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Commentary
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It's Hard to Get Hooked on 'Fisher'
By Kathi Wolfe

The other day, when I phoned my bank, I asked the customer service representative to give me a few seconds so I could legibly write down my balance. "I'm visually impaired," I said, "so I need a little extra time."

"Oh my God!" the rep said. "Do you have someone looking after you?"

"No," I said. "No worries. I'm on my own."

"Wow!" she said. "You're amazing!"

If, like me, you have a disability, you've likely had such an experience. In this age of pop culture, the media, particularly in the form of scripted television entertainment programs, have played a key role in forming perceptions of people with disabilities.

"Growing Up Fisher," a sitcom that began airing on NBC television in February, proves the truth of the well-known proverb "The road to hell is paved with good intentions." When I first heard about it, I thought the show sounded promising.

With some liberties taken, "Fisher" is based on the true story of what it was like for the series' creator, D.J. Nash, to grow up with a father who was blind. Mel, the show's lead character (played by J.K. Simmons), is an attorney who's blind. He's a graduate of Harvard Law School. He's close to his wife, Joyce (played by Jenna Elfman), even though they've split up, and to their children Katie (Ava Deluca-Verley) and Henry (Eli Baker).

Jason Bateman, in voice-over as grown-up Henry, narrates what his childhood with his dad was like. We see Henry as a 12-year-old, living with his sister, his dad and his mom in what appears to be the 1990s.

Nearly one in five Americans has a disability, according to the United States Census Bureau. Yet, in 2012, there were only four characters with disabilities on all scripted prime-time shows on television, according to a GLAAD, or Gay & Lesbian Alliance Against Defamation, report "Where Are We on TV?" Knowing how seldom characters with disabilities are portrayed, I was delighted that "Fisher" has a character who is not only blind but also a lawyer and family man.

Unfortunately, after watching "Growing Up Fisher," I realized that this was just wishful thinking. Despite its creator's worthy intent, this show often stereotypes

True Equality Must Include PWDs Too

I am not your property. I am not your slave. I am not merely chattel of some kind. I certainly wasn't put on this earth to serve as your revenue stream, something you can manipulate whenever you feel like it, something to feed your penchant for self-aggrandizement. My life was not created so it could run its course absent the experience of equality and freedom -- and equality requires freedom. People cannot be free if they are not fully recognized as equals, a recognition that merely requires an allegiance to truth.

Many, if not most of us, in this country who live with a disability can say these words and be accurately representing our truth.

While most would not openly disagree with the statement that PWDs (people with disabilities) are not chattel, one doesn't have to look very far to see that many PWDs are treated as if they are little more than exactly that.

My home state of New York is rife with such examples. One, as Bruce E. Darling, president and CEO of the Rochester-based Center for Disability Rights, pointed out in a written analysis of the New York Governor Andrew Cuomo's 2014 State of the State address, was, "Even though 34 percent of New Yorkers have disabilities, Governor Cuomo's address had relatively little to say to the disability community."

How is it that one-third of New York state's population gets barely a mention?

The PWD landscape on the national scale is equally eye-opening. According to the United States Department of Health and Human Services website: "54 million people in the United States are living in the community with a disability. That's one in every five people. According to the most recent census data, around 52 million of them reside in the community (U.S. Census Bureau, 2002). Additionally, about 2 million people live in nursing homes and other long-term-care facilities."

As a native New Yorker who lives with a brain injury, I am quite familiar with the situation facing those from my state who have brain injury disabilities. If, by chance, they are receiving services under the state's Traumatic Brain Injury Waiver -- a form of Medicaid reimbursement that pays for services designed to keep PWBID (people with brain injury disabilities) living in the community and
Nightmare No. 1 -- The bus ride: In September 1990, Stevens took a bus to Buffalo, N.Y., from his home in Harlem. It was a routine trip to visit family that Stevens said he'd done countless times since his childhood. Because Stevens has spinal muscular atrophy and uses a motorized wheelchair, he travels with an assistant. This time, his assistant was a cousin of a family friend. “I had no idea this guy had a hidden agenda,” Stevens said.

The assistant helped carry Stevens onto the bus. When the bus arrived in Buffalo, police arrested the assistant and charged him with possession of 5 ounces of cocaine in his travel bag. And while they were at it, the police arrested Stevens too. They carried him off the bus.

Nightmare No. 2 -- The trial: Stevens has always adamantly insisted that he knew nothing about the cocaine. But the assistant, who received probation in exchange for his testimony, said in court that Stevens was in on everything. Even though Stevens had no prior drug convictions, in October 1992, he was sentenced to 15 years to life in prison for possession.

Nightmare No. 3 -- Serving time: Stevens ended up in Green Haven Correctional Facility, a maximum-security prison in New York state.

“Prison wasn’t built for people in wheelchairs,” Stevens said. “The prison yard was riddled with potholes. The bathroom doors were too narrow.”

Stevens was only allowed to have a manual wheelchair, which he was unable to push. He needed assistance for all his physical needs, from dressing to eating. For that, he had to rely on other convicts whose prison job it was to assist disabled inmates.

“A lot of the prison aides were angry themselves,” Stevens said. “They were locked up doing 20, 30 years. Now they’ve got the burden of pushing me around, helping me get where I’ve got to go. They’d come to work very angry and try to convince me to stay in bed.”

Outside Green Haven, Stevens’ case became Exhibit A for advocates seeking to reform New York’s Rockefeller drug laws. Signed in 1973 by Gov. Nelson Rockefeller, these laws established mandatory minimum sentences of 15 years to life for possession of 4 ounces of narcotics—about the same as a minimum sentence for murder or kidnapping.

“The Rockefeller drug laws ending up convicting a lot of people who are addicted to drugs, a lot of nonviolent people,” Stevens said. “The only harm they were doing was harming their own bodes. The war on drugs actually was a war on people of color in urban communities.”

But on Christmas Day 2000, Stevens received a wonderful gift. “The superintendent handed me a piece of paper and said I was going home.” New York Gov. George Pataki had granted him clemency.”That was a day of joy and victory. I
Event Fuses Technology, Disabilities

By Deborah Kendrick

Where else could you shake the hand of a hired robot at a cocktail hour one minute and chat with Stevie Wonder the next?

Wonder, the legendary singer/songwriter, showed up at an event in San Diego, Calif., recently, and he wasn’t there to sing or make a speech. He was just following the same drumbeat that drew more than 4,000 other individuals with and without disabilities from throughout the U.S., Canada, the United Kingdom and several other countries from around the world to the definitive annual event that focuses on the marriage of technology and disability.

The robot – Big E, it was called – was hired by HIMS Inc., the Austin, Texas-based company that is leading the way in innovative devices for people who are blind or visually impaired. Big E chatted with happy hour attendees, posed for photographs, and even showed up the next day to introduce a presentation or two.

The 29th annual International Technology and Persons with Disabilities Conference, held March 17-22, featured hundreds of exhibitors and workshops, new products and practices, and plenty of geek speak and networking. The event drew people from all walks of life who are interested in both assistive and mainstream technology as it relates to people with disabilities.

Dr. Harry Murphy, who served as director for California State University at Northridge’s Center on Disability (CSUN), came up with the concept back in 1984 of hosting a conference that would bring together researchers, developers, educators and consumers involved with ways in which technology can be used by people with disabilities.

Dealing with a Shocking Diagnosis

By John M. Williams

Note: John M. Williams is a frequent contributor to Independence Today. This is the first of a two-part story about his battle with Parkinson’s disease.

Four years ago, when I was 64, I began limping on my left side. At first, I was not sure what was happening. My limp was barely noticeable, but gradually it became more apparent. Simultaneously, my hands and feet started shaking. The shaking made it difficult to dress myself.

For decades, I showered, shaved, dressed myself and went to the toilet in less than an hour. Suddenly, that time was being extended by 20 to 30 minutes. Just putting on my socks took more than five minutes. Putting underwear and pants on took another 10 minutes. Buttoning my shirt added five more minutes. And then I started stumbling and experiencing repeatedly severe pains from my left knee to my toes. Finally, I decided “Enough!” I searched the Internet for a neurologist in Fairfax, Va., where I live. I also searched for a physical therapist. I found a neurologist, Dr. Suneetha Manem, and a PT, Kevin Linde.

After my first visit to the neurologist, I came away much better informed than when I entered the room and impressed by Dr. Manem’s knowledge and manner. After listening to me describe my physical condition and then examining me, she told me that I had a neuromuscular condition that could not be determined at that time. At the end of that first meeting, I was given a prescription and told to return in a month. The medication (Mirapex) stopped the shaking. It did not do anything to stop the limping. For pain, I was told to take either aspirin or Tylenol. I picked aspirin.

At my next doctors’ appointment, I was given another examination, and Dr. Manem suggested that I read up on muscular diseases. I was told to return in three months, sooner if necessary. Between doctor’s visits, I devoured material about neuromuscular diseases on the Web. I pictured the worst-case scenarios for my future. I did not like what I read about various neuromuscular diseases, including Parkinson’s disease.

I was told during my third doctor’s visit that I had Parkinson’s. The announcement shocked me. Before I left, my doctor and I discussed ways to control my balance and other functions. She suggested that I consider obtaining a cane and a leg brace to help me walk, and a wristband to support my wrist when typing and doing other work. She recommended that I start physical therapy and wrote a prescription for me. When I got in my car to drive home, I was sweating. I was scared. I was angry.
Don’t Wait to Say ‘I Love You’

By Peter S. Kahrmann

Tell the people you love that you love them before it is too late. Say it out loud. Love is the ineffable life force that fuels and empowers the spirit, the intellect, one’s emotional, physical being. Love, when real, doesn't miss a thing, and the absence of love, the life without it, is surely a wrenching place to be.

As a writer, I often look to the words and thoughts of fellow writers when trying to grow my understanding of something. When it came to the subject of love, I didn't have to look very hard to find sentiments I wholeheartedly agree with. Here are three examples:

Russian writer Leo Tolstoy captured love's ubiquitous presence: “All, everything that I understand, I understand only because I love.”

German writer Johann Wolfgang von Goethe knew the gift of being loved by someone perfectly: “I am so glad that you are here ... It helps me realize how beautiful my world is.”

French writer Victor Hugo displayed remarkable insight, capturing a truth applicable to many: “The greatest happiness of life is the conviction that we are loved -- loved for ourselves, or rather, loved in spite of ourselves.”

That conviction stands on firmer ground when those who love show it both in deed and in words. The absence of such displays have wounded many a self-image and, as a result, hindered many a life.

It is not likely I'm telling you something you don't already know when I point out that life happens to us whether we like it or not, including the end of it: death -- the subject so many of us avoid, and the experience so many of us would like to avoid.

Over the past two years, a couple of people I loved (and still love) died unexpectedly. I could not remember the last time I told my two friends I loved them, and it both-ered me. It bothers me still.

I discussed my condition with my wife, Lisa. She did not panic. She offered words of encouragement and said: “We will go through this together. Our children (Faith, Sean and Brandon) will stand by you.”

I started physical therapy soon after I left the doctor’s office. I told my PT, Kevin Linde, that my left leg and foot were painful and that I had limited motion in my leg and stiffness in my left wrist and fingers. I also told him that I was having trouble maintaining my balance. Kevin explained to me how we would confront my challenges over the next many months. We started my physical therapy that week.

My Falls

One of my great challenges is maintaining my balance while walking. In the past year and a half, I have lost my balance and fallen hard seven times. The first time I fell, I was walking my dog. I had a long leash, and Daisy wrapped the leash around my legs and started running. I fell forward, hit the ground and fractured my right elbow. It took six months to heal. Now I use a short leash when walking Daisy.

While my elbow was healing, I lost my balance in the rain while on my morning walk and fell. I severely injured my chest. I had a huge black and blue mark for months on the right side of my chest. The injury was extremely painful.
people who are blind.

Why do I, as someone who’s legally blind, find “Growing Up Fisher” to be offensive? How does the program contribute to society’s misperceptions of people who are blind and visually impaired?

To begin with, we are asked to believe that Mel has managed to hide his blindness from everyone but his brother, wife and kids for decades. Though he’s been totally blind since age 12, Mel has successfully hidden his disability from his high school, college and law school classmates and teachers as well as his clients. No one has noticed that Mel can’t read textbooks or that he doesn’t use a white cane or guide dog (though he can’t see at all). As they say on “Saturday Night Live”: Really??

“It’s unrealistic to think that you could hide your blindness,” said Peggy, a friend who is blind and has a guide dog. “We all want to (keep blindness hidden) for a time. But you can’t do it for long. If you’re in college, how would your roommate not see that you couldn’t read?”

Mel finally reveals his blindness when he and his wife divorce. Accepting that he needs help, he gets a guide dog named Elvis. “He (Mel) realizes, ‘If I’m going to be the dad that I want to be, I’m going to need some help,’ and this is what happened with my dad,” Nash told TV Guide.

In “Growing Up Fisher,” he’s not telling the story of the experience of everyone who’s blind or visually impaired, Nash has said in numerous interviews. I’m sure he, and the producers and writers of the show, didn’t set out to make those of us with disabilities wince. “I really wanted to write a love letter to my dad,” Nash said of “Fisher” to TV Guide.

It’s great that Nash created “Growing Up Fisher” out of his love for his dad. Unfortunately, this isn’t great for those of
Maryland Tragedy Sheds Light On Developmental Disabilities
By Kathi Wolfe

Most of us think we’re safe when we’re at the movies. Tragically, this wasn’t the case for Robert Ethan Saylor, a 26-year-old man with Down syndrome.

On Jan. 12, 2013, Saylor died after being restrained by three off-duty Frederick County (Md.) sheriff’s deputies (working as security) at a cinema in Frederick, Md. Saylor, along with his aide, had gone to see “Zero Dark Thirty.” When the movie ended, Saylor wanted to see it another time. He refused to leave when told that he didn’t have a ticket to watch the film again. After he resisted and became frightened (crying out “Mommy!”), the deputies forced him out of the theater.

Maryland’s state medical examiner called Saylor’s death a homicide. A Frederick, Md., grand jury determined that charges shouldn’t be pressed against the deputies. The U.S. Department of Justice is investigating the case, and Saylor’s family filed a lawsuit that calls their son’s death “violent, terrifying and painful.”

Nothing can bring Saylor (known as Ethan) back to life. But a public outcry over this tragic loss has ensured that he has not died in vain. In September, Martin O’Malley, Maryland’s Democratic governor, by executive order, established a new commission: the Maryland Commission for Effective Community Inclusion of Individuals with Intellectual and Developmental Disabilities.

The commission was created to improve training so that law-enforcement personnel, paramedics, firefighters and other first responders may better respond to and interact with persons with developmental and intellectual disabilities. Timothy P. Shriver, chairman and CEO of Special Olympics, heads the commission, believed to be the first such body in the country.

According to a commission press release, the panel is tasked with “evaluating the current training received by people that interact with the IDD (intellectual and developmental disabilities) community and developing and issuing recommendations about the types of statewide training standards that Maryland should adopt to educate individuals in positions of authority, particularly those in public sector positions ... about the best approaches for safely managing situations with persons with IDD.”

The commission hasn’t found any training curriculum that provides the scope of what its members seek to develop, said Catharine A. Raggio, Maryland’s secretary of disabilities, in a telephone interview.

“We found that pockets of training were being done, but we need to expand the scope to other first responders — to the courts and hospitals,” she said. “We need to make the training comprehensive and consistent.”

Above all, the training that is developed should be “person centered,” said Raggio. “We don’t want people (in the IDD community) to be seen as patients. We want people with intellectual and developmental disabilities to be involved in (developing) the training.”

The commission issued its first report on Jan. 9, 2014 – the day that would have been Ethan Saylor’s 27th birthday. Last winter, the commission conducted four public hearings during what was billed as a listening tour. “We held it on evenings and Saturdays in areas where there are a lot of people with intellectual and developmental disabilities,” Raggio said.

Given the enormity of its tasks, the commission’s work will go on for some time, Raggio said. Like many interviewed for this article, she hopes the training developed by the commission will make the interaction between first responders and people with intellectual and developmental disabilities safe and inclusive.

Raggio said that, once, when she was at a meeting, “someone from the media asked Patti Saylor (Ethan’s mother) about how first responders interacted with Ethan. She said, ‘nobody in our church ever had to be trained on how to interact with Ethan. He had developed relationships with people.’”

In a telephone interview, Patti Saylor said that more than 370,000 people signed on to a Change.org petition decrying and calling for further investigation into her son’s death.

“The public no longer is going to accept these kinds of
create a climate that allows them to, say, leave a nursing home and return to the community -- they will encounter some problems not of their making. Perhaps the biggest problem is the state's own Department of Health.

Although it is hard to believe, Department of Health personnel responsible for overseeing the waiver, developing the services manual and tracking the behavior of waiver providers across the state are not required to have any training, formal or otherwise, concerning the workings of the brain! Think about that. The very people responsible for the TBI Waiver know little if anything about the brain. As of this writing, there is little reason to believe this is going to change any time soon. Moreover, the DOH and its minions provide little if any oversight of the waiver providers themselves.

One problematic result stemming from the combination of DOH ignorance and lack of provider oversight is that some waiver providers -- by no means all -- are free to engage in community-based warehousing. They do this by keeping waiver participants in five-day-a-week day programs ad infinitum and inundating them with many hours of additional services -- needed or not -- when they're not in those programs. All in all, it is a schedule that would tire out anyone, brain injury disability or not.

Never mind that fatigue, according to experts including the Mayo Clinic, is one of the more common symptoms of brain injury. And never mind that the website of the National Institute of Neurological Disorders and Stroke (part of the National Institutes of Health) points out that "fatigue or lethargy, a change in sleep patterns, behavioral or mood changes" are common symptoms of brain injury.

And never mind that advocacy groups and others have repeatedly tried to engage the state's DOH in dialogue that gives them input into the TBI Waiver program's development, manual and oversight. Nothing doing. With all its ignorance, the DOH acts as if it knows better than all the aforementioned groups.

Sadly, -- no -- tragically, New Yorkers with brain injury disabilities are not the exception to the rule when it comes to living with a disability in most if not all states. You'd think that an allegiance to equality would be an instinctive response from a society whose very existence was announced to the world by a declaration of independence that included the words "We hold these truths to be self-evident, that all men are created equal, that they are endowed by their Creator with certain unalienable Rights, that among these are Life, Liberty and the pursuit of Happiness."

Gov. O'Malley didn’t feel there was justification for another investigation into Ethan’s death, Saylor said. But the commission was formed after the outpouring of public outrage over the senseless loss of her son’s life, she said.

“I and my family met with O’Malley,” said Saylor, a nurse with a master’s degree in special education. “We didn’t get everything we wanted, but it was a positive outcome. The commission has taken its charge seriously. They’re really doing their work!”

Ethan isn’t the only person who has been hurt verbally or physically, or even killed, by first responders lacking appropriate training, Saylor said. Law-enforcement personnel, for example, need to know that “their presence can escalate a situation -- that a person (with an intellectual or developmental disability) may not have the communication skills to understand that they can’t watch (a movie) a second time.”

In February, Patti Saylor received the National Down Syndrome Society’s Advocate of the Year award. Ethan’s death will be the catalyst for something good, Saylor said. “There’s a dialogue going on now that didn’t exist last year.”

Commission member Erica Wheeler said in a telephone interview that when she heard about Ethan’s death, her heart dropped. “It was a scary situation,” said Wheeler, a self-advocate. “Suddenly, I just didn’t feel comfortable or safe anymore. When I was asked to be on the commission, I felt totally honored. I felt that I could help change the world and make our state safe for people with all kinds of disabilities.”

Wheeler has cerebral palsy. “I have gross motor developmental delays. It takes me a little more time to process things,” she said.

The commission’s work “will be a slow process,” said Wheeler, an athlete and board member of Special Olympics Maryland, “but I feel that we’ll work together. We’re doing great!”

It’s vitally important that the commission assist in developing training that helps law-enforcement personnel understand that difference doesn’t always mean dangerous, Joanna L. Pierson, a member-at-large of the commission and executive director of the Arc of Frederick County (Md.), said in a telephone interview.

“If someone (with an intellectual or developmental disability) doesn’t respond, it can be upsetting,” she said. “Law enforcement worries that this means the person could be dangerous. Sometimes it does. But often it means the person either
us who are blind or visually impaired. Watching “Fisher,” many people could well think that we hide our blindness. In fact, many of us aren’t closeted about being blind. Accustomed to being open about everything from our sexuality to whether we’re carnivores or vegans, we’re out and about, with white canes or guide dogs, in our communities.

On “Growing Up Fisher,” Mel seems to be always chopping down trees or driving. In one scene, Mel teaches his teenage daughter how to drive.

“What a Magoo,” Katie says sarcastically of her dad.

It’s hard to tell what’s more offensive: the show’s continual retelling of jokes about blind people driving, or the use of the term “Magoo.” Mr. Magoo was a bumbling, stumbling, blind cartoon character. The Mr. Magoo cartoons originated in 1949 and were brought to life again on TV in the 1960s.

As a child, I, like other blind and visually impaired kids, was bullied about being like Mr. Magoo. I understand why Magoo cartoons were broadcast in the pre-disability rights, pre-ADA era. To me, using the Magoo stereotype now, however, is similar to calling a gay person a “sissy” or a black person a “little black Sambo.”

The show’s depiction of Mel, a blind man, is offensive, said Lynn Manning, co-founder and artistic director of the Watts Village Theater in Watts, Calif. “A machismo thing is being played out,” said Manning, a poet and playwright who is blind. “As it’s depicted in ‘Fisher’ and so many TV shows and movies, you’re not a man if you don’t drive or use a chainsaw.”

Along with driving, Mel also appears to have gone to the Three Stooges Guide Dog School. In one episode, he gives Elvis a whole piece of meat and checks him into a restaurant cloak room. In another, Mel lets Henry walk Elvis so he’ll appear blind -- and get the girls. I know “Fisher” is a comedy, but have you ever met someone who’s blind and received training who has ever done this? Yet, viewing the show, if you know nothing about guide dogs or blind people, you might think this is par for the course.

You can perpetuate stereotypes and still get laughs, Manning said, “but real artistic ability is to create new (non-stereotypical) jokes – to shed light on things that haven’t been seen before,” he said.

To add insult to injury, it appears that, like many other TV shows and films, no actors with (apparent) disabilities appear on “Growing Up Fisher.”

“There are 2,288 performers with disabilities who have... self-identified on Breakdown Services’ Actors Access, so there is much untapped talent ready for prime time,” Tari Hartman Squire, a disability policy, marketing and employment consultation firm executive, said in an email to Independence Today.

“We hope (the program’s) creators will tap into the expertise of consultants who are blind to ... ensure authenticity,” said Squire, CEO of Ein Sof Communications Inc.

I’d go further. It would be great if “Fisher” tapped the blind community’s expertise and used some actors with disabilities. But to be a funny show that isn’t demeaning, “Fisher” needs to bring some writers who are blind into its fold. Only then would the series’ stories and jokes be entertaining and not stereotypical. If this happens, and I’m hopeful that it will, “Growing Up Fisher” could be “must-see TV.”

Kathi Wolfe writes frequently on disability and the arts. She was awarded a 1998-1999 Rosalynn Carter Fellowship for mental health journalism.

It’s hard to experience life and liberty and to pursue happiness when nearly every moment of your life is controlled by those who see you as a way of making money, a population whose voice must be kept silent. (One-fifth of the U.S. population is a formidable voting bloc, and 34 percent in New York is formidable and then some.)

All this is why the voice of this newspaper, the pen of this writer, and the voices of all people who believe in equal rights for all must not fall silent, not for a moment.

A person with a disability is no more defined by that disability than a person without a disability is defined by his or her hair color. We are born with equal rights. Greed and a lust for power over others cannot be allowed to prevail and continue the denial of these rights.

Peter S. Kahrmann writes a blog on disability issues. He resides in Massachusetts.
painful, and it hurt when I laughed, bent over or picked up any item weighing more than 1 pound. X-rays revealed internal bruising. After that incident, I stopped taking my morning walks in the rain.

My third fall happened at home. I lost my balance getting out of a lazy man’s chair, and I landed on the floor. I injured my right kneecap and the area above it. It took months for the pain to go away. I stopped using the chair.

I have a tendency to shuffle my feet when I start walking with my cane on my morning stroll. In December 2012, I was walking down a hill and started sliding. I could not stop and fell forward. I rolled over down the hill about five times before I stopped. I scraped my right shoulder in half a dozen places. When the doctor saw my arm, he said, “What feline attacked you?” It took three months for all the scrapes to heal. I am careful now in choosing my hills.

In July 2013, I was getting out of my car when I lost my balance and fell forward. I hit the ground hard. For nearly five months, I had excruciating pain in an area that extended from behind my right knee to my toes. While the pain has gone, I get muscle spasms in my right leg daily.

On a Sunday in October 2013 at 6 in the morning, I was sitting in a lounge chair watching TV. I had planned to go to 7:30 Mass. My plan was to start getting ready at 6 a.m. I got up from the chair and took about six steps when I lost my balance. I did a 360-degree turn and landed on the floor. When my head cleared, I looked at my watch. It was 6:11. I had lost 10 minutes. I got up slowly. My head ached. I went to my computer and turned it on. I went to WebMD.com and typed in a question concerning the aftereffects of my fall. After I read the answer, I decided to skip church in the event that I might develop severe side effects. Fortunately, nothing happened.

Physical Therapy

Each morning before I get out of bed, I raise my left and right feet 10-15 times. Then I turn over on my stomach and bring both legs back and forth 10-15 times. Then I sit on my bed and move my legs up and down 15 times. If there is no resistance in any of these exercises, then I know I can move from my bed to the bathroom with relative ease.

If I encounter resistance with my legs, I know I am going to have difficulty going from the bed to the bathroom, and that means walking challenges that day. Once I am dressed, I go for my morning walk.

When I return from my walk, I do a series of leg exercises for about 10 minutes, and then I do a series of elbow, wrist and finger exercises for seven minutes. My daily exercise routine is about 60 minutes. On days that I choose to ride my exercise bike, my exercise runs nearly 90 minutes.

When I started physical therapy, my leg and arm movements were severely limited. For example, I could only move my feet side to side about a foot or less. I could raise each foot less than a foot off the ground. I had problems maintaining my balance. And I had limited movement in my left wrist. I am left-handed, so I had to shave with my right hand.

Today, I am shaving with my left hand. I can lift both legs about three feet off the ground. I can move both legs side to side 70 or more times, and my balance has greatly improved. I credit my success to Kevin for developing the PT programs that addressed these problems and to myself for following these programs on days when I am not doing PT with him.

I see Kevin twice weekly. Depending on how I feel, I do a solid 50 minutes of physical therapy. I spend 15 minutes riding an exercise bike, 15 minutes on a machine working on two different leg exercises, and another 20 minutes on exercises dealing with mobility and balance. We spend the last five minutes of each session trying a new exercise or talking about my progress.

Kevin is a first-rate physical therapist. He is always working with me and never has another patient that competes for his attention while I am there. He is always busy. His philosophy is “Keep those muscles moving.” He always asks me, “How are you feeling?” “How much energy do you have?”

He watches me carefully. If he believes I can improve my routine, he tells me and sometimes shows me how to do something new. If he sees I am not doing my exercises properly, we stop and discuss how I feel at that moment. He never rushes me and has never lost his temper. He encourages me to keep working on my PT even when he is not there. He has made a positive difference in my life. When I leave him after my PT, I feel 100% better physically and psychologically. He has become a friend.

He told me: “The goal of physical therapy is to find the right exercise for the patient. We found yours.”

My Medications

I take three medications daily. One is aspirin for pain and to prevent a heart attack. The others are Carbidopa/Levodopa ER and Mirapex. Levodopa helps decrease tremors, muscle stiffness and other symptoms of Parkinson’s disease. Carbidopa decreases side effects associated with Levodopa. Mirapex simulates dopamine, a neurotransmitter in the brain, and stimulates its receptors, which alleviate motor spasms, tremor and rigidity, as well as depression and cognitive problems.
Disabilities and, instead of the possibly 200 people California organizers anticipated, more than 600 came from around the world. The event quickly outgrew its campus surroundings, moving first to Los Angeles and several airport hotels and then to its current venue at the Manchester Grand Hyatt in San Diego.

Presentations were a mix of specialized and mainstream technology, as well as discussions of policies, practices and legislation. Mainstream giants such as Amazon, Google, and Microsoft not only demonstrated products and served as sponsors, but sometimes scouted for talent.

Comcast demonstrated a first in this country with its TV set-top box with a talking interface that allows those unable to read onscreen menus to hear audio equivalents of channel guides and program descriptions. Amazon invited attendees to experiment with the accessibility features of its Kindle Fire. And Google, Adobe and Deque offered sessions demonstrating accessibility initiatives, such as: How can a person unable to hold an iPad make it work? How can someone who can't see pictures make productive use of an iPhone camera? How can companies ensure that their websites and employment policies are inclusive?

With roughly 20 presentations to choose from each hour, there was no shortage of learning and information to be absorbed. In addition to serious presentations on best practices in producing audio description, copyrighting third-party captioning on the Internet, or the state of employment statistics as presented by Kathleen Martinez, assistant secretary of the U.S. Department of Labor, there were lighthearted moments as well.

In addition to the presence of Big E at one company's happy-hour reception, another firm held light-night technology-related chats in a company suite. And several companies hosted parties for networking and product demonstrations.

Since the conference has established itself as an international hallmark of technological equality, the event itself serves as a model of inclusiveness.

All venues are completely accessible to people using wheelchairs. Sign language interpreters, real-time captioning and a plethora of assistive listening devices are available for making the spoken content of all presentations available to people who are deaf or hard of hearing.

A dog relief area was conveniently located and well-maintained for attendees with service animals, and volunteers eager to provide information or direction were just about everywhere in the hotel.

And what did Stevie Wonder come to see? Like everyone else, he was interested in new breakthroughs in technology that enhance accessibility.

He spent some time at HIMS Inc., for example, where new braille notetakers are making it possible to read files of a growing number of formats, search the Web, post to Twitter and Facebook, and more. A new handheld player can play audiobooks, music and podcasts while also boasting a camera and optical character-recognition software to enable a person with a print disability to snap a picture of a menu, concert program or grocery ad and have it translated into an audio file.

Wonder examined a 3D image of Abraham Lincoln's face produced by American Thermoform, a company once
known for making copies of braille pages. Now it makes three-dimensional tactile graphics to allow blind people to “see” with their hands.

And, of course, he was just doing a little bit of what attracted many attendees: enjoying the company of others who are in awe of the power of technology, particularly its power to make things equal for people who happen to have disabilities.

Programs of all conference content are available in braille and large print as well as in HTML5, which attendees with print-related disabilities can download to their smartphones or other mobile devices.

Next year’s conference is set for March 2-7, 2015, and will again be held at the Manchester Grand Hyatt in San Diego. For more about the conference this year and next, visit www.CSUNconference.org.

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In truth, I’m known for telling people I love them or I like them. More than once, I’ve been playfully teased for doing so. Doing so is deeply important, for teller and listener. What saddens me — and is tragic, in some cases — is not just those who, for a variety reasons never (or rarely) say “I love you,” but those who never hear it enough, or, never hear it at all. There are children who never hear it from parents, friends who never tell each other just that, couples who tell it to each other rarely or not at all.

I’ve witnessed, experienced, and heard of instances in which the words “I love you” are purposely withheld as some form of power play or punishment. I’ve also heard the utterly inaccurate judgment that views saying those words as an act of weakness. If that were so, then why is it so hard for so many of us to do?

Whatever your belief system in life, the very fact that love is part of life, one of its greatest gifts, is surely one of its underpinnings. So tell those you love that you love them. Tell them more than once. They don’t just need the experience of hearing you say it, they deserve the experience. And, may I say, I hope those who love you tell you they love you. After all, you deserve the experience too. I promise.

Peter S. Kahrmann is a writer and an advocate for people with disabilities.

Any one of us is just an accident away from having a disability, Curtis said, and more people with disabilities are living longer — and seeking a full life.

“This means we’ll all be interacting with more people with a range of disabilities,” he said. “That’s a good thing! But you don’t want to worry all the time that your kids could be in danger every time they interact with first responders.”

That’s why the commission’s work is needed, he said.

Kathi Wolfe writes frequently on disability issues. Her most recent poetry collection, “The Green Light,” was published by Finishing Line Press.

Mike Ervin is a writer who lives in Chicago. His blog, “Smart Ass Cripple,” appears at smartasscripple.blogspot.com.