1981
Vol. 6, No. 3

TELECOMMUNICATIONS
1981 FILM FESTIVAL WINNERS
INDEPENDENT LIVING,



1981-1982 INTERNATIONAL DIRECTORY OF ACCESS GUIDES



THE WHITE HOUSE

WASHINGTON

November 5, 1981

It is my pleasure to salute guests from this nation and twenty other nations who are participating in the 1981 Film Festival of Rehabilitation International - U.S.A. I extend a special greeting to the United Nations Ambassadors in attendance. The significance of this evening is indicated by your presence.

1981 has been designated as the International Year of Disabled Persons. One of the goals of this International Year is to increase understanding of the problems and potentialities of handicapped people, both in America and around the world.

RI-USA is a fine example of our common goal for a greater involvement of the private sector in many phases of our national life. I congratulate you on your continuing service to handicapped people and wish you every future success as you strive to enrich the lives of disabled persons in America and throughout the world.

Ronald Reagan

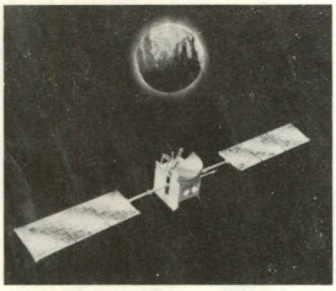
A LETTER FROM THE PRESIDENT DELIVERED AT THE FIFTH ANNUAL INTERNATIONAL REHABILITATION FILM FESTIVAL

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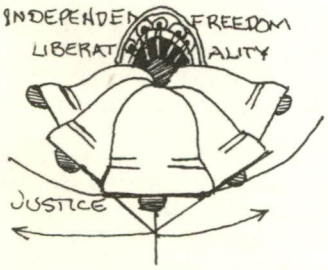
Enclosed with this issue is the 1981-82 International Directory of Access Guides. **Page 18.**

TELECOMMUNICATIONS



Dr. Susanne Bruyere describes the effects the advancing technology of communications will have on international rehabilitation. **Page 2.**

INDEPENDENT LIVING



Lex Frieden surveys the independent living movement in the United States and examines its implications for disabled people abroad. **Page 10.**

FILM FESTIVAL WINNERS



Prizewinners of the 1981 International Rehabilitation Film Festival and celebration for the IYDP at the United Nations. **Page 20.**

REHABILITATION WORLD

The U.S. Journal of International Rehabilitation News and Information

Fall/Winter 1981 **Vol. 6, No. 3**

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TELECOMMUNICATIONS TECHNOLOGY TO ENHANCE REHABILITATION EFFORTS ACROSS CULTURES

by Susanne M. Bruyere, Ph.D.



Susanne M. Bruyere was the director of a national short-term training grant from the Rehabilitation Services Administration on "The Use of Telecommunications Technology in the Training of Rehabilitation Personnel," 1978-1979. She is currently an Associate Professor in the Department of Rehabilitation at Seattle University, and a trainer in the Region X Rehabilitation Continuing Education Program. Dr. Bruyere has a doctorate in Rehabilitation Counseling Psychology from the University of Wisconsin—Madison, and masters degrees in Rehabilitation Counseling, Adult Education and Public Administration.

Introduction

The comprehensive introduction of automation everywhere around the earth will free man from being an automaton and will generate so fast a mastery and multiplication of energy wealth by humanity that we will be able to support all of humanity in ever greater physical and economic success anywhere around his little spaceship Earth.

R. BUCKMINSTER FULLER[2]

A person observing the planet earth from the vantage point of a far-off star could perhaps more clearly and optimistically describe the balance between crisis and constructive evolutionary change which we are experiencing today. No doubt the fuel crisis and arms escalation are challenges which our world has never been confronted with prior to this time. But, neither have we had prior opportunity, as Buckminster Fuller alludes to in the opening quotation, to experience the potential of economic, societal and personal fulfillment that is possible in our life time.

One factor which has touched, if not dramatically changed, the lives of people all over the world in the 20th century is the advent of telecommunications technology. Marshall McLuhan has used the term "global village" to describe some of the changes which we are experiencing as a result of telecommunications. Electronic media such as the satellite have created a kind of immediacy possible all over the world that has hitherto existed only at the level of a village, thereby creating a sense of community and commonality among all people of the world.

With this increasing sense of global community, we can see efforts to approach areas for common concern in a more globally united way than previously possible. One manifestation of this has been the international year emphasis proclaimed annually by the United Nations. 1981 was proclaimed the International Year of Disabled Persons, with the intention of calling attention to the needs of individuals with disabilities throughout the world. It is the purpose of this paper to present some ideas on how telecommunications technology can be called upon to meet this challenge not only in 1981, but into the 21st century.

The Need

As in all technical fields, those in rehabilitation medicine are experiencing the impact of an information explosion. There is increasing research being done in all areas related to disabilities, resulting in an increasing number of research reports, indexes, and journal articles which must be reviewed and digested by rehabilitation practitioners in medicine and counseling, and rehabilitation counsel trainers and educators nationally.

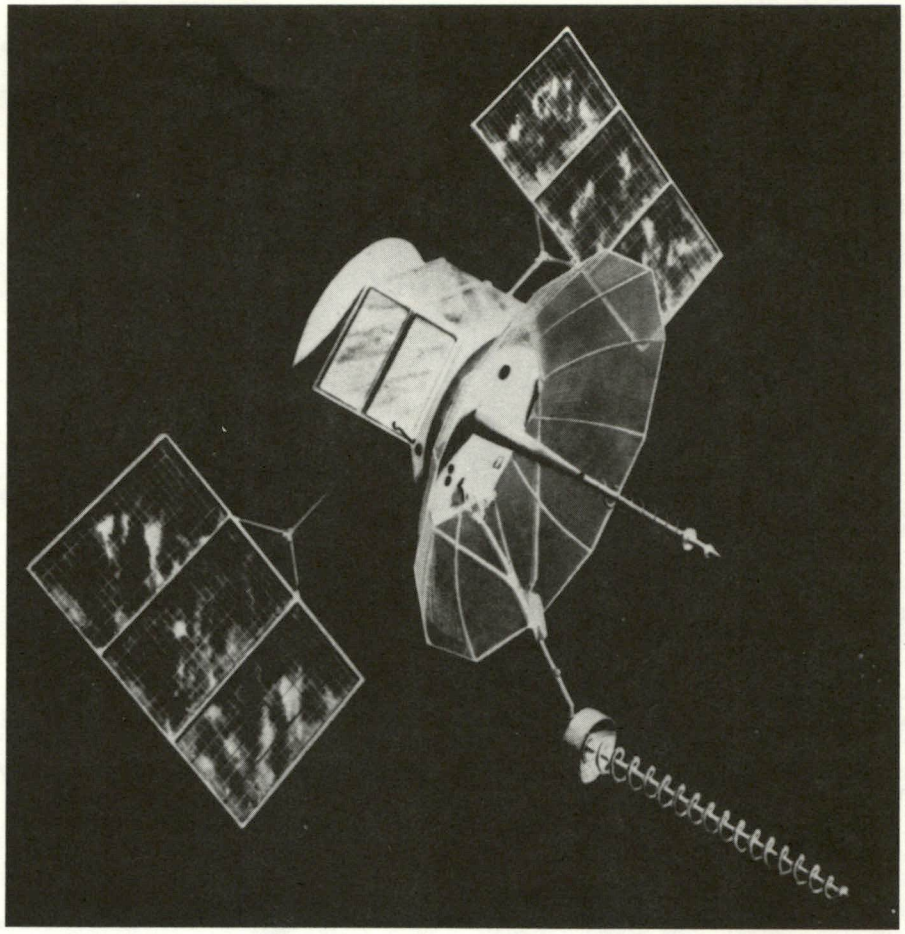
Those in the field of rehabilitation in the United States began several years ago to try to find a way to disperse research information in a way that was timely and expeditious with the use of a Clearinghouse of Rehabilitation Materials,[3] and the more recently established National Rehabilitation Information Center.[4] Now efforts must be made to expand this information storage and compilation capability beyond our national borders to include research and the results of applied experience that are occurring in other countries as well.

Historically researchers, practitioners and educators in all disciplines have used regularly scheduled face-to-face meetings and conferences to share information. This has been the way in which new research findings have been shared, and collaborative efforts have been initiated, thereby maximizing the use of available resources. And, with increasing awareness of the value of expanding our knowledge to discoveries being made by scientists from other countries, this effort to share new information has been expanded to the international level, with an increasing number of meetings and conferences being held in countries other than the United States. An example of gains made to make this possible in the field of rehabilitation is the University Centers for International Rehabilitation (UCIR).[5]

It might seem ironic, then, that the need for this increased international information sharing should become so strong at a time when rising travel costs and shrinking dollars for human services must diminish, if not threaten to eliminate, opportunity to attend conferences which necessitate extensive travel. The challenge for those in the field of rehabilitation, therefore, as it will be to all of us as we are inevitably impacted by the energy crisis and the information explosion, is to find alternative and innovative ways to reach out across large distances to communicate and share ideas with those in other cultures.

Existing and Projected Applications of Telecommunications Technology

Significant efforts have already been made to link together leaders in human services and education by electronic meetings. Electronic meetings, as an alternative to face to face meetings, "are meetings in which visual images, the spoken word, or typewritten messages are exchanged electronically by



people who may be far apart" (Johansen et al., 1979, p. 1), One example of such meetings is computer conferencing.

Computer Conferencing. Turoff and Hiltz (1980) describe current experiences with computer-information systems, projecting their utility for more widespread international uses such as exchange of scientific and technical problems and solutions, conflict resolution, and management of crisis such as famine or terrorism. A current model of such international knowledge resource-sharing is provided by the "legitech" group using the Electronic Information Exchange System (EIES).[6] Each member of the System sends and receives information remotely via a computer terminal with an acoustical coupler; access to the system can be gained through regular telephone lines. This legislative group consisted of 20 state legislative science advisors and approximately 30 resource organizations. Members could send inquiries and retrieve information on selected topics to a central computer. This kind of scientific information exchange might well be a good mechanism for the dissemination of knowledge to developing nations.

Another example of computer conferencing, as applied within the field of rehabilitation, has been the use of the EIE System by the Rehabilitation Engineering Centers located across the United States. Researchers and clinicians were able to quickly communicate with each other via computer on selected problems identified for a specific disabled person when the need arose. A projected follow-up effort has been conceptualized called ABLE Data,[7] whereby various appliances and electronic devices for the disabled and their vendors would be catalogued in a central computer for easy access by all rehabilitation engineering centers nationally. Thus, for example, an individual located in Massachusetts who is in need of a specialized wheelchair can quickly find out through this electronic information exchange system where the nearest vendor might be, even if the item is manufactured on the West Coast.

Satellite and Television. Satellite is another way in which information may be shared across large distances without need for extensive travel by participants in the exchange. Several space technology "firsts" were demonstrated in June, 1978, when a three-

hour satellite demonstration was transmitted from Paris, France, to receiving sites in Canada and the United States. The satellite video conference included a 45-minute videotape which was made in Scotland at the First World Congress on Future Special Education sponsored by the Council for Exceptional Children. The balance of the transmission featured a panel of experts in special education who spoke, and then answered questions telephoned in by listeners in the U.S. and Canada (Public Service Satellite Consortium Newsletter, 1978).

A similar effort has been made closer to home by the University of Washington School of Medicine which has been providing medical education by satellite since 1971 to students in Washington, Oregon, Idaho and Alaska. Having received preparatory printed materials in advance, students were presented with a lecture, broadcast live from a studio at the University of Washington. Using equipment with two way audio and visual capabilities, questions can be directed to lecturers located hundreds of miles away. This innovative approach to the delivery of medical education provides students in this four-state region with the opportunity to learn from experts in specialty areas but who are not geographically proximate to them.

Audio Teleconferencing. Voice conferencing is the simplest, most accessible and least expensive type of teleconferencing available today. This approach "ranges from the simple conference call placed through an in-house conferencing phone system, to a teleconference including video tapes, slow-scan television, electronic writing, and facsimile[8]" (Cores-Vergova, 1981, p. 39). The approach has been used successfully to inexpensively "bring" experts to conferences for short presentations, or to do entire training programs. In the summer of 1979, over 200 trainers and agency administrators from the field of rehabilitation received training on the use of this approach. The training was delivered by teleconference to 21 locations located from coast to coast and including Hawaii and Alaska (Bruyere, 1980).

Radio. Radio has long been used in the field of rehabilitation to provide news coverage and reading services to individuals with visual impairments. A creative embellishment of this approach has been demonstrated in New York City by a radio station called "In Touch Networks."[9] Through the efforts of this Network consumer information is offered daily to elderly and blind and visually impaired individuals, covering topics related to health, insurance coverage, banking, etc., as well as stock market reports and job listings. This effort provides a dual service in that not only does it provide useful information to disabled individuals, but, raises the awareness of many others in the New York metropolitan area about some of the unique needs of disabled individuals.

Technology to Come. The examples presented here are but glimmers of things to come. The future of satellite communications will involve the utilization of "space information stations," which will both greatly expand the variety and capability of space communications services and reduce the associated costs (Smith, 1979, p. 10).

"Already today the Intelsat V satellite (can transmit) a billion bits of information per second. Perhaps, in more understandable terms, this is like saying the capability to transmit the entire Encyclopedia Britannica six times over in a minute" (Pelton, 1979).



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For information, contact C.G. Warren, Department of Rehabilitation Medicine, University of Washington, Seattle, Washington 98195, (206) 543-3720.

Implications for Those in Intercultural Training and Research

What does all this mean for those involved in the rehabilitation of individuals with disabilities or those involved in cross-cultural education, training and research? There are two key points to abstract from the information which has been presented here. Although much of the emphasis has been on the use of telecommunications technology in the delivery of services to disabled individuals and the training of rehabilitation professionals, the examples presented have implications for a wide variety of human services and educational efforts. They also have important implications for those involved in cross-cultural research and training.

Need to Gain Entry to Use

First of all, those in education and human services cannot stand still heedless of the technology changes currently taking place. To not keep pace and explore the application of these capabilities to our disciplines may mean that we will lose out altogether on this opportunity. There is currently much energy being put into sorting out what is an equitable way to share this capability not only between public and private sector interests within our own country, but with all nations of the earth. Wilson Dizard, a senior officer in the U.S. Foreign Service, speaking of the strides made toward developing an international institutional framework for sharing this technology, says "the world is moving into new, unchartered waters with satellite technology and the institutional arrangements for insuring its most effective use," and urges the United States to take an active part in the international telecommunications planning projected to be accomplished at the 1984 Space Services Conference. Since satellite space is rapidly being allocated to a wide variety of users, we must act now to ensure that those in international rehabilitation efforts will be able to use this capability later on.

Societal Change and Cross Cultural Education

The widespread use of electronic media could alter the organizational and social structures of the world as well as protocols for meetings. "The biggest advantage of computermediated communication is that it spans space and time barriers, allowing a person to work, learn and communicate from those places and at those times that are most convenient for him or her" (Hiltz and Turoff, 1978, p. 169). The use of telecommunications technology may not only be useful in enhancing international efforts in the field of rehabilitation and other human services, but by this outreach across national borders create sense of commonality and community that would enhance the concept of a "global village."

The implementation of such systems of human communication through computers will result in a "communications revolution" that will have profound effects on societies. Hiltz and Turoff (1978) offer the following criteria, as set forth by futurist Gordon Thompson[11], which will constitute this revolution:

- It will ease the access to stored human experience.
- It will increase the size of the common communication space shared by the communicants, and therefore increase the amount of shared information and interaction among them.
- It will increase the ease with which new ideas can be developed and spread throughout society (Hiltz and Turoff, 1978, p. 469).

Verner Bickley, the director of the East-West Culture Learning Institute in Honolulu, Hawaii, alludes to the cultural considerations which this revolution brings with it, in saying:

> Notwithstanding Zbigniew Brzezinski's assertion that the 'technotronic' society is a society that is shaped culturally, psychologically, socially and economically by the impact of technology and electronics, it is certain that human and social behavior is rooted deeply in cultures (Bickley, 1978, p. 2).

Thus, our awareness of the increasing global interdependence between peoples and nations must be accompanied by a sensitivity for the need to accommodate different sets of values in international relations.

Telecommunications technology offers the opportunity for us to more cost effectively and expeditiously than ever before overcome the geographic distance which in the past may have been a barrier to dialogue on important organizational and societal issues. But this effort will be only the beginning; the potential for easier communication may also be the potential for easier miscommunication. Differences in cultural background, organizational commitment, and goals and objectives will be less perceptible in teleconference interchanges. Therefore as we begin to explore the potential of telecommunications technology to make our world smaller and hopefully thereby make easier the sharing of information, we must recognize the need to simultaneously heighten our sensitivity to the potential for diverse perspectives, particularly cultural differences, which may influence our interactions, and look to the use of experts in the area of cross cultural communication to assist us.

Summary

The purpose of this paper has been to present some examples of existing and projected uses of telecommunications technology in international rehabilitation efforts for individuals with disabilities. The importance of the need for those in human services and education to become knowledgeable about and make use of this capability for their own efforts in the near future was discussed. It was concluded that the advent of telecommunications technology, although immeasurably enhancing the opportunity for international communications, will also bring with it the need to be aware of the potential differing perspectives which may be a result of crossing cultures. Thus, the use of teleconferenced communication to enhance international human services and education efforts must be accompanied by increasing awareness of the body of knowledge and expertise available in cross cultural communication and make use of its experts to better insure success of electronic interactions.

Footnotes

[1]This paper has been developed for presentation at the annual conference for the society for Intercultural Education, Training, and Research held in Vancouver, British Columbia, March, 1981.

[2]R. Buckminster Fuller, *Utopia or Oblivion: The Prospects for Humanity.* New York: Bantam Books, 1969, pp. 362.

[3]The National Clearinghouse of Rehabilitation Training Materials has as its mission the gathering and dissemination of printed materials in the field of rehabilitation. Further information can be obtained from Oklahoma State University, Stillwater.

[4]NARIC is a computerized bibliographic retrieval service listing research reports funded by the National Institute for Handicapped Research. Further information can be obtained from Catholic University, Washington, D.C.

[5]UCIR was funded initially in 1978 by the Rehabilitation Services Administration (HEW) as a program for international rehabilitation research, demonstration, and training. Further information can be obtained from Michigan State University, East Lansing.

UNIVERSITY CENTERS FOR INTERNATIONAL REHABILITATION
Michigan State University
D-201 West Fee Hall
East Lansing, Michigan 48824
(517) 355-1824

Contact: Donald E. Galvin, Ph.D., Director

[6]The EIE System is a computer conferencing system maintained on a dedicated minicomputer at the New Jersey Institute of Technology in Newark. Further information about EIES or the projects described can be requested from Innovative Systems Research, Inc., Cleveland, Ohio.

ELECTRONIC INFORMATION AND EXCHANGE SYSTEM
Computerized Conferencing and Communication Center
New Jersey Institute of Technology
323 High St.
Nerwark, New Jersey 07102
(201) 645-5503

Contact: Murray Turoff, Director

INNOVATIVE SYSTEMS RESEARCH, INC.
922 Keith Building
1621 Euclid Ave.
Cleveland, Ohio 44115
(216) 621-6193

Contact: Jane McCarroll, Vice President

[7]ABLE Data is a project which is currently funded by the National Institute for Handicapped Research. Further information can be obtained from the University of Virginia Rehabilitation Engineering Center, Charlottesville.

ABLE Data
University of Virginia Rehabilitation Engineering Center
Towers Office Bldg., Terrace Level
P.O. Box 3368
University Station
Charlottesville, Virginia 22903
(804) 977-1378

Contact: Marian G. Hall, National Director

[8]Facsimile is a telecopying device that sends page copies over telephone lines to a terminal at a remote location (Johansen et. al., 1978, p. 157).

[9]In Touch Networks is a non profit, noncommercial radio information service for the handicapped. Subscribers listen through a special receiver. Further information can be requested from In Touch Networks, N.Y., N.Y.

IN TOUCH NETWORKS, INC.
322 West 48th St.
New York, New York 10036
(212) 586-5588

Contact: Lilly Bruck, Ph.D.

[10]Mr. Dizard served as a vice chairman of the U.S. delegation to the 1979 World Administrative Radio Conference (WARC). This quote comes from a paper entitled *WARC-79 and Communications Satellites: An American Perspective,* presented to an on line conference on Communications Satellites, London, June 18, 1980.

[11]Gordon B. Thompson, Three characterizations of communications revolutions, in *Computer Communication: Impacts and Implications,* 1972, pp. 36-37. (Proceedings of the First International Conference on Computer Communication, Washington, D.C., October, 1972).

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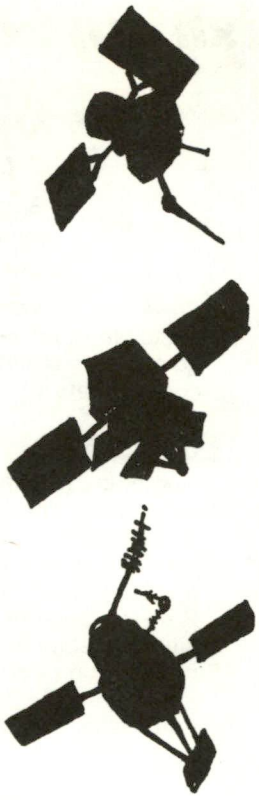
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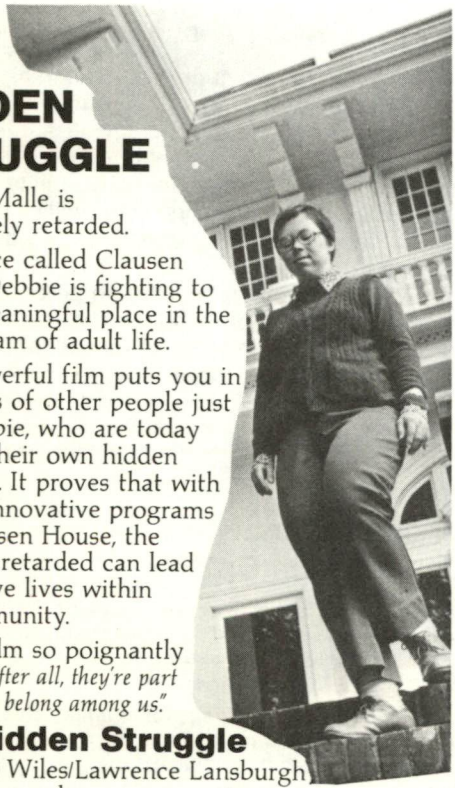
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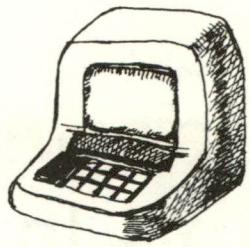
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RIUSHARE

RIUSA EXPANDS INFORMATION SERVICES



Rehabilitation International USA (RIUSA) has recently received a three year grant from the U.S. Department of Education's National Institute of Handicapped Research to upgrade and expand its role as an information resource to both the domestic and international rehabilitation community.

RIUSHARE, the name of this expansion project, grew out of the ever increasing demand on RIUSA for all types of information from an array of organizations and individuals.

The Demand for Information

As the United States **affiliate** of Rehabilitation International, RIUSA is expected to provide access to information about developments in international rehabilitation through its 12-member council of major U.S. rehabilitation organizations.

As the U.S. **delegate** to Rehabilitation International, representing the U.S. rehabilitation community, RIUSA is expected to provide information about the U.S. to organizations all over the world.

Because of its development of travel-related programs such as *Access to the Skies,* the *Directory of Access Guides,* and the *Host Directory,* as well as its international position, RIUSA is expected to provide all sorts of information for disabled travellers, sometimes right down to the current cost of an accessible room near accessible transportation in Tuscaloosa or Tel Aviv.

Because of its Rehabfilm programs, the rental library, the annual Film Festivals, and the Rehabfilm Newsletter, RIUSA is expected to provide extensive information about non-print media relating to disability.

In addition, RIUSA receives continuous requests for information from disabled consumers in the United States and other countries covering everything from the location of facilities appropriate to their special needs to employment opportunities in the United States or abroad.

Currently, RIUSA responds to all these demands through its primary communication mechanisms—*Rehabilitation World, Rehabfilm Newsletter,* and a variety of other publications and events. RIUSHARE, while supporting and enhancing all current activities, will now provide for a far more organized efficient response to this demand.

Plans for 1982

In 1982, the first full year of the project, RIUSA will conduct a general review of information systems and transmission methods currently in use and devise its own network with an aim to continual expansion and interconnection. With privately raised funds, appropriate equipment for data storage, tie-in with other data-bases, and transmission will be acquired. Three data-bases, new to the international rehabilitation community, will be established in 1982. These are an extensively cross-referenced bibliography of access guides and additional sources of travel information, and a greatly expanded directory of facilities in the United States willing to host visits from overseas professionals.

RIUSA, through its Executive Director, will reach out first to its Council of Organizations, and then to the general community as represented by its membership to find out what their information needs currently are, and how RIUSA can best respond.

Linkage will be established with compatible data-bases to enhance the capacity of RIUSA to respond to inquiries.

The AV Data Base

One area of particularly heavy activity will be non-print media. Rehabfilm anticipates the establishment of a very extensive data base of audiovisual materials in all formats and from all producing nations. It is expected that it will be possible within the three-year grant period to derive from this data-base complete listings of materials in a very great number of categories. It will also be possible to determine in which areas very little production has been accomplished and provide this information to prospective filmakers and producers.

The delivery of non-print information will be enhanced through two interrelated programs. First, in addition to the annual International Rehabilitation Film Festival, which will be held annually in New York City, some support has been provided for conducting a tour of six regions of the U.S.A. each year and showcasing the best films drawn from the Festival.

Secondly, in response to requests from outside the United States, Rehabfilm has been asked to engage in research as to the audiovisual needs of the rehabilitation community in four to six regions of the world. As a result of this research, a selection of films most useful to each population will be suggested. In some cases, on-site demonstrations of these "core" films are called for.

The Travel and Accessibility Data Base

In addition to the bibliography enclosed with this issue of Rehabilitation World, the popular INTERNATIONAL DIRECTORY TO ACCESS GUIDES, information will be drawn from current access guides and many other sources to establish a general information base relating to travel. Information relating to both building and vehicular accessibility, current procedural standards and rules in various regions of the world, a general bibliography of information related to travel for disabled people, will be loaded into the system.

RIUSA has conducted a number of surveys over the years under contracts or grant from both federal agencies and private corporations and foundations, and anticipates continuation in this line in the future. Information deemed generally useful will be drawn from these activities and shared through RIUSHARE.

The Host Directory of U.S. Facilities Data Base

The Host Directory of U.S. Facilities which encourages visits from overseas professionals is scheduled to be updated and greatly expanded in 1982. This listing also carries extensive information about each facility and serves thereby a number of purposes. The new directory, which will be available to RIUSA members by mid-1982, will provide the basis for an extensively cross-referenced listing of U.S. facilities. In time, it is to be hoped this data base may be expanded to include the same information in relation to non-U.S. facilities as well.

The Bottom Line for Information

"The bottom line for information servicing is to reach the people who really need the information," says Tim Moses, Director of Media at RIUSA. "You have to approach the problem actively—with a substantial effort of reaching out, telling people you exist. And be ready in a passive sense at the same time, having the right information for each person making an inquiry. We hope to find out the best way to do all this, and do it."

Independent Living in the U.S. And Implications for Other Countries

by Lex Frieden

Background

Independence and freedom are among the basic tenets of the American way of life. Our country was founded upon the principles stated in the Declaration of Independence, and we celebrate Independence Day, July 4th, every year.

We value every person's right to play a role in shaping their own destiny, and we make great sacrifices to guard and protect our freedom. Thus, the extension of the concepts and philosophy of freedom and independence to the treatment of disabled people in our society would seem natural.

However, when we examine the status of disabled people, and particularly when we look back into the past, we discover certain attitudes and practices predicated on beliefs which are contradictory to those of independence and freedom. We find that disabled people have been thought of and treated as helpless children. They have been sheltered, protected, and patronized. They have seldom been given an opportunity to speak in their own behalf. They have been segregated, and they have been institutionalized. They have been discriminated against, both intentionally and unintentionally, and they have been deprived of certain rights.

Some disabled people have been forced to stay at home and live with their parents long after becoming adults, because the services they needed to be comparatively independent were not available in the community. For similar reasons, other disabled people have been forced to live in institutions where they had few choices to make even simple decisions like what to eat, what to wear, and when to go to bed. Even those disabled people who have overcome the barriers to independence have discovered that they cannot benefit from some of the facilities and services which their tax dollars have built and operate.[1]

After World War II, when people became more sensitive to human and civil rights, the contradictions between historical philosophies and ways of treating disabled individuals became more apparent. Disabled people, their families, and professional rehabilitation workers began to express their frustrations, and a growing group consciousness demanded progressive change in policies and programs. New theories relating to the treatment of disabled people began to emerge, and model programs designed to facilitate more independence by disabled people were proposed.

The normalization principle was adopted from Scandinavia by organizations working with mentally retarded individuals during the 1950's. As a result, many group homes and day centers were established as alternatives to large institutions. In the early 1970's, several new principles and ideas converged to effect major changes in legislation and policy relating to disabled people.

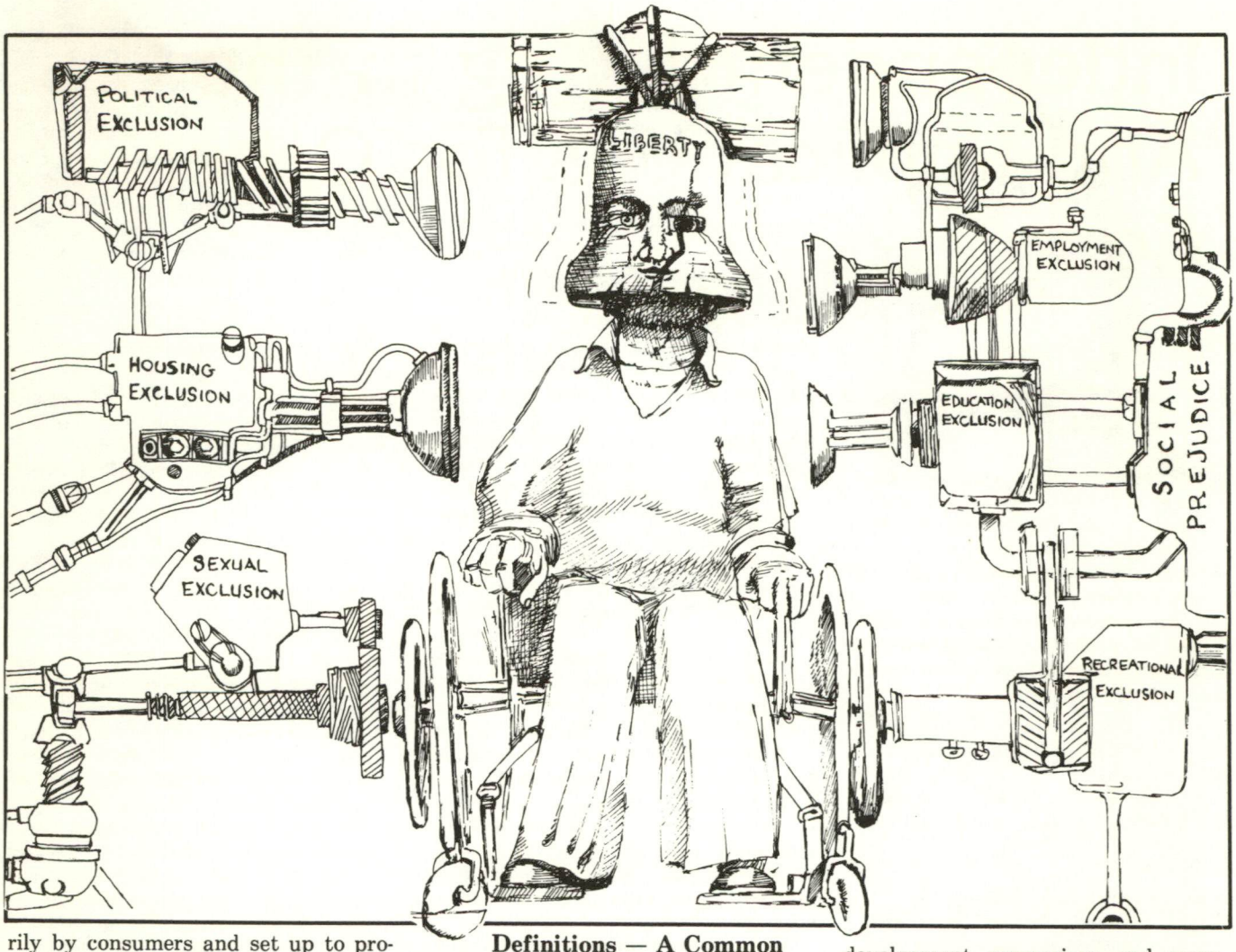
The concept of normalization for disabled people had led to de-institutionalization for some groups, and had been linked to concepts of equality, consumerism, and independence. The normalization principle suggested that disabled people should be treated in the least restrictive environment possible and that they should be helped to move from levels of dependence to those of less dependence. De-institutionalization was a means of accomplishing this goal.

The Equal Rights movement by disabled people was patterned in many ways after a similar movement by black people to overcome discrimination and segregation a decade earlier. Many disabled people considered themselves to be members of a minority group, related not by color or nationality, but by functional limitation and similar needs. Consumerism was having an impact on the whole society by causing providers of all sorts of goods and services to be more responsive and responsible to the users of their products. Citizen input was widely sought by both private and public policy makers and program administrators in all fields, including rehabilation, where disabled people were at last called upon to represent themselves. Finally, disabled people began to relate to independence as a philosophical concept entailing not only physical access and functional improvement or restoration, but also freedom of choice and self-determination.

Many important changes in the treatment of and attitudes toward disabled people resulted from the open discussions and practical implementation of these theoretical concepts and idealistic principles. The de-institutionalization movement expanded and spread to groups of disabled people other than the mentally retarded. The Equal Rights movement led to strict legislation against discrimination and encouraged affirmative action by both the public and private sectors of society in removing barriers to disabled people in employment, education, housing, transportation, recreation, and so forth.[2]

The consumerism movement brought disabled people into the decision-making process and led to the formation of self-help, advocacy, and political action groups at local, state, and national levels. Some of these groups joined together to form powerful coalitions capable of influencing policy at the highest levels.[3]

In the early 1970's, the Independent Living movement became more than a confluence of ideals and philosophies. It manifested itself in several separate, yet parallel, efforts to develop service programs which were based on Independent Living principles and designed to facilitate independent lifestyles for severely-disabled people. These were community-based programs run prima-



rily by consumers and set up to provide services frequently left out of the existing human service network.

There were three such programs in 1974. These were the Center for Independent Living (CIL) in Berkeley, California; the Cooperative Living/ Independent Lifestyles Program at TIRR (The Institute for Rehabilitation and Research) in Houston, Texas; and the Boston Center for Independent Living (BCIL) in Boston, Massachusetts. There are now more than seventy Independent Living programs in the fifty states.

Since the Independent Living philosophy continues to be the predominant theme in developing policies and programs for disabled people in the United States, the remainder of this paper will focus on the theory of Independent Living and the programs developed to facilitate a truly independent style of life by disabled people. Nevertheless, it is important to bear in mind the historical underpinnings and the societal context which led to the present state of affairs.

Lex Frieden is Director of the Independent Living Research Utilization (ILRU) Project at the Institute for Rehabilitation and Research in Houston, Texas.

Definitions — A Common Ground for Understanding

In 1978, the Independent Living Research Utilization project at The Institute for Rehabilitation and Research (TIRR) in Houston, Texas, undertook the task of developing a definition for Independent Living which would be accurate, relevant, and descriptive. In constructing the definition, it was also necessary to take into account all of the different interests and perspectives represented in the Independent Living movement. Through an iterative process of review, comment, and revision by experts in the area of Independent Living, working definitions of Independent Living and several related terms were developed.[4]

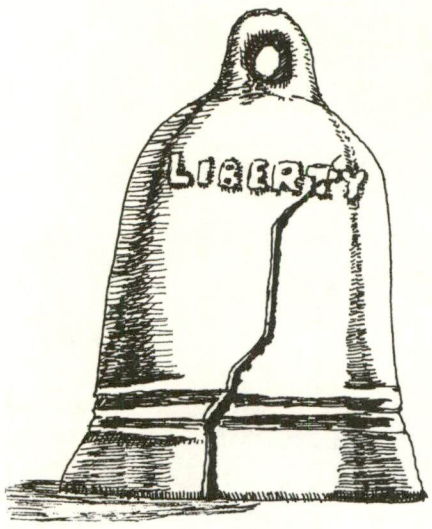
A set of draft definitions was introduced at a National Conference on Independent Living in Houston in September, 1978. Here, representatives of Independent Living programs, state rehabilitation agencies, consumer groups, and other government agencies, studied, discussed, and endorsed the definitions and their associated commentary. Thus, the following definitions have become a concrete basis for discussion, development, comparison, and expansion of the Independent Living movement as it relates to service programs.[5]

Selections from a Glossary for Independent Living

Independent Living - Control over one's life based on the choice of acceptable options that minimize reliance on others in making decisions and in performing everyday activities. This includes managing one's affairs, participating in day-to-day life in the community, fulfilling a range of social roles, and making decisions that lead to self-determination and the minimization of physical or psychological dependence upon others.

Independent Living Movement - The process of translating into reality the theory that, given appropriate supportive services, accessible environments, and pertinent information and skills, severely disabled individuals may actively participate in all aspects of society.

Independent Living Program - A community-based program which has substantial consumer involvement, pro-



vides directly or coordinates indirectly through referral those services necessary to assist severely disabled individuals to increase self-determination and to minimize unnecessary dependence on others.

Services that an independent living program must provide or coordinate through referral are housing; attendant care, readers and/or interpreters; and information about goods and services relevant to independent living. Other services that are either provided or coordinated by independent living programs include transportation provision or registry, peer counseling, advocacy or political action, independent living skills training, equipment maintenance and repair, and social-recreational services.

Note: Custodial care facilities and primary medical care facilities are specifically excluded from the definition of an independent living program.

Independent Living Center – A community-based, non-profit, non-residential program which is controlled by the disabled consumers it serves, provides directly or coordinates indirectly through referral those services which assist severely disabled individuals to increase personal self-determination and to minimize unnecessary dependence upon others. The minimum set of services that are provided by an independent living center are housing assistance; attendant care, readers, and/or interpreters; peer counseling, financial and legal advocacy; and community awareness and barrier removal programs.

Independent Living Residential Program – A live-in independent living program that provides directly or coordinates through referral shared attendant services and transportation. Related services which increase personal self-determination and minimize unnecessary dependence on others may be provided.

Independent Living Transitional Program – An independent living program that facilitates the movement of severely disabled people from comparatively dependent living situations to comparatively independent living situations. The primary service provided by these programs is skill training in such areas as attendant management, financial management, consumer affairs, mobility, educational-vocational opportunities, medical needs, living arrangements, social skills, time management, functional skills, sexuality, and so forth. Additional services may be provided. Transitional programs are usually goal-oriented and/or time-linked.

Independent Living Services Provider – An organization which provides several discrete services which can be used to increase an individual's ability or opportunities to live independently. For example, a medical rehabilitation facility may provide out-patient services which are designed to maintain the physical health of a person who lives independently in the community. However, if the center does not provide or coordinate a full set of services including transportation, attendant care and so forth, it would be an independent living service provider rather than an independent living program. While an independent living service provider does not meet the criteria necessary to be classified as an independent living program, the services it provides may be used or coordinated by an independent living program.

With these definitions in mind, it is important to remember that independence for us all is an intangible quality. Not every person is capable of achieving total independence in the sense described here, and not every person who is able to achieve it chooses to do so.

It is also important to reiterate that Independent Living is not dependent upon Independent Living programs. However, these programs are directly related to the Independent Living movement, and one of their primary functions is to support and maintain that movement. Thus, the next section of this paper will deal with Independent Living programs as they exist in the United States today.

Independent Living Programs Today

As illustrated by the definitions, there are basically three types of Independent Living programs: centers, residential programs, and transitional programs. Each of these are similar to the extent that they are community-based, have consumer involvement, and provide services designed to facilitate Independent Living by severely disabled people. However, each of them are different to the extent that they provide either ongoing or transitional services, and that they are either residential or non-residential, and that they are either controlled by consumers or merely provide opportunities for substantial consumer involvement.

Other dimensions along which Independent Living programs vary include service setting, service delivery method, helping style, vocational emphasis, goal orientation, disability type served, program sponsor, management structure, geographical setting, and primary funding source.[6]

At the present time, there are more than seventy Independent Living programs and many more Independent Living service providers in the United States. There are more than twenty such programs in California, and at least five programs each in Massachusetts, Texas, and New York. Multiple programs also exist in Kansas, Michigan, and Washington. Most of these programs are located in urban areas, and most of them serve persons with different types of disabilities. Disability types served include spinal cord injury, cerebral palsy, deafness, blindness, mental retardation, and others.

Residential and non-residential programs seem to be equally represented among existing programs, and several programs provide comprehensive services in both residential and non-residential settings. On the average, non-residential programs serve more than five hundred persons per year. Residential programs serve nearly fifty persons annually. Most of the programs provide services of an ongoing rather than a transitional nature. Also, most of the programs emphasize information-type services and refer clients to other agencies whenever possible.

About half of the programs have a strong vocational focus while the rest have only an incidental focus on vocational issues. About half of the existing programs have a staff consisting of mostly handicapped individuals, and the other half — are generally directed or managed by handicapped individuals. In addition to residential services, the services most frequently provided by

"...there is no country in the world where disabled people share the same rights and benefits, and have the same respect and responsibility as nondisabled people."

Independent Living programs are peer counseling, Independent Living skills training, attendant care, advocacy, financial aid counseling, transportation, social and recreational activities, and mobility training.

Most of the programs are independent, private, non-profit entities governed by a corporate board of directors who in turn employ an executive director to manage day-to-day program activities. Most of the programs depend on funds provided by federal grants as their primary source of financial support, and most of them have multiple sources of program income.

It is difficult to describe a typical Independent Living program, because the programs vary to a great extent from one to the next. The services which they provide and the way in which they are organized depends on the needs of disabled people in each community, on the availability of existing community resources, on the physical and social make-up of the community, and on the goals of the people who operate the program itself.

Perhaps it is sufficient to say that the way in which these programs are most alike is in the way they differ most from established programs serving disabled people. That is, Indepedent Living programs depend on their consumers, disabled people, to establish program goals, while other programs serving disabled people have predetermined goals which the consumer must seek in order to receive services.[7]

Independent Living as a programmatic concept is clearly in an evolutionary stage. New programs are beginning every day, and old programs are changing as the needs of their clientele change. The number of programs has grown from three to seventy in six years. Additionally, the total annual investment in Independent Living programs and services has grown from about one-half million dollars nationally in 1974, to more than eighteen million dollars nationally in 1981. Finally, the number of persons served by Independent Living programs has grown from about five hundred in 1974 to more than eight thousand in 1981.

It is certainly appropriate to look at the future of Independent Living programs and the Independent Living movement. What are the implications of these programs and this movement for the future and what applications may they have in other countries? These questions will be addressed in the following section.

Conclusions and Summary Discussion

As noted, the growth of Independent Living Programs has been phenomenal during the past few years. Although the rate of growth for these programs may slow somewhat during the next few years, the expansion in terms of number of programs, number of people served, and amount of funding, will continue. In fact, it is expected that there will be as many as three hundred to five hundred Independent Living programs in the United States by 1985. It is likely that more than one hundred thousand severely disabled people will be served by these programs. Finally, it is possible that as much as one hundred million to two hundred million dollars will be spent on providing Independent Living Services to disabled people by 1985.

Although it is conceivable that all human service delivery programs may eventually become integrated to the extent that they provide suitable and appropriate services for meeting the needs of disabled people, Independent Living programs will still be viable sources of peer support, information, and education for disabled people. These programs are likely to be maintained as centers of community-wide advocacy networks of and for disabled people. This leads to a significant point.

More important than the future of Independent Living programs is the future of the Independent Living movement itself. This movement has already had a substantial impact on the attitudes of policy-makers and the general public toward disabled people and the treatment of disabled people in the United States. Disabled people are now more than ever before involved in making decisions which affect their lives, both programmatically and individually. As individuals, disabled people are involved in establishing goals for themselves in vocational, educational, and Independent Living programs. Where they were treated more as children before, they are now treated more as adults. Where their views were ignored before, the opinions of disabled people are now sought by policy-makers and program administrators. Some of these authorities are disabled people themselves.

So what about the future of the Independent Living movement? It is difficult if not impossible to be objective about the answer to this question. In order to have a free society, everyone, including disabled people, must be free to make certain choices. One must be free, within natural limits, to choose his or her own occupation, his or her own friends, and his or her own style of living. In the past, disabled people have been denied these choices. In the future, they shall not be.

At this point, the implications of Independent Living for disabled people in other countries and cultures may be obvious. The United States has not been alone in its backward treatment of disabled people. It is true that a number of other countries have made progress and may be ahead of the United States in terms of the services they provide to facilitate Independent Living by disabled people. However, there is no country in the modern world where disabled people share the same rights and benefits, and have the same respect and responsibility as non-disabled people. Thus, the Independent Living movement has significant implications for every country.

With respect to Independent Living programs in particular, groups in some countries have recently modeled those in the United States, and similar programs have been operated in other countries for years. Nevertheless, it is a mistake to assume that Independent Living programs are trans-national or cross-cultural. Social, political, and economic systems vary dramatically from one country to another and from one culture to the next. More importantly, the views and needs of disabled people vary from country to country and culture to culture. Therefore, it is up to disabled people in each country and in each culture to specify what is needed for them to be independent. This may or may not require the devel-

opment of Independent Living programs as we know them in the United States. On the other hand, it will no doubt require changes in policies and practices in every country.

Independent Living holds great promise for disabled people. But more than that, it holds great promise for all people in society. In order to solve the problems of disabled people, society must assimilate them, meet their needs in an ordinary manner, and stop regarding them as a problem. When disabled people have achieved independence, their individual problems will be treated in the context of the whole society. There will be no need for special programs nor references to special groups. Disabled people will be just as independent and just as dependent as everyone else.



Footnotes

[1]For example, persons who use wheelchairs are, for the most part, unable to use publicly-funded mass transportation systems. Blind people have difficulty accessing public documents in a usable medium. Deaf people are unable to find interpreters or telecommunications devices in public offices.

[2]Title V of the Rehabilitation Act of 1973 (P.L. 93-112), particularly Sections 503 and 504, is often referred to as the Civil Rights Act for handicapped individuals.

[3]Perhaps the strongest of these organizations is the American Coalition of Citizens with Disabilities. Established in 1974, ACCD represents nearly one hundred smaller organizations of disabled people.

[4]The method used for developing this definition was basically a Delphi procedure.

[5]Definitions from Lex Frieden, Laurel Richards, Jean Cole, and David Bailey. "A Glossary For Independent Living." *IRLU Source Book: A Technical Assistance Manual on Independent Living.* Houston: TIRR (The Institute for Rehabilitation and Research), C. 1979.

[6]These dimensions are defined and discussed in an article by Frieden entitled "Independent Living Programs," which appears in the July-August, 1980 issue of *Rehabilitation Literature* magazine.

[7]The most obvious example of this type program is the Vocational Rehabilitation Program where eligibility for services is contingent upon the adoption of an approved vocational objective.

News Briefs



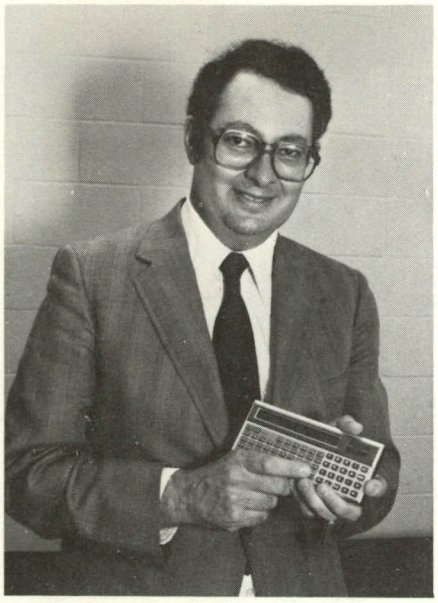
DISABLED PEOPLES INTERNATIONAL MEETS IN SINGAPORE

The founding meeting of Disabled Peoples' International (DPI) was held from November 30-December 4 in Singapore. Four hundred delegates from 45 countries attended the first World Congress to elect the first World Council, refine the standing Constitution, evaluate the impact of the International Year of Disabled Persons, and set policies and priorities for future activities.

DPI has established itself as a World Organization of Persons with Disabilities. It was founded by over 300 disabled delegates and a few non-disabled colleagues at the XIV World Congress of Rehabilitation International held in Winnipeg in June of 1980. Meetings there were orchestrated by the Coalition of Provincial Organizations of the Handicapped (COPOH), an alliance of Canadian organizations of the disabled. Resulting from these meetings were general guidelines for the organization and the election of a 14-member Steering Committee with two representatives each from Asia, Europe, Africa, North America, Latin America, Oceania, and the Middle East. This Steering Committee met in Dublin in October 1980 to draft a Constitution, plan and begin to organize the World Conference which eventually took place in Singapore, contact other organizations of disabled people, line up funding, and open up avenues to other international organizations, including Rehabilitation International and the United Nations.

The Steering Committee drafted a Constitution based on that employed by the International Labor Organization (ILO). Some general guidelines: 1. Membership is open to all organizations of disabled people—that is, organizations in which the majority of both the governing board and the membership is disabled. The exception is organizations concerned with the developmentally disabled, in which case parents or other advocates would count. 2. DPI points out that not only does one-tenth of the world population have a disability of some sort, but when one considers relatives directly affected by this disability one is talking about 25% of the world population, or people. When one talks about integration and accessibility, one is not talking about charity, but rather a question of justice, basic rights. In the securing of these rights, the disabled are better equipped than anybody to be their own advocates. 3. In pursuit of justice, DPI will establish mechanisms, for the exchange of information and disabled personnel with professional expertise. It will attempt to stimulate the creation of organizations of disabled people around the world, and to knit them into a unified world body. It will provide to member organizations a wide array of services to help them help themselves.

Because of the importance of DPI, *Rehabilitation/WORLD* intends to examine the organization and the First World Congress in Singapore in greater depth in upcoming issues of the magazine.



Dr. Harry Levitt displays his pocket computer he programmed as a rapid telephone communication instrument for the deaf.

DR. LEVITT WINS COMPUTER CONTEST

Dr. Harry Levitt, a professor of speech and hearing at the City University of New York took the $10,000 First Prize for the Johns Hopkins First National Search for Applications of Personal Computing to Aid the Handicapped. Dr. Levitt developed a pocket telecommunicator by reprogramming an off-the-shelf Radio Shack computer. The computer, shown in the photo above, permits the deaf to communicate with other people, both hearing and deaf, by punching out messages on the keyboard and reading them on the display panel. A special coupler permits adaptation for use with a conventional phone. It could be connected to an inexpensive line printer not much larger than the computer itself. It was developed as an alternative to the combersome and expensive teletypewriters currently in use. Called the Portable Telecommunicator for the Deaf, Dr. Levitt is looking forward to marketing the device. He estimates the cost, coupler included, will be about $220.

The contest ran from November, 1980 to June 30, 1981. On October 31 and November 1, the inventions of the thirty finalists were displayed at the Great Hall of the National Academy of Sciences, and a banquet honoring the winners was held at the Mayflower Hotel in Washingon, DC on November 2.

Rehabilitation/World will publish more on this fascinating competition in the Technical Aids Section of the next issue of the magazine.

WRF GRANT RENEWED FOR 3 YEARS

The International Exchange of Experts and Information in Rehabilitation Project at the World Rehabilitation fund has been awarded a three year grant from the National Institute of Handicapped Research in the U.S. Department of Education.

This project provides fellowships to U.S. rehabilitation experts for investigation abroad. These experts must be in a position not only to assess information but effectively utilize and disseminate it on their return to the United States. Monies are also made available to commission foreign experts to write monographs on selected topics. Readers of *Rehabilitation/World* will be familiar with this project from the last issue (Volume 6, Nos. 1-2).

For those interested in the program, inquiries should be directed to: Diane Woods, Project Director, World Rehabilitation Fund, 400 East 34th Street, N.Y., N.Y. 10016.

A NATIONAL OFFICE AND A NATIONAL YEAR

On December 17, Alan Reich, President of the U.S. Council for the International Year of Disabled Persons in the United States, announced the formation of a new National Office on Disability.

The primary purpose of the new organization will be to pursue the aims of the IYDP and the initiatives begun in 1981. As Mr. Reich pointed out, "The International Year soon will end, but the problems of 35 million disabled Americans will not." Mr. Reich noted that during the International year, 1,850 communities enhanced services to the disabled in some way. The new organization will continue to support these efforts.

The National Office on Disability will be located at 1575 Eye St., NW, Washington, DC 20005.

SUPPORT BUILDING FOR NATIONAL YEAR OF DISABLED PERSONS

Congressman Larry Winn, Republican of Kansas, and Senator Bill Armstrong, Republic of Colorado, have jointly introduced a Congressional resolution (HJR 354) designating 1982 National Year of Disabled Persons. As of January 20, 167 signatures have been added to the resolution, with expectations of passing the requisite 218 by the time the House settles down to new business. Support from mayors and governors across the country has been significant as well.

THE ROYAL BANK OF CANADA AND THE IYDP

The Royal Bank of Canada is one institution which has moved ahead in its behaviour towards disabled people as a result of the International Year of Disabled Persons. The corporation has developed a promotion program aimed at hiring disabled people throughout its network, has introduced aids for the blind, published what amounts to an access guide for wheelchair bound customers, and sponsored a film.



The aids for the blind were developed with the assistance of the Canadian National Institute for the Blind (CNIB). These include a check writing guide, a template which fits over a check, and indicates where to fill in information and sign. The bank also makes available a 50-minute audio cassette which describes the bank's personal services. These items are free.

The "access guide" is actually a directory for disabled customers, giving the address of more than 200 branches across Canada specially equipped to serve customers confined to wheelchairs. In many branches, throughout the IYDP, doors have been widened, ramps built, low-level desks and low-level automated banking machines installed.

Finally, the Royal Bank of Canada sponsored the production a 24-minute film called "Against All Odds", produced by Lauron Productions of Toronto. The film demonstrates the successful adaptation of three disabled people.

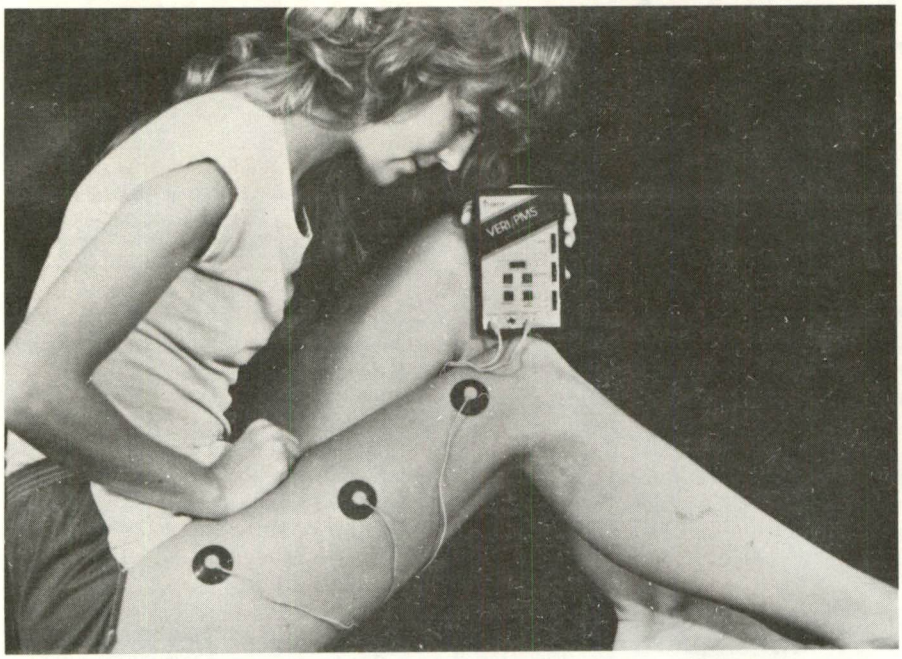
In the future, the Royal Bank of Canada intends to install TDDs (telephone devices for the deaf) in their VISA offices in Montreal, Toronto, and Vancouver.

To Rehabilitation/WORLD Readers

Rehabilitation/WORLD is accepting no further subscriptions in the United States. Only members of Rehabilitation International USA will receive the magazine in the future. Current subscription orders will, of course, be fulfilled. RIUSA memberships start at $25.00 per year, and include, in addition to Rehabilitation/WORLD, a subscription to the newsletter, International Rehabilitation Review from Rehabilitation International. For more information, or to join RIUSA, write: Membership Dept., RIUSA, Box 63, 20 W. 40th St., NY, NY 10018.

Overseas subscriptions, currently at $25.00 per year surface rate, remain unaffected by this change.

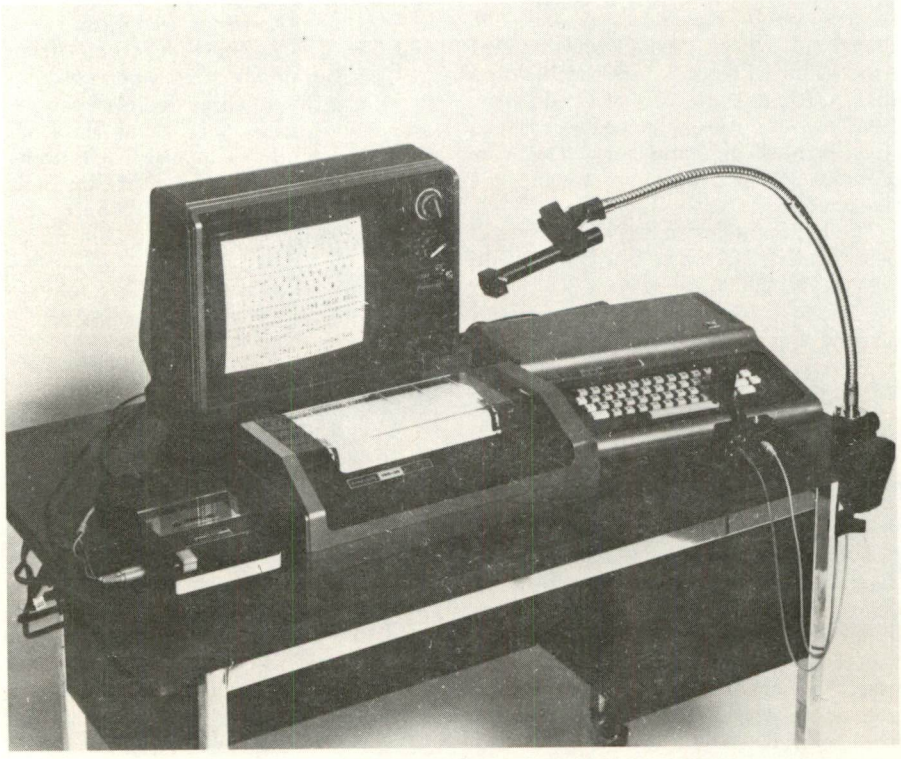
Marketplace



The Varite VERI/PMS

NEW DIGITAL STIMULATOR

Verite, a California company has developed a microelectronic muscle stimulator which has been modified to make internal surging user-adjustable. Primarily, this permits the user to adjust for 2-6 second range in surging intervals instead of the standard 2 seconds on, 2 seconds off format. The adjustment was made on the basis of a survey of physical therapists. Other alterations include and increase in intensity range up to 100 mA from 90 mA and a decrease in frequency range to 20-80 H2. The instrument called the VERI/PMS is priced at $695. For more information contact Verite, 1645 W. Anaheim Road, Harbor City, CA 90710.

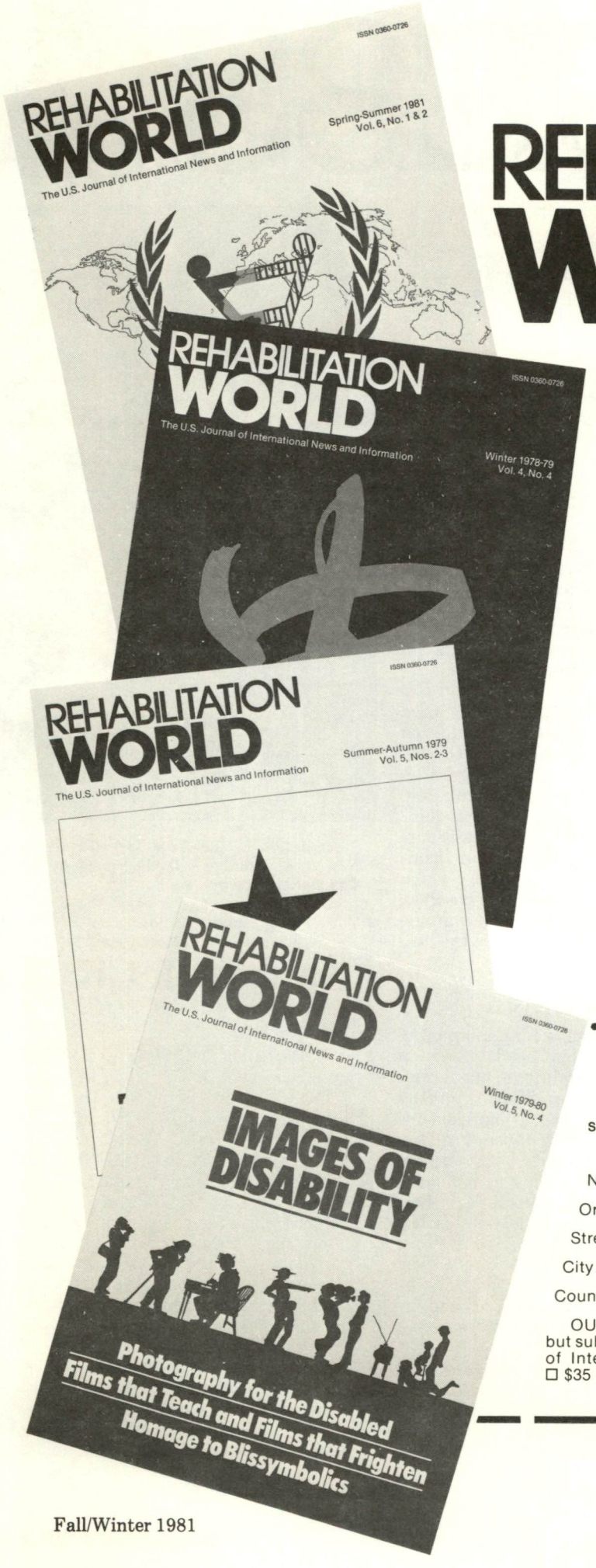


The Help-Mate

HELP-MATE: THE COMPUTERIZED COMMUNICATION AID

Applied Science Laboratories, a division of Gulf and Western, has introduced a new communication aid for the severely disabled. Using simplified word processing software, this unit makes it possible for people with little or no use of arms and hands to communicate through tv display and/or printer. The Help-Mate can be activated by the nod of the head, the blowing of a puff of air, or the use of a mouth switch.

This low cost Help-Mate System is complete and ready to plug in and run. Only a standard tv set is requested for display. Chief among its advantages is that the machine uses low cost microcomputer modules and nationwide service is available. Says Dr. Sol Aisenberg, President of Applied Science Laboratories "... the basic functions of the system are software-controlled, which means that units can be tailored for the needs of special groups without major investments in time and equipment. This opens up the possibility of developing special software to facilitate the functioning of the disabled in jobs they couldn't otherwise perform."



REHABILITATION WORLD

THE U.S. JOURNAL OF INTERNATIONAL NEWS AND INFORMATION

The extraordinary magazine that brings you all the latest news form the rest of the world as well as the United States on all aspects of the rehabilitation/integration process.

Available to members of Rehabilitation International USA, this quarterly magazine, in addition to its regular articles, publishes The International Directory of Access Guides. The Host Directory, and the Annual Film Guide as extra features.

So join Rehabilitation International USA today. Membership starts at $25 per year. Send in this application to: Membership, Box RW, Rehabilitation International USA, 20 West 40th Street, NY, NY 10018. You may also use this form for overseas subscriptions.

REHABILITATION INTERNATIONAL USA
20 W. 40th St., New York, NY 10018, U.S.A.

Enclosed is $25.00 for an annual membership in Rehabilitation International USA, which includes a subscription to Rehabilitation/WORLD. Your membership fee is tax deductible. Make checks payable to RIUSA.

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Organization (if applicable) _____

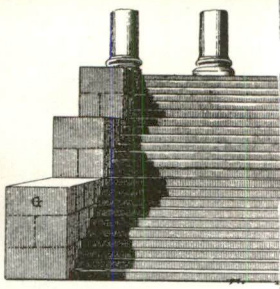
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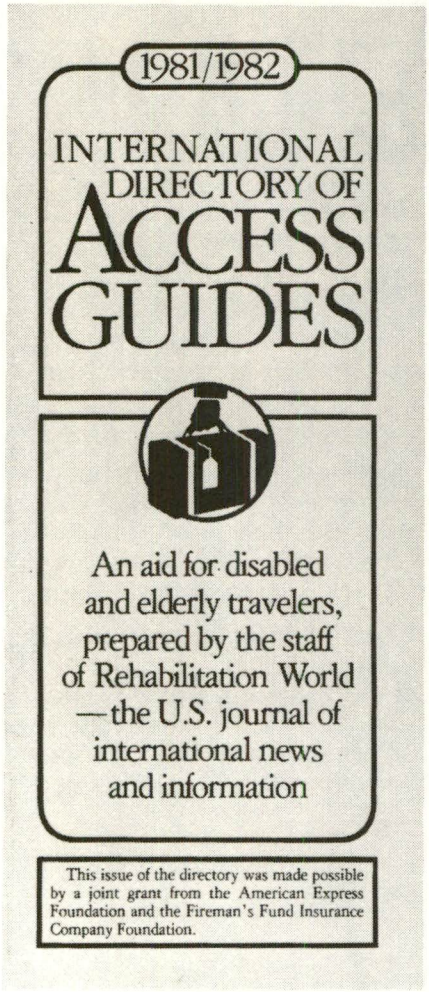
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OUTSIDE THE UNITED STATES: no RIUSA memberships available, but subscriptions to Rehabilitation/WORLD, the quarterly U.S. journal of International News and Information are: ☐ $25 (surface mail) ☐ $35 (airmail)

ACCESS





THE INTERNATIONAL DIRECTORY OF ACCESS GUIDES, 3rd Ed.

Enclosed with this issue of *Rehabilitation/WORLD* is your copy of the latest *International Directory of Access Guides.*

Several years ago, in response to repeated requests for information relating to accessibility and travel, the staff of *Rehabilitation/WORLD* at RIUSA developed the first of these bibliographies. The response was overwhelming. Hundreds of newspapers and magazines around the world picked up the story of the publication, and RIUSA, happily, was buried in requests.

That first edition listed 275 publications. The second edition issued for 1979-1980 listed 347. The current edition includes 458 entries. Between issues there is a certain amount of attrition. Supplies of access guides run out and are not renewed. Or, in other cases, the information in an older access guide may simply be so out of date that it becomes an embarrassment to the distributor or producer. Consequently, the difference in numbers between editions actually represents only a portion of the new access guides that have either been produced or discovered.

Not only is the quantity of access guides increasing. So is the quality. The story below about the *New York City Guide,* which has just been issued, offers some insight into the process involved in producing a guide. It is not a small task. It requires many steps and a great deal of people's time. Perhaps that is why it is so frequently a labor of hard-working volunteers.

Similarly, the development and dissemination of the Directory required the efforts of many people. In addition to the staff at *Rehabilitation/WORLD,* Shirley Walker of RIUSA has been invaluable in promotion and circulation. Above all, the funding under a joint grant from the American Express Foundation and the Fireman's Fund Insurance Company Foundation, which made this edition of the guide possible, was provided with warm encouragement and personal interest by the people involved.

ACCESS TO BOSTON

A new access guide containing information on 14 neighborhoods of Boston Brookline, and Cambridge, has recently been released. Considered by many to be one of the most comprehensive guides in the country, Access to Boston covers restaurants, night spots, historical sites, shopping areas, museums and many other attractions. Factors described include accessibility features such as parking, curb cuts, steps, aisle widths, ramp slopes, braille menus, and more. Development of the guide began four years ago, and involved the efforts of volunteers from a variety of agencies.

The guide is currently available at no charge by writing to Disabled Students Services, Boston University, 775 Commonwealth Avenue, Room 411, Boston, MA 02215.

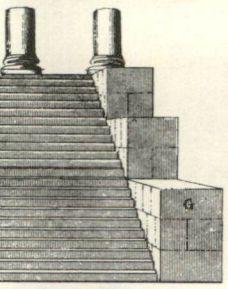


Presentation of the New York City Access Guide: C New York; Christina R. Davis, President of the New York City, holding the guide.

New York City Gets A

On December 7, 1981 at a 10:30 AM press conference at City Hall, Christina R. Davis, President of the New York Junior League, presented a copy of the brand new *Access New York City Guide* to New York City Mayor Ed Koch and other city dignitaries. During the International Year of Disabled Persons, there have been many similar ceremonies—the culmination of a lot of volunteer calling and walking and measuring which, with the support of a local foundation, resulted in an admirable guide for the use of disabled people.

In this case, Junior League members first researched the problems of accessibility. They consulted with numerous local agencies concerned with the plight of the disabled traveller. They reviewed over 50 existing access guides



GUIDES



Carol Bellamy, President of the Council, City of
Junior League; Edward I. Koch, Mayor of New York



Some of those concerned with production of the access guide: standing left to right, Christina R. Davis, President, Junior League of New York City; Elizabeth Maier, Chairman of the Access Guide Committee; Richard Mittenthal, Program Officer for the New York Community Trust; and seated, Anthony Santiago, Director, Mayor's Office for the Handicapped, New York City, and Eileen Healy, Representative of the New York State Easter Seal Society, New York.

A New Access Guide

to get ideas for content and layout. Then, armed with questionaires and measuring tapes, they went out into the community and personally surveyed each of 425 public buildings using accessibility standards developed by The American National Standards Institute.

Particularly in a city the size of New York, a process of selection is called for. In this instance, every effort was made to include all sorts of activities in all price ranges in all areas of the city. There is some emphasis on visitor attractions. The buildings surveyed were not included on the basis of accessibility, but general interest. The editors felt that it was preferable to state the information as it exists and leave the judgment as to accessibility up to the reader. As there is significant variation in capacities, both physical and emotional, for dealing with barriers, and the element of surprise is in itself a barrier, this was a wise decision.

The guide descriptions cover all aspects of accessibility: parking, entrance, interior, elevators, restrooms, water fountains, telephones, and makes general comments as well. The telephone number is provided. The suggestion is made that the disabled traveller make a call in advance to get any additional information and alert the management of any assistance required.

The amount of work involved in putting together an access guide should not be underestimated. It took 2½ years to produce this guide. A recently published guide for the Oakland/Berkeley area in California took two years to compile. *Access to Boston* took four years start to finish. The Committee Chairman of *Access: New York City,* Elizabeth Maier ended up taking virtually the whole summer off from her job as interior designer to finish up the editing.

When the editing was done, the Junior League went to press. The final product is a handsome 4½″ x 7″ booklet which can be easily carried in purse or pocket. It contains a foldout map of Manhattan. It is sturdy softcover and bound with a spiral wire for easy manipulation with one hand. Funding for publication came from the Corporate Special Projects Fund of the New York Community Trust (with funds drawn in turn from eight major corporations.) The initial printing was 15,000 copies. Copies are available for $2.00 each to cover postage and handling, payable to the Junior League of the City of New York, Inc. Orders placed from overseas should add $2.00 for surface and $4.00 for air delivery. Send orders to: Access New York City, The Junior League of the City of New York, Inc., 130 East 80th Street, New York, NY 10021.

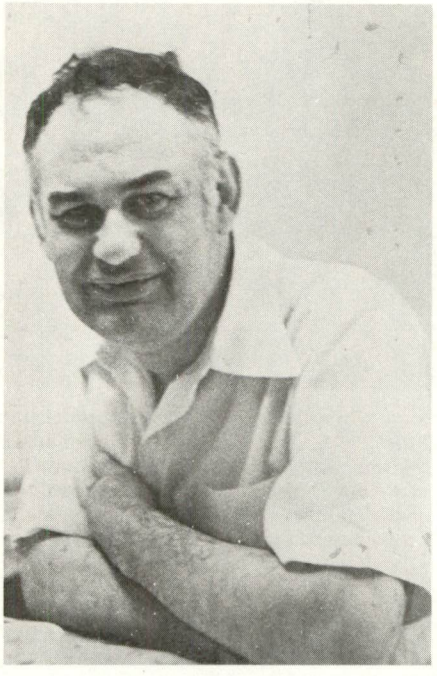
Film Page

1981 PRIZE WINNERS OF THE INTERNATIONAL REHABILITATION FILM FESTIVAL

Best Boy, the remarkable film about a 52-year old retarded man, took Grand Prize at the 1981 International Rehabilitation Film Festival, held in New York City, November 4, 5 and 6.

It is a sensitive and frank portrayal of the emergence of a retarded man from the shelter of his aging parents' home, and the ensuing alteration in his relationship with them and the world at large. It was first released as a feature film in early 1980 and Rehabfilm Newsletter reviewed the film in the February 1980 issue (Vol. 2, No. 4) as well as interviewed its producer, Ira Wohl. In April, 1980, Mr. Wohl accepted an Academy Award for best Feature Length Documentary. The film was only in theatrical distribution throughout most of 1980, and was therefore not submitted to the 1980 International Rehabilitation Film Festival. It was submitted in 1981, easily took the First Prize in the Mental Retardation category as well as the Grand Prize. For personal reasons, Ira Wohl was unable to accept the award at the Awards Ceremony on November 6. Anne Kraus, past President of the Association for the Help of Retarded Children, which helped to fund the making of *Best Boy* accepted the award from Awards Ceremony Chairman Dr. Howard Rusk.

Other big winners included two from Australia, *Captives of Care,* a film that dramatizes a confrontation between staff and patients in chronic-care nursing home, took First Prize in the category of The Disabled Person in Society. First Prize in the category of Special Education went to *Breaking Free* (or "Stepping Out" outside of the United States), a film about a theatrical production staged by a group of retarded young adults at the Sydney Opera House. First Prize in Rehabilitation for the General Audience went to *Can't It Be Anyone Else?,* a film that explores



the lives of three children whose leukemia is in remission and shows how they cope with cancer. It was made by John Korty and Bill Couturie. This pair also teamed up to make the sequel to *Who Are the Debolts And Where Did They Get 19 Kids* (another John Korty production) called *Stepping Out: The DeBolts Grow Up.* This *Stepping Out* (released in the U.S. before the Australian film above and therefore claiming title copyright priority) won First Prize in Mainstreaming. Good thing they changed the name. First Prize in Rehabilitation for the Professional Audience went to an amusing and very effective film from United Cerebral Palsy for the training of rehabilitation personnel in the care and handling of disabled people entitled *Twenty is Plenty.*

The complete list of First and Second Prize winners follows below.

GRAND PRIZE WINNER

Best Boy

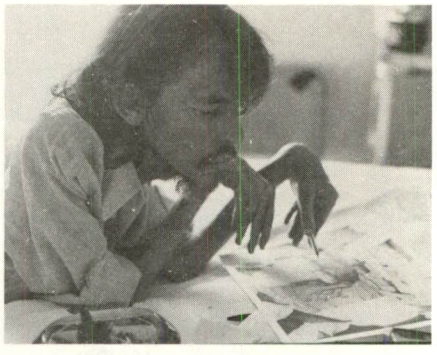
USA, 16mm, color, 104 mins., 1981. Produced by Ira Wohl, Only Child Motion Pictures and distributed by Documentary Films, Inc., 159 West 53rd Street, NY, NY 10019.

Philly, the 52-year old retarded son of Pearl and Max Wohl discovers independence for the first time when his filmmaker cousin Ira introduces him to school, the theatre, the zoo, and to a new life in a community residence. 1980 Academy Award winner.

WINNERS BY CATEGORY

Disabled Person In Society

FIRST PRIZE



Captives of Care

Australia, 16mm, color, 49 mins., 1981. Produced by Mr. Don Catchlove, PO Box 161, Glebe NSW 2037 Australia.

This film, based on a book of the same name by John Roarty, depicts the confrontation between patients in a chronic-care nursing home and the staff there. The patients, unable to obtain cooperation from the administration, go to the media to air their grievances. A well-acted dramatization of disabled activists against an entrenched status quo.

SECOND PRIZE

Deaf Like Me

USA, 16mm, color, 23½ mins., 1981. Produced by Jim Callner and distributed by Barr Films, 3490 E. Foothill Blvd., Pasadena, CA 91107.

Reveals the emotional and communication difficulties of the deaf in the hearing world. Yollie, a 10-year old with congenital deafness, discovers a professional mime who is also deaf. For the first time she understands and accepts herself.

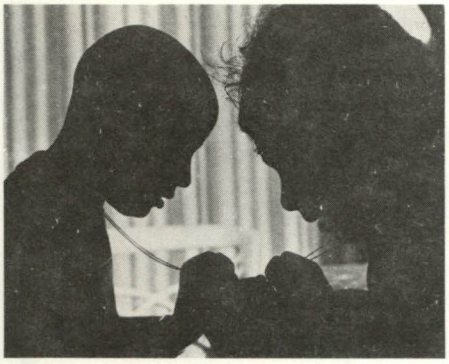
Our Largest Minority: The Disabled

USA, ¾" videocassette, color, 60 mins., 1980. Produced by Phillip and Norma Rappa and distributed by NBC News, 30 Rockefeller Plaza, NY, NY 10020.

Documentary that examines attitudes and barriers for people with disabilities in America through interviews with Max Cleland, Judy Heumann, Rev. Wilkie, Sarah Needham, and many, many other people in the forefront of the independence movement.

REHABILITATION FOR THE GENERAL AUDIENCE

FIRST PRIZE



Can't It Be Anyone Else?

USA, 16mm, color, 50 mins. (short version: 30 mins.), 1981. Produced by John Korty and Bill Couturie and distributed by Pyramid Films, 2801 Colorado Avenue, Santa Monica, CA 90404.

Follows a year in the lives of three children whose leukemia is in remission. These children display the most extraordinary range of virtues — courage, sensitivity, intelligence, humor, while living in the shadow of early death. Even with the recovery rate from leukemia now up to 50%, few subjects could be more poignant nor handled so robustly. Reviewed in Volume 3, Number 3 of Rehabfilm Newsletter.



SECOND PRIZE

Emerging

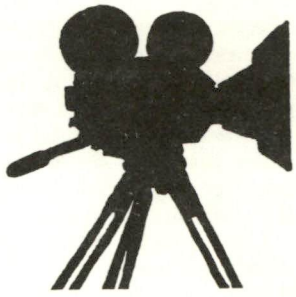
Canada, 16mm, color, 16 mins., 1980. Produced by Michael McFarland and distributed by the Canadian Rehabilitation Council for the Disabled, Suite 2110, One Yonge Street, Toronto, Ontario M5E 1E5 Canada.

Shows the evolution of rehabilitation and social attitudes towards the disabled throughout Western history without depending on an audio narrative. Marvelous use of graphic devices and music to overcome absence of a narrative, and possibly pave the way for additional films to be used in the international rehabilitation community without resorting to the expensive process of translation.

Here's Looking At You, Kid

USA, 16mm, color, 53 mins., 1980. Produced by Andrew McGuire, Burn Council, San Francisco Hospital Trauma Center. Distributed by Biomed Arts Associated, 350 Parnassus Avenue, Suite 905, San Francisco, CA 94117.

Rob Cole was seven when he was severely burned over three quarters of his body. "Here's Looking At You, Kid" provides an intimate look at the ordeal of his physical and emotional recovery during a four year period. With sensitivity and humor the film portrays Rob's adjustments as well as those of his mother, Maggie. Their lives are revealed through candid scenes of intimate conversations at home, at school, in the hospital and in public. Shown in the 1980 New York Film Festival. Reviewed in Volume 3, Number 2 of Rehabfilm Newsletter.



REHABILITATION FOR THE PROFESSIONAL AUDIENCE

FIRST PRIZE

Twenty is Plenty

USA, ¾" videocassette, color, 24 mins., 1981. Produced and distributed by United Cerebral Palsy of NYC, 175 Lawrence Ave., Brooklyn, NY 11230.

UCP clients present 20 suggestions for staff entering the rehabilitation field. Through a series of humorous vignettes, points of etiquette for disabilities are covered. Could be applied in any environment where able-bodied people service disabled people.

SECOND PRIZE

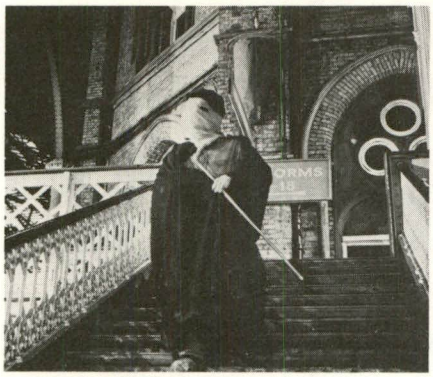
Multiclinic #49

USA, ¾" videocassette, color, 50 mins. Produced by Western Michigan University TV Services, Center for Human Services, Western Michigan University, Kalamazoo, MI 49008.

Interdisciplinary diagnosis of a client with cleft lip, cleft palate, and speech difficulties. Not only is excellent clinically but leaves the viewer with a vivid impression of the child as well as the disability.

FEATURE-LENGTH DRAMATIZATION

FIRST PRIZE



The Elephant Man
USA, 16mm, color, 123 mins., 1980. Produced by Jonathan Sanger and distributed by Paramount Pictures Corporation, 1 Gulf & Western Plaza, NY, NY 10023.

Represents the life of John Merrick, who became known as the Elephant Man in Victorian England. Portrays the multi-level emotional experiences of a man so deformed and of the dedicated doctor who gives him an opportunity to live his last years in dignity and grace. Reviewed in Rehabfilm Newsletter, Volume 3, Number 3.

SECOND PRIZE

Inside Moves
USA, 16mm, color, 113 mins., 1981. Produced by AFD and directed by Richard Donner. Distributed by Swank Motion Pictures, 60 Beth Page Road, Hicksville, NY 11801.

A drama about a group of people with a variety of disabilities who congregate at a local bar. Harold Russell, of PCEH and *The Best Years of Our Lives,* is one of the lead characters. One of the group has his disability cured and he becomes a basketball hero, but after his rise to fame avoids the old crowd. Story follows his come-uppance, and attempts to redefine 'disability.'

RECREATION

FIRST PRIZE

Free Dive
Canada, 16mm, color, 26 mins., 1981. Produced by Horus Productions and distributed by Filmmakers Library, 133 E. 58th St., NY, NY 10022.

A new recreational frontier opens up as a group of handicapped young people learn underwater diving. They first learn their skills in a hospital pool where they earn skin-diving certificates, then go to Grand Cayman Island to dive on the fabulous coral reefs.

SECOND PRIZE

Feeling Good, Feeling Proud
USA, 16mm, color, 27 mins., 1981. Produced and distributed by Richard Heus, 480 Potrero Ave., San Francisco, CA 94110.

Story of Heidi, a mentally retarded and epileptic woman who lives in her own apartment. Heidi is an actress in Theatre Unlimited and the film focuses on her relationship with her mother and the actors in her company.

EMPLOYMENT

FIRST PRIZE

Accommodating the Disabled Employee
USA, ¾″ videocassette, color, 7:29 mins., 1980.

Depicts several types of job accommodation, including both expensive and inexpensive devices, job site and task changes and procedural changes. Intent is to teach viewer that job accommodation is a creative problem solving skill.

Supervising the Disabled Employee
USA, ¾″ videocassette, color, 8:25 mins., 1980.

Shows the dilemma in which an employer finds himself as soon as he begins to apply a double standard for a disabled employee. First segment depicts a disabled employee who uses her disability to make her manager retreat from a firm position on her habitual tardiness. Second segment shows employer who does not accept excuses. Viewer is left to choose.

Both of these programs were produced and distributed by the International Center for the Disabled (ICD), 340 E. 24th Street, NY, NY 10010 and received the First Prize as a single entry.

SECOND PRIZE

Overcoming Disabilities
Japan, 16mm, color, 30 mins., 1980. Produced by Mainchi Productions for the National Association for Employment of the Handicapped, Japan. Distributed by Rehabfilm, 20 West 40th Street, NY, NY 10018.

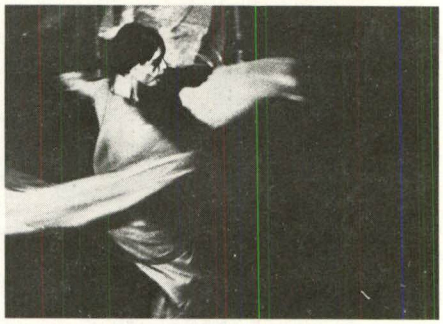
Documents the Abilympics or National Skills Contest for the Disabled held in Chiba City, near Tokyo, in 1979. Focuses particularly on a paraplegic draftsman, and a blind typist with a charismatic seeing-eye dog.

SPECIAL EDUCATION

FIRST PRIZE

Breaking Free
Australia, 16mm, color, 50 mins., 1980. Produced by Chris Noonan and distributed by ABC Wide World of Learning, 1330 Avenue of the Americas, NY, NY 10019.

Explores the lives of a unique theatre group comprised of mentally handicapped people as they prepare for their first public performance — at the Sydney Opera House. The film follows the event from its beginnings, shows the startling growth and ability in the performers, and climaxes with their first performance. "Stepping Out" is the title of this film outside the USA. Reviewed in Rehabfilm Newsletter, Volume 3, Number 3.



SECOND PRIZE

Autism
Belgium, ¾″ videocassette, color, 56 mins., 1980. Produced by Belgian Radio/TV in series "Kijkmensen" and distributed in the U.S. by Division TEACCH. U. of North Carolina Medical School, Dept. of Psychiatry, 214 Med. School, Wing B, 204H, Chapel Hill, NC 27514.

Belgian families describe the problems of raising autistic children in an environment where information and support is scarce. Shows how these families adapt an American program, namely the TEACCH program at the University of North Carolina, and improve their situation.

MAINSTREAMING

FIRST PRIZE

Stepping Out: The DeBolts Grow Up
USA, 16mm, color, 52 mins., 1981. Produced by John Korty and Bill Coutourie and distributed by Pyramid Films, 2801 Colorado Avenue, Santa Monica, CA 90404.

Follow-up to the original "Who Are the DeBolts, and Where Did They Get 19 Kids?" Eight adopted children are still living at home. Film focusses particularly on J.R. who is preparing to start school at the local public junior high school. Reviewed in Rehabfilm Newsletter Volume 3, Number 3.

SECOND PRIZE

You Can

USA, 16mm, color, 28 mins., 1980. Produced by KIM Associates and distributed by Mrs. G. Weston, Motion Picture Service, NOAA, Public Affairs, 11400 Rockville Pike, Rockville, MD 20852.

Depicts a Marine Science Program for physically disabled students held one summer at Wallops Island off the coast of Virginia. Twenty-one students, blind, deaf, and orthopedically impaired, come from around the nation to collect specimens, survey coastline, make geological assessments, and conduct various projects in lab and field. Shows that there is no reason physical disability should bar a student from going into marine science. Reviewed in Rehabfilm Newsletter, Volume 3, Number 3.

MENTAL RETARDATION

FIRST PRIZE

Best Boy

USA, 16mm, color, 104 mins., 1981. Produced by Ira Wohl, Only Child Motion Pictures and distributed by Documentary Films, Inc., 159 West 53rd Street, NY, NY 10019.

Philly, the 53-year-old retarded son of Pearl and Max Wohl discovers independence for the first time when his filmmaker cousin Ira introduces him to school, the theatre, the zoo, and to a new life in a community residence. 1980 Academy Award winner.

SECOND PRIZE

Being Part of it All

Canada, 16mm, color, 24 mins., 1981. Produced by Richard Burman for the Canadian Broadcasting Corporation and distributed by Filmaker's Library, 133 E. 58th Street, NY, NY 10022.

Gary and Barbara Young are moderately mentally retarded, happily married, and live in their own home. Though they have lived most of their lives in institutions, thanks to a strong support system in the community, they have made a successful transition.

MENTAL HEALTH

FIRST PRIZE

Dreams So Real

USA, 16mm, color, 28 mins., 1981. Produced by Oren Rudavsky and distributed by Filmaker's Library, 133 E. 58th Street, NY, NY 10022.

Three animated films, some with paper figures, some with clay, made by three outpatients from a community health center in Ohio. They speak candidly about their lives and their artistic creations.



You Can

SECOND PRIZE

The Last to Know

USA, 16mm, color, 45 mins., 1981. Produced by Pandora Films and distributed by New Day Films, 1697 Broadway, NY, NY 10019.

Dramatically explores the myths and realities surrounding women, alcohol, and tranquilizers through the experiences of four women who were "the last to know" about their own dependencies, shown in 1981 New York Film Festival.

PROGRAMS AND FACILITIES

FIRST PRIZE

Back to Square One. . .

England, 16mm, color, 28½ mins., 1981. Produced by Bill Stevenson and distributed by CTVC, 'Hillside', Merry Hill Road, Bushey, Watford, Herts WD2 1DR England

An investigation into what happens to six stroke victims receiving treatment at the Kingdon-Ward Dysphasics Unit in London. Prime aim of this unique Unit is to rebuild patient's ability to communicate.

SECOND PRIZE

The Hidden Struggle

USA, 16mm, color, 25 mins., 1981. Produced by Lawrence Lansburgh and Clair Wiles. Distributed by Pyramid Films, 2801 Colorado Ave., Santa Monica, CA 90404.

Documents programs at Clausen House in Oakland, California where a variety of programs for several dozen retarded young adults have been successful in improving self-confidence, occupational and social skills.

PREVENTION

FIRST PRIZE

Pre-Natal Diagnosis: To Be or Not to Be

Canada, 16mm, color, 41 mins., 1981. Produced by David Suzuki for the Canadian Broadcasting Corporation and distributed by the Filmakers Library, 133 E. 58th Street, NY, NY 10022.

Examines recent advances in detection of abnormalities in the unborn child and how this knowledge affects decisions among 'high risk' couples.

SECOND PRIZE

Parents Look at Genetic Counseling

USA, ¾" videocassette, color, 27 mins., 1981. Produced by Stewart White, Biomedical Media Production Unit and distributed by the Media Library, University of Michigan Medical Center, R4440 Kresge 1, Box 56, Ann Arbor, MI 48109.

Program consolidated from a series of interviews of parents of children affected with birth defects. All families interviewed had received genetic counseling.

TRANSPORTATION/ ARCHITECTURAL ACCESS

FIRST PRIZE

Right of Way

Canada, 16mm, color, 26:40 mins., 1981. Produced by Paula Clark and Wendy Campbell and distributed by Filmakers Library, 133 E. 58th Street, NY, NY 10022.

Describes a Driver Education program for physically disabled drivers at the Ontario Crippled Childrens' Center. Shows driving classes, practice sessions in car, devices for adaptation and more.

SECOND PRIZE

They See My Chrome. . .
But They Don't See Me

USA, ¾" videocassette, color, 20 mins., 1930. Produced and distributed by Trans World Airlines, Audiovisual Productions, 6300 Lamar, Overland Park, KS 66201.

Provides customer service personnel with the information and techniques for interfacing and handling handicapped travellers. The video covers handling, cerebral palsied, paraplegic, quadriplegic, hemiplegic, blind and deaf travellers.

TECHNICAL AIDS

FIRST PRIZE

One Giant Step

Canada, 16mm, color, 40 mins., 1981. Produced by Michael McFarland and distributed by Canadian Rehabilitation Council for the Disabled, Suite 2110, One Yonge Street, Toronto, Ontario M5E 1E5 Canada.

Demonstrates the range of technical aids available from environmental control systems to communications aids, showing how they can be used in various setting to increase independence and mobility of disabled people.

SECOND PRIZE

It's a New Day

USA, 16mm, color, 9 mins., 1981. Produced by Fern Field and distributed by the South Bay Mayors' Committee for Employment of the Handicapped, 2409 N. Sepulveda Blvd., #202, Manhatten Beach, CA 90266.

Celebration of new attitudes and new technologies available to disabled people to increase their integration into the mainstream of life. Shows braille menu, elevating wheelchair, talking calculator, Opticon, etc. From the folks who brought you "A Different Approach".

SERIES

FIRST PRIZE

Awareness Month Specials/ Five Programs

USA, ¾" videocassette, color, 30 mins. each, 1981. Produced by Jill Geisler, Dan Lewis, Phyllis Watson, Joanne Williams, Dave Forman, Jim Paschke for WITI-TV and distributed by WITI-TV 9001 N. Green Bay Rd., Box 17600, Milwaukee, WI 53217.

Five programs that examine the world of the disabled person. Topics include Group housing; Sports and leisure; Rehabilitation; Professional Employment; and Muscular Dystrophy Summer Camp program.

SECOND PRIZE

Kidsworld

USA, ¾" videocassette, color, 3-6 mins. each, 1981. Produced by Bob and Betsy Behrens and distributed by The Behrens Company, Inc., 170 S.E. 14th Street, Suite 6, Miami, FL 33131.

Kidsworld is a half-hour weekly television news program made for and by kids and telecast in 90 U.S. cities. Segments entered were as follows:
Reading Aids for Blind #135
Dunbar #129
Courtnee Weston #140

Adapted Aquatics #79
Handicapped Riders #198
Learning about Handicaps #180

PICTURE CREDITS

Cover Photo: NASA

Drawings: pages 1, 7, 9, 11, 12, 14, 21, 32, John F. Moses; pages 1, 3 NASA.

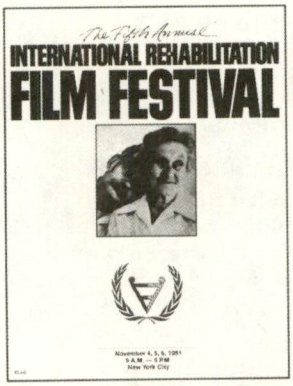
Etchings: pages 16, 28, 30, 35, 36, Dover Publications.

Photographs: pages 1, 25, 26, 27, Claudius Petrini; page 2, Suzanne Bruyere; page 14, A.R.G. D'Rose; page 15, Johns Hopkins University; page 16, Verite; page 16, HelpMate; pages 17, 18, Daniel Strol, ICD; pages 23, 28, 29, 30, E.C. Keller, Jr.

1982 INTERNATIONAL REHABILITATION FILM FESTIVAL

The Sixth International Rehabilitation Film Festival will be held in November, 1982, for three days, in New York City. Deadline for entries is June 29, 1982. This competition is open to 16mm film, 3/4" videocassette, 35mm slide/tape programs, Super-8, and filmstrips. There is no release date limitation. The subject area covered by this competition is anything relating to the physically or mentally disabled person. Material for both professional and lay audiences is appropriate. Major category headings in the past have been: Physical Rehabilitation—Professional Audience; Physical Rehabilitation—General Audience; Disabled Person in Society; Mental Retardation; Special Education; Transportation/Architectural Access; Recreation; Employment; Technical Aids; Mental Health; Prevention, and others. Average entry base has been 225 titles. In 1981, productions from 20 countries were entered.

For further information, instructions, fee schedule, and entry forms, contact: Rehabfilm, Box FFW, 20 West 40th Street, NY, NY 10018.



FESTIVAL PROGRAM LISTS 180 TITLES

The Program from the Fifth International Rehabilitation Film Festival, held in November 1981, is available for $5.00 per copy. The Program provides a list of 180 titles, on film and videotape, relating to disability. Ninety percent of these titles were released in the past 24 months. The listing is extensively cross-referenced and would be a valuable reference tool for anyone who uses audiovisual materials in the context of disability. Overseas order must be paid in U.S. currency. Add U.S. $2.00 for surface and U.S. $4.00 for air delivery. To order, write: Rehabfilm, Box FPW, 20 West 40th Street, NY, NY 10018, USA.

THE 5TH

The International Rehabilitation Film Festival was presented in 1981 as a contribution from both Rehabilitation International USA, and the United States Mission to the United Nations, to the International Year of Disabled Persons.

The Film Festival itself was presented at the Church Center for the United Nations. One hundred and eighty films and videotapes were screened in three days. They came from 20 countries — Australia, Austria, Bahrain, Barbados, Belgium, Canada, Colombia, Czechoslovakia, England, Hungary, India, Ireland, Italy, Japan, Netherlands, Poland, Portugal, Sweden, Switzerland, and the United States. One film each also came from Guam and the United Nations. This was the greatest international representation Rehabfilm has ever had at a Film Festival. The general level of excellence demonstrated throughout was quite high. On Wednesday, November 4, productions such as *Here's Looking at You, Kid, Can't It Be Anyone Else?,* the old Marlon Brando film, *The Men, Emerging, Fighting Back,* Canadian winner of an International Emmy, *Face Value, Twenty is Plenty,* and *Among Them But Not of Them* were screened. On Thursday, there was *Breaking Free,* shown only two weeks earlier on nationwide PBS, both the DeBolt films, *Best Boy, The Music Child,* two training films for airline personnel *Deaf Like Me, The Other Children,* an unusual film on the feelings of siblings to a disabled child, and a film on a program from North Carolina as applied in Belgium, *Autism.* Friday, November 6, was the biggest day with *A Lady Named Baybie, Fit to Be Untied,* a film from Italy featured in this year's New York Film Festival, *Handicapped Love* (last year's New York Film Festival), *Captives of Care, Inside*

ANNUAL INTERNATIONAL REHABILITATION FILM FESTIVAL

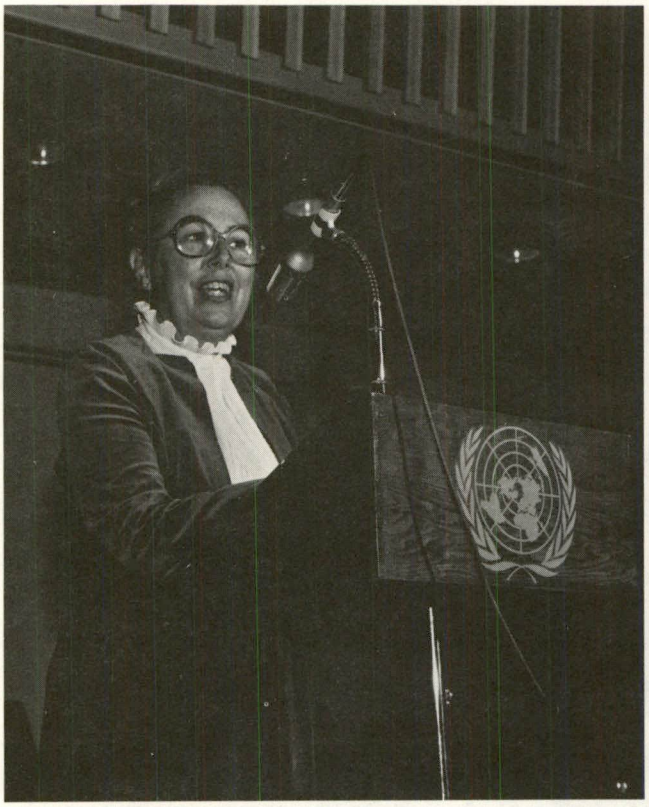
Moves, The Elephant Man, Fern Field's new film *It's a New Day, A Fine Line, A Light Shining in the Darkness,* a unique dramatization of a recently blinded woman from Sweden, *Our Largest Minority: The Disabled,* segments of *Kidsworld,* last year's Grand Prize winner, *Survival Run,* and *The Last to Know* (also in this year's New York Film Festival). These are simply some of the better-known films that were shown. There were many others which were excellent. Some, like the Brian Line/Nick Dance films, *It Could Happen to You* and *I've Got Wheels* or the 8mm *Stigma Why?* from the Rehabilitation Institute Training Center in Cork, Ireland, were made by disabled independent filmmakers. Others had the complete facilities of major broadcasting studios at hand, such as those from the Canadian Broadcasting Corporation which continues to produce excellent material. Some presented entirely new programs such as *You Can,* which depicts the mainstreaming of a marine biology course down at Wallops Island, Virginia, or *Double Bind* which concerns itself with the plight of the disabled prisoner in California.

Some new categories were added this year. Mainstreaming was distinguished from Special Education. Transportation/Architectural Access was provided to handle a number of entries in this specific area. Most interesting to many, and decided upon after the Program went to the printer, was the category of Feature-Length Dramatization. There were also a number of films entered as Exhibition Items only, including *The Men* and *Fighting Back.*

On Friday evening, November 6, an Awards Ceremony was held across the street in the General Secretariat Building at the United Nations. Filmmakers



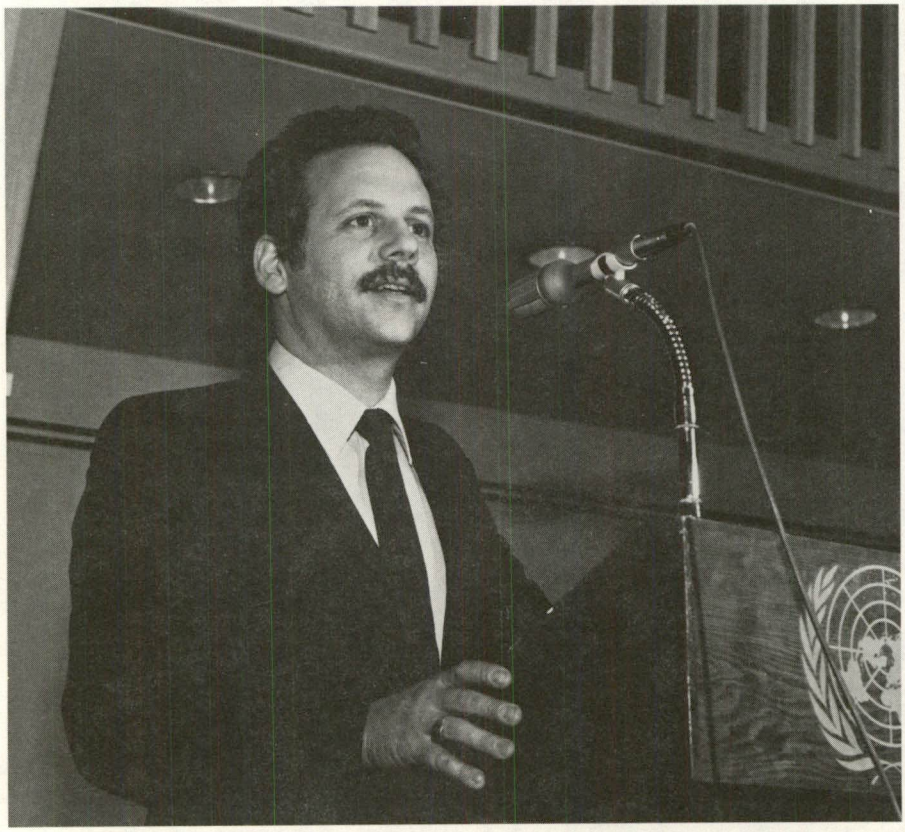
Mrs. Anne Kraus, Past President of the Association for the Help of Retarded Children, and current Director of Community Participation and Education there, displays the Grand Prize Award for Best Boy.



Mrs. Jean Tuffs, Under-Assistant Secretary for Special Education, Department of Education, addresses guests at the Awards Ceremony in the General Secretariat Building at the U.N.



Dr. Howard Rusk, Chairman of the National Council of the Handicapped and President of the World Rehabilitation Fund, congratulates Mrs. Kraus.



Ambassador Kenneth Adelman, Deputy United States Representative to the United Nations.

and distributors, rehabilitation professionals, consumers, information officers, diplomats and diplomatic aides settled down at the curved tables with the names of all the countries displayed on little black placards.

Mrs. Eleanor Oakes Skinner, President of Rehabilitation International USA made welcoming remarks. Dr. Richard Thornburgh, of the United Methodist Church, read the invocation. Remarks followed from Ambassador Kenneth Adelman, Deputy United States Representative to the United Nations; Mrs. Jean Tufts, Under-Assistant Secretary for Special Education, Department of Education; and Miss Laila Doss, Director, Division of Economic and Social Information in the Department of Public Information at the United Nations, who has also headed up the IYDP effort in New York.

John F. Moses, Director of Rehabfilm and the International Rehabilitation Film Festival, made a presentation of segments drawn from a number of films shown during the three-day festival. Awards were then made by Miss Doss, Mrs. Tufts, and Mr. Adelman. Ambassador Gerard Pelletier of Canada collected four First Prizes on behalf of his countrymen. Ambassador H. David Anderson of Australia accepted two,



Dr. Rusk addresses the audience at the Awards Ceremony at the United Nations while Ambassador Adelman of the U.S. Mission to the United Nations and Tim Moses, head of media at RIUSA, look on.

and First Secretary Ian Matthewson of the United Kingdom accepted one, on behalf of filmmakers back home.

The Grand Prize was presented by Dr. Howard Rusk, Chairman of the National Council of the Handicapped, President of the World Rehabilitation Fund, and founder of the Institute of Rehabilitation Medicine at New York University. Accepting the award for *Best Boy* was Mrs. Anne Kraus, Past President of the Association for the Help of Retarded Children and current Director of Community Participation and Education at AHRC.

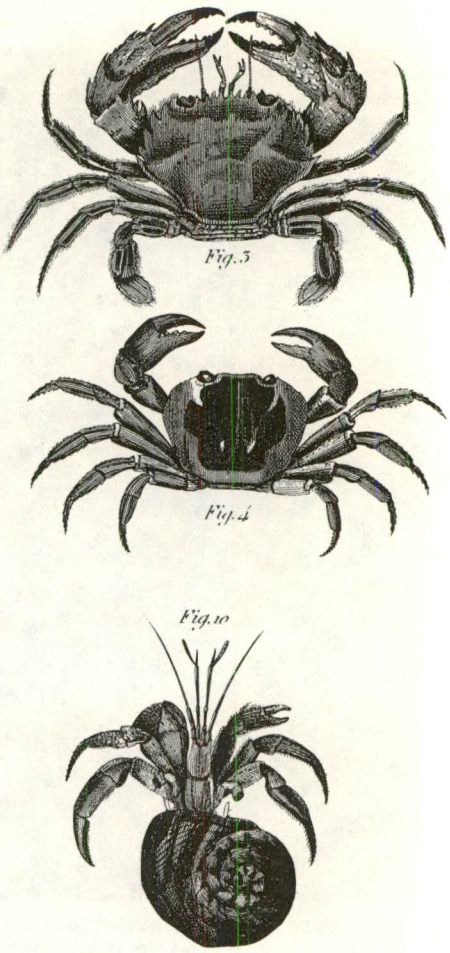
Following the presentation of awards, Dr. Rusk read a letter from President Ronald Reagan to all those participating in the Film Festival, commending them on their good work.

So ended the official work of the 1981 International Rehabilitation Film Festival. It was followed by a gala reception at the U.S. Mission to the United Nations just across Fifth Avenue from the United Nations. Here members of the National Advisory Board for the Film Festival, prize-winners, and members of the international diplomatic community based at the United Nations got acquainted.



Miss Laila Doss, Director, Division of Economic and Social Information in the Department of Public Information at the United Nations.

MARINE SCIENCE FOR THE HANDICAPPED



E.C. Keller, Jr. with
Johanna Fisher Stewart

Guided by a partially sighted friend, Dwayne waded into the ocean for the first time of his life. Totally blind and dependent on crutches because of a "brittle bone" disability, Dwayne was assigned the task of determining the height of the waves. He and his partially sighted fellow student ascertained the trough and the crest heights of the first 10 waves they measured and relayed the information, for recording, to another student standing in more shallow water.

This oceanic experience set the stage for Dwayne to eventually change his objective in life of "staying home and collecting welfare" to going to college and studying science.

He is one of some 89 outstanding high school students from California to Nova Scotia and Florida to Oregon who have proved that wheelchairs can navigate aboard boats as well as on beaches and that blind and deaf students can indeed study "hands-on" the natural habitats of fiddler crabs, fishes, and algae.

Dwayne was a participant in an innovative marine science program held each summer since 1977 at the Marine Science Consortium's Wallops Island Station near the Assateague Island National Seashore Park in Virginia.

One of the objectives of the Marine Science Program for the Physically Handicapped, sponsored by the National Science Foundation (NSF), is to make its young participants aware that their physical disabilities need not bar them from laboratory or oceanic field trips or even eventually a career in the sciences.

These high school students — including many with sensory impairments — have demonstrated that they can excel away from the security of their homes and special schools in a demanding "hands-on" marine science curriculum. As a result of the program, many nagging myths, stereotypes, and attitude barriers about handicapped individuals in science have been dispelled.

Carroll Haller of Newport, Oregon, who is wheelchair bound with cerebral palsy, traveled alone by airplane to attend the program. She said the program sensitized her to "the kinds of hard ships that the blind and deaf encounter."

In the program, Carroll, who is now a college student, was just another suntanned youth happily doing field work in the natural wilderness of Wallops Island, and on Chincoteague Bay and the Atlantic Ocean.

Said Carroll: "I'd never had the chance to study science in school because they wouldn't let me in the laboratory. They allowed me to do just about everything, but swimming, chemistry and biology were out for me more or less. They were afraid of me."

In 1977 I put together a proposal for a marine science program involving physically handicapped high school students. The foundation granted the proposal and plans were drawn up for the first field science program designed exclusively for a mixed group of physically impaired students.

In organizing the first summer session, my planners and I overcompensated a little on health care by having three emergency medical technicians on hand, in addition to my wife Helen Keller who is a licensed practical nurse.



Students Aboard the R.V. Delaware Bay.

Experience has taught us that the most serious health problems that we confront during our summer program are a few cases of homesickness during the first week, sunburn, and bug bites — just what you might expect for any group of non-handicapped youngsters.

Helen, who works as nurse and instructional coordinator for the program, advises the students' anxious parents not to worry. "We're one family. We do everything together. The students and staff really work well together and look out for each other," she tells them.

It was easy and relatively inexpensive to make the necessary structural changes for the orthopedically impaired students in the World War II vintage Wallops Island classrooms and barracks-like dormitories and laboratory. The facilities are operated by a consortium of 15 mid-Atlantic colleges and universities including West Virginia University, my home institution.

Portable plywood ramps are used for boarding boats; sections of snow fence are laid across the marshes and dunes of Wallops Island to keep the wheelchairs from bogging down in the muck of the marshes and the sand of the beaches. One summer the students used and evaluated an all-terrain wheelchair (that floats) which they took into the bay and ocean waters for both instructional and recreational purposes.

The students learn marine biology, navigation, coastal ecology, meteorology, and oceanographic techniques and scientific methods from a group of instructors and visiting lecturers who are committed to the concept of opening up the sciences to the handicapped.

Oceanographer Dr. Thomas S. Austin, who is one of the lecturers, is an excellent role model for the students. A paraplegic, Austin lectures the students from his wheelchair. He is the former director of the Environmental Data and Information Service for the National Oceanic and Atmospheric Administration.

The students also learn experimental design, elementary statistics and scientific techniques. Samples of plants and animals are gathered, classified and counted. Seining nets are used to collect specimens in the water while shovels and sifting screens are used on the beaches and dunes. The students ecologically "transect" Wallops Island from the beach inland to the bay. They compare graphic prints of toadfish sounds with the song of a humpback whale.

On survey trips to the beaches of Assateague and Wallops Island, teams of students measure the grade of the beaches and the heights and frequencies of the waves. Back in the classroom, the heights and distances are recorded on graphs to create profiles of the beach and dune areas. Blind students use tacks on a graph board to lay out profiles of the two beaches so that they can compare them with their fingers.

Along with the academic portion of the program, each student is assigned a mini-research project (like a science fair project) and works closely with one of the instructors to form and test a hypothesis. The project requires field and/or laboratory investigation, as well as analysis and interpretation. Examples of students' projects are: *"Environmental Preferences of the Periwinkle Snail", "The Relationship of*

Ghost Crab Size to Beach Zones", "*Flounder Preference for Light and Dark Substrates*" and "*Chemical Differences Between Ocean and Marsh Waters.*"

Before taking our course, many of the blind teenagers never thought seriously about a career in the sciences. After all, many thought, how could they go out into the field to collect data? How could they read instruments in the laboratory or describe the appearance and color of the specimen? And the deaf; how could deaf students learn to identify marine sounds and bird calls? How could wheelchair bound students manage to get around in the marshes or aboard a ship on a field trip to the sand dunes?

In the past, many physically disabled youngsters believed that science was a closed door to them, but we have blown that door right off the hinges! We have helped them see that they can do things they never before thought that they could do.



Program Director Dr. Edward Keller Showing Three Totally Blind Participants a Bucket of Flounder

"Profoundly deaf and totally blind students are seldom taught together. We were told that you just can't do it. But you can, you absolutely can."

Before the program started, we were told by skeptics that it would be a "big mistake" to put blind and deaf students together in an academic environment — particularly science. Profoundly deaf and totally blind students are seldom taught together. We were told that you just can't do it. But you can, you absolutely can. In general, the blind and deaf students are supportive of each other. And in the non-academic areas of the program, the students interact much better than we thought they would. Sometimes we think it's a natural pairing.

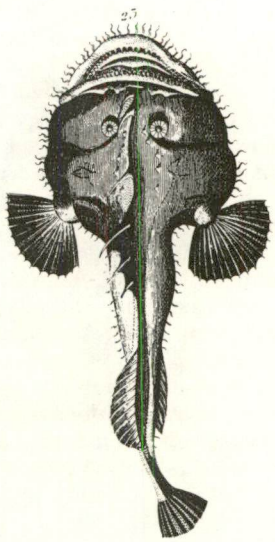
In the program, deaf students are paired with blind students to handle a seining net in the breaking waves of the ocean. An obliging deaf student introduces his blind classmate to a horseshoe crab. A very bright blind girl and a deaf boy work well together — "talking" with hand signs, the common denominator for communications among the students. Both the deaf and the blind helped those in wheelchairs move over rough terrain on field trips or to dinner at night.

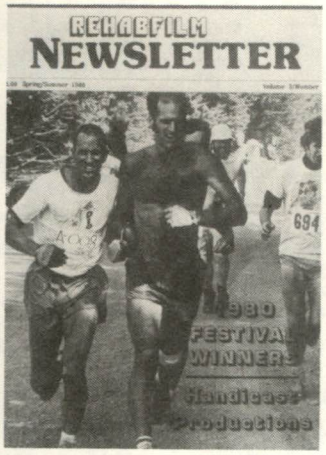
While at Wallops, the deaf learn some Braille; the blind quickly learn some signing, and the orthopedically impaired learn a little bit of both (the staff includes interpreters and Braillers). For instance, shells, birds, sea lettuce, anchovies, and jelly fish are introduced to the students verbally, in sign language, tactilely and in some cases, by tasting.

The students' favorite activities are the expeditions on the R.V. Chesapeake Bay and the R.V. Delaware Bay. For some of the students, it is their first time out on a boat. Generally, we take them out into the Chincoteague Bay and once to the Atlantic Ocean. It's especially thrilling for them to feel the rocking waves of the ocean and bay.

Although handicapped students may have to prove over and over again that they do desire a science career, participation in this program helps them make up their minds that they can do science, they can do field work, and most importantly that they can have careers in science, if they so desire. ■

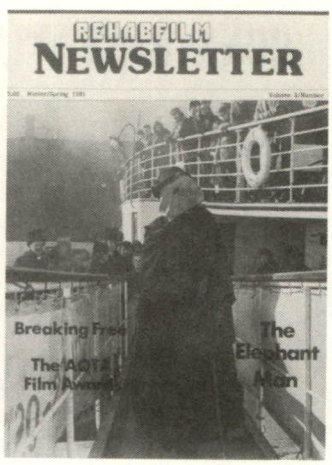
You Can is a 16mm film about the program at Wallops Island which won Second Prize in Mainstreaming at the Fifth International Rehabilitation Film Festival in November. For further description, and the address of the film distributor, turn to page 23.











REHABFILM NEWSLETTER

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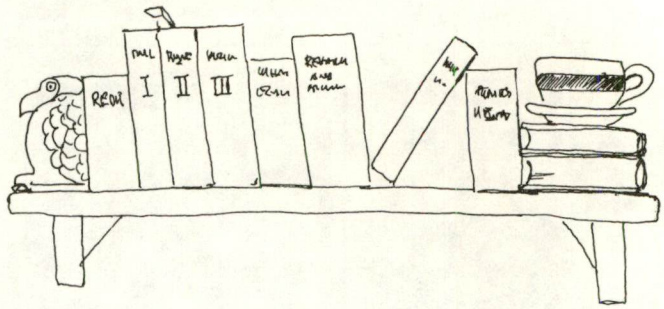
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BOOKS RECENTLY RECEIVED



ACCESS TO THE PAST: MUSEUM PROGRAMS AND HANDICAPPED VISITORS—A guide to Section 504—making existing programs and facilities accessible to disabled people

by Alice B. Kenney; Pub. 1980 American Association for State and Local History, Nashville, TN, 131 pp. Drawings by Charles Cox, Paperback:

AIDS TO MAKE YOU ABLE: Self-Help Devices for Disabled Persons

by Wendy M. Davis. Pub. Beaufort Books, Inc. New York. 1981. 155 pp. Illustrations. Spiral bound soft-cover: $8.95

ALTHOUGH ... THOSE WHO OVERCAME:

True success stories of the handicapped, hundreds of biographies indexed by disability

by Barbara Gosline Smith, Padre Productions, San Luis Obispo, CA. 1981. 168 pp. Paperback: $9.95

ANNUAL REVIEW OF REHABILITATION: VOL. 2 1981

Elizabeth L. Pan, Ph.D., Thomas E. Backer, Ph.D., Carolyn L. Vash, Ph.D., Editors. Publ. Springer Publishing Co., NY. 1981. 305 pp. Hardcover: $38.00

BLISSYMBOLICS: SPEAKING WITHOUT SPEECH

by Elizabeth S. Helfman. Pub. Elsevier/Nelson Books, New York. 1981. 152 pp. Illustrations. Hardcover: $10.95

CAPTIVES OF CARE

by John Roarty. Publ. Hodder and Stoughton, Sydney. 1981. 126 pp. Paperback: $4.95

COOPERATIVE OCCUPATIONAL PREPARATIONS OF THE HANDICAPPED: EXEMPLARY MODELS

Sylvia Ashby and Gerard J. Bensberg (Eds.) Pub. Research and Training Center in Mental Retardation, Texas Tech. University, Lubbock, 1981. 390 pp. Paperback: $10.00

COPING WITH ALZHEIMER'S DISEASE: A GROWING CONCERN

by Ann and Stephen Newroth for the Mental Retardation Health Care Series, National Institute on Mental Retardation of the Canadian Association for the Mentally Retarded, Downsview, Ontario. 1980. 30 pp. Paperback: $3.00

THE DAY HOSPITAL: ORGANIZATION AND MANAGEMENT

Charlotte M. Hamill, Editor. Pub. Springer Pub. Co., New York. 1981. 177 pp. Hardcover: $23.50

THE ECOLOGY OF EARLY DEAFNESS—Guides to Fashioning Environments and Psychological Assessments

by Edna S. Levine. Publ. Columbia University Press, NY. 1981. 422 pp. Illustrations. Hardcover: $27.50

THE ECONOMICS OF DISABILITY: INTERNATIONAL PERSPECTIVES

Susan Hammerman and Stephen Maikowski, Eds. Publ. Rehabilitation International in cooperation with the United Nations. 1981. 237 pp. Illustrations. Paperback

EDUCATORS WITH DISABILITIES: A RESOURCE GUIDE

Diane Merchant, Project Director. Publ. American Association of Colleges for Teacher Education. 1981. 153 pp. Paperback: $5.50 from Superintendant of Documents, US Government Printing Office, Washington, DC 20402.

ENVIRONMENTAL ACCESSIBILITY AND INDEPENDENT LIVING OUTCOMES—Directions for Disability Policy and Research

by Gerben deJong, Ph.D., Medical Rehabilitation Research and Training Center, Tufts New England Medical Center. Publ. University Ctr. for International Rehabilitation, Michigan State University, E. Lansing, MI. 1981. 198 pp. Paperback.

FUNDAMENTALS OF EVALUATION RESEARCH IN VOCATIONAL REHABILITATION

Dan Cook and Paul Copper. Publ. Arkansas Rehabilitation Research and Training Center, University of Arkansas. 1978. 178 pp. Paperback

GUIDELINES AND GAMES FOR TEACHING EFFICIENT BRAILLE READING

by Myrna R. Olson, Ed.D. in collaboration with Sally S. Mangold, Ph.D. Publ; American Foundation of the Blind, NY. 1981. Paperback: $7.50

THE HANDICAPPED SPEAK

by William Roth. Publ. McFarland & Co. North Carolina. 1981. 211 pp. Hardcover: $15.95

IMPLEMENTATION OF INDEPENDENT LIVING PROGRAMS IN REHABILITATION

Study Group Chairman, William P. Clark, from Proceedings of Seventh Institute on Rehabilitation Issues. Publ. Arkansas Rehabilitation Research and Training Center, U. of Arkansas. 1980. 211 pp. Paperback

INTERNATIONAL STATEMENTS ON DISABILITY POLICY

Rehabilitation International. 1981. 132 pp. Paperback:

LEARNING TO LIVE WITH DISABILITY: A GUIDEBOOK FOR FAMILIES

Institute for Information Studies, Falls Church, VA. 1980. 84 pp. Paperback Institute for Information Studies, 200 Little Falls Street, Suite 104, Falls Church, VA 22046.

LIFTING, HANDLING AND HELPING PATIENTS

by Patricia A. Downie and Pat Kennedy. Pub. Faber & Faber, 1981. 143 pp. Illustrations. Hardcover: $19.95 Paperback: $8.95

THE MAKING OF FRANKLIN D. ROOSEVELT: TRIUMPH OVER DISABILITY

by Richard Thayer Goldberg. Publ. Abt Books, Cambridge, MA. 1982. 224 pp. Illustrations. Hardcover: $16.95

THE MAKING OF BLIND MEN—A Study of Adult Socialization

By Robert A. Scott. Pub. Transaction Books, Rutgers, NJ. 1981. 160 pp. Paperback: $5.95

MORE THAN SYMPATHY: The everyday needs of sick and handicapped children and their families

by Richard Lansdown. Pub. Tavistock Publications, 1980. 226 pp. Hardcover: $19.95. Paperback: $10.95

NEUROPHYSIOLOGICAL CONCEPTS IN HUMAN BEHAVIOUR: THE TREE OF LEARNING

by Margot C. Heiniger and Shirley L. Randolph; Pub. 1981 The C.V. Mosby Co. 350 pp., 156 illustrations, Hardcover: $24.95

PARTICIPATION OF PEOPLE WITH DISABILITIES: AN INTERNATIONAL PERSPECTIVE

Selected Papers from the 1980 World Congress of Rehabilitation International

Kathleen S. Miller, Linda M. Chadderdon, Barbara Duncan, Eds. Publ. by Rehabilitation International and University Center for International Rehabilitation. 1981. 157 pages. Illustrations. Paperback: $4.50

PEER COUNSELING AS A REHABILITATION RESOURCE

Joseph Pankowski, Chairman of Study Group. Report from Eighth Institute on Rehabilitation Issues. Publ. Arkansas Rehabilitation Research and Training Center, U. of Arkansas. 1981. 51 pp. Paperback

PHYSICAL MEDICINE AND REHABILITATION: ESSENTIALS OF PRIMARY CARE, 2nd Ed.

by Kenneth B. Washburn, M.D., Pub. 1981 Medical Examination Publishing Co., Inc., an Excerpta Medica Co. 200 pp. Ill. Paperback: $14.95

PLANNER'S GUIDE TO BARRIER FREE MEETINGS

Barrier Free Environments, Inc. and Howard Russell Associates in collaboration with the New England Chapters of Meeting Planners International. 1980. 75 pp. Paperback. $11.95

PROGRAM: THE 5TH INTERNATIONAL REHABILITATION FILM FESTIVAL, 1981.

John F. Moses, Ed., Publ. Rehabfilm, RIUSA, New York. 1981. 32 pp. Illustrated Paperback: $5.00.

PSYCHOLOGY OF DISABILITY

by Carolyn L. Vash, Ph.D. Publ. Springer Publishing Co., NY 1981. 268 pp. Hardcover: $21.95. Textbook orders: $16.95

REHABILITATING PEOPLE WITH DISABILITIES INTO THE MAINSTREAM OF SOCIETY

Allen D. Spiegel, PhD and Simon Podair, M.A., Eds. Preface by Eunice Fiorito, M.S.W. Pub. Noyes Medical Publications, Park Ridge, NJ. 1981. 350 pp. Hardcover: $28.00

RECREATION PROGRAMMING FOR VISUALLY IMPAIRED CHILDREN AND YOUTH

Jerry D. Kelley, Editor. Publ. American Foundation for the Blind, NY. 1981. 160 pp. Illustrations. Paperback: $12.00

RECRUITING QUALIFIED DISABLED WORKERS: An Employer's Directory to Placement Services in the Greater NY Area

Compiled by Lana Smart, M.A. Publ. Research and Training Institute, National Center on Employment of the Handicapped, Human Resources Center, Albertson, NY 11507. 1981. 142 pp. Paperback: $5.95 plus 50¢ postage

REHABILITATION OF THE HAND 4th Ed.

by C.B. Wynn Parry. Publ. Butterworth, London. 1981. 409 pp. Illustrations. Hardcover: $69.00

REHABILITATION OF THE MENTALLY ILL: AN INTERNATIONAL PERSPECTIVE

by Eveline D. Schulman, Ed.D. President's Committee on Employment of the Handicapped, Washington, D.C., 1981. 66 pp. Paperback: Free from President's Committee on Employment of the Handicapped, Washington, D.C. 20210.

REHABILITATION SERVICES AND THE SOCIAL WORK ROLE: CHALLENGE FOR CHANGE

J.A. Browne, Betty A. Kirlin, Susan Watt (Eds.) Rehabilitation Medicine Library, Williams and Wilkins, Baltimore. 1981. 371 pp. Hardcover: $25.00

RESOURCE DIRECTORY OF HANDICAPPED SCIENTISTS

Janette Alsford Owens, Martha Ross Redden, and Janet Welsh Brown, Eds. Publ. American Association for the Advancement of Science. 1978. 80 pp. Paperback. Available from AAAS, 1776 Massachusetts Ave. NW, Washington, DC 20036. New edition being planned.

SELECTED TOPICS IN EXERCISE CARDIOLOGY AND REHABILITATION

A. Raineri, J.J. Kellermann, V. Rulli, Eds. Proceedings of the First Course on Functional Evaluation and Rehabilitation in Cardiology, held in Sicily, October 1979. Ettore Majorana international science series: Life sciences; v. 4, Plenum Press, NY 1980. 279 pp. Hardcover: $35.00

SEMANTOGRAPHY-BLISSYMBOLICS: A LOGICAL WRITING FOR AN ILLOGICAL WORLD—3rd Enlarged Edition

by Charles K. Bliss. Publ. Semantography-Blissymbolics Publications, PO Box 222, Coogee, Sydney, NSW, Australia 2034. 1978. 882 pp. Illustrations. Hardcover

SEX, LOVE, AND THE PHYSICALLY HANDICAPPED

by Evelyn West Ayrault. Publ. Crossroad/Continuum, NY. 1981. 150 pp. Hardcover: $11.95

THE SLAYING OF THE DRAGON WITHIN: A Question of Educational/Psychological Disease of School Children

by Joel Macht, Ph.D. Pub. JEM Publishing Co., Littleton, CO 80161. 1980. 204 pp. Paperback:

TECHNIK IM DIENST DER REHABILITATION BEHINDERTER: Eine Dokumentation der Bundesanstalt für Arbeit, Nürnberg

Bundesanstalt für Arbeit, Regensburger Strasse 104, 8500 Nürnberg 1, Federal Republic of Germany. Coffee-table picture book of facilities. Extensive illustration. Text in German. 1976. 215 pp. Hardcover.

VOCATIONAL REHABILITATION AND THE EMPLOYMENT OF THE DISABLED: A GLOSSARY

International Labor Office, Geneva, 1981. In English, French, and Spanish combined. 182 pp. Paperback: 15 Swiss francs

WHEELCHAIRS AND ACCESSORIES: AN ACCENT GUIDE

Betty Garee, Editor. Pub. Accent Special Publications, Cheever Publishing, Inc., Bloomington, IL. 1981. 131 pp. Illustrated. Paperback: $7.50

THE WHEELCHAIR GOURMET: A COOKBOOK FOR THE HANDICAPPED

by Mary E. Blakeslee. Pub. Beaufort Books, New York. 1981. 219 pages. Illustrations. Spiral bound soft-cover: $8.95

WORK DEPENDENCE AND THE SEVERELY DISABLED: A BIBLIOGRAPHY

Gerardo Bilotto, Ph.D. and Veronica Washam, M.A. Publ. Research and Utilization Institute, National Center on Employment of the Handicapped, Human Resources Center, Albertson, NY 11507. 108 pp. Paperback. $7.50 + 45¢ postage.

YOUR DOG: COMPANION AND HELPER Concerns dog-training for disabled as well as able-bodied people

by Milo D. and Margaret E. Pearsall. Pub. Alpine Publications, Loveland, CO. 1981. 200 pp. 75 photos/drawings. Hardcover: $11.95

1981/1982 INTERNATIONAL DIRECTORY OF ACCESS GUIDES

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This is the third edition of Rehabilitation/WORLD's International Directory of Access Guides for travelers with mobility impairments.

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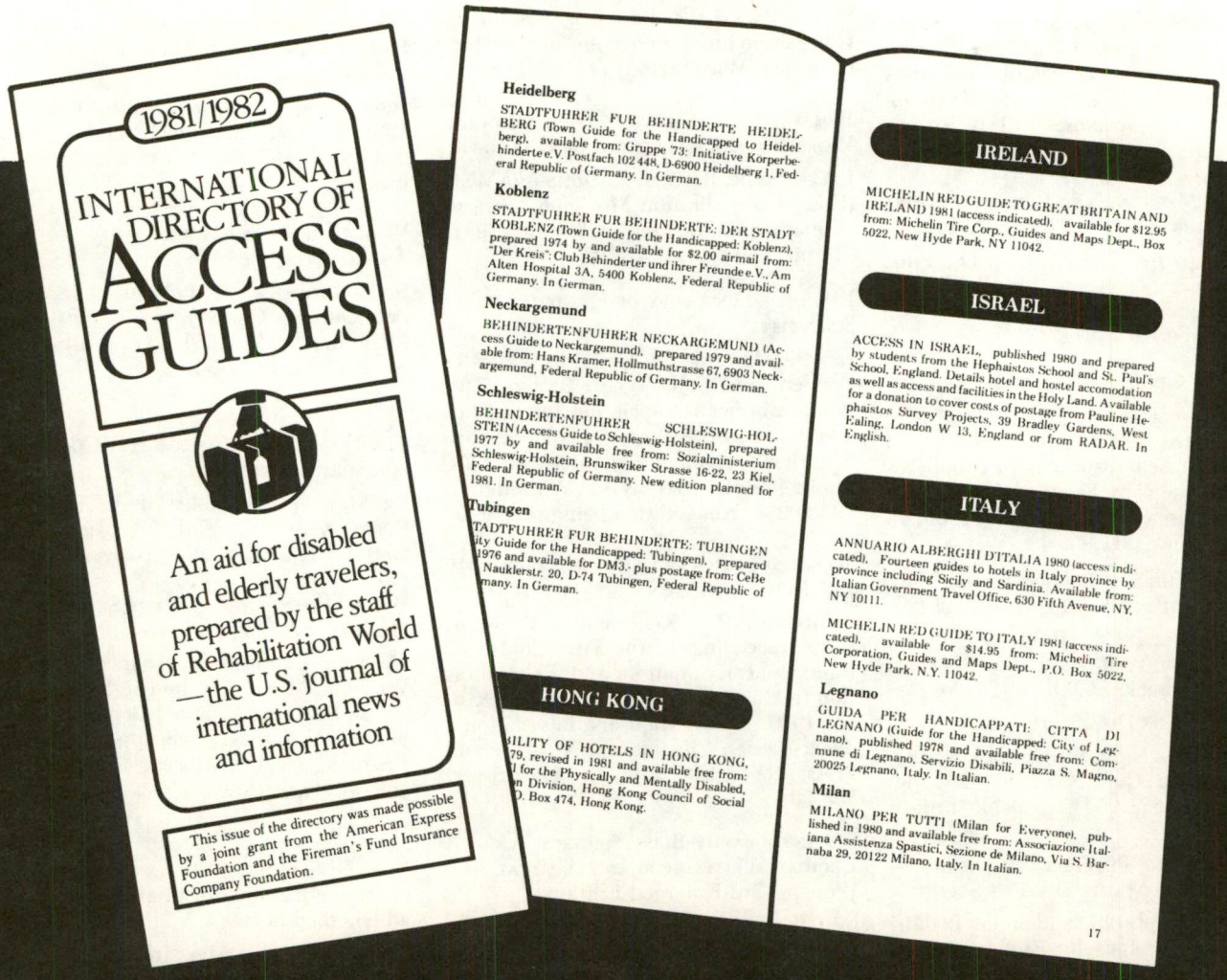
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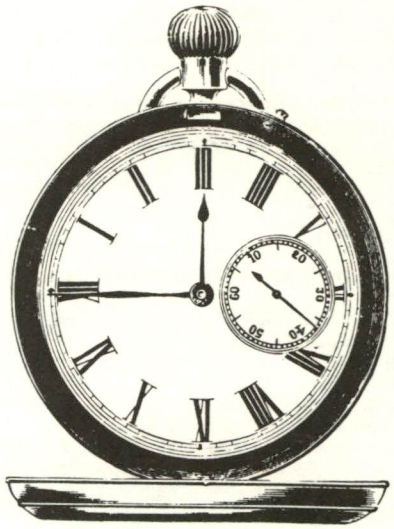
The 1981-1982 International Directory of Access Guides was made possible in the International Year of the Disabled Person through a joint grant from the American Express Foundation and the Fireman's Fund Insurance Company Foundation.

John F. Moses
Editor

Shirley Walker
Promotion/Circulation



INTERNATIONAL CALENDAR



MARCH

March 3-6: **19th Annual International Conference of the Association for Children with Learning Disabilities,** Chicago, IL. For information: ACLD Conference Headquarters, 4156 Library Rd., Rm. 2A, Pittsburgh, PA 15234.

March 8-10: **5th Annual National Symposium of the Instructional Media Production Project for Severely Handicapped Students,** Nashville, Tennessee. For information: The Instructional Media Production Project for Severely Handicapped Students, Box 318, Peabody College of Vanderbilt University, Nashville, TN 37203.

March 8-18: **World Ski Championships for the Handicapped,** Switzerland.

March 21-27: **Meeting of the Orthopedic Assn. of the English-speaking World,** Cape Town, South Africa. For information: 1982 Congress Steering Committee, 108 Medical Center, Heerengracht, Cape Town, South Africa 8001.

March 31-April 3: **32nd Annual Conference of the National Council on the Aging,** Washington, DC. For information: Conference Dept., NCOA, West Wing 100, 600 Maryland Ave., SW, Washington, DC 20024.

APRIL

April 2-5: **1982 National Alcoholism Forum,** Washington, DC. For information: NCA, 733 Third Ave., Suite 1405, NY, NY 10017. 212-986-4433.

April 9-11: **34th National Wheelchair Basketball Tournament.** For information: Robert Szyman, Courage Center, 3915 Golden Valley Rd., Golden Valley, MN 55422. 612-588-0811

April 11-16: **60th Annual Convention of the Council for Exceptional Children,** Houston, TX. For information: Children for Exceptional Children, 1920 Association Drive, Reston, VA 22091.

April 15-17: **International Abilities Unlimited Exposition,** Los Angeles, CA. For information: International Abilities Unlimited Exposition, 2945 Harding St., Suite 107, Carlsbad, CA 92008.

April 18-24: **4th World Congress, International Rehabilitation Medicine Association.** San Juan, Puerto Rico. For information, contact: Caribbean Expo Management Inc., 1060 Ashford Ave., P.O. Box 13564, San Juan, P.R. 00908. Tel: (809) 724-5500.

April 22-29: **9th Annual Conference of the Spina Bifida Association,** Dallas, TX. For information: Spina Bifida Assn., '82 Conference, PO Box 200, Garland, TX 75040.

April 24-25: **First National Symposium on Psychoimmunology,** New York City. For information: Institute for Psychosocial Study, 221 E. 50th St., NY, NY 10022. 212-838-3122.

April 25-27: **National Industries for the Severely Handicapped Conference.** San Antonio, Texas. For information: NISH, 4350 East West Highway, Suite 1120, Bethesda, MD 20814. 301-654-0115.

April 25-29: **Annual Convention of the American College of Nurse-Midwives,** Lexington, KY. For information: American College of Nurse-Midwives, Suite 801, 1012 Fourteenth St. NW, Washington, DC 20005.

April 25-30: **International Conference on Disability and Communications.** Gallaudet College, Washington, D.C. For information, contact: Robert H. Ruffner, The President's Committee on Employment of the Handicapped, Washington, D.C. 20210. Tel: (202) 653-5010.

April 29-May 2: **Annual Conference of United Cerebral Palsy Associations,** Los Angeles, CA.

MAY

May 3-7: **1982 AECT Convention.** Dallas, Texas. For information, contact: Association for Educational Communications and Technology, 1126 Sixteenth Street, N.W. Washington, D.C. 20036 Phone: (202) 833-4180.

May 6-8: **2nd European Meeting on Cardio-Respiratory Physiotherapy,** Carleroi, Belgium. For information: Secretariat des Flemes JFK, Centre sportif, social, et culturel pour Handicapes, rue de l'Ancre, 1A-B6000 Charleroi, Belgium.

May 10-13: **International Society for Proshetics and Orthotics**—Advanced Course on Below-Knee and Through-Knee Amputations and Prosthetics. Denmark. Information: I.S.P.O. Secretariat, Borgervaenget 5, DK 2100 Copenhagen O, Denmark.

May 14-16: **3rd Annual National Institute on Innovations in Camping and Outdoor Education with Persons Who Are Disabled.** For information: Gary M. Robb, Bradford Woods, 5040 State Road 67 N, Martinsville, IN 46151.

May 10-14: **62nd Annual Conference and Exhibition, American Occupational Therapy Association (AOTA).** Philadelphia, PA. For information, contact: Mardy Phillips, Director, Conference & Meetings, AOTA, 1383 Piccard Drive, Rockville, MD 20850.

May 15-22: **Annual Congress of the Canadian Physiotherapy Association,** Halifax.

May 22-26: **24th Annual Meeting, Health Sciences Communications Association.** San Antonio, Texas. For information, contact: Program Committee, HeSCA Annual Meeting, c/o Dr. Robert Brecht, Biomedical Communications, 332 Gail Borden Bldg. D11, University of Texas Medical Branch, Galveston, Texas 77550

May 23-27: **16th International Congress of Audiology,** Helsinki, Finland. For information: Secretary-General Dr. Tapani Jauhiainen, Dept. of Otolaryngology, Helsinki University Central Hospital, Haartmaninkatu 4 E, SF 00290 Helsinki, 29, Finland.

JUNE

June 6-9: **1982 Annual Convention of Rotary International,** Dallas, TX.

June 18-20: **Fourth Annual National Symposium on Sexuality and Disability,** New York City. For information: Deryck Calderwood, Ph.D. or Nancy Esibill, Ph.D., Symposium, New York University, 51 West Fourth St., NY, NY 10012.

June 20-23: **International Symposium on the Past, Present, and Future Roles of Residential Schools for the Blind,** Perkins School for the Blind, Watertown, MA. For information: Ronald Trahan, Coordinator, Public Relations, Perkins School for the Blind, Watertown, MA 02172. 617-924-3434.

June 22-26: **International Convention of the A.G. Bell Association for the Deaf,** Toronto, Canada. For information: AGBAD Conference Dept., 3417 Volta Place, NW, Washington, DC 20007. 202-337-5220.

June 26-July 2: **Biennial Convention of the American Nurses' Association,** Washington, DC. For information: American Nurses' Assn., 2420 Pershing Rd., Kansas City, MO 64108.

June 27-July 2: **26th National Rehabilitation Conference,** Las Vegas, Nevada. For information: Conference Chairman, Jack Tomich, 9581 Scotstown Drive, Huntington Beach, CA 92646.

JULY

July 13-16: **4th World Congress of International Ostomy Association,** Munich, Federal Republic of Germany. For information: Deutsche Ilco, Kammergasse 9, D-8050 Freising, Federal Republic of Germany.

July 15-22: **5th International Cerebral Palsy Games,** Copenhagen, Denmark. For information: Cdr. A Cameron, President, Cerebral Palsy International Sports and Recreation Assn., "Rhuemore", 22 Corstorphine Road, Edinburgh EH 126 HP, England.

July 24-28: **34th Annual Conference of the National Spinal Cord Injury Foundation,** Bloomington, MN. For information: National SCI Foundation, 368 Elliot St., Newton Upper Falls, MA 02164.

July 25-30: **10th International Congress of the International Association on Child and Adolescent Psychiatry and Allied Professions,** Dublin, Ireland. For information: Richard Lansdown, 4 Southhampton Row, London WC1B4 AB England.

July 26-August 6: **United Nations World Assembly on Aging,** Vienna, Austria. For information: United Nations Center on Social Development and Humanitarian Affairs, PO Box 500, Vienna, Austria.

AUGUST

August 16-19: **10th Annual Meeting of the National Council for Therapy and Rehabilitation through Horticulture (NCTRH),** Vancouver, Canada. For information: Roy L. Taylor, Chairman, Program Planning Committee, 1982 NCTRH Conference, Director, The Botanical Garden, The University of British Columbia, 6501 NW Marine Drive, Vancouver, BC, V6T 1W5 Canada.

August 22-26: **World Congress of Mental Retardation,** Toronto, Canada. For information: IASSMD, Kinsmen Building, York University Campus 4700 Keele Street, Downsview, Ontario, M3J 1P3.

August 26-29: **4th International Congress on Therapeutic Riding,** Hamburg, Federal Republic of Germany. For information: Prof. Dr. Med. Hans Wolf, Hamburg Messe and Congress GmBh Postfach 30 23 60, D-2000, Hamburg 36, Federal Republic of Germany.

August 29-September 2: **4th World Congress of the International Council for the Prevention of Alcoholism,** Nairobi, Kenya. For information: ICPA, 6830 Laurel Street, NW, Washington, DC 20012. 202-723-0800.

August 29-September 4: **6th International Conference on Birth Defects,** London, England. For information: International Birth Defects Congress, Ltd., 1275 Mamaroneck Ave., White Plains, NY 10605.

August 29-September 4: **21st Conference of the International Council on Social Welfare,** Brighton, England. For information: National Council of Social Service, 26 Bedford Square, London WC 1B 3HU England.

September 5-9: **10th International Roundtable for the Advancement of Counseling,** Lausanne, Switzerland. For information: Prof. Francois Gaillard, Institute of Applied Psychology, University of Lausanne, Ave. Vinet 19, CH-1004, Lausanne, Switzerland.

OCTOBER

October 6-10: **Annual Meeting of the American Academy for Cerebral Palsy and Developmental Medicine,** San Diego, CA.

October 25-29: **2nd General Assembly for the International Agency for the Prevention of Blindness,** Washington, DC. For information: International Agency for the Prevention of Blindness, Commonwealth House, Haywards Heath, West Sussex RH16 3AZ, United Kingdom.

NOVEMBER

November: **6th Annual International Rehabilitation Film Festival,** New York. For information: Rehabfilm, Box FF, 20 West 40th St., NY, NY 10018.

November 21-27: **8th World Congress of the International League of Societies for the Mentally Handicapped,** Nairobi, Kenya. For information: Secretariat, Congress Organizing Committee, PO Box 42635, Nairobi, Kenya or ILSMH, rue Forestiere 13, B-1050, Brussels, Belgium.

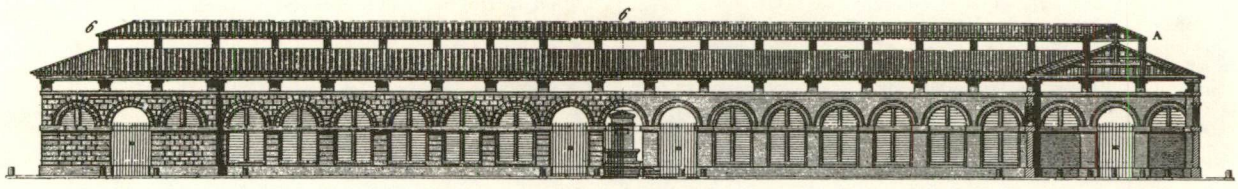
1983

April 21-24, 1983: **Annual Conference of United Cerebral Palsy Association,** Pittsburgh, PA.

June 5-9 1983: **1983 Annual Convention of Rotary International,** Toronto, Ontario, Canada.

June 27-July 2, 1983; **23rd International Hospital Congress,** Lausanne, Switzerland.

September, 1983: **Fourth World Congress of the International Society for Prosthetics and Orthotics,** London, England.



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