We are deeply grateful for the goodwill of our readers who responded so generously to our appeal with their donations. With such continuing support we feel confident that we can publish the TOOMEY *J* GAZETTE for these readers.

However, after this issue, we will be unable to send it to those who have not indicated, in one way or another, that they wish to receive it.

The suggested minimum donation is $3 per copy from the non-disabled, and $1 per copy from the disabled, if able to do so. Donations are deductible as a charitable contribution on the federal income tax return. Make checks payable to: Iron Lung Polios & Multiplegics, Inc., Box 149, Chagrin Falls, Ohio 44022, U.S.A.
TOOMEY j GAZETTE is an annual journal and information service for the disabled. The editor and founder is a non-disabled volunteer. The editing, researching, and other activities are centered in her home in the village of Chagrin Falls. From this hub, she and the non-disabled assistant editor gather material through correspondence with the world-wide readers. TjG is incorporated as a non-profit organization under the name of Iron Lung Polios & Multiplegics, Inc.

TjG Aim: To reach, to inform, and to dignify the disabled throughout the world.

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*Quad (quadruplegic) - one whose four limbs are paralyzed or relatively useless as the result of injury or disease.
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I HOPE TO FLY AGAIN

by Jing Ling Dai
Reprinted from the
January 1968
SOUTHLAND magazine

Captain Thomas cruising toward the Engineering Building on campus at California State College at Long Beach. In the Background is the new faculty office building.

"I hope to fly again.
"Without hope, there is not much purpose in going on in life. I think of my handicap as a temporary difficulty.
"If I thought otherwise, I would start feeling sorry for myself.
"I don't honestly believe that I'm going to get better. It'll be one chance in 10 million that I would."

Thus, Capt. Henry L. Thomas, a 1964 West Point graduate and a former pilot, soared above the clouds of uncertainty concerning his future as a quadriplegic.

Thomas was an Army helicopter pilot trainee when he was injured in a water skiing accident in Mobile, Ala., on June 11, 1966.

The 27-year-old veteran has joined the increasing number of determined students attending California State College at Long Beach in wheelchairs.

The spinal cord of the boyish-looking sportsman was injured at the level of the fifth cervical vertebra when he fell off the skis and struck his head in shallow water, paralyzing him from his chest down. Thomas has use of only the shoulder and arm muscles. He wears an adaptive hand brace, which enables him to write, using arm movements. He also has an electric hand grip, a new medical
discovery, which he wears to pick up objects.

Thomas spent 15 months in hospitals - six of them at Letterman General Hospital in San Francisco, before he was transferred to the spinal cord injured section of Long Beach Veterans Administration Hospital.

When he was discharged from the hospital last September, Thomas decided to take the path forward, to return to college for a master's degree in aerospace management engineering. He could easily have taken the path of least resistance - inertia.

However, one thing almost prevented the West Point graduate from enrollment at Cal State: He did not have the strength to surmount the hills on the campus in his hand-propelled wheelchair.

Determined to attend the college, Thomas took his problem to Dr. Ernest Bors at the VA Hospital, although he knew Dr. Bors, known as "the father of the spinal cord injured in Long Beach," is opposed to the use of electric wheelchairs. The VA doctor advocates that spinal cord injured patients make optimum use of their muscles to prevent their deterioration. Patients with electric wheelchairs tend to get lazy.

"Since Dr. Bors did not want to prevent anyone from going to college because he couldn't get around, he let me have an electric wheelchair," said Thomas. Displaying the adventurer in him, the former Eagle Scout took a "test run" in his new wheelchair from the corner of Seventh Street and Bellflower Boulevard to the Marine Stadium. "I almost caused a traffic jam. I just wanted to see if it would really hold up. It did," he said with a mischievous grin. His electric wheelchair operates on two 6-volt automobile batteries and can run for seven hours without recharging.

Again with characteristic alacrity, Thomas enrolled at the college for twelve units instead of the six units recommended by Dr. George Rhodes, VA counseling psychologist.

"Thomas was highly motivated even when he was first admitted here. He is extremely bright and alert," said Dr. Rhodes. "He is a good example of the success of the Veterans Administration's
Captain Thomas chats with Tyron Powers, a Vietnam casualty, who helped him around in his wheelchair, when both were patients at Letterman General Hospital in San Francisco.

Mrs. Sylvia Rosenberg, physiotherapist, puts an adaptive hand device on Captain Thomas' right arm which enables him to write, using his arm movement. Flexing his muscles, Captain Thomas smiles as he pulls 20-30 pound weights in corrective therapy department.
rehabilitation program, especially since he is severely disabled."

(The Long Beach hospital is the nation's center for the treatment of the spinal cord injured; it has a 205-bed unit in the newly built wing. The hospital, now the second largest general medical and surgical hospital in the VA system, will, when completed, have a 1,700-bed capacity.)

Thomas, who was discharged from the Army in February, can be seen whizzing across the college campus in his wheelchair, stopping to ask a student to open the gate leading to the VA Hospital grounds, and disappearing behind the bushes.

He must return to the hospital every other morning for medical care and twice a week for both passive and corrective therapy. This consumes about four hours each visit. He was able to schedule his classes around his treatment periods.

If you were to follow Thomas from morning to night, you would discover that he has an unusually busy schedule, which begins before seven and ends usually well into the evening.

After a patient is discharged, the amount of physiotherapy depends chiefly upon his own initiative.

"Hank is very cooperative and always cheerful. He is well liked by everyone," said Sylvia Rosenberg, VA physiotherapist, as she gave Thomas passive exercises. These exercises, given him without his aid, are important to maintain range of movement, prevent muscle contractions and prevent muscle deterioration.

In corrective therapy, Thomas pulls 20-30 pound weights. A strap is placed around each gloved hand and hooked to a pulley, anchored by the weights. He also does "standing" exercises.

He is lifted to a standing position, a strap is placed around his waist and hooked to a podium-like stand. "It is important that I stand to prevent my body from absorbing the calcium, causing possible brittle bones, kidney and bladder stones."

Taking this rigorous daily regimen in a matter-of-fact manner, Thomas kibitzes with his hospital buddies and jokes about his return to college: "You've heard of the Student Prince? I'm the 'Student Clod.'"

A clod he is not. Much to his own surprise, he scored 96, out of a possible 100, in an engineering exam, which he took in the same time allotted the rest of his class, in spite of his handwriting handicap.

An honor student while at West Point, Thomas hopes to take all his tests competitively with other students in the same given time. In his statistics course, he had planned to have a "neutral" student transcribe for him at the midterm exam because it involves many computations. Just before the exam period, his "pinch hitter" was unable to show up so Thomas did it himself.

Is his statistics course jinxed? Just before a previous exam, he discovered his slide rule had become warped from being under the sun. Bending with the wind, Thomas takes in his stride these little kinks in his path forward. Like an inventor enthused with each new discovery, Thomas finds with surprise that he is able to do more and more things by himself. He has improvised short cuts. He has designed the rod on which his slide rule is mounted.

The friendly and modest graduate student, who hopes to complete his master's degree at either Stanford or UCLA, finds professors and students very cooperative and helpful. He usually finds a
Just before bedtime, Thomas does a statistics problem using the slide rule, mounted on a stand he designed. He operates the slide rule with an erasure-tipped pencil, clamped to his adaptive hand device.

friend to take lecture notes for him. He supplies the note taker with carbon-backed paper so he can take notes on the top sheet and give Thomas the duplicate. "This works out very well," he said, explaining that it takes him twice as much time to do his homework because of his handicap.

"I would encourage anyone who hesitates to continue his education because of his handicap to disregard the disability and continue, especially at Long Beach State. The college is specifically equipped to handle the handicapped," said Thomas.

Most of the buildings at Cal State have elevators or ramps for wheelchairs. There is also a special counseling service to help the handicapped with rehabilitation.

Self-acceptance and indomitable courage, flavored with a keen sense of humor and an art of communication, have hallmarked Thomas' successful rehabilitation.

But this does not mean Thomas did not have moments of despair. "At first I thought, 'This isn't so bad. Tomorrow I'll get better.'" Then in the second or third months he realized the terrifying moments of stark reality. "I knew then that I was honestly paralyzed - that my chances for recovery were remote."

His morale was at its lowest ebb then. He didn't think he could see his way out of the labyrinth of paralysis.

"At that same time my West Point classmates passed through San Francisco to go to Vietnam. I wanted so much to go. I felt like a football player threatened with retirement. It was a real blow. I was in training so long to serve my country. I had always pictured myself as having a career in the Army."

The Army is no stranger to Thomas - his father served over 30 years as an Army doctor.

Now, Thomas is determined to become an aerospace engineer. And, if his hopes are realized, he will fly a glider with a servotype system. He has already written to two glider companies seeking a sponsor.

A pilot's most valuable asset might be his manual dexterity, but Thomas may prove that artificial dexterity is as efficient.

Henry L. Thomas, Army captain, member of the National Ski Patrol, cross-country skier and ski jumper, scuba diver, soccer player, sky diver, lacrosse champion, and pilot, may someday conquer the skies again.
As my mother and father were from Canada we're fortunate to have a lot of friends and relatives living in different parts of that sprawling country. I have had polio (quad) ever since I was 3 years old (16 years) and we have gone to Canada every other year since I was 5.

We have always gone by plane or jet and have always found the airlines most helpful and they have let us bring my wheelchair and small portable respirator without extra charge.

Last time we (my Mom and brother, Joe, who is two years younger and a big help) went was in 1967. We began in Vancouver and Victoria and had a fantastic time riding the ferry up and down the coast visiting friends.

We spent four days in Calgary seeing the world famous Stampede (a big rodeo). Next we spent a month in Manitoba where we saw some of the Pan Am Games. Then we drove over 500 miles north to the nickel mining country.

When we returned from our vacation it was time to start college. This would be the first time I ever attended class regularly as I had previously had home teachers and for the last seven years a home-to-school intercom. My attendant, whom I liked very much, had never attended high school so obviously she couldn't take notes. I didn't want to record classes and have to take notes when we got home as that was too time consuming. We discovered the best way to solve the problem was for me to tell her what to write (whispering with the class listening to the teacher and my attendant listening to me).

Well, my attendant left last September and my new one is from Mexico and speaks very little English. All I had to do, however, was teach her the English alphabet and which letters went with those sounds and now as I spell the words she writes them down and when I say "derecha" (that means "right") she moves her hand to the right and we write the next word. I am now in my three semester of Spanish so I am teaching Amelia English and she is helping me learn more Spanish.

Some of my teachers let me take my tests at home but others have me take them orally in their office. This is because I write while lying on my left side and steadying the pen with my left hand. It takes a long time to dictate a test to anyone who doesn't understand English.

This summer we are planning to drive to Victoria seeing the sights along the way. We will spend four weeks at the beach home of friends where I love to float in the water with my head on a raft and my Mom and brother, Joe, ski and skin dive.

Address: 11224 Hannum Ave., Culver City, California 90230.
Lee Barnes, and the story of his life since September 19, 1965, has been an inspiration to my family and to a wide circle of friends.

Lee (right) and my son, Dick (left) had been together in school since the first grade. They both took pride in work well done, and a friendly rivalry spurred each of them on to better school achievement. During their years at Hughes Junior High School, they developed a keen interest in surfing—and together they surfed all the well-known surfing spots in California, Hawaii, and Baja California.

Ironically, it was after a morning of high surf that Lee's life was to alter its course. He was a senior student at Long Beach Polytechnic High School, a member in good standing of the Scholarship Society, and had distinguished himself as a letterman with the cross country track team. He was already motivated toward a college education and was planning a career in optometry. But on his first dive into the swimming pool of friends on that day in September, Lee's head struck the bottom, and time stood still for an instant. He sustained a C-5 injury.

During the two months he was confined to a Stryker Electric Circle bed in St. Mary's Hospital, he read novels whenever he could find someone to turn the pages of a book held above his face on an improvised rack. Many of his friends from his school, church, and track team brightened his otherwise endless afternoons. Surprisingly, often, it was Lee's cheerfulness which put the visitors at ease.

When, in November, he was transferred to Rancho Los Amigos in Downey, Lee was able to take high school courses with a personal instructor. Because he had taken a maximum load each year at high school, the only two classes which were required for his graduation were Senior English and United States Government. He studied these daily with a visiting teacher at Rancho Los Amigos, and these credits were easily transferred to Poly High.

Lee's discharge from Rancho in May 1966, made it possible for him not only to attend the graduation exercises with his class, but to participate in some of the Senior activities. Included in these was an assembly at which he was awarded a Boys League Scholarship. Lee, and all of us were proud of his diploma, especially because it was presented with scholastic honors.

With the continuing help of therapy classes at Rancho, Lee could now feed himself and was able to write efficiently enough, with the aid of a wrist driven flexor hinge hand brace, to keep up with a regular class. After conferring with Head Counselor Bob Davis, at Long Beach City College, he decided to make a trial run during the summer, and enrolled in an eight week
English Composition class held in the evenings. His friend, Dick, enrolled in the same class and provided the needed transportation and lifting. Before long, however, with much practice, he was able to transfer unaided to the car. Lee was treated just as any other student with this exception: he was permitted to finish at home the essays which he started with the class at school.

Since the summer class had proved so satisfactory, Lee entered the fall semester of 1966 with the minimum load of eight units. He felt more at ease at college now, and each class, with its daily challenges, provided just the incentive he needed to push ahead. He enjoyed being with young people again, and applied himself with determination to the daily homework assignments. His electric typewriter made rewriting notes and preparing reports much easier tasks.

Lee continued his studies at Long Beach City College for two years, including the summer sessions. His efforts were rewarded by having his name appear on the Dean's List for three semesters. His rather general course included classes in history, literature, math, speech and psychology. However, by the fall of 1968, when he transferred his units to California State College at Long Beach, he had decided on a math major, with his eyes on a career in computer programming.

A student body of 26,000, a much larger and sloping campus, classes in advanced calculus and logic, and the loss of his chief mode of transportation, all presented challenges, which Lee set about systematically to overcome. Unquestionably, the most noticeable fringe benefit of the larger school was making friends with the many other students who are likewise confined to chairs. Lee renewed his acquaintance with Ray Anderson, a quad he had known at Rancho Los Amigos, but for the most part, the wheelchair students were paraplegics.

Since his friend Dick is studying at UCLA, Mrs. Barnes drives her son to and from CSCLB each day, where she uses preferred parking which is reserved for the handicapped students. Lee is able to get to his classes on his own, although there are always people around who are anxious to help when he has difficulty. He uses his wrist brace, now, only for exams—he made an A+ in the logic final—and to aid him in eating tacos.

Pursuing his formal education has, indeed, kept Lee busy but he has managed to branch out in other ways, too. With the aid of lessons presented on the local educational TV channel, he has learned to play the game of Bridge, and eagerly looks forward to the weekly games with his friends. He organizes, prepares the charts for, and participates in the local ping-pong tournaments, enjoys directing gardening and landscaping activities, has mastered the art of "catch" with a tennis ball, and has become a major threat on the croquet court!

For two years after his accident, Lee spent one or two afternoons a week at Rancho Los Amigos, visiting with and encouraging the patients who were still confined there. The doctors and nurses were proud of the spirit of cheerfulness which Lee maintained for himself and the amount of inspiration he has been able to bring to others.

Meanwhile, Lee, with his fine sense of humor and his zest for life, will continue to propel himself daily around the block—since he feels this activity has done the most to redevelop his arm muscles. And those of us who see him wave a cheery hello.
I am a cerebral palsy, confined to a wheelchair. Completely helpless, I can't even blow my own nose. My speech defect is so severe that until strangers grow accustomed to my manner of speaking, I have to repeat what I'm saying several times. Yet I try to lead as normal a life as I can. I go to opera, theatre and concerts. Although I enjoy them now, originally, they were substitutes - substitutes for friends. As friends got married and had children, my social life dwindled. That was very hard for me to accept but going to entertainment made it easier. 

Realizing that friends separate, my parents always encouraged me to read. They knew that reading would occupy me for many lonely hours. Now not only do I get pleasure from reading, but I gain knowledge about the world that I can't get first hand. Most of all, reading keeps me busy. But "reading" is not exactly accurate. I do read the most difficult material myself. Using a reading stand, I am able to turn the pages with my mouth if the book lies flat. If, like paperbacks, it doesn't, I have to call someone to turn the pages.

I also "read" with my ears, that is, I listen to "talking books." Talking books are recordings of entire books and magazines. The Library of Congress selects the books, and the Congress appropriates the money, and postage is free. Anyone who is blind or physically handicapped can become a reader of talking books. The number of selections in every category is amazing. Biography, fiction, science and television are only a few. There are also twenty-one magazines. I receive four: American Heritage, The Atlantic Monthly, Good Housekeeping and Newsweek.

Still, there are some books and magazines that I want to read that are not on talking books. And so, twice a week, I have a girl with a mild case of cerebral palsy come to my home to read to me. Actually, we only read the last half-hour of a three or four hour session. We spend the rest of the time talking.

I have an avocation that I hope will become a vocation. Because my life is not complete unless I have a goal to work towards, I am trying to become a writer. Of course, I cannot write alone, so I have a writing major come to the house to take my dictation. She takes down what I say and tells me I'm all wrong. Then I rewrite and rewrite my manuscript until I'm ready to throw it or her out the window. I consider reading and writing an occupation - something to cling to. My friends often urge me to "skip a lesson and go out shopping or to a museum." I very rarely break my schedule because once I allow myself to go off a steady course, I will begin to drift aimlessly. Life would no longer have meaning. To give it meaning, I must have a goal, something to work towards. Writing is that goal.

How did I, a so severely handicapped person, come to live as normal a life as I do? It was a long, hard struggle. At birth, the cells of four lobes of my brain were smashed. I was vegetative.
Yet when my mother held me on her lap and talked to me, she could tell by my eyes that I understood. She was determined to give me as normal a life as possible.

She began by getting me a therapist. We were fortunate in getting a physical and speech therapist and psychologist all rolled into one. When she began, I was so spastic that I was unable to hold my head up, and my arms flew in all directions. Her first problem was to get me quiet and relaxed. Now with years of "patterning" and massage, I am able to do this. I can sit quietly in my wheelchair. She also taught me to speak in an almost normal voice. Although I will never become an opera star, through voice training, I have acquired a fairly pleasant voice.

Swallowing was another of my difficulties. She taught me to swallow with a medicine dropper, drop by drop. I eat well enough to go to a restaurant, but still practice drinking.

When it was time for me to go to school, my mother requested a teacher from the Board of Education to give me home instruction. There were no special classes or special schools as there are now. Although I received my high school diploma through home instruction, my education was very poor. It was impossible to learn a week's work in four and a half hours. Since I was unable to go to college, I decided I would take college courses at home. I got a college student for each subject. I took all the required courses except economics and mathematics and enough literature courses for an M.A.

Although it's been a long, hard road to get where I am now, it has been worth it. My achievements, both physical and mental, enable me to live a fairly normal life, and, if I ever learn to write, a purposeful one.

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**TALKING BOOKS**

If you are turning these pages with a mouthstick or a page turner or relatively useless hands you are eligible for the TALKING BOOKS program.

The Library of Congress is ready to loan you a FREE record player and send you FREE recorded books and current magazines. FREE mailing too.

All you need to qualify is a brief statement of your disability from a competent authority.

Contact your local library or write: Division for the Blind and Physically Handicapped, Library of Congress, Washington, D.C. 20540.
At the age of 15 I fell severely ill with polio. Returning home to my parents after a five years stay in two Munich hospitals - for some months in the Iron Lung - I choose some schooling which corresponded with my possibilities. I intended to make my leaving with the prospect to go on into university training. But what about it - how to manage it? The only movements left to me are those of both my hands and my right lower arm, so that school visiting was out for me.

With the help of Mrs. Vollmar (of the Bavarian Pfennigparade) and my parents as well as from many open minded people and officials I got to work at home preparing myself for the leaving examinations according to the requirements set out for pupils of the Munich evening high school, which in principal is meant for scholars who are working during day time.

After four years I passed my final exams with marks entitling me to receive free scholarship at the university. All this was done at home. But also my university training has been carefully selected with little attendance at lectures and with much private tuition. My university studies comprise Slavonic languages and history of art. Thanks to government grants we were able to buy a V.W. With this car my mother takes me to the university. She lifts me to my wheelchair and accompanies me to the lecture-rooms. It's my personal chance that my parents judge it to be their task of life to arrange for best training and professional prospects for their daughter.

It may be said that experience proves people suffering from bodily restrictions to show very often more willingness and ability for intellectual occupation; so for instance a polio-child which for a long period experiences physical restrictions, suddenly acquires interest and readiness to get active whenever it finds possibilities where it can use faculties available to him. Bodily restricted children who get the possibilities for a profound and good education are less diverted and have better concentration and intensity. This was observed by Mrs. Vollmar and also by me during five years in the hospital.

Everyone must see his own chances, if he wants to be successful. So I think that either the case of Adolf Ratzka (TjG 1966) or my own could be used as a valid example for all. We could only describe our own situation, both of which are only some of the great masses of opportunities open for everybody, looking for them.
EDUCATION ABROAD

The following letter from John Hessler was dated 8 March 1969. The address on the back of the envelope: 81 rue du Plessis, St. Leu-la-Forêt, Val d'Oise, France. John, who has been a C5-6 quad since he was 16, was featured in the 1967 TjG on pages 42-43. He and Ed Roberts, a respiratory polio quad, were the first two severely disabled students admitted to the University of California, Berkeley, and dormtoried in the student hospital.

"I am in France for a year while I study for my Master of Arts degree. I arrived last September. Among other things I proved a 'cripple' can spend 16 hours in a jet plane, drive across England, cross the channel by ferry and drive to Paris non-stop! I sat up over 24 hours without one bruise. I owe it all to my silicon pad.

"Traveling here was easy compared to the year of preparation it took. I had to get permission from Welfare and Voc. Rehab., plus extra money from Education Abroad at Cal. I am an independent student who is enrolled at Cal while I go to school here. It's a very nice arrangement.

"I was told before I came that the French people hated handicapped type persons. This is a lot of bull. The French are very kind and generous toward me.

"Another problem I was warned about, and some thought was reason not to go, was cobble stone streets! Most of the Paris streets are flat brick and no hindrance. They have paved streets and even a couple of freeways.

"There are a few problems with buildings. Most of the old ones have stairs, lots of them. But there are a lot with elevators too. The school I go to, 'Alliance Francaise,' has a new building with elevators, large and comfortable.

"I've been about as healthy here as I was in California, which is to say good but not great. So far I haven't had anything that would send me to the hospital. If something does though we have the American Hospital in Paris which is supposedly the best in Europe. Nationalistic pride aside, they do seem to be efficient and modern."

INTERNATIONAL STUDENT AFFAIRS CLUB. A non-profit organization. Activities include: exchange-visitor programs and a news digest. Write: ISAC, 2 West 13 Street, New York, N.Y. 10011.

EDUCATIONAL TRAVEL. The United States National Student Association, 70 Fifth Avenue, New York, N.Y. 10011. Free list of exciting publications.


GROUPEMENT DES INTELLECTUELS HANDICAPÉS PHYSIQUES, 54 - Vandevuere, Nancy, Meurthe et Moselle, France. This organization will assist with accommodations and facilities in France for schools and summer camps. It would like information about facilities for French physically handicapped students in other countries. Details and bimonthly publication available upon request.
EDUCATION U.S.A.

CAMPUS COMMITMENT NEEDED. The following cogent remarks are excerpted from an article by Tim Gust, Ph.D., University of Pittsburgh, in the January 1969 issue of Performance (President's Committee on Employment of the Handicapped, Washington, D.C. 20210. Free).

"Confronting American colleges and universities today is the necessity to eliminate architectural, attitudinal, and administrative barriers to handicapped college students. Most formidable among these is the attitudinal barrier.

...A severely handicapped person has been described as one who cannot be rehabilitated through the usual procedures and facilities established for general community use, but who requires additional specialized facilities and a combination of services over an extended period of time.

..."Approximately 10 percent of the general population (outside of institutions) have some type of physical, mental, or health handicap. Approximately one out of every ten known handicap is severe.

"Based on current estimates, this means that the college-age population will be about 14 million in 1970. Approximately 7 million will graduate from high school, and roughly 2.3 million will have college potential and will go on to college.

"Two hundred and thirty-five thousand will have some type of handicap and approximately 23,500 will be severely handicapped.

"What are the expected resources available to these 23,500 severely handicapped students? Of the more than 2,000 U.S. colleges and universities, there are fewer than 300 to which the physically handicapped can presently apply, and barely more than a handful of these meet minimum requirements necessary to accommodate handicapped students.

..."Freedom of appropriate choice should be available to all students, commensurate with their interest and ability, to the greatest extent possible. Planned access to higher education can make this possible."

WRIGHT STATE UNIVERSITY. The same issue of Performance described the exciting developments for handicapped students at this new university in Dayton, Ohio. In 1968-1969 there were 107 handicapped students enrolled. Their handicaps ranged from quadriplegia to emotional breakdowns.

These special facilities for the handicapped were designed to be part of the basic architecture. All buildings are accessible by lead-in ramps to the main building, contain elevators, are air conditioned, and are connected by an extensive system of pedestrian tunnels. The parking lot has a special area designed and identified for handicapped students. Two dormitories are being architecturally designed to include housing units for handicapped students and are expected to be completed in 1970.

Various types of assistance have been developed for the handicapped students. This work is coordinated in the Counseling Service, but is all done on a volunteer basis by other students.

These services include: readers who tape text-
books for blind students; walkers who assist new students around the campus and through the canteen; writers who assist those who have coordination problems; proctors and readers for tests; advanced students who provide academic assistance and review; drivers who provide transportation; and tapers of class lectures for those who have to be absent for a length of time.

For more information, write to: Mrs. Elenore Koch, University Counseling Service, Wright State University, Dayton, Ohio 45431.

UNIVERSITY OF MISSOURI. Modifications of campus, buildings and buses for wheelchaired students and the services, such as counseling and therapy, are reported in the following VRA supported publication: Preparing Higher Education Facilities for Handicapped Students. For information on its availability write: John D. Collier, Coordinator, Area of the Crippled and Health Impaired, Department of Special Education, 515 S. Sixth St., Columbia, Missouri 65201.

Mr. Collier advised that his department would have a number of master's level fellowships and undergraduate traineeships available to highly qualified individuals in 1969-1970.

The community of Columbia has received partial funding for a large residential complex which will be designed for handicapped individuals and located adjacent to the University campus. Tentative plans are that this complex will be utilized by handicapped students, especially those who are married, persons from the community, clients of the community workshop, etc.

REHABILITATION SERVICES ADMINISTRATION brochure lists 189 colleges adapted for those who are wheelchaired or who have braces or crutches. Titled, Mobility for Handicapped Students, it will be sent free by the RSA, Social and Rehabilitation Service, U.S. Department of Health, Education, and Welfare, Washington, D.C. 20201.

CENTRAL CONNECTICUT STATE COLLEGE. This state-operated liberal arts college has initiated a unique program through which any academically qualified handicapped resident of Memorial Hospital may attend classes tuition free.
ST. ANDREWS PRESBYTERIAN COLLEGE. This four-year liberal arts college in North Carolina has been constructed so that a handicapped student can move over the entire campus under his own power. The total enrollment in 1968-1969 was about 900. There were 16 in wheelchairs and about 20 others with vision or ambulatory problems.

Robert M. Urie, Rehabilitation Services Director (right and below, right)...."We treat the handicapped differently only when necessary. For the first time, on this campus, the handicapped person has lost his identity as such. Some thrive on it, others feel threatened that they can no longer get any mileage from their handicap...."

"...While we have a few students at the quad level or others who require adult attendant care, we are not accepting further applications. We hope to build a new health center in a few years which will help in this area...."
An adaptive educational course offers individual and group programs of development in swimming, bowling, pool, weight lifting, etc. A driver's training course has recently evolved, using a specially equipped car.

All 25 of the major programs at St. Andrews offer intensive studies under the 4-1-4 system. This approach allows concentrated work in one field for a one-month period during the winter between the fall and spring terms.

With support from the federal Social and Rehabilitation Service and private foundations, the expenses for student aides are borne by the college. Assistance is given in the form of roommate-aides and other services such as handling cafeteria trays and pushing wheelchairs. Trained adult attendants are available for bathing, bathroom and dressing at a weekly cost of $20.

For information, write: Robert M. Urie, Rehabilitation Services Director, St. Andrews Presbyterian College, Laurinburg, N.C., 28352.
U. OF CALIFORNIA AT RIVERSIDE by Bruce Hillam.
Two years ago there appeared an article in TjG about my adventures as an undergraduate at UCR, and the reasons a person in a wheelchair should consider it. Since then I have received my B.A. degree and this June I will receive my M.A. in Mathematics. I plan to continue working for my Ph.D. here. This article is intended to report on some of the new developments at UCR that are of interest to prospective wheelchair students.

It is expected that on July 1 Joel Bryan, a quad who now works in the Financial Aid-Placement Center, will be named Assistant Dean of Students for Special Services. Mr. Bryan graduated from UCR and is thoroughly familiar with the campus. One of Mr. Bryan's main responsibilities will be to provide and to co-ordinate services for the handicapped students on campus. This might mean helping an entering student to find an attendant, or giving the continuing student a direct line to the administration, or just someone to talk to who understands the problem of the handicapped student.

This year the Student Health Service also expanded the services it offers to the handicapped student. A new wing to the Student Health Center has just been completed which features two rooms with electric beds, a lift, and bathroom and shower facilities especially designed for a student in a wheelchair. In addition the Health Service has recognized the fact that a wheelchair student has many more specialized needs than an ordinary student. To this end they now require that all entering students in wheelchairs furnish them with a medical summary in advance. Upon arrival they will arrange for you to meet with several specialists, usually urologists or internists, from the Riverside area. You are then asked to pick one of these doctors, who is now familiar with your particular problems, to be your "personal physician" while attending UCR. The Health Service will also send periodic reports back to your doctor if requested to do so. All of this is in addition to the normal services offered by the Student Health Service, and all of this comes under the standard compulsory student health insurance policy.

There are now two committees of students and administrators on campus that affect the handicapped. The first is the Committee on Facilities for the Physically Handicapped, which makes suggestions on how to make the campus more accessible. The second is the Vice Chancellor's Committee on Administrative Affairs, upon which both Mr. Bryan and myself currently serve, which makes recommendations in many areas including the Health Service and the Campus Architect's Office. Largely through the efforts of these two committees, and the Dean of Students, Dr. Better, the Campus Architect has a complete list of specifications for all new construction on campus with regard to accessibility of the handicapped, the idea being that it is easier, and cheaper, to prevent bloopers than to correct them.

Finally, several departments on campus are trying to help the handicapped student. The Computer Center now has modified a remote terminal to the computer so that anyone who can type with an electric typewriter from his wheelchair can now program the computer. The Library also offers specialized services. In addition the campus maintenance shop will repair wheelchairs when the need arises, any time, any day.

If any TjG reader has any questions on how he could fit into life at UCR, or what UCR can do for him, just write to Mr. Joel Bryan, Office of
the Dean of Students, University of California, Riverside, California 92502, or to me, Bruce Hillam, 640 Linden Street, Riverside, California 92507. We will both be glad to do anything we can. (Editor: Bruce is a C5-6 quad.)

I believe that for these and other reasons, UCR in general, and the Office of the Dean of Students in particular, has made a substantial commitment to the physically handicapped student at UCR.

CORRESPONDENCE COURSES. 65 accredited colleges and universities offer correspondence courses for graduation — some toward graduate degrees — and most are liberalizing their "on campus" minimums for a fully accredited degree. Send 50¢ for Correspondence Study in Colleges and Universities to: National University Extension Association, 900 Silver Spring Ave., Silver Spring, Maryland 20910.

SOUTHWEST STATE COLLEGE at Marshall, Minnesota, a new college, was designed without barriers.

UNIVERSITY OF WISCONSIN has extensively modified its campus for wheelchaired students.

CEREBRAL PALSYED COLLEGE STUDENTS...their education and employment is a comprehensive study of value to both students and counselors. The authors estimate about 50,000 persons with cerebral palsy have the potential for college work. Free. Request from: CPCS Study, United Cerebral Palsy Assoc., Inc., 66 E. 34 St., New York, NY 10016.

Ed Roberts, a student of political science at the University of California at Berkeley flew to Washington, D.C. in March at the request of the U.S. Bureau of Higher Education. He was asked to help its staff draw guidelines for helping other handicapped persons to attend college. ..."Unnecessary steps and narrow doors deny us an education just as effectively as lack of money...." Ed used a portable respirator during the flight and borrowed an iron lung for his two day stay. He expects to get his doctorate next year. After that, he plans to teach at the university level. (TJG, 1967, pp.42-43.)
I live with my grandmother who is no longer physically able to take complete care of me. I work at home, but spend a great deal of my time away - swimming, sunning, shopping, viewing, visiting and enjoying!

In the course of these nomadic meanderings, I've had many "moving" experiences: once when I fell off a raft into the Atlantic Ocean; once when I flipped head over heels from the back of a station wagon to its front seat; once on a merry-go-round at midnight in March; and once when Harry Belafonte talked with me after a fantastically exciting performance! All were unique and none traumatic to anything but my emotions.

I am quite dependent on others for all my physical needs and so, such mobility has been made possible only by creative thinking in terms of employment - that is, how I employ myself and others.
I have a very small income which just allows me to exist. Any extras, such as help for my care, outside activities, transportation and entertaining must come from other sources. Over the years I have done abstracting, stenotype transcription, sold magazines and cards, and held a number of telephone jobs. Though I still do have a small magazine and card business, the telephone has proved the most successful source of income.

Using the telephone I am employed by two companies - one, Ward North American Van Lines for whom I am a sales representative and the other, Lynch Transcription Service, for whom I do coordinating and monitoring of TV commercials. In order to work I am "set up" with appropriate pillows (7!), push-button phone, book rack, papers, and iced tea, as shown in the accompanying photo.

On an average weekday a woman from Cleveland Homemakers (see page 82) arrives at 8:30. She takes care of such mundane matters as rousing me from my iron lung, taking care of my bath, hair, clothes, and room, and such extra-curricular activities as letters, picture hanging, and plant watering. She is with me until noon five days a week.

On the weekends I have live-in help which I pay for myself, as well as a once-in-awhile-driver who may take me shopping, to the eye doctor, etc. when a friend isn't available. I have advertised in the paper for such help, but have had the best luck with local colleges, high schools, and churches - you simply call and have your job posted on their bulletin board or in their newspaper.

Other community services I use periodically are the Visiting Nurse Association, Highland View Hospital Dental Home Care, and the Homebound Division of the Public Library.

It is, however, friends who in the long run make the difference. One friend, a hair stylist, cuts my hair at home. Others sew for me. Others, artists, have decorated my apartment at Christmas time for many years. Others have painted new furniture, put together shelves, and built my ramp.

I have gained a degree of independence I once thought impossible and now I know it can be still greater. With all rehabilitation, inside and out of the hospital, it is the way the many parts are put together that makes the whole thing work. If a problem has so far remained unanswered by the obvious solutions, turn it over and look on the other side. Creativity does not begin and end with painting, cooking, and flower arranging. It begins and ends with living.

Address: 15985 Nelacrest Drive, East Cleveland, Ohio 44112.
Mickie McGraw is the director of the Art Studio at Highland View Hospital in Cleveland, Ohio. The idea of a studio in a hospital grew out of a conversation with Dr. George Streeter the summer Mickie had a job in the hospital's Photography and Design Department.

"We felt there needed to be a place unrelated to therapy and unstructured in format with an emphasis on the person and his painting or idea, not the patient and his hospitalization." The Studio, is, in fact, a non-profit organization financially independent of the hospital and wholly supported by contributions.

In June of 1967, Mickie and Dr. Streeter's daughter, Sue, directed the furnishing and equipping of a former storeroom, which is now the Art Studio. A highly flexible arrangement of studio equipment was necessary, since many of the patients are on carts, beds, and wheelchairs.

The Studio is open Tuesday through Saturday, usually from noon until 8 pm. During a day, Mickie is called upon to perform in a variety of roles. Instruction is on a one-to-one basis, since there are no formal "classes" as such. This is necessary because often the patient may need some form of adaptive device to control the media. The problems encountered are, therefore, unique to him. It is also a very personal and direct method of teaching, more immediate to the "student" and the instructor. Mickie holds a Bachelor of Fine Arts Degree from the Cleveland Institute of Art, with major work done in Graphic Design. "Because of my background, work so far has been primarily two-dimensional - that is, painting, drawing, print making. However, we hope to expand and are taking steps in this direction."

The work completed during the course of the year is eligible for the Annual Art Studio Exhibition held in mid-July. This exhibition of the patients' work is open to the community and helps promote further awareness of the Studio. The Art Studio is in charge of rotating displays within the hospital, chiefly in the new Patient Lounge, and has also exhibited a few times outside of the hospital.

In cooperation with Patient Recreation, the Studio has also produced a number of shows. One especially well-received endeavor, called The Electric Follies, was held over for three performances. Occasionally the Studio will sponsor a frivolous venture, as witnessed by the Graffiti Un-contest. The walls outside the Studio were covered with white cardboard with pencils conveniently nearby. Thus the world at large was free to do its thing, quite literally. Amongst the gems found after a few weeks was the legend, "Mickie is a mouse's name!"
Art Studio - Yesterday and Today

Dr. George Streeter
Chief of Psychiatry, HVH

Art Studio Exhibition - 1968

Director Mickie McGraw (polio quad)

Descriptive brochure on request: Art Studio/Highland View Hospital/3901 Ireland Dr./Cleveland, Ohio 44122
Tricks or treats came early for me in that Halloween day in 1955. I was treated to a fast ride to Yakima and found I had tricked my way into hospitals for the next nine months.

It was simple, I couldn't swallow. Diagnosis — Bulbar Polio with complications. First came a fast tracheotomy, which I still have, followed three days later by the iron lung that became my cocoon for the better part of two months.

Eating was only a minor problem once I got the hang of the gastrostomy (a tube directly into the stomach). It surely beats a Levine tube and it served me well for four years while I returned to public school, took part in 4-H club activities, and traveled to statewide conferences with my school clubs.

The swallowing barrier was overcome by a combination of experimental surgery (1957) and therapeutic treatment at Sister Kenny Institute in Minneapolis. There I learned the helpful technique I still employ to assist my swallowing muscles. The actual muscle build up took two more years before I finally took the plunge and was on my own. In my senior year, I eliminated the gastrostomy and my long leg brace.

1964 brought another commencement and with it a B.A. in Economics from the University of Puget Sound. My county rehabilitation officer gave me as much moral support as financial assistance.

My occasional bouts with pneumonia interrupted my studies, but I received my Master of Librarianship degree at the University of Washington in June of 1966 and was elected to Beta Phi Mu, an international Library Science honorary.

But honors are passing and soon I became deeply involved in good hard work establishing a new Library-Resource Center in the Junior High School in Granger, Washington.

It is a gratifying job, one which is beset with continuing challenge and regular frustration, as well as tremendous satisfaction. Supervising and training a staff of fifty seventh and eighth grade students each semester to help operate the library is no mean task. We utilize all manner of materials from conventional hardcover books and the ubiquitous paperbacks to 8 mm film loops, 35 mm filmstrips and longplay disc recordings, to name a few.
"Tape recording reports requires uninterrupted concentration."

"Students come from classes or study halls to do reference work, independent projects or leisure reading. Magazines from among our 75 different current titles are high among student preferences."

"For independent projects, such as this enlarged human skeleton poster, the library provides the equipment and reference materials. The students provide the interest, enthusiasm, time, and effort."

"Our heavily used filmstrip collection is stored within easy reach of both student and teacher."

"Humor is a part of the daily life of GJH students."

"Clipping and mounting newspaper articles on current topics for the class research projects is one job of the student staff members."
Several years ago, I read an article in the TOOMEY GAZETTE relating to home-based businesses. At that time I was attending Millikin University, here in Decatur, on a part-time basis. As I read the article, I noticed that several disabled set up their insurance businesses in their homes. I then decided to take a correspondence course in insurance from the Aetna Fire Insurance Company, to prepare myself for a home-based business. After taking the course and studying the manual for examination, I took the required exam and acquired a general broker's license.

With the help of two of the local agencies where I broker my business, I started my insurance work and have been selling casualty insurance for four years. I am now taking a life insurance course from Research and Review Service to enable myself to be better informed and prepared.

Most of my work is done via specially-made telephone. On occasion some people do drop by to drive me, I go to the prospect's home. This is very seldom, though. My main working tool is my telephone, and I call prospects between 3 and 5 P.M., and between 7 and 9 P.M. I utilize several channels. I call upon Newcomers to Decatur from lists sent to me by the Chamber of Commerce, different civic organization lists, and friends and acquaintances. When I sell a Policy, I call one of the agents and give him the needed information for the order. Since I am unable to do much of the paper work, the agency does this for me. I have a file system here in my home where records, applications, and other information are kept. When I call a prospect, the needed information for rating is relayed to the person who helps me, and he writes the information on a work sheet. I operate on a commission basis, but some day I hope to be employed by one of the
insurance firms.
I advertise my insurance business with wall calendars, big number telephone dial rings, and a sign board on the back of my Greenbrier wagon. As many of you are aware, the insurance business is an extremely competitive one. If I could have sold half of the "no"'s in the last four years, I would now be living on "easy street." Over the years, however, my clientele has steadily grown, and I feel privileged to serve my clients and to make their acquaintances.
I hope this article has been helpful, and if any of you who are now in business should have any suggestions, I would appreciate your writing me. Likewise, if any of you should have any questions about my business, please feel free to write. Tom Taylor, 98 N. Country Club Road, Decatur, Illinois 62521

CIVIL SERVICE MATHEMATICIAN
by Ronald O. Pennslyle
I am a polio quad with the use of my left hand and a ball-bearing feeder on my electric wheelchair. I was stricken in 1959, a few weeks after completing my sophomore year in chemical engineering at North Carolina State University. After missing three semesters of school, my mother and I moved to Raleigh, where, with the indispensable aid of my Phi Kappa Tau fraternity brothers, I returned to State to complete in three years my degree in chemical engineering and a graduate degree, M.A.M., in applied mathematics.

I am now a mathematician at the U.S. Army's Edgewood Arsenal in Maryland. My mother and I live in a two-bedroom apartment 8 miles from the arsenal. She drives me to and from work in a Ford Wagon (Econoline) with a raised roof and a set of lightweight ramps. She takes care of me, dressing me, etc., since I can do very little physically.

At work I require no special assistance other than having someone hand me a book that is out of reach or pour me a cup of coffee at lunch. I have had no difficulties at all in performing my duties as a Civil Service mathematician.

I HIGHLY RECOMMEND TO OTHER HANDICAPPED PROFESSIONALS THAT THEY CONSIDER THE GOVERNMENT AS A PROSPECTIVE EMPLOYER. THE GROUP LIFE AND HEALTH INSURANCE PLANS HAVE BEEN A GREAT SOURCE OF SECURITY TO US.
Address: 331-Al Trimble Rd., Joppa, MD 21085
A pilot program to train disabled people for careers as computer-programmers was begun in the fall of 1967 at Texas Institute for Rehabilitation & Research in Houston. Donald Rossi (l), an ex-patient (respiratory polio quad) who is a programmer in Baylor's Biomath Department, was the instructor of the first trainees, Joe Villereal and Robert Vaughn (r).

"I am a C-5 quad as the result of a diving accident in 1961. I write with the aid of a CO₂ splint on my left hand. In 1965, I was able to take a course in programming offered by IBM through the Kenny Rehabilitation Institute in Minneapolis, Minnesota. In 1967 we made our big move to the West Coast... I prefer to do my work at home, because my sitting is limited to 4 to 6 hours at a time... I enjoy programming since it is something I can do by myself." Roger Nelson, Rt. 2, Box 602, Battle Ground, Washington 98604
Jack Schmitt, a quad, was placed in 3M's CBSA program by his local vocational rehabilitation office... "I have done much copying for tax forms and engineering drawings. In the statement service field, I do an account for a drug store and a contractor. We also do some bookkeeping work along with the statement services. I do a great deal of gummed labels. Both my wife and I do a great deal of typing. I am on the board of directors for the Jaycees, an active member of the Chamber of Commerce. We feel it is very important to the success of any business to become active and interested in your community." 1564 Kildare Way, Pinole, California 94564

"I started working for Trendex (285 Riverside Ave., Westport, Conn. 06880) after answering an ad in our local paper... the work varies as does the time. We do some television and radio surveys, but most of the work has to do with various products. We are paid $1.75 an hour. The only requirements are the ability to be able to speak on the phone and write at a reasonable rate at the same time." Mary Ellen Lillis, 1242 Rutledge St., Cincinnati, Ohio 45205

Bedridden for 36 years since several of her vertebrae were crushed in an automobile accident, Miss Lucy O'Rourke has been a police dispatcher on a 24-hour basis for 12 years. She also has a phone for a funeral home and the fire department and one over which she sells cosmetics. 111 E. 112th St., Ellis, Kansas 67637
Sitting at his desk, as police and fire dispatcher for the city of Solon, Ohio, Larry Doubrava can look back at the last 2½ years as a period that began in a nightmare and evolved into a dream. "If it hadn't been for the people of Solon," says Larry, "I wouldn't be here in my own home, and I wouldn't be working now. They are just great — wonderful."

Larry's nightmare began July 3, 1966. A boating outing that started out to be a carefree and happy beginning of the July 4th holiday weekend suddenly turned into a tragic horror for the then 25 year old Larry, his family and his friends, when Larry, in a backwards dive off the boat, suffered a high spinal cord injury. Doctors at Suburban hospital, where Larry was taken after the accident, offered a grim prognosis — as a result of a C-7 spinal cord lesion, he would suffer permanent and total paralysis of his lower extremities but would regain good use of his upper extremities. This gloomy forecast hung like a pall over the Doubrava family, for the future of the young Solon fireman, his wife, Jeanne, and their two young daughters, Kathleen, 5, and Cheryl, almost 2, hung precariously in the realm of uncertainty.

News of Larry's accident was reported in the local newspaper, The Chagrin Valley Herald, and almost immediately, the people of Solon began to react with compassion and concern. Phone calls to the Herald and the Fire Department from caring neighbors who wanted to do something to help came pouring in. Larry's plight had touched the hearts of the people in his community, and they...
wanted to be of service to this young fireman who had served them in the past. This overwhelming spontaneous community response to Larry's tragic accident prompted the Herald to establish the Herald-Doubrava Fund, to be administered by a 9-member board of trustees made up of leading citizens of the community. Through the Fund, the Herald would be able to channel and direct all contributions to their most constructive end and would be able to encourage fund-raising projects by clubs and organizations within the community.

Two weeks after Larry's accident, the Herald announced the establishment of the Fund, and every week thereafter until the end of the year, Larry's cause became the Herald's cause, and through the Herald the cause of the people of Solon and its nearby communities. His progress was reported with frankness and honesty and with no tear-stained prose. Also recorded were Larry's reactions to the generous spirit of his neighbors. "I couldn't believe what was happening!" says Larry. "I thought we were alone in this thing, and all of a sudden, old friends, new friends, people I didn't even know were with me. I never realized people were so great. It really gave us all a lift. My worries over the hospital bills and where my next rent payment would come from could not be replaced with my most important concern—getting well enough to go home."

Throughout the summer, contributions came into the Herald-Doubrava Fund in varying amounts from individuals all over the community. Scout troops collected donations from shoppers at the local shopping centers on pre-publicized weekends. Children throughout the community had backyard carnivals to raise pennies, nickles, and dimes that would boost the Fund by dollars. A local dog breeder pledged the proceeds of the sale of one of its AKC registered puppies to aid the Fund. Local commercial and industrial firms and clubs and community organizations donated generous amounts.

To boost the Fund, community activities, which had already been planned, were redirected for Larry's benefit. The Recreation Department's Family Day Picnic featured a Blooper League baseball game during which refreshments were sold. The proceeds of these sales together with the proceeds of the sale of children's craft items in a special Fund booth were donated to the Fund. The annual Solon Fireman's Clambake was dedicated to the Doubrava Fund, and to enhance its effectiveness, Fire Departments from two nearby communities joined forces with the Solon Department to make this clambake the largest and most profitable ever. This concerted action, together with generous food donations by local firms, resulted in $3,500 attendance at the clambake and a profit of $4,143.20 to be added to the growing Fund, which now had been boosted to $9,179.21.

As the summer drew to a close, donations to the Fund began to level off to trickle proportions; however, two more big fund-raising affairs were in the planning stages, and these promised to boost the Fund considerably. The Solon Kiwanians and their wives planned a dinner dance, "A Night in Italy," to be held in mid-November, and the Solon Jaycettes planned to contribute 50% of the proceeds of their annual Christmas-item sale to the Fund. Added to the increased individual donations to the Fund during Christmas, these two fund-raising projects brought the Fund total to $13,545.03.

Two years after Larry's paralyzing accident—the people of Solon having responded generously
both spiritually and financially — the Herald-
Doubrava Fund was officially disbanded and its
moneys finally disbursed. The greater part of
the Fund went to hospital and medical bills, and
the remainder was used to establish a trust fund
for the two Doubrava children and to cover pres-
ent and future incidental expenses. The Fund had
accomplished its purpose.

Larry was home from the hospital and back with
his family again. He had regained good use of
his upper extremities, but, as predicted, his
lower extremities were totally paralyzed. "I
never would have made it this far without the
support of these great people," says Larry.

Support and help from the people of Solon,
however, did not end with the disbandment of the
Doubrava Fund. Since Larry was able to use his
hands and arms, they returned him to the ranks
of productive citizenship by hiring him as their
Police and Fire Dispatcher. Says Larry, who
works six days a week from 8 a.m. to 4 p.m.,
"Although no special adaptions had to be made
for me to operate the equipment at the police-
Fire Station, the set up seems tailor-made for
me. I can operate all of the equipment with no
problem at all. As a matter of fact, the only
thing I can point to as even resembling a prob-
lem is that I can't get under the desk all the
way. So you see, I'm in great shape."

Thanks to the educated hearts of the people in
his community, Larry is financially solvent,
working, and looking ahead to plans for the fu-
ture. Larry muses, "I think I'd like to start
driving again. It'll take some of the burden off
my wife and give me a feeling of independence."

Larry can muse over his future with relaxed
anticipation because he lived in "A Community
That Cared!"
Just over four years ago, in February 1964, I was paralysed when my spine was fractured and my neck dislocated in a car crash. My husband, who was driving, was killed. I was taken almost immediately to Stoke Mandeville Hospital, where I spent ten months being rehabilitated. I was fortunate to recover the use of my right hand very quickly and am now completely paralysed from the chest down, with a partially-affected left hand.

There are obviously many advantages to a paraplegic in going to a Spinal Unit rather than to a General Hospital. The correct treatment is sure to be given from the start - I was thus able to avoid contractures and pressure sores, and to get up and begin rehabilitation proper as soon as my fracture site was stable. Since all patients remain in a Spinal Unit for a considerable time, they get to know each other pretty well and consequently can be of real help. There is very much a family atmosphere at Stoke which is invaluable to a paraplegic who will probably spend from six to nine months there. Wherever possible, every patient's questions are answered and his problems fully discussed with him. The advantages of being surrounded by other paraplegics are enormous: more advanced patients of a similar lesion set a target to aim for, perhaps to surpass; and a new lesion will probably learn more about the best method of getting in and out of bed, for example, from another paraplegic in the same boat as himself than from an able-bodied physiotherapist, however understanding she may be.

Off-duty nurses and physios will take patients shopping or to the cinema, which helps to prevent them from becoming too hospitalised and out of touch with society. I was surprised to find that nobody turned round to stare at me, and thought that maybe this was because a wheelchair was a common sight in Aylesbury, but I have since found that few people pay much attention to a wheelchair - unless they happen to catch their ankles on the footplates! The only difficulty I had was in trying to decide what expression to assume when parked outside a shop surrounded by goggling babies in push chairs. I still have not found the answer!

Patients are encouraged to go home for weekends while they are still at Stoke, which is an excellent plan, as it not only paves the way for the paraplegic's re-entry into society, but also allows the new lesion to check on any proposed plan...
alterations to his home, such as ramps, widened doors, etc., and to work out methods of manoeuvring in and out of bed, on and off the toilet. Also, to try cooking or doing the housework.

All together the rehabilitation at Stoke is pretty thorough, from both the physical and psychological aspects, and I left in December 1964 thinking that I was completely rehabilitated. But as you know, rehabilitation never ends. The newly-disabled person is in a similar position to the motorist, who on discarding his L-plates, thinks that he knows all there is to know about driving, and subsequently finds that he will continue to learn for the rest of his driving life. It may be a series of small incidents or some major happening - perhaps months or even years after disablement - that suddenly makes a person realise that he is not really rehabilitated to the full. It is only right that the world should be geared to the able-bodied population, but inevitably it creates barriers for the disabled minority. I think, however, that it is perhaps not so much the obvious obstacle - such as the inability to join in certain activities with able-bodied friends - that causes the real problems, but rather the insidious temptation to use one's disability not as an excuse (that would be too simple) but as a smoke-screen for one's shortcomings: it is far easier and in a sense less humiliating to blame one's disability for the loss of a job or of a friend rather than face the fact that the cause might simply be inefficiency, bad breath or bad temper.

While I was in Stoke, my three children lived with my parents, and on discharge I joined them until I could find a suitable bungalow for us. As there were many steps, I could not do much in the way of helping in the house or with the children, so I concentrated on learning to drive a car, doing a bit of physio, and some sport.

I became very interested in sport while I was at Stoke, although I was never exactly a sporting type in my able-bodied days! It is however, especially important for a paraplegic to keep fit and active and through sport one can get out and meet people and make new friends, which is essential for many people who have to start their disabled life in a new district, owing to the unsuitability of their previous homes. Sport is also a good means of demonstrating that people in wheelchairs are not necessarily senile.

My children were young enough to accept my disablement quite naturally. At the time of the accident Miranda was three-and-a-half, Caspar just two, and Catriona three months old. Miranda was old enough to be affected by her father's death and the fact that I was away from home for nearly a year, but not I think by my being paralysed. A child will accept with ease things which an adult will refuse to; a child understands your need to do things for yourself, however slowly and badly - perhaps because he is still at the same stage himself. The children would come and see me while I was in Stoke and I saw them at home at week-ends, so with Miranda and Caspar there were no special problems, but I did find it took a long time to get to know Catriona, who had been so small at the time of the accident.

I was lucky to find a bungalow big enough to house us all, with a large garden which did not need many alterations. We finally moved in about eighteen months after I left Stoke. It was marvelous to have a home of my own again, and to be able to get around it without help. I found, however, that I was very slow at things like cook-
ing (it was the mental effort rather than the physical difficulty that was so great!) and I am very grateful to have had that interim period at my parents' house.

Half the bungalow has a second storey which I turned into a small flat for an Irish couple who help with the house and garden, while the children, our nanny, a crazy dachshund named Willy, and myself, moved into the lower part. Considering that it was not built with a wheelchair in mind, the house is very convenient, although there are some corners which take a bit of manœuvreing and two of the bedrooms are very small. Since I have so much help in the house there are not really any problems, but I should adapt it further if I were on my own. The one room that was altered entirely to suit me was the kitchen.

The children settled in rapidly both at home and at their new schools and after a bit of disciplining became much less spoilt and happier in themselves. After chasing them once or twice when trying to smack them, I said that if they tried to run away they would, when I eventually caught up with them, get a far harder slap than if I were allowed to deliver it at once! This still works at present. In fact a gentle smack that half misses is enough to excite yells of indignation. I am a little stricter than I should be by inclination, firstly because I have no husband to deal with a particularly truculent child, and secondly because, being in a wheelchair, I cannot allow things to get to a pitch where a show of strength is needed. But I am not particularly strict by any standards.

It was simply by chance that we came to live near Maidenhead -- the bungalow was the only one remotely suitable -- but I quickly discovered that it was a good choice. People were very friendly and helpful from the moment we arrived. And the neighbouring towns are flat and easy for shopping; some of them have kerbs that slope down at crossings. I find that people are very willing to help if asked but rarely offer, partly because they lack confidence and partly because they think you want to be independent. There is the occasional keen helper who breezes up, heaves your chair into the car and, waving aside supposed thanks, dashes away before you can explain that you had in fact, just got the chair out of the car! But in general, passers-by are very thoughtful. I know a couple -- both in chairs -- who, during the Paralympics in Rome, had the greatest difficulty crossing the street, since every time they went backwards down a pavement, several helpful Italians rushed up and pushed them up again!

In the shops themselves, people are obliging and exercise endless patience while I try to decide if shoes I cannot feel fit me. Sometimes assistants will go to the extent of coming from another counter to serve me. These occasions far outnumber the times I have been stuck for ten minutes in front of Woolworth's too-high counters waving for attention.

At present I do not have a job, although I should like one when the children are a little older. Mental activity seems to speed one up physically and less time is wasted on the dull everyday manoeuvres which disablement entails. And it is especially necessary for a disabled person to feel that he is pulling his weight in the able-bodied world. Disablement can provide an insight into some of life's problems, or it can do the reverse and utterly blunt perception. It is up to the individual to turn it into a handicap or an asset.
"I was introduced to TjG when I first got the Possum over 4 years ago. I did not contact you then because I wanted to have something to stand on before looking further afield. I also wanted to be able, however limited my capability, to ask you: "In what ways can I help?"

"The TjG has established a reputation for itself in the world of the handicapped. I have heard it mentioned from the most unexpected sources. In this region, those who know look out eagerly for old copies. There are many severely handicapped persons in Singapore and Malaysia. Most of the paraplegics and quadriplegics are young people. You will no doubt agree that initial treatment for these people is one thing, and later rehabilitation another. But neither, especially the latter, can be very successful unless from the start their minds are being subjected to positive examples of hope, courage and triumphs over disabilities. Had I been exposed to such preventive psychological readjustment, I
would have saved myself years of despair and years of groping in the darkness of ignorance. I have seen many whose minds have sealed hermetically and lapsed into hopeless indifference.

"I believe that the TjG is best suited to this purpose. I have some friends in mind who will like to subscribe. I shall find out and compile a list of those interested. But, first, I have to let them know that there are certain voluntary responsibilities if not obligations.

"You said that you are interested to know my ideas for improving rehabilitation in Singapore. I will discuss them in more specific details and perhaps seek your advice on certain matters in future correspondence. Before any idea, however brilliant, can be translated into actions, much less to harvest the practical results, one has to find a group of like-minded, dedicated persons willing to act in concert. I have some ideas, some original, some gathered from publications and some learnt while attending the 4th Pan Pacific Rehabilitation Conference. Right now, I can do nothing more than mere words for which I cannot find a medium of publication except a Chinese and English newspaper. None other in TjG's category exists. Newspapers being what they are, publish items or events of news interest.

"I have the will but I have not the means. There are no attendants in the wards. The only male workers are the gardeners, electricians, boiler-man and driver. To get into the wheelchair I have to round up a couple of them to help me. The nurses, being typical Asians, would collapse if they tried to lift me. You see, my size unfortunately conforms to American standards. I was proud of it. Now it is quite a burden! I can only get up at specific hours in the afternoon. Could you kindly find out what sort of lifting device suits me best? I hope you do not mind that I am discussing my problems. I have to solve them somehow...

"Now about myself. I am 28, a Singaporean of Chinese descent. Primary schooling in Chinese (Mandarin). Transferred 3 years later on government scholarship to an English school. I was doing my pre-university (college) in medicine when accident occurred on 4th October 1959. I was 18 then. I was more interested in science or engineering but my mother on her death-bed had asked me to be a doctor. My mother died when I was about 9. I have a younger brother, a sister, a half-brother and two half-sisters. I am the eldest. My father is a chef specialising in Chinese Teochew delicacies.

"I have intense interests for politics, social and economic developments particularly in Afro-Asia. My hobbies are stamp collecting and coin-collecting. Frankly, I find it a little uncomfortable to talk about myself. It is rather difficult to draw the line where facts end and immodesty begins. What is humbleness to one, is impropriety to another."

Johnny Ang, Mt. Alvernia Hospital, Thompson Road, Singapore 20.

EDITOR: Excerpt from a subsequent letter of July 4: "It is my pleasure to inform you that Dr. Howard A. Rusk, to whom Sally and Gini had directed me to write, has kindly consented to give me a Hoyer bed-lift. Dr. Rusk wrote 'Ordinarily the World Rehabilitation Fund does not provide equipment to patients, but we are making an exception in your case.' Three cheers for Dr. Rusk!!! Last year he made a similar exception and had a wheelchair sent to Mrs. Muriel Willes of St. Helena Island who had mentioned her old collapsing one in TjG.
I was born with a normal body except for arms, hands, legs, and feet which are very small. I only stand 3'6" but I wear artificial limbs which bring me up to 5'3". Besides making me taller, I can walk 10 times more without tiring.

I live with my parents who were born and raised in Greece and came here 38 years ago...I drive a hand-controlled car...I love to paint and sing...I'm an amateur artist...I belong to the Illinois Art League, Illinois Photo Colorist Association, Sr. Goya, Walking or Wheeling Club whose paper I edit...I teach a Beginner Sunday School Class of 4 and 5 year olds...I am a choir member...I can speak Greek, read it, and write a little."

Tina Harris, 510 Caroline St., Pekin, Illinois 61554.

I wear full length knight spinal braces due to amyotonia congenita...I 'went' to high school by telephone...

I am studying bookkeeping with a correspondence course paid for by the Rehabilitation Commission. This, I hope, will enable me to get a fairly good job or start a business some day. I have it in my head I want to teach mentally retarded and/or handicapped children. I'd like to go to college. I was unable to arrange it when I graduated because of various reasons, but I have definitely not given up the idea.

I love to write and receive letters and have many pen pals, all over the world, including places such as Japan, India, England, Korea, Puerto Rico, Greece, and others. I'd enjoy hearing from anyone. My other hobbies are reading (I love books), music (particularly folk and
guitar) and writing. I'm also very interested in sciences (psychology, biology, anthropology, physiology, etc.).

Dottie SantaPaul, 184 Essex Ave., Gloucester, Massachusetts 90130.

"I am a quadriplegic belonging to Pinderfields Paraplegic Sports Fellowship...I've attended the games at Stoke for some time now, and hope to be there this year.

"For some time now I have been trying to get started as a stamp dealer. Any publicity you can afford in regard to my stamp business would be most appreciated. What I am doing at the moment is supplying the NEW ISSUES of Great Britain, the Commonwealth, Colonies and Eire. Also the FIRST DAY COVERS of Great Britain, Eire, Gibraltar and Malta. All supplied on a deposit account basis."


"I am a senior at Bay Springs High. I am the only handicapped (spinal bifida) in the whole school. Everyone is so wonderful to me...I type, write, play the piano for my church, do leatherwork, help mom can everything from peaches to peas, keep books for my father's fish business, go to movies, dances, and parties and lots of other things teens like to do.

"Please put my address in TjG. I love people and I love to communicate with as many as I can."

Jerry Ted Windham, Box 55, Bay Springs, Mississippi 39422.

"I was injured while playing a Rugby match for my school in April 1966, and at that stage I was 17-1/2 years old, in my last year at school.

"At present I am studying for my B.A. degree through the University of South Africa, which is a correspondence University. It has students all over the world, and if anybody is interested the address is: The Registrar, University of South Africa, Box 392, Pretoria, RSA.

"Lately I've been too busy studying the examinations, to write short stories, but I've written quite a number of stories for juveniles.

"If anyone wants to know more about my circumstance, I'd like them to feel free to write to me personally."

Lane Flint, Box 171, Clocolan, Orange Free State, Republic of South Africa.

"I am currently a student at California State College and manage to meet at least part of my expenses from a mail order business offering FIRST DAY COVER service of the U.S. and U.N. Free brochure upon request. Tad Tanaka, Sierra Stamp Sales, 16511 S. Garfield Ave., #50-C, Paramount, California 90723.

"I am a medical doctor in our National Rehabilitation Center. My interests are music, reading, languages, and helping the disabled to walk.

"...Disabled by Syringomyelia, I use a Korea made wheelchair. I wish it were possible for me to have a U.S. made collapsible wheelchair."

Hong Du Choe, M.D., 150-18 Onchundong, Tongnae, Pusan, Korea."
"The Farmer Had A Wife" is the latest novel of Megan Glyn, one of Wales' most popular writers. This beautifully written book runs the full gamut of Welsh weather and natural beauty.

Following are excerpts from a letter from her publisher, Dock Leaves Limited, 42 Chestnut Ave., Mickleover, Derby DE3 5FS, Wales:

"If there is anything you can do to promote the sales of this book in the United States, we would be most grateful. We are a non-profit making body; our whole concern is the promotion of good literature.

"If you know any charitable bodies in the United States who would like to raise some funds for themselves with this book, do tell them about us. If they sell copies, they collect the $3, send us the name and address of the customer and enclose payment of $2. We send out the book and they gain $1 a copy. All the proceeds from the sale of this book will go to Megan Glyn (a polio quad) and to the Cheshire Homes."

Megan's address: Cheshire Home, Dolywren, Pontfadog, Near Llangollen, Denbighshire, Wales.

"Jeanne Kipe's article about entering competitions in '64 stuck in my mind and I resolved I would get cracking some day. The outcome is a very happy one indeed as I have made many new pen friends through the London Competitors Club and they gave me a lot of help. In just one year I have won twenty prizes in trade contests. I cannot tell you what a wonderful boon this new hobby has been to me in terms of interest - as well as the lovely prizes."

Babs Tulley, 177 Sackville Road, Worthing, Sussex, England.

"I love and enjoy writing. By putting my experiences into words, I hope to enrich and enhance my usefulness in society by showing other cripples that they too can achieve something out of what would appear to be ruined lives.

"If I send you some of my stories and articles, would you know anyone who has the time to proofread? If so, then I would appreciate it very much if someone could help me to have them published. Helping me in this way will make it possible to have a special wheelchair with a specially-fitted typewriter so that I can exercise independently my ability to write."

Mr. Justin Rozario, c/o Matron's Office, Tan Tock Seng Hospital, Moulemen Rd., Singapore 11.

"I was born in 1928, disabled in my hands and arms...I type and do needlework with my feet...I would like a male penfriend in America about my age. My interests are reading and music and typing. I do lots of embroidery with my feet and this year I have won three prizes."


"I am 32 years old...have been wheelchair-bound since having polio at age 4...I do sewing and typing in my home...I enjoy reading about other handicapped persons and my favorite hobby is corresponding with them, especially those near my age with similar disabilities, so if any reader would write I should be most happy to reply.

Ruth D. Carter, 117 South 22nd St., Unionville, Missouri 63565."
"I am volunteer editor of a monthly publication, *Strictly Popickanda*, which I created for Allied Services when I was a patient there nearly three years ago."

Louis Sayle Popick, 947 Quincy Ave., Scranton, Pennsylvania 18510.

"I have made on the average one short amateur film cartoon (with paper cut-out figures) yearly. I make only the story, script and draw the paper cut-out figures of our Kladno's amateur animated cartoons. Other studio members make the cameraman's work, the sound, cutting, etc.

"I think that trick-films by animating cut-out figures are a suitable movie technique for disabled who want to make movies, have witty, crazy ideas and a portion of creative talent.

"Do you know by chance some U.S. amateur film makers creating animated trick-movies? In this case we should be glad if you could pass over to them the brochures about the 2nd Kladno's AMA-TRIK Festival? I am one of the organizers of this Interfestival, in which besides many Czechoslovak trick-film amateur makers also British, Finnish and West German amateurs sent preliminary applications already."

Alois Wokoun, Pavlisova 9, Kladno, Czech.

"I am a freshman at South Texas Junior College... a C-5 quad...car enthusiast...love animals...Indoor Sports Member...Easter Seal visitor."

Glenn G. Gregory, 5231 West Bellfort, Houston, Texas 77035.

Louis Sayle Popick
Pennsylvania, U.S.A.

Glenn G. Gregory
Texas, U.S.A.

Megan Glyn
Denbighshire, Wales
"I'm sorry that I am unable to write to you in English, but my knowledge of that language is very limited.

"Thank you immensely for sending me your magazine. I would not like to see it discontinued; therefore, I am sending you a small contribution: 6 International Stamp Coupons.

"TjG opens a door of hope above all in a country as mine, where the physically disabled are still very backward. I can't deny that I'm curiously jealous to see you enjoying technical advantages which we don't have within our reach.

"I enjoyed the last issue very much. All the ideas which allow us girls to do housework and lead a 'normal' life are stupendous. I hope that all these things can reach the largest number of people. I will struggle to achieve this.

"Let me now introduce myself. My name is Julia Monfort. I am 26 and I suffer from muscular dystrophy. I have finished high school and studied French. Now I am studying Catalan.

"I am part of a program in Barcelona directed by the Catholic Fraternity of Patients. This is a Christian movement formed and directed by the physically disabled. I am in charge of producing the bulletin which we publish every two months."

Julia Monfort, Floridablanca 8, Barcelona 15, Spain. (Translated by Eva and Frank Bill)

"I am 25 years old and am disabled since my two years to muscular dystrophy. I have many interests including art, classical and modern music, life, nature and poetry...Excuse, please, my mistakes. I am very glad you write to me.

Vladana Varnerova, Budovatelu 28, Kladno 4, Czechoslovakia."
POSSUM USERS ASSOCIATION unites the 68 users (62 in Britain, 6 in Sweden, Switzerland, Israel, New Zealand, Singapore). Their Newsletter is an exchange of information and innovations. Membership is open to anyone who uses POSSUM equipment, is disabled, or interested in helping the disabled. Annual membership, including the Newsletter, for POSSUM users is 5 shillings; for all others it is 10 shillings. Hon Treasurer: G. C. Docwra Jones, 17 Ovington Gardens, Kensington, London S.W.3., England.

"I am 25...CP...I've been tutored all through school and the greatest honor for me was to graduate with a B average...I have good use of my right hand and can move my legs and stand with help...I have trouble meeting people for the first time but after a while I get used to them. My biggest problem is talking on the telephone. I guess I am afraid people won't understand me. "My hobbies are stamp collecting, reading, TV, writing and amateur astronomy."

William Munza, 2745 Linda Dr., N.W., Warren, Ohio 44485.

"I love reading, writing letters, and being with people...I am interested in meeting new acquaintances about my age (21)...I had home instruction till high school...Attended high school and secretarial school...I am a secretary for a Finance company. I would like to have a car that I could drive in my wheelchair.

Darlene Cosenza, 64 Fulton St., Massapequa Park, New York 11762.

WORLD M.S. PEN CLUB. "The pleasure I have derived from corresponding with other M.S. patients has prompted me to form a club. Everyone who writes to me will be sent a monthly newsletter publishing their letters in part and introducing them to other patients."


ENGLISH TAPE CIRCLE. Free membership to any disabled person having a tape recorder which will take a 4" tape, at a speed of 3-3/4 i.p.s.

Ernie Pembroke, 6 Park View, Highcroft Villas, Brighton BN1 5PS, England.
"I read a whole lot of books, mostly for school, but few ones not any (I think) connections with it, for example: Galbraith's 'The New Industrial Society'. Well, I have made some steps forward in the school. Next fall I try to get in The University of Tampere to study mathematics, the computer programming, the data handling; the near target is the computer programmer, the far target Ph.D. in maths.

"You once asked from me if I liked to correspond with some nice and gentle girl about my age. Yes, I would love to, if you will introduce me to somebody, but warn her, please, I have a good reputation to be boring, hi! and I am a very slow in answers, well, you know me a little bit from our correspondence, so...! Tell her, I am interested everything on earth and heaven and all things, thoughts and feelings between them, everything which concerns this living creature, called 'Homo sapiens' or human being. Thank you!"

"John" Jukka Jarnberg, Suomela, Kangasala, Finland. (Traumatic Quad)

"I had a lively summer and fall. Except the trip to Savonlinna I made some other journeys to see my amateur friends and clubs when they were camping and working. It is a local manner to celebrate a field days. I have a new antenna Hy-Gains TH 3 Junio beam and CDE's antenna roter AR-22-R. With my Galaxy 5 Mk I they are working rather nicely. From English Radio Amateur and Invalid Club I got a headset-unit (headphones & mic) and it is very useful too. Never had to take care of microphone...all the time OK. 'Kuulemiin'. 73 + 15."

Erkki Riihimaa, Pentinmaki, Jalasjarvi, Finland. (Respiratory Polio Quad)
"I am almost 30 years old and a citizen of East Berlin...At the age of 14 I got the first symptoms of muscular dystrophy...In 1961 I came into a hospital...Now I am in a sort of asylum for incurably disabled and weak-minded...I would like to hear from organizations and individuals who would help me to learn something about the prospects of treatment and to overcome the lonely feelings that I have now...My disease is like a soundless snake which closes tighter and tighter around me each year...Please don't send any printed matters...they would be confiscated."

Heribert Flader, 114 Berlin-Blesdorf, Grabensprung 3/1A, East Germany/D.D.R.

"I am 16 years old...I had polio when I was 2 and I am in a wheelchair. I use positive pressure during the day and an iron lung at night...We have a portable lung too...I would like to find someone in a similar situation, who lives in England - who would like to come and live with my family while I go to stay with theirs.

This could be for a few weeks during the summer or for my Senior year...."

Andrea Cappaert, 2335 South Circle, Ann Arbor, Michigan 48103.

When TjG volunteer Nancy Hoover moved with her family to Switzerland she called on many TjG readers who could not read English.

To help these readers Nancy magnetted a staff of volunteer translators, both disabled and non-disabled. Early this year they sent questionnaires in French, German or Italian to all readers in Belgium, France, Germany, Italy, and Switzerland asking which articles they would want translated.

To make it simpler for European readers to pay their share of the expenses of TjG Nancy opened an account, titled "TOOMEY TJ GAZETTE INTERNATIONAL," at the Union Banques Suisses in Lausanne (compt courante No. 10-315).

Nancy's address: Mrs. John T. Hoover, 51 Bd. de la Forêt, 1012 Lausanne, Suisse.

AFRICA: Ian Bompas, 2 Dowse Road, Glenashley, Durban, Natal
AUSTRALIA: Mary Guy, 125 Derwent Park Rd., Moonah, Hobart, Tasmania
CANADA: Bob Gordon, Pearson Polio Pavilion, 700 W. 57th Ave., Vancouver 14, B.C.
CZECHOSLOVAKIA: Alois Wokoun, Kladno, Pavlisova 9,
FINLAND: Erkki Riihimaa, Pentimäki, Jalasjarvi
FRANCE: Michel Le Saux, L II R, Hôpital R. Poincaré, Garches, S et O
IRELAND: Ethna O'Dowd, Ward 7, Cherry Orchard Hospital, Dublin 10
JAPAN: Tethuji Tomikawa, I-Banchi, Toyama-Chô, Shinjuku-Ku, Tokyo-To
MEXICO: Mrs. Eileen Van Albert, La Merced 1052, Col. Chapulta, Guadalajara, Jal.
SWITZERLAND: Charles Froelicher, Steinhofhalde 18, Luzern
This author, from personal experience, regarded severe disability as a means of rebirth to a higher level of living. Her philosophy is succinctly contained in her first two sentences, "We do not appreciate what we have until we lose it. And we only advance through suffering." The succeeding pages are a splendid supporting argument.

When Betsey Barton was sixteen her back was broken and her legs paralyzed in an automobile accident. For eight years she did all the wrong things and made all the worst mistakes before awakening to the positive realities and significance of her new level of life. To save others from such lengthy and needless waste of time, Betsey has chronicled what she learned of the pitfalls and potential of disability.

You will get some idea of the scope and depth of her observations from the following excerpts.

On rehabilitation: "If the mind does not have some other incentive, some other goal, some other end, then simply getting well and strong, it will soon give up. The mind needs a greater reason than health; it needs to feel that the total work of the mind-body is leading to some expression, to some fulfillment in a medium other than itself."

On the dangers of disability: "We may simply accept the help of others, living off them, sucking strength and attention from them, dramatizing our hurt, making it our excuse for failure, for gloom, for laziness."

On the potential: "The emphasis forced on the inward life in those who have been hurt sometimes brings out precious latent talents..."

On the positive reality: "Thus those of us who are thoughtful, and who have been hadly hurt, may ultimately be cheered in another way than we had dreamed, by our growing awareness."

On sex: "Since we have been defeated on the
physical level it is on the physical level and on that alone that we can be wholly reassured. The lack of understanding of this need in us for sexual contact and love has devastated and made arid the lives of many of the fallen.

The title is accurate. This book is full of life and how every disabled person can better live it.

MERMAID ON WHEELS
by June Epstein
1967. Ure Smith Pty. Ltd. Sydney, Australia. $4

Most of us know through personal experience or the intimate associations that come with long hospital confinement the importance of the attitudes of the human circle surrounding a disabled person. If those with whom we love and live see no hope for us, usually we don't either. But if they treat us as the same person with a few additional handicaps, then our horizons are expansive as ever. It is with this type of family and friends that the wheeled mermaid is blessed and because one of them is an author the story of the rehabilitation of this young Australian woman can be shared.

Margaret Watkins is 22 years old, in her final year of college and engaged to be married when she is in the automobile accident that paralyzes her from the chest down. For many weeks her physical pain is only second to the mental agony of wondering whether her finance, John Lester, will still want her to be his wife. Little else matters; he is her reason for living.

When John is finally asked by Margaret's doctor what his intentions are, he responds with surprise. Not to marry Margaret because of her new physical limitations had not occurred to him. That is all Margaret wanted to hear. In the incredibly short time of nine months she has mastered the activities of daily living and is ready to take on the responsibilities of marriage.

Besides becoming a successful wife and mother of three children, Margaret finishes college and obtains a degree in architecture. She also perfects her athletic skills and wins many medals in the Australian Paraplegic Games. Swimming is her favorite sport and one of her happiest moments comes when she is presented with her own hydraulic life-equipped pool, financed by her grandfather and designed and built by her father.

To all these fulfillments Margaret Lester is encouraged and helped by her special human circle of family and friends. The result is compared by the author to the Indian poem,

"Even the severed branch grows again,
And the sunken moon returns:
Wise men who ponder this
Are not troubled in adversity."

IT'S GOOD TO BE ALIVE
by Roy Campanella
1969. Dell Publishing Co., Inc. New York. $0.4

Once upon a time there was a great catching and batting star for the Brooklyn Dodgers. So good was he that he received the National League's Most Valuable Player award three times, a rare honor.
Then one winter night his car skidded into a telephone pole and turned over. A broken neck paralyzed him from the shoulders down. The ballplayer was now a quadriplegic.

A tragic tale, you say? A spectacular athlete unable to move must be very bitter. Naturally he will think there's not much to live for anymore.

Well, if those are your thoughts you're wrong. Roy Campanella doesn't put life down that easily. He proves it takes more than quadriplegia to make him bitter and disillusioned.

Luckily for the rest of us Campy is willing to share the story of his extraordinary life. It makes good reading, especially if you're a baseball fan. He dictated the details and they were recorded in his own warm, chatty style. You will come to know his parents, wife, children and baseball cohorts, and get an inside view of such historical events as breaking the color bar in professional baseball.

The first 190 pages involve Campy's baseball life. Its relevance after the accident is clear; the athlete's discipline and the national concern for a loved hero, plus Campy's own fantastic spirit, align into a determined rehabilitation effort. A year after becoming paralyzed this player turned coach is heading for the Dodgers' Florida training camp.

One of the most moving memories in this book is Campy's reaction to the tribute given him in the Los Angeles Coliseum by baseball's two major leagues. On that night 90,103 people filled the park for the special game between the Yankees and the Dodgers. Between the fifth and sixth innings the lights were turned out and thousands of matches lit in a sparkling salute to Roy Campanella.

What of Campy's spirit? Comparing the quadriplegic's suffering to a kiln's white heat that makes pieces of clay into objects of art, he says, "We've been through the white heat of that kiln. But due to that torture--and it is torture--I think that maybe we have a bond of understanding that goes below any surface stuff. We're a rugged breed, us quads. If we weren't we wouldn't be around today. Yes, we're a rugged breed; and, in many ways, we've been blessed with a savvy and spirit that isn't given to everybody."

Campy's spirit? Just what the title says.

EXPERIMENTS IN SURVIVAL
Compiled and edited by Edith Henrich
Commentary by Leonard Krieger
1961. Assoc. for the Aid of Crippled Children.
New York. $3.50

Ask yourself just what you are.
The answer is important, for how you think of yourself determines in great part the richness or thinness of your life. This book will help your evaluation. In it are the personal accounts of 33 individuals as to how they learned to survive and function with their disabilities. Through their words you will receive a stark focus on yourself and your place in society.

One of the best lenses is Doris Lorenzen, who has spent most of her life bedridden from polio. She accurately says, "Normally endowed people claim they need an escape from reality; the severely handicapped person knows with passionate certainty that the wish to be a part of life is the only ambition that makes any sense."
But then there are those difficulties involved in being a part of life. Chief of these seems to be finding a job equal to the disabled person's talents and abilities. One contributor states, "It was common experience to find that employers put the fact that I had cerebral palsy far ahead of any consideration of my ability to do the work."

Social prejudices are another challenge. This problem is especially intense for the unmarried disabled. To one young woman who consistently attracted egocentric, immature men a psychiatrist explained, "You may as well get used to it; you are a catalyst. You draw impurities to the surface." A more detailed explanation is that people without active interests of their own or without fully developed identities often seek to find, outside themselves, some symbol of the dramatic or tragic or heroic. We, alas, are sometimes symbols.

All kinds of attitudes and images are demonstrated or implied. There is martyrish acceptance as well as denial that a handicap is a handicap ("It's not so bad being blind. Everyone is handicapped in some way, you know.").

This is a pearls and pablum book. Lest you not have the chance to read it here is my favorite pearl, formed by Doris Lorenzen: "For there is a discovery that, once made, renders all else tolerable: whatever we do is a symbol of what we would do. This is the shift of emphasis that ends the isolation. Not only can we do no more than to let an act substitute for a more splendid act, but no one can do more. This is the reconciliation. Even so grand a physical and spiritual triumph as flinging an object at the moon is a compromise."

Put that in your mind and think about it. YOU STILL HAVE YOUR HEAD by Franz Schoenberner 1957. The MacMillan Co. New York. $4

Sigh. Every now and then it happens--a reviewer falls in love with an author.

When this occupational passion occurs all objectivity disintegrates, to be replaced by total partiality and near worship. It is a delicious state, rarely incurred and lasting only until another, lesser book is read. You must forgive me then this temporary adoring indulgence and prejudiced review, for I have completely succumbed to the beautiful mind of Franz Schoenberner.

Since his birth in Berlin in 1892 Franz has been absorbed with the life of the mind. He was editor of a satirical weekly until Hitler came into power. Then he went to France and later the United States. At the age of 50 he learned and mastered the English language, in which he then wrote two autobiographical books. He anticipated them to be his last but, when he was 59 years old fate presented a whole new experience that Franz could not help but record.

Late one night the author was disturbed by noise from an adjoining apartment. His personal call to request quiet provoked a violent physical attack that injured his spinal column. The consequent paralysis from the neck down produced a paradox of imprisonment and release; the body's immobility granted the mind new energy and reign, freeing it to the endless fields of reflection, imagination and memory. These are the "excursions from immobility" about which Franz writes, and it is an uncommon, exciting adventure.

Everyone experiencing misfortune asks 'why?'
Here you will find one of the most brilliant tapestries of reason ever inspired by that question, leading to the even more appropriate one, 'why not?' The old belief of the correlation between fate and character is explored in depth, to be debunked then substantiated in cogent proof of the fragility of the human organism. After you read this you will marvel along with Franz at the astounding number of beings who are still relatively healthy and functioning.

Hospitals, nurses, doctors and care of the quadriplegic are sifted through the Schoenberner cerebration, often with humorous conclusions. No one else has ever made the hazards of being fed and the indignity of not being able to clean your own nose seem quite so funny. He agrees with Helen Keller, whom he met and admired, that humor and courage are more important than intellect, for these in a really desperate situation can save an intelligent person from losing both head and heart.

There are some excellent thoughts on the argument of whether suffering ennobles or degrades. Franz concludes that the suffering "remained what they were, only more so, because their most essential, normally perhaps hidden characteristics suddenly became visible on the surface. The shell formed by certain civilized conventions, pretensions or inhibitions peeled off easily under pressure and revealed every single individual in his naked truth. Human nature being what it is, the resulting aspect was of course often quite unpleasant and in extreme cases horrifying."

Well, some people may appear horrifying when severely challenged, but Franz Schoenberner emerges finely, superbly, most admirably. Although he regains some movement his lifelong vigorous mental life continues to be his most important activity. This activity served him well during his hospitalization, when the web of his thoughts "somehow screened and veiled the insipidly painted walls, rendering them immaterial, translucent, somehow non-existent." He discovered thinking to be a much more indispensable necessity than reading or writing, a harmony in itself.

It was with great reluctance that I turned the last page of this book. Not often do you get a chance to enter the mind of such a knowledgeable and sensitive man, and I shall ever gratefully and warmly remember him. He is must reading for every person disposed to thinking.

YOUR HANDICAP--DON'T LET IT HANDICAP YOU by Sarah Splaver, Ph.D.
1967. Julian Messner. New York. $3.95

The impact of disability on a child or adolescent can permanently warp and undermine his future. To avoid this destructive effect Dr. Splaver offers young people a well-researched guide on how to accent abilities and take advantage of available services.

Many types of physical handicaps are examined here, from the physiological and psychological characteristics to the potential and means of educational, vocational and social development.

The importance of attitude toward yourself and others is emphasized. One term, 'physically limited,' is stressed as that which creates the most positive image. Optimism abounds in this book and, better still, the facts to justify it.
Tell me that you love me. Even if I am crippled or hideous and unwanted.
This book is the love song and beautiful it is.

Tell me that you love me, Junie Moon
by Marjorie Kellogg
1968. Farrar, Straus & Giroux. New York. $4.95

Has this reviewer ever insisted that you read any book? Of course not. But I am now, for you might not be touched so bittersweetly tenderly again and you will have missed out on a little of life.

This is a beautiful, intimate interval with 3 unforgettable people. They meet in a hospital and decide to live together for the simple reason that nobody else wants them. Arthur has a progressive neurological disease that causes him much shaking, flailing and unsteadiness. Warren is a paraplegic as a result of a shot in the back while hunting. Junie Moon has an acid-eaten face and hands, disfigured by a mad lover. All are in their 20's but only one has ever been loved and that one not for very long.

On welfare assistance and in a grapevine-covered house with broken windows and a banyan tree in the yard they start their life together. Through their living and social adjustments, jealousies and frustrations you cannot help but become as involved with them as they do with each other. Splendid gentle and wry humor lightens and endears the experience.

There is also fighting. "At first because they were afraid of having to tend to their ailments by themselves..." Later, after they get used to privacy again and discover who they actually are they fight because of their fear at the realization. Then they fight because they are beginning to care about each other.

From this caring comes love, with all its usual plus some added perplexities...and beauties. It is these beauties that will get you. Here

CAPE TO CAPE BY WHEELCHAIR
by Ernest M. Gutman
1959. Ernear Publications. Florida. $4.75

Stay confined within four walls because of a wheelchair? Never!
Ernest Gutman doesn't even stay confined to one continent. After a difficult adjustment to the fact that he must be in a wheelchair permanently Ernest decided that was restriction enough. The world waited to be seen and he would simply roll rather than walk around the view.

One thing Ernest discovered as he and his wife journeyed from Cape Town, South Africa to North Cape in Norway was that sometimes a wheelchair is an asset. For instance, during foot-wearing tours like those through the Royal Palace in Stockholm and the Brussels World Fair.

For one who never read a travel book this was an exciting experience. The Gutmans saw many interesting and spectacular sights in their 50,000 mile trip. And along the way they gave their own demonstration of why the severely disabled are no longer called shut-ins.

Try this trip. You will next be planning one of your own.

EDITOR: Three more interesting books by Mr. Gutman arrived too late to be reviewed by Donna in this issue. They are summarized on pages 60 & 72.
By car through Mexico! From Piedras Negras to Saltillo, Monterrey, San Luis Potosi, Aguascalientes, and Guadalajara; thence to Manzanillo, Guanajuato, San Miguel de Allende, Tampico, Ciudad Victoria, and out via Reynosa...a total of 3,876 miles.

Such a trip for a respiratory polio quad, with a VC of 650, seemed impossible until the seed was planted by travel articles in the TJG, and nurtured by thorough investigation, reading, planning, and the generous advice of many people. Much of the preliminary effort was the same as for any would-be tourist: studying Mexico and the many places of interest; picking the places to visit and the routes; getting familiar with customs requirements, climate, and food conditions; taking medical shots, etc. Special planning to get my doctor’s approval; obtaining the names of doctors in Mexico familiar with polio; borrowing of spare respiratory equipment; collecting other spare parts; finding out about effect of altitude, the type of electric current, and its reliability; condition of roads and auto repair service and parts, etc.

The trip was made by my parents and myself in our 1962 Chevy Corvair Greenbrier Van. It is a standard model with just three homemade items: ramp and chair holder (see page 75); an electrical cord attached to the van’s battery which plugs into and runs my Bantam respirator for as long as the van has gas, plus 3-4 hours off a fully charged battery with the engine off.

As I use respiratory aid almost 24 hours daily - pneumobelt when in chair; chest shell for sleeping in ordinary bed - sufficient equipment
was a necessity: (1) Thompson Bantam for pneumo-belt, model BFF, 12 & 120 volts (plus a spare); (2) Monaghan Model 170C, 12 & 115 volts, for chest shell (a Monaghan Model 170B, 12 & 115 volts, that would run both shell and belt as a spare); (3) Eureka Model 806, 120 volts, "vacuum cleaner," for positive pressure (plus spare); and (4) Monaghan Model 63 Hand Resuscitator, just in case.

A car battery was mounted under my chair for use in wheeling about where there was no nearby house current, and we had an Exide model EJ, 6 & 12 volt, charger to revive this battery at night plus an Hydrometer, with a float No. 1040, for checking the charge. Also a bag of miscellanea: spare belt, chest shell seal, maintenance equipment, mouthpieces, adaptor plugs, extension cords, etc. Sound complicated? Not really; I use all of these items in my day-to-day life - except for the spare machines - and they are as familiar to me as my heartbeat.

Tires are vitally important; we had five good ones. Mexico has automotive parts, but it is easy to carry a few that might be needed: a 6th-tire, fan belt, light bulbs, fuses, spark plugs and an extra flashlight.

The days were bright and warm, the nights cool and clear. A McGraw-Edison "Tropic-Aire" electric heater model 70AX1, 115 volts, was needed to knock the chill off rooms at night. The electric current in Mexico proved most reliable, but its voltage sometimes varied anywhere from 100 to 135 from hour-to-hour. An Acme Voltage Transformer, Type T10307, with input of 75 - 145 volts and output of 115, was used in conjunction with the Thompson and Monaghan respirators. The rest of the equipment withstood the fluctuations on their own.

October is Fiesta Month in Guadalajara, with many special activities each day: bullfights; soccer; bands and native dances in the plazas; symphonies; operettas; exhibitions of painting, sculpture, photography, regional costumes, handicrafts, and livestock; international tennis and golf matches; and dozens of other activities. This mile high city is flat, and we had no trouble participating in all these activities, as well as visiting the year-round places of interest: parks, cemeteries, Cathedral, the many churches, the Basilica (home of the Virgin of Zapopan), museums, ancient buildings, world's largest market under a single roof, glass-blowing factory, pottery factory, Orozco's studio, the Orphanage, nearby tequila distilleries, a wide variety of restaurants, etc. Thirty days spent in this second largest city of Mexico, and much still unseen when we left!

There must be 150 Americans in wheelchairs in Guadalajara, with half of them more or less permanent residents. We enjoyed spending time with some of these folks - both in their homes and at the newly-built clubhouse of the local chapter of the Paralyzed Veterans of America - and they went out of their way to be helpful whenever possible. You will be faced with two "problems:" a reluctance to leave, and a desire to settle in this beautiful place.

The Mexican people were intelligent, friendly, warm, and quick to be of help when needed no matter where we were...and there is certainly
more to this country than just one city...every
city we visited offered a variety of unique at-
tractions. We wandered...no hurry...maybe 100 to
300 miles of travel a day when on the road...a
day here and a day there...so much to see...you
should not miss it by trying to drive all over
the country in a few days or months.

I noticed a little more difficulty in free-
breathing at the altitudes of a mile or more,
but none as long as I used my respirators. We
had no trouble getting my standard size (25" out-
side width) American Wheelchair Co. chair any-
where we wanted to go, unless there were just
too many steps.

Touring by car in Mexico is no different from
in the U.S. (except avoid night driving on high-
ways, and always drive a bit slower). We never
used any of our spares (except for two of the
respirators). It can cost whatever you wish. We
decided to go at the moderate rate level. Trans-
portation, lodging, food, and miscellaneous per
person per day worked out to: $8.48 in the U.S.;
$5.61 in Mexico. You might add up to $100 for
purchases per person to bring back, and you
could add $1 to $10 per day per person to suit
your own miscellaneous and entertainment taste,
depending on how elaborate you want to get. We
used no preplanned tours, no guides, no advance
reservations (used apartment in Guadalajara; mo-
tels elsewhere), nor did we have an attendant
along.

Try Mexico by car; you'll see more this way.
Plan the trip yourself; this is much of the fun.
Start at least six months in advance. Write the
tourist bureaus in the cities you plan to visit;
be sure to ask for a city map. Use Sanborn's
logs and suggestions on where to eat and stay.
And, above all, learn as much Spanish as you can
before you go to triple the joy you'll receive.
Write me, too, if I can be of help. (716 River-
side Drive, Lynchburg, Virginia 24503.)

MEXICAN MOTELS USED BY THE ROBERTSONS. Walter's
3-page list of motel accommodations in the fol-
lowing cities will be photocopied on request:
Piedras Negras, Saltillo, Monterrey, San Luis
Potosi, Aguascalientes, Guadalajara, Silao,
Guanajuato, San Miguel De Allende, Tampico,
Ciudad Victoria.

WALTER'S LIST OF DOCTORS IN MEXICO WHO ARE FAM-
ILIAR WITH POLIO will also be photocopied. This
list was furnished by Dr. Carlos Vallbona,
Texas Institute for Rehabilitation and Research,
1333 Moursund Ave., Houston, Texas 77025.
GUADALAJARA

by JOE LAURIE

Gini and I spent two of our winter months in Mexico, and enjoyed it immensely. The Mexicans are the friendliest people, and they are the first, when you pass them on the sidewalks, to greet you with "Buenos dias," or later in the day with "Buenas tardes," or "Buenas noches."

We spent about a week in Mexico City and saw the sights; if you go there don't miss the Anthropology Museum - probably the finest of its kind anywhere. Or, the 44+ storied Latin American Tower which overlooks the whole city. There are so many things to do and see, and we just didn't have the time as we were heading for Guadalajara.

Mile high Guadalajara, hereinafter referred to as "G.", was a lot easier on even my breathing apparatus than mile and a half high Mexico City. We like "G." better than the latter, as it is a smaller city - about 1,300,000 - and it is a more relaxed place. The traffic is slower, the people walk, not run, and that big city "zoom" is not there. And its nice altitude and the beautiful tropical weather make for many plants and trees and parks. Not that the same doesn't apply to the capital city, but it seemed more so with "G." Sunny days and coolish nights prevail - January was the coldest month, and as there is no central heating except in posh places like the Hilton and other hotels catering to the Norte-americanos, nights can get a little chilly.

Many of the inns have fireplaces where you can assemble a pile of mesquite faggots and pour on some of their lighter fluid - diesel oil - and in a short time have something to take the chill out of the room. As there is AC 110 volt current all over the country, an electric blanket in the winter months might not be a bad idea to pack along.

The AAA Guide to Mexico is up to date, reliable and accurate, and their tour guides provide you with detailed maps. A postcard to Sanborn's in McAllen, Texas, P.O. drawer #1210, Zip 78501, will net an exciting list of books and insurance on the necessary automobile insurance, as your USA policy is not valid down there. Premiums are higher, but I wouldn't want to get into a fracas just because I thought I'd skimp on insurance: in Mexico, their justice presumes you are guilty until proven innocent, and it would be comforting to have them on your side.

Subscribe to the CoZony Reporter, the magazine that comes out weekly for the 10,000 or so Norteamericanos living in and about "G." - its address is Lopez Cotilla 2057, Guadalajara, Jal., Mexico ($2 for 6 months). Also subscribe to the
El Sombrero News at 1052 La Merced, Col. Chapala-ta, "G." ($1 per year.) And we would suggest reading the March 1967 issue of the National Geographic on good old "G."

We met and enjoyed the Ken Van Alberts, with whom Gini had been corresponding over the past years. Both are disabled, but they are real "doers." Ken edits and publishes the El Sombrero News, and also is secy-treas of the local PVA chapter there, and in his spare time drives his wife, Eileen, to the super mercado, to the concert, or to the opera. There are no architectural barriers for them, as they have a young Mexican couple living with them to assist their chairs in and out of anywhere.

The local PVA has quite a fine clubhouse where dinners and drinks are served; a couple of times a week there are Bingo games going there, with Ken calling the numbers and letters. The food was very good, as were the drinks, and very reasonable. There are about 75 members, and with their families there is quite a throng at one of the sessions. The adequate parking facilities with the ever present aides for the in and out making this a really relaxing spot.

We also saw the four "residences" for the disabled, and chatted with the people who were there and with the other people who run them. The 1968 Gazette had stories about these places. Here, once you've gotten to "G." you can get into the spirit of the area and learn about the money and other necessities, and try to pick up enough of the language so that you can make yourself understood, and vice versa. There are not too many Mexicans who speak English, and you have to have at least a little "pig-Spanish" to get along. With this smattering you can get a personal aide for about $40 US a month, and with his help you'll get over those "barriers" and out to the opera, the concerts, the restaurants and bars, and all the other goodies in this charming city.

The Mexican "Dollar" is the Peso, and there are 12-1/2 of them to a US $. And they price everything in $ - but it is their dollar, not ours. So, things are relatively cheaper there than here, especially if you live the way they do and not like a rich, ugly Americano. According to the old hands here you would need at least $300 per month to afford an attendant and a place to live and eat, and at the same time be in a position to enjoy this lovely area.

Bus, train and air service are good, fast and cheap. The highways we travelled were excellent. We'd flown down, and then rented a VW there - which is, we guess, the quickest way. But, next time, we'll drive down and just leisure along in our own automobile. Then we could more easily get down to the Pacific, and enjoy the charming little city of Manzanillo and the coastal region - especially when it is chilly in darling "G."
curves but more miles. There is a 10:30 pm train leaving Guadalajara and arriving at Manzanillo at 7:00 am. A compartment costs 200 pesos ($16) for two persons. By first class bus the fare costs 30 pesos ($2.50) each and it takes 5-1/2 hours.

In the town of Manzanillo there are plenty of taxis so a car is not a necessity. The town is located on a large open bay and has a sandy beach shoreline of about 5 miles. There are hotels, motels and apartments located on the beach, as well as further inland. Good restaurants are rather scarce so it is a good idea to rent a place with a kitchen. Prices run from 120 to 200 pesos ($9.60 - $16) a night for four people in a bungalow or apartment. Special rates are given by the month, for example: the Manzanillo Courts and Bungalows rent for 150 pesos ($12) a night for four, but by the month they rent for 2,000 pesos or ($160). Some places are new and in good condition, some are a little weather beaten, but most all are clean. It is a good idea to bring along as much food as possible, thus saving time and money in shopping, looking for Guadalajara super market type things they don't stock there.

Charter boats are available for 60 pesos ($4.80) an hour. We had four wheelchairs on one of the biggest boats, the Allegro, and there was plenty of room to walk between the chairs. (This also included the 4 aides and the 3 crewmen.) For the early morning fishermen breakfast is served on board, and from the first fish that are caught the captain makes and serves a delicious Ceviche. Trophy-sized Sailfish, Marlin, Dolphin, Bonita, Mackerel, Sea Trout and many other species are for the catching in that vicinity in the various seasons.

Swimming is not one of the area's features for the wheelchair set as the surf is generally quite high and the shore drops off sharply. Night life is quite active even in the daytime. From December to May the weather is excellent, not too hot or too cold. A good vacation spot during Guadalajara's cool spell.

HOUSTON to MONTERREY, MEXICO.

Nita Weil's account of their expedition is rollicking but, alas, too long for here...."The 5 days in Mexico were a feast of the senses for me. I never really expected to see it. If it had not been for Grace (I) and Willie (r) I never would have. I can at last understand why people come away enchanted with the flavor and atmosphere of this wonderful country...." If you could encapsulate an experience - the friendship, the sights, the color, the myriad second-to-second events, and their impact, you would have a jewel more precious than money could buy. I feel rich indeed...."
TRAVEL BRIEFS

HAWAIIAN HOLIDAY. Ralph Dosch and his mother had a delightful and worry-free trip by air in the spring of 1968. (See TiG, 1965, page 50, describing his trip to Germany when his respirator 'went up in smoke'.)

(2) At the Reef Hotel with Diamond Head and Waikiki Beach in the background.

ROUND TRIP FLIGHT TO ENGLAND WITH RESPIRATOR was successfully achieved by Gary McPherson (N.S.67, University Hospital, Edmonton, Alberta, Canada). He will share his experiences with adaptors, etc.

GUIDEBOOKS FOR HANDICAPPED USA TRAVELERS. Single copies of this 14-page booklet are free from: The Women's Committee, The President's Committee on Employment of the Handicapped, Washington, D.C., 20210. It includes one or more addresses from which each of the 61 city directories listed may be obtained. Guidebooks to the national parks and monuments are also included.

MIDDLE EUROPE BY WHEELCHAIR. This tour book, by Ernest M. Gutman, describes in detail the experiences he and his wife encountered during their journey through France, Luxembourg, Germany, Austria, and Switzerland. Most impressive is the smoothness with which the trip evolved because of the careful planning with their travel agent. The ship and cabin were convenient. A car and an experienced driver met them at Cherbourg and shepherded them throughout the tour, arriving with clockwork precision at the various hotels for which reservations had been made long in advance. In addition to the selected hotels and restaurants they made careful notes of other facilities which would be suitable for wheelchairs. An entertaining and informative book. Published in 1962 by The Mitre Press in London, it may be ordered from Erncar Publications, 5790 N.E. 17th Ave., Ft. Lauderdale, FL 33308. 35s. or $4.75.

A TRAVEL GUIDE FOR THE DISABLED. This 133-page book, published in 1967, was also written by Ernest M. Gutman. It is more inclusive and less subjective, touching travel by land, sea, and air in Europe and the U.S. Priced at $5.75, it may be ordered on ten days free inspection approval from Charles C. Thomas, Publisher, 301-327 East Lawrence Avenue, Springfield, Illinois 62703.


GUIDE TO EDINBURGH FOR THE DISABLED. Sixpence. Simon Square Center, Edinburgh 8, Scotland.

DISABLED PERSON'S GUIDE TO CAMBRIDGE and HOME EXCHANGE SCHEME FOR THE PHYSICALLY DISABLED are both available from Mrs. J. E. Copp, 5, Pretoria Road, Cambridge, CB4 1HD, England. The guide may be ordered for 3 shillings. Brochure and application forms for the home exchange are free.

MELBOURNE FOR THE HANDICAPPED. Free. The Victorian Society for Crippled Children and Adults, 524 Collins St., Melbourne, Vic., Australia.


HANDICAPPED TOURS. 1969 European Tours are being planned by Handy-Cap Horizons, 3250 E. Loretta Dr., Indianapolis, Ind. 46227 and Accent on Living, 802 Reinhaler, Bloomington, Ill. 61701. A 37 day world tour in 1970 to Japan, Hong Kong, Angkor Wat, Bangkok, Singapore, Bali, Sweden, India, Turkey, Russia, Finland, and Iran is being organized by Betty Hoffman, Evergreen Travel Service, Box 583, Lynwood, Washington 98036.


Sister Caedmon and her friend, Madeline Brade, have made their third tour of Europe's cathedrals. (Send your used Christmas and other greeting cards for her work with retarded children to Sr. Caedmon, O.S.A., Convent of Saint Anne, 18 Claremont Ave., Arlington Heights, Mass. 02174.)
Tom Rollins, wheelchair-bound by polio and arthritis, ran a successful watchmaking and jewelry business for 21 years. Recently he retired to devote more time to being an active Conservationist and to writing about hunting, fishing, camping, and swimming for "outdoor" writing organizations.

There's a fine article about him and his activities in the April 1969 issue of *Outdoor Life*.

He and his wife designed and helped build their own house. Also he designed and helped build a flat-deck cruiser 32 feet long. He de-
signed and had built the hand controls for various automobiles, so that they are as "accident-proof" as possible to design.

He was cited as the outstanding Handicapped Citizen of 1965 by the Governor of Tennessee.

Address: 923 Medaris St., Clinton, Tenn. 37716

(Above) "In the goose picture, I'm down in a blind, sitting in my wheelchair - my hunting buddies put us there a piece at a time - shoved my shotgun in my hands and said, 'yer on yer own, lil buddy.' They did pick up my geese, though. The next photo is of two nice plump Chukkar Partridges shot in Florida. The jeep picture is to show how I do it. The station wagon picture is just another goose picture but it is pretty cluttered up.

"The photo of my wife, Mona, and daughter, Kaye, shows that I'm a good teacher! Kaye caught both of those grouper at the same time. Mona's the 'red snapper kid.' She really gets 'em."
PHOTOGRAPHY
by MARDA GENE DUNCAN

I was a traffic statistic more years ago than I care to remember. Seriously, it was January 1st, 1947 when the car in which I was riding came out a poor second best in an encounter with a tree. My neck snapped - three vertebrae were involved — the doctors said quadriplegia and so, I was launched upon a completely new road.

After the prescribed hospital stay, I came home where Mom and Dad, Gram and Gramps, and I started putting together a new type of life. (The importance of family and friends need hardly be stressed on these pages — none of us could make it without them.) Because the folks both worked, a practical nurse who could spend days with me was necessary. Evenings, nights and weekends were and still are, Mom's and Dad's. Over the years the emphasis has changed and now my Gal Friday is a combination secretary/photographic assistant/file clerk/stenographer/pill pusher/ and tea maker.

A stay at the Milton Berry Foundation in Cincinnati, Ohio taught Mom and me about braces and wheelchairs. By wearing a full length pair of body and leg braces, I can sit comfortably for several hours in either a wheelchair or a car.

The braces opened up a whole new world - weekends and vacations needed no longer to be spent in the hospital type bed. We three Duncans have found great pleasure in travel and have managed to see many of the beauty spots and historic points of interest in this glorious country.

Photography is an absorbing hobby and one which we all enjoy. It is two-fold fun, the excitement of taking pictures is matched by the pleasure of sharing them with friends. Evening slide shows are common here at 607 West Logan. Mom and Dad take the majority of our pictures; my shutter snapping is quite restricted.

Perhaps I should say specialized. Birds and squirrels are the models who pose for me. Three very good and very talented friends worked long and hard to design and build a camera rig which I could operate. An Argus camera was adapted so that it fits into a special remote control head and, by operating the control which is pinned to my bed, I am in business. The control is a sensitive two-way switch, a slight upward thrust of my — well, it is a shoulder movement but I use it to nudge my wrist up against the switch and click, a picture is taken. A downward touch on the switch advances the film and cocks the shutter. I use an electronic flash and thus, once the camera is focused properly, I am on my own for a while.

Actually, of course, I am very much involved with the telling of what I see "THROUGH MY WINDOW". That is the title of the weekly article I write for the local paper, "The Tecumseh Herald", and yes, my subject matter deals with the 'goings on' in Mother Nature's wonderful world of
the out-of-doors — or at least the goings on which go on outside my window. For the past several years I have also written a monthly article (same title, same subject matter) for the "Purple Martin Capital News". So it is that the road took an abrupt turn way back in 1947 but, when one is busy time flies quickly and these have indeed been busy busy years.

Address: 607 West Logan Street, Tecumseh, Michigan 49286.

The effects of polio were with me as early as I can remember. However, I rode horseback, fell in the brook, climbed trees, and had all the happy experiences reserved for a child brought up in the country. My family and teachers (bless them) guided me to recognize my limitations and to concentrate on the many and varied things I could do. So I grew up with lots of interests, lots of friends, and very little idea of being handicapped.

In high school I found a new and consuming interest, music: piano, accompanying and teaching. My musical career was steadily building when I had the stroke. I thought the end of the world had come. It had: the end of the world I had planned for myself, but another world was there waiting to be discovered.

Contrary to doctors' predictions, I learned to walk with the help of a cane and two braces below my knees. I worked on my speech word by word until it came back. It is far from perfect but I get by. My right hand never came back, though I did con it into holding the handle of an egg beater so I could make cakes and other goodies for myself, my friends, my church and the Woman's Club. (I love to cook — and to eat.)

There were some 30 glorious years between the stroke and the onset of arthritis when I could go places and do things under my own power. During these years, I took several courses in writing. Now that arthritis has sentenced me to the chair (the electric chair), I have a new interest. Believe it or not, writing gives me more pleasure than music ever did. There is a challenge and excitement to each new assignment. Isn't it strange how things work out?

Address: 4 Evergreen Parkway, Westport, Connecticut 06880.
VOLUNTEERING

FISH by JANET BERRY

FISH is an ecumenical group of men and women volunteers who extend a helping hand to people in emergencies.

FISH gives help in emergencies to all regardless of faith or circumstances. There is no charge, no obligation.

FISH provides emergency babysitters, housekeepers, meals, transportation, etc., gives companionship to the sick and lonely for as long as needed, and refers people to other sources of aid in the community.

Taking its name from the ancient symbol of Christ, the FISH is a movement of laymen designed to meet the emergency needs of the community. The Appleton branch of FISH has been in operation for almost a year and a half now, and we are averaging 80-100 calls a month. Naturally all of these are not calls requesting service, but also include referrals to our lists of paid help of various kinds (cleaning women, housekeepers, babysitters, etc.), requests for speakers to local groups, and information wanted.

I man the phone 24 hours a day and seven days a week, and if I go out I either arrange for a FISH member to come in to man the phone, or now I have an arrangement with the local professional Telephone-Secretaries group that gives me the equivalent of one free day of service a month.

We have found that the longer we are in business the more different types of calls and areas of life we get into. Several necessities have made themselves known: have a definite understanding on what people are signing up for; keep lines of communication open; have a board, though a limited one; accept donations (it's vital if your sponsorship is not a big concern which it should not be, and it is also important to the people you are serving to take out the sting of charity for them); making yourself known is absolutely necessary to the survival of the organization; volunteers should be impressed with the necessity of reporting back on the services they render, both as a check on who is doing what as well as being the only way to keep good records that allow us to serve better.

It is a very good way to feel needed and helpful and every one who has done any serving feels that it is a good thing. Until the organization is known there is a danger that you can lose some volunteers through inactivity (and later on through their feeling that they are being over-worked) but if they are the kind that really are not willing to commit themselves totally to the work then it is probably just as well to weed them out in the beginning.

If any readers have some questions or want more specific information, just let me know and I'll do my best to satisfy your needs. Address: 123 N. Green Bay Rd., Appleton, Wisconsin 54911. (Editor: Janet is a dermatomyositis quad.)
EQUIPMENT

LIFTS, ELEVATORS, TAILGATE LOADERS, TRANSPORT SEAT, SEAT BELTS, WHEELCHAIRS & ACCESSORIES, TYPING AIDS, BATHROOM EQUIPMENT, PORTABLE LUNG & SUCTIONING MACHINE, PUBLICATIONS. SPECIAL FEATURE: RAMPS FOR HOME & CAR.

HYDRAULIC LIFTS. The following companies will send free brochures describing their hydraulic lifts. Most have adaptations so that they can be used to transfer from bed to chair to tub to auto to swimming pool, etc.

Ambulift. White Engineering & Mfg. Co., P.O. Box 195, Tustin, California 92680.
Wolfe Lift Corporation for Medical Engineering, 1144 East Whittier Blvd., Whittier, California 90606.
American Iatro-Dynamics Corp., 1009 W. Arbor Vitae St., Inglewood, California 90301.
Ted Hoyer & Co., Inc., P.O. Box 949, Oshkosh, Wisconsin 54901. (They have recently added a new electric lifter to their line of products.)

ELEVATORS. Some simple electric elevators have been devised by disabled people for sale to other disabled folk. Among these are:

Earl's Stairway Lift Corp., 743 Airline Highway, Waterloo, Iowa 50701.
Vince LaMielle, East City Limits, Bad Axe, Michigan 48413.
Wheelchair Elevators, Inc., Box 49, Broussard, Louisiana 70518.

TAILGATE LOADERS. The Venco Loader, a product of The Santa Anita Mfg. Co., 4961 North Double Dr., Temple City, California 91780, is a versatile unit that can be attached either to the rear or the side of a station wagon or van. The lifting-lowering mechanism is electric/hydraulic, and various methods of controls are available. One enterprising young polio quad, Adolf Ratzka, designed a van with a tailgate which he operates with remote control. (See 1968 TjO, pg. 55.)

Here, and in Great Britain, there are numerous SMALL VANS that can be converted into proper vehicles for handling the disabled. Those desiring information would be interested in two recent, informative publications: The Transportation of Disabled Students, Study No. 10, Human Resources Center, Albertson, New York 11507; Conveyance of the Disabled, The Spastics Society, 12 Park Crescent, W.1., London. Price: 5 shillings.

The Ultra Van looks like more than a MOBILE HOME, with its aesthetic lines. From the brochure it seems well engineered to serve as a home on wheels anywhere for the wheelchaired. Write Ultra, Inc., 101 West 5th St., Hutchinson, Kansas 67501.
Seat belts, of course, are a must when travelling in a vehicle. They can also be of use for moving the disabled about in places where a chair is not feasible. Such a method of carrying is shown in the accompanying photographs of a TRANSPORT SEAT (figs. 1-3). This device is available from the J. T. Posey Co. at 39 Santa Anita Ave. in Pasadena, California 91107. Price: $36. Send for their free catalog of various safety supports.

Thanks to a gift from the Chrysler Corporation, FREE WHEELCHAIR SEAT BELTS will be available to "all patients suffering from muscular dystrophy or a related crippling disorder." Available from local chapters of the Muscular Dystrophy Associations of America.

An electrically operated SEAT-LIFT (fig. 3) to raise you slowly to your feet taking the struggle out of "getting-up" has been developed by Ortho-Kinetics, Inc., 2611 Friar Dr., Parma, Ohio 44134. Lift: $192. Special chair: $161. The lift may be used on other chairs or wheelchairs.

Colin J. Amstel of N.A. 42 B.E.L. Colony, Jalahalli P.O., Bangalore 13, India has made a SELF PROPELLED WHEELCHAIR, and an auto tricycle (fig. 4). Colin is a para, and he manufactures these devices for others with no profit to himself, which, to us, is a most noble effort. For further details please refer to The Journal of Rehabilitation in Asia's April 1968 issue.

Lord Snowdon's PLATFORM FOR WHEELCHAIRS. It is interesting to note that this eminent photographer, who has a small limp because of polio, is devoting some of his energy to designing for the disabled. He developed a 3-wheeled platform which will hold the chair, and this electrically driven unit would enhance mobility. The prototype was made for Quentin Crewe, Wootton House, Wootton, Bedfordshire, England.

A THREE-WHEELED GOLF CART (fig. 5) was ingeniously remodeled by Harold Babcock, engineer for St. Andrews Presbyterian College of Laurinburg, North Carolina. This brainchild enables Miss Carol White to get to and from classes and even
to venture about. Carol, a quad, is able to manipulate all the automatic controls on the cart, which also has a ramp incorporated into it so she can get in and out by herself. This just shows a beautiful example of what a devoted engineer can accomplish.

The Rehab-Chair is a SELF-POSITIONING WHEELCHAIR, and a recliner, tiltboard, therapy table, commode chair and emergency cart all in one (figs. 6-7-8). It is powered by a standard 12-volt battery, and has push button controls, and they can be mounted for hand or mouth control. The chair is shipped freight prepaid from Applied Scientific Knowledge, Inc., 800 South 13th Street, Lincoln, Nebraska 68508. The price is $1,695.

A combination WHEELCHAIR/TILTBOARD (figs. 9-10) has been designed by Peter W. Bressler of the Rhode Island School of Design in Providence, R. I. 02903. Triggered by lifting the arm rests, the spring action straightens chair to an almost vertical position, providing standing support for a person paralyzed from his chest downwards.

The unique thing about this chair is that it does not require an outside power source as it incorporates the natural motions of standing. The chair is not in production as yet, but Mr. Bressler hopes to be able to produce it at a price commensurate with other chairs.

A recently developed WHEELCHAIR CUSHION, the Hydro-Float, applies the principle of hydrostatic buoyancy to conform to all body contours, with equal distribution of pressure on supporting areas, thus reducing the possibility of development of decubiti. Made by Jobst Institute, Inc., Box 653, Toledo, Ohio 43601. Price: $89.50

Mr. A. G. Garris of the Los Angeles County Region of the California State Department of Rehabilitation devised a simple "do-it-yourself" PLATFORM TO FIT OVER A BATHROOM SCALE onto which a chair could be rolled. For further details, write TGC and we'll send a photocopy.

The Hoyer SCALE ATTACHMENT fits onto the top beam of the lift. Write: Ted Hoyer & Co., Inc.
Box 949, Oshkosh, Wisconsin 54901 for brochure. The price is about $100.

HILL HOLDER FOR WHEELCHAIRS prevents roll back, thus assisting quads to climb ramps and inclines. $27.50 per pair. Jaeco Orthopedic Specialties, Box 75, Hot Springs, Arkansas 71901. Their catalog features upper extremity orthotic equipment.

A new POWER DRIVE UNIT for chairs (fig. 11) has been developed by Wm. L. Shaw & Associates of 4869 Topanga Canyon Blvd., Woodland Hills, California 91364. This "Motorette" will fit nearly all chairs, they say. Suitable for use by persons with limited use of arms. The price is about $520 and includes battery charger, but not the battery. Tiller control permits one hand steering.

MULTI-PRONGED TYPING STICKS. It was reported by the Winnipeg, Manitoba's Canadian Paraplegic Association's publication Para Tracks that one of their group, a quad named Sam Lai, uses a unique method in typing on an IBM (figs. 13-14). A 4-prong stick is fastened to his right wrist and a 3-prong to the other. Sam has no wrist or finger movement, but with a slight rotation of the forearm and a forward shift from the shoulder he can jab away at about 25 words per minute.

SPEEDIER MOUTHSTICK TYPING is described by Ian Bompas of la Dowse Rd., Glenashley, Durban, Natal, South Africa: "One gadget the orthopaedic unit in Pretoria produced for me is the result of an idea I have had for years. It is a small micro-switch mounted on the side of my chair. When I flick my little finger (which is all I can move) it works a solenoid (electromagnet) mounted under the typewriter and depresses the shift bar. It takes a bit of coordination at..."
first, but I mastered it in a few hours and now I fairly race across the keys. Also it has strengthened my finger and the finger beside it considerably. Is this an original invention? Because if it is, I present it to the mouthstick typers of planet Earth with pleasure.

WHEELCHAIR LAVATORY (fig. 16) is available from Charlotte Byrum at American Standard, 40 West 40th St., New York, N.Y. 10018. The height of 34" from the floor makes a wheelchair easy to maneuver into position.

SANI-SEAT, Inc., 5835 N. Tripp St., Chicago, Illinois 60646 has a SANITET which uses warm sprays of water for cleaning, thus eliminating the need for toilet paper. Price: about $150.

A PADDED ADJUSTABLE TOILET SEAT (fig. 18) is available from D. R. Hulbert, 5601 North Newark Ave., Chicago, Illinois 60631, and the price is about $30.

MOBILE SIT-DOWN SHOWER CABINETS: Custom Contract Sales, Inc., 5300 New Peachtree Rd., Atlanta, Georgia 30005, has one called an "EASY BATH" (fig. 17). Rehabilitation Products of 2020 Ridge Rd., Evanston, Illinois 60201, has one called a "SAFETY BATH". They also have an excellent catalogue of toilet and tub rails, grab bars, as well as other fixtures, and self-help equipment.

J. E. Nolan & Son, Inc., Box 22181, Louisville, Kentucky 40222 manufactures BATH CHAIR LIFTS (fig. 18) which are water-powered; the chair lowers, turns, stops, and lifts. Price: $225.

PORTABLE RESPIRATORY EQUIPMENT: Four-piece fiberglass LUNG. Price: $480, plus motor and shipping. W. G. Plastics, Ltd., 175/179 Upper Grosvenor Road, Tunbridge Wells, Kent, England. Portable ELECTRIC SUCTIONING MACHINE is mounted on the chair and works off the chair battery or a car cigarette lighter (fig. 19). Write to Carol Harris of 8320 Norwalk Blvd., Whittier, California 90606. Her father has a patent pending on the machine and will give further details.
RECENT PERTINENT PUBLICATIONS

TELEPHONE SERVICES FOR THE HANDICAPPED. This is the most valuable handbook the disabled can have, if he wishes to communicate. Published by the Institute of Rehabilitation Medicine of NYU (400 East 34th Street, New York, NY 10016) in cooperation with AT&T, it shows all the various attachments which can be affixed to the common telephone to make it usable by the most severely disabled. Price $2.50.

TELEPHONE SERVICES FOR THE MOTION HANDICAPPED. This manual is also a result of the above study, but it is the telephone company's own Bible. It is not usually available to their customers, as it was designed to assist the Bell Tele Co representative in situations where the customer needs guidance, and all of the offices of the company should have a copy. If they do not, have THEM call Mr. D. Holland in the New York office, Area code 212 - 393-9800.

ASSISTIVE DEVICES FOR THE HANDICAPPED. This 186-page book, the work of the late Charlot Rosenberg, is certainly worth its price of $3.50. The book was aimed at the cerebral palsied, but there are many useful devices which can benefit the other disabled. It is especially interesting that these items can be made by a good do-it-yourselfer. The book is published by the American Rehabilitation Foundation, 1800 Chicago Avenue, Minneapolis, Minnesota 55404. If you cannot afford this amount, a special fund has been set aside by her family for those who need the book, but for whom the price is too much. In either case, write Mr. James Pearson at the above address.

REHABILITATION EQUIPMENT AND DEVICES CONSTRUCTED IN WOOD. This pamphlet describes many useful gadgets simply made for therapy, and it is available from the Institute of Rehabilitation Medicine, New York University, 400 East 34th St., New York, N.Y. 10016, at a price of $2. The gentleman who printed the above book with the Institute of Rehabilitation has now gone into the business of making and selling some of these devices. A free catalogue can be obtained from Stauffer Wood Products Co., RD #3, Pine Grove, Pennsylvania 17963. For the wheelchaired he has an ingenious folding lap-board at $10.95.

YOU ON CRUTCHES. This little book by Nora Works has helpful suggestions for the crutchborne folk; it can be had from The Carlton Press, 84 5th Avenue, New York, N.Y. 10011.

THE WHEELCHAIR BOOK. This recently received book by Herman L. Kamentz, M.D. provides valuable suggestions for professional people interested in mobility for the disabled. It seems expensive for an individual to buy - perhaps you can borrow it from your library. It can secured from the Charles C. Thomas Publishing Co. in Springfield, Illinois 62703.

WHEELCHAIR TO INDEPENDENCE. This well-illustrated book by Ernest M. Gutman, published by the same Thomas Company as noted above, is priced at $6.75, and is aimed at the elimination of architectural barriers in the home, on campus, and in the community.
Standards for public ramps vary. In the U.S.A., England, and Canada, a general purpose ramp for pedestrians, crutchers, and the wheelchaired should have at least a 1' rise in 12' of length; some authorities prefer a gentler slope of a 1' rise in 20.

In Canada, ramps may be as steep as 1' rise in 7' if they have two handrails and are for wheelchairs only.

The home ramp is a different animal, as it will be designed for a particular individual, and a particular home, and the above standards will not necessarily apply. Thus, it should follow certain general rules for safety and ease, but it can be imaginative and decorative.

The slope will be determined by several factors: are you fat or thin, do you have good use of your arms, do you have a strong or a weak "pusher," what is the size of your chair — or do you use crutches and/or braces?

The ramp should have a low guard rail to prevent rolling off, and should be at least 28" between these rails; if you have good use of your arms, the width should be 30" allowing you to brake your descent by turning against the guardrail. Also, it should be sturdily built, and should have handrails on at least one side, about 32" above the ramp and extending 1' beyond.

The surface should be made slip-proof by sanding the wet paint, using cleats, or covering with rough-surfaced roofing paper. If snow and ice are a problem during the winter, perhaps it should be enclosed or the surface covered with those new electric carpet strips.

If the entrance to your house is very high from the ground, you can "wrap" the ramp around the house, and perhaps camouflage it with shrubs or a lattice with vines, or design it to blend with your style of house.

Be sure to have an adequate turning area for getting on and getting off; so, with the above in mind you might be able to have a short, steep ramp, or a longer gentle one. Here, we have one that rises 2' in 10' of length, and as it is covered with a sandy surface, almost all of us can maneuver a wheelchair up or down.

Most important: always go up forward and down backward, whether you are your own pusher, or are being pushed, and if you lean forward, going up or down, the trip will be easier and safer.
Handi-Ramp, Inc. of 904 Countryside Highway, Mundelein, Illinois 60060 has developed two FOLDING RAMPS which take about half the space of a straight ramp.

The ramp in fig. 1 was described in the 1965 TDC; it is designed to be attached to a bus or van and is 5' long and folds within the vehicle to a 36" height. It weighs 75 lbs. and has four steps with non-skid treadways built in for the "pusher." Its price is $189.

They now have a lighter weight ramp (fig. 2) with the same dimensions and same width of 26". It is made of expanded metal and the rough surface makes for good traction for the aide. This is a PORTABLE RAMP which weighs 26 lbs. and sells for $113.

They also have foreign agents from whom these may be purchased. The designer's brother has muscular dystrophy, and there has been lots of thought in their design. The folding ramps are used in buses and taxi-vans for the disabled.

A DO-IT-YOURSELF FOLDING RAMP (fig. 3) was built into a '61 Greenbrier Station Wagon by Walter Robertson's father. This was made from two steel channels 90" long, 5" wide and 2" deep; these were cut into four sections each 45" long; two of these pieces were joined together by hinges and one end of each of these was affixed to a hinge on the floor of the van. When extended for egress from the van they stuck out 90" and when folded up like knees, they took up little space. This length's gentle incline makes for easier pushing up, and better control backing down.

CHAIR TIE-DOWN. Walter's respirator and battery are mounted under the seat of the chair, and this weight + that of the chair and occupant is
considerable. By the laws of Physics this mass combined with the vehicle's velocity makes for much momentum; to overcome this, the chair and the occupant are firmly tied down (fig. 4). So, be sure you're practically "screwed down" before you attempt any venture.

Ian Bompas of 4a Dowse Road, Glenashley, Durban, Natal, South Africa reports his method of WHEELCHAIR ANCHORING: "My new VW is the 1968 model and much more suitable for us types than the old VWs - the door is wider and there is much more room. We have cut two slots in the floor to sink the two back wheels of my wheelchair lower. This improves visibility, makes the chair more stable and by making the chair tip back increases one's comfort."

The new "Medicar," a LIMOUSINE WITH BUILT-IN RAMP, made by Checker Motors, Kalamazoo, Michigan 49007, features an extra high roof allowing people in wheelchairs to sit upright. (fig. 5)

A flat-floored French RENAULT WITH BUILT-IN RAMP was illustrated in the '67 TCG, page 32. By raising the roof, lowering the floor, and adding the ramp, Carl Haberman of 3336 Sycamore Knoll Drive, Columbus, Ohio 43219 can wheel himself in and drive from his wheelchair.

Mrs. Ida Daly, the sparkplug of The Handicapped Center in Seattle, Washington, had a HOMEMADE WOODEN RAMP built by her carpenter for her 1963 Corvair van. Its rails are fastened at the lower end to keep them from spreading and they are fixed at the top, being easily bolted to the chassis. They are lightweight and adjustable in width. (Ida is at the left in fig. 6.)
A MOVING SIT-IN

by Ron Dickson

With the light-change, kamikaze cabs, scurrying Hondas and yattering Yamahas led the assault, then a spurt of bicycles and a clot of pedestrians surged through Taipai's main artery. Suffering a sudden heart transplant (to my throat), I thought this wasn't the sort of Valentine's Day I'd anticipated.

A few days before, I'd arrived, wheelchair-bound in Taiwan. Now, with a driver and wooden ramp, I had a VW Microbus: I could be pushed aboard, in the wheelchair, and go anywhere easily.

These solutions were an informal United Nations: a former civil engineer with the U.S. Navy put me in touch with the automotive division of Air Asia, where the inventiveness of C. C. Li guided the securing of an American wheelchair to the deck of a German auto in the Republic of China.

There are three elements to Air Asia's creation: a ramp to get the wheelchair into the car; a device to lock the wheelchair to the car; a seat-belt to lock me to the wheelchair.

The RAMP (figs. 1-2) weighs 42 lbs., is made of aluminum with metal ribs to assure strength and rigidity, and is hinged for folding up into a convenient size to fit behind the back seat of the Microbus. Two teeth at the head of the ramp gnash firmly into holes bored in the VW floor, and a non-slip rugged surface paint coats the body of the ramp, which has raised sides.

The DEVICE is a pair of hinges, bolted to the floor, with a bar fastened with a swivel-joint to one hinge. When idle, the hinges lie relatively flat (fig. 3), so they don't interfere with wheelchair maneuvering. But when the wheelchair is shoved into place, with painted white lines to guide the positioning of the wheels, the hinges with the bar forced down between them - clamp firmly to the tubular framework of the chair. With a custom-made bobby-pin to keep the bar from springing out, this device keeps the chair absolutely rigid.

The SEAT-BELT (fig. 4) is a standard variety, but fastened to the wheelchair, rather than to the car. This way, the belt is helpful for extra-auto ventures: up curbs, down ramps, on corrugated sidewalks. The ends of the belt are bolted to the framework of the chair, and the buckle nestles snugly around the waist.

With a practiced driver/helper, the process of loading the occupied wheelchair (fig. 5) takes only minutes.

EDITOR: Detailed photo-copied plans available from TjG.
At the heart of the rehabilitation effort are the resources and methods of delivering services to disabled clients. Throughout our deliberations, we were confronted with evidence that many disabled individuals are not receiving the services they desperately need to permit them to become independent, self-respecting citizens.

Regardless of the administrative or legislative format that may evolve to insure interagency coordination and to support programs, the principle of 'the right service in the right manner, from the right persons at the right time' must prevail. On this point we are convinced that the vocational rehabilitation approach is the best yet devised for helping people to help themselves. Provision of comprehensive services to meet unique individual needs through a person-to-person relationship is far superior to mass or 'class' approaches. It takes people to help people. We hope this time-tested method of serving the disabled is not only continued, but vastly expanded.

Regional Rehabilitation Centers. Believing that further specialization will be required to assume adequate services to the disabled, we noted a great need for regional rehabilitation centers. In certain severe disabling conditions, the volume of cases is not large in a given area, yet they require highly specialized and intensive services.

It appears the best approach to serving the individuals in these categories is through regional rehabilitation centers, which should be established for the multiple handicapped blind, those with such neurological disorders as cord injury, stroke, and epilepsy, those with communications disorders, and those suffering from drug abuse. Depending on the number of clients and the geographical areas covered, the centers might be developed for single disability groups. On the other hand, it is possible that various disability groups could be served jointly by separate units within a comprehensive center. The centers should serve individuals of all ages and should provide self-care, recreation, and part-time employment as well as the traditional vocational rehabilitation services.

To illustrate the need for such regional centers consider the specialized problems presented by injury to the spinal cord.

Cord Injury Cases. There are about 125,000 spinal cord injury victims in this country, according to the most generally accepted statistics. Some 35,000 of them (paraplegics and quadriplegics mostly) have not received adequate care.

In paraplegia, both lower extremities are paralyzed and a portion of the trunk musculature may be involved depending upon the level of spinal cord injury. Quadriplegia involves paralysis of both upper and lower extremities and
and trunk musculature. Both conditions may be further complicated by bowel and bladder dysfunction, loss of sexual function and impairment of sensation and circulation in the body parts inferior to the spinal cord lesion. The psychological trauma related to the loss of so many important functions is severe and too often overlooked.

"Typically, cord injured patients are admitted to general hospitals for an average of 7 months. Yet, most of these hospitals do not have the medical and other specialists and the rehabilitation services that are needed if the patients are to achieve improved functional capacity and greater economic independence. Among the needs of the cord injured are the following:

"A. Reevaluation at a comprehensive medical spinal cord injury center.
"B. Remedial services required because of the spinal cord injury and because of the complications following injury. The coordinated services of specialists in fields such as neurosurgery, physical medicine and rehabilitation, orthopedic surgery, plastic surgery, urology, internal medicine, and psychiatry are usually indicated.
"C. A nursing team skilled in the 24-hour management of cord injury patients.
"D. Physical therapists and occupational therapists, to initiate reconditioning activities, ambulation and new ways of self-care.
"E. An orthotist to serve patients under the prescription of a physician.
"F. Social workers and rehabilitation counselors working with clinical psychologists to provide personal and family counseling, and to develop with each patient an individualized rehabilitation plan which includes a vocational goal, the vocational training needed to realize this goal, and ways of dealing with the realities of living, transportation, and maintenance of health.

"Each year from 3,000 to 6,000 persons develop paraplegia or quadriplegia due to spinal cord damage. These persons need the services described above but first they need:

"A. Transfer from the scene of injury to a hospital by ambulance, helicopter, police or fire department crews who are aware of handling techniques which do not aggravate or cause the cord injury...
"B. Transfer from the admitting hospital to a cord injury medical center by the most appropriate method as soon as the condition of the patient permits. A specialist from the center should prepare the patient for transfer.

"This country urgently needs a network of spinal cord injury facilities to provide prompt, comprehensive, coordinated care for paraplegics and quadriplegics. The medical spinal cord injury center should be strategically located on a regional basis and should have affiliation or cooperative arrangements with vocational rehabilitation centers and/or community workshops. Where practical, civilian cord injury centers should be coordinated with veterans' centers so that the necessary specialists can be shared. In addition, the cord injury centers should be functionally related to the Regional Medical Programs for Heart Disease, Cancer, and Stroke.

NATIONAL CITIZENS CONFERENCE ON REHABILITATION OF THE DISABLED AND DISADVANTAGED.
Miss Switzer and Dr. Rusk carried through one of the principal recommendations of the National Citizens Advisory Committee on Vocational Rehabilitation by arranging a conference in Washington, D.C. from June 24-27, 1969. About 1,000 professional and lay persons discussed rehabilitation of the physically and mentally disabled as well as those disadvantaged by poverty, drug addiction, criminal records, racial minority, etc. It was a vital "happening," an eye-opening experience for T&O's editor.

PLANNING CONFERENCE FOR COMPREHENSIVE REGIONAL SPINAL CORD INJURY CENTERS.
The Social and Rehabilitation Service sponsored a prelim-
inary planning conference of about 100 doctors and therapists and a few lay persons (including TGC's editor) November 25 and 26, 1968 at Rancho Los Amigos Hospital. The program coordinators were Elane Wilcox, Ph.D., Coordinator of Spinal Cord Injuries Center at Rancho and Fritz J. Cramer, M.D., Consultant on Medical Affairs, Social and Rehabilitation Service. It was an exciting and hopeful confluence.

WHERE WILL THE MONEY COME FROM?
By Leonard F. Goldwater, 305 West 28th Street, New York, N.Y. 10001. Mr. Goldwater is Senior Economist for the New York State Department of Labor. A muscular dystrophy quad, he is a member of Mayor Lindsay's Advisory Committee for the Handicapped and of the Board of Directors of the National Foundation for Neuromuscular Diseases.

After working out a pet scheme of how he might live independently many a severely disabled individual confined in an institution, has been defeated by the question, "Where will the money come from?" He need no longer feel defeated. It is my belief that the money is there - or soon will be.

Institutions are expensive. They must allow for a whole range of services that often require a lot of equipment and a large payroll. Most residents, however, do not need all the services. Each individual requires only certain services and, therefore, as far as he is concerned there is an element of waste in the institution.

By living independently, a former institutional resident will save money by providing for himself only those services that he needs. But there are other savings. Given the responsibility for the conduct of his own life, he is more likely to call on powers left fallow in an institutional setting and might well de-vise more efficient methods for his own care. Often he will become more productive in terms of developing his own personality to say nothing of even the possibility of stimulation to some income producing activity. Costs would be further reduced if several had apartments near each other or if they lived in the same apartment, making it easier to share attendants.

But, "Where will the money come from?" The answer is the government. The government has the money now but is instead spending it on keeping the severely disabled in institutions or hospitals. New York City, for example, spends $36 per day at Bird S. Coler Hospital which despite its name is actually a residence for severely disabled people. (Regular City hospital care costs $98 per day.) That is nearly $1,100 per month. What if each resident who asks for it were given a monthly check of that amount if he moved out and lived on his own? There is little doubt that except for those who need regular medical attention, they could manage.

What is needed is a campaign to convince the government to spend its money this way instead of that way. Unfortunately, it will be something of a struggle to rid the government of traditional stereotyped thinking and demonstrate to them that there is a dollars and "sense" advantage to independent living.

Economics aside, even if it should not save dollars and might even cost a little more than present custodial programs, can a price be put on the human happiness, the feeling of self-worth, the literal rebirth that such a program would provide the many disabled freed from institutional confinement? And what of the tensions of those not institutionalized but faced with it should their present situations change?
Known as DIG for short, this pressure group of disabled people was founded in 1965 by the late Mrs. Megan Du Boisson. Its main aim is to secure from the Government a pension for all disabled people. Firstly, DIG wants to find out how many disabled there are in Britain and the nature of their needs. 

For information, write: Mr. E. Caffery, Rellen House, Busbridge Lane, Godalming, Surrey.

CANADIAN HOUSING CONSIDERATIONS

In the March 1968 CALIFER Mr. A. T. Mann, Executive Director of the Central-Western Division of the Canadian Paraplegia Association, summarised the points which had been submitted to the Federal Task Force on Housing and Urban Development. Following are excerpts:

"It should be recognized that apart from the building specifications to accommodate wheelchairs or other disability requirements, the needs of the disabled will vary in the same way as they differ for any group of citizens. This may be governed by economic factors, the size of the family, the age, the special interests and the way of life to which they may have been accustomed. It is important that disabled people have some freedom of choice to select the kind of accommodation best suited to meet their needs — whether it be a house, a commercial apartment, or a special housing unit. Any attempt to group all disabled people into one large segregated project would not only be an injustice but for practical purposes would be doomed to failure.

"In order to carry out the ultimate goal of rehabilitation, housing policies for the disabled must allow for their effective integration into the economic and social life of the community so that the disabled can put to use the talents they have to offer. Units for the disabled must be interspersed within regular housing projects and must be within the main stream of activity if the disabled are to become productive and useful citizens."

RESIDENTIAL CARE NEEDS - A REPORT TO THE CALIFORNIA STATE LEGISLATURE. January 1969.

The Handicapped Persons Pilot Project was a 3-year study of 115 severely handicapped persons of normal mentality to determine their residential care needs. "Residential care" was used in the broadest sense to denote not a special institution but all types of services and living arrangements. Of special interest: the relative estimated cost of various types of care to the State, a nursing home with a youth wing, and an analysis of the problems of group living.

We recommend this report highly to all who are interested in the complexities of severe disability. Request a copy from: Lois C. Lillieck, M.D., Assistant Chief, Bureau of Chronic Diseases, California Department of Public Health, 8151 Berkeley Way, Berkeley, California 94704.

Excerpts from the findings:

"At the present time approximately 10,000 Californians under the age of 65, severely physically handicapped but of normal mentality, need some form of residential care services. Probably no more than 2,000 have critical needs not being met at any one time. Within the 10,000 are represented all socioeconomic levels. Their common characteristics, the range and degree of their needs and their dependence on others for life itself make them a distinct group for which the combination of existing assistance programs are inadequate.

"There is no one agency, program or source which now meets the multiple, complex and varied needs of the physically handicapped. The individual (or his family) has to seek out and piece together the various services needed, or do without.

"Of the help available to the handicapped, much goes unused....

"Most handicapped persons can and do live independently in the community and express a strong desire to continue doing so....

"These handicapped persons have alert, active minds,
normal ambitions, normal emotional needs and reactions, normal abilities for creativity and normal desires for mental stimulation, occupation, recreation and community life.

"Individual characteristics - initiative, perserverance, education, independance, ingenuity - seem to influence what the person can do for himself and the range of his activities, often as much as his physical condition."

Excerpts from the recommendations:

"It is recommended that a State program be established with responsibility to see that adequate services are provided in the place of residence to care for the comprehensive needs of the severely handicapped of normal mentality, drawing upon all available government, voluntary and private resources in the community.

"Establish local supervisory teams of nurse and social worker to determine the needs, to find sources of necessary services and to see that they are coordinated, delivered and changed as needed on an individual basis.

"Arrange a variety of living accommodations in the community appropriate to and suitably adapted to the needs of the handicapped and in which comprehensive residential care services can be rendered.

"Provide for the temporary shelter and residential care of those handicapped persons who ordinarily live at home.

"Provide funds to modify dwellings and repair or purchase equipment necessary to maintain a handicapped person in his own home or to preserve the integrity of his family.

"That case management and ongoing residential care services be provided by a health-oriented community agency of high quality, such as a coordinated home care or other agency, staffed with a well-trained professional group of paramedical and social work members accustomed to functioning as a team.

"Provide reasonable attendant-type care, as needed, to be given adequately trained and supervised non-professional, agency-hired personnel.

"Of the possible alternatives the proposed programs can provide the full range of services needed by the severely physically handicapped of normal mentality at the lowest cost."

SWEDEN'S SPECIALIZED APARTMENTS DISPERSED AMONG ORDINARY APARTMENTS WITH SPECIALLY TRAINED PERSONNEL FOR PERSONAL SERVICES. The Fokus Society was established in 1964, on private initiative, for the purpose of working jointly with state and county authorities to arrange housing for the disabled and to provide them with essential services, such as attendant care, housekeeping, and some meals, as well as to assist them in finding work. The booklet, Fokus - A Way of Life for Living, illustrates the interchangeable equipment and special electrical system.

Write: Claire Soderberg, ISRD International Information Service on Technical Aids, Ibsengatan 8-14, Bromma 3.

SCOTTISH HOME VISITS TO SPINAL CORD INJURED BY A DOCTOR/MEDICAL SOCIAL WORKER TEAM. This pilot survey of 101 ex-patients of Edenhall Hospital Spinal Unit by Dr. W. A. Murray and Mrs. M. A. Thompson is reported in detail in the 43-page booklet, Paraplegia At Home. This is available from E. & S. Livingstone Ltd., Edinburgh and London, for 10s. 6d. The team aimed at friendly visits, discussing the housing, financial, physical, and psychological problems. After each visit a summarizing letter was sent to the family doctor.
HOME CARE SERVICES
A wealth of source information is included in the 130-page annotated bibliography, Selected References on Home Care Services for the Chronically Ill and Aged. It was compiled by Mrs. Mabel I. Edwards and published in June 1967. Free copies are available from the Institute of Gerontology, University of Iowa, Iowa City, Iowa 52240. It is clearly and attractively presented. Excellent!


HOMEMAKERS AND HOME-HEALTH AIDES. Since the Welfare Federation in Cleveland established The Homemaker Association in 1967 the demand for its services has steadily increased. The homemakers are professional trained and supervised. Most of the women are in their 50's and 60's and are paid from $1.40 to $1.75 an hour, depending on their experience. Their services include care of children, shopping, planning and preparing meals, light laundry and housekeeping, and general individual assistance. Those who are assigned homemakers pay a fee scaled to their income. For instance, a family of five with $5000 annual income would pay about $20 a month. (Ohio Medicare provides for homemakers' services for the elderly.) Homemakers work an eight hour day, five days a week, but where required, fewer or more hours may be arranged. For more information, write: The Cleveland Homemaker Service Association, Room 514, Cuyahoga Savings Building, 2123 East 9th Street, Cleveland, Ohio 44115.

COUNTY COORDINATED HOME CARE PROGRAM is detailed in a reprint, Organisation of a Coordinated Home Care Program in Erie County, New York. Available from the author, Mitchell E. Roth, Hospital Review and Planning Council of Western New York, 235 North St., Buffalo, N.Y. 14201. Significant quote: "Home health agencies, coordinated home care programs, and comprehensive coordinated home care programs all meet the basic multiservice requirement for participation in Medicare. The goals of all these multiservice programs include reducing the cost of illness by providing comprehensive high-quality, noninstitutional patient care to avoid hospitalizing the patient or confining him in a nursing home, or in another type of long-term care facility. All are financed under the provisions of titles XVIII and XIX of Public Law 89-97." This program for 217 patients was published in Public Health Reports, Vol. 82, July 1967.

COUNTY CHRONIC ILLNESS INFORMATION CENTER is an important step in the direction of filling the gaps between the individuals' needs and the community's services. For descriptive brochures of one such program, write to the Center at 2239 E. 55th St. (VGRS Building), Cleveland, Ohio 44103.

FOR THE MUTUAL BENEFIT OF THE DISABLED AND DISADVANTAGED more programs need to be developed to train and employ the disadvantaged to assist the disabled.

Existing programs, such as Foster Grandparents, Senior Aides, Homemakers, Meals-on-Wheels, Foster Homes for Disabled Adults, and other creative dovetailings of people need to be expanded.
HOUSING FOR THE PHYSICALLY IMPAIRED - A GUIDE FOR PLANNING AND DESIGN is an attractively presented 49-page publication by the U.S. Department of Housing and Urban Development. We recommend it enthusiastically to all groups thinking about housing as well as to individuals planning to remodel or build. Excellent drawings and photographs; comprehensive bibliography. The text concisely covers:

- Basic concepts of low and moderate income housing, including federal programs, sites, and neighborhoods.
- Structure details: entrances, corridors, elevators, parking, lighting, planting, laundry facilities, storage.
- Dwelling units: living room, kitchen, bedroom, bathroom, windows, doors and hallways, lighting, telephone, television, emergency signal system, heating, custodian.
- Community space: lounge, recreation or multipurpose room, craft activity area, library, kitchen, health clinic, wash rooms, public telephones, drinking fountains.


ODDMENTS AND ENDMENTS

by Gini Laurie and Sally Schmidt

SPINAL CORD INJURY HANDBOOK. 34 pgs. 1968. Free. N. Elane Wilcox, Ph.D., Rancho Los Amigos Hospital, East Imperial Highway, Downey, California 90242.

SPINAL CORD INJURY - HOPE THROUGH RESEARCH. Information Office, National Institute of Neurological Diseases, Bld. 31, Room 8 A 18, Bethesda, Maryland 20014.

BIBLIOGRAPHY ON SELF-HELP DEVICES AND ORTHOTICS, 1950-1967. Publications, Institute of Rehabilitation Medicine, New York University Medical Center, 400 East 34th St., New York, N.Y. 10016. $2.

CARE OF PATIENTS WITH BOWEL AND BLADDER PROBLEMS: A Nursing Guide. By Doris A. Bergstrom, American Rehabilitation Foundation, 1800 Chicago Ave., Minneapolis, Minnesota 55404. 40 pgs. $1.

MEDICAL IDENTIFICATION JEWELRY. Medic Alert Foundation, Turlock, California 95380. Stainless $7; Silver $9.

FREE BOOKLETS ON WHEELCHAIRS AND REHABILITATION are being published for patients and physicians by Everest & Jennings, Inc., 1803 Pontius Ave., Los Angeles, Calif. 90025.


INSTRUCTION MANUAL FOR A RECIPROCAL WRIST EXTENSION FINGER FLEXION ORTHOSIS. Thorkild J. Engen, C.O., Director of the Orthotic Department, Texas Institute for Rehabilitation and Research, Houston, Texas 70025.

BARIUM ENEMA COMPLICATIONS. A report on the discovery of a rock-like formation low in the abdominal cavity one year after a complete GI series was written by Jane Jeffris, R.N. and published in the Illinois Medical Journal, December, 1968. Titled, "The Perils of Immobility. A First-person Case Report," her article concludes: "With the immobile patient, keeping the administration of barium for just the extreme case is desirable, but not always possible. The use of other types of contrast media might be considered. If barium must be used, then a scout roentgenogram should be done a week or two after the barium study in order to get an 'all-clear.'"

POTPOURRI

SAC-CES. Quarterly by the Society for Accessible Construction. $5 yr. Box 7368, St. Petersburg, FL 33734.


FLORIDA CONDOMINIUM APARTMENTS FOR DISABLED. For prices and floor plans of proposed 30-unit project, write: L. J. Power, 11396 115th Ave., North, Largo, Florida 33740.

TALKING BIBLE RECORDS. THIS has a set to loan. It was donated by Senator Carl T. Curtis as part of a memorial set up in memory of his daughter, Clara Mae Hopkins.

FACTS ABOUT SEX FOR EXCEPTIONAL YOUTH. Especially written for young people who have neurological, physical and/or learning disabilities. It can be read with profit by any adolescent. N.J.A.B.I.C., 61 Lincoln St., E. Orange, N.J. 07017. $2.95 plus 25c postage.


RESPIRATORY POLIO HAM. Bob Armstrong, 4 Roberts Lane, Saratoga Springs, NY 12866, WA2LVM, 15,20,40 meters, S.S.B.

CLOTHING PROBLEMS. Sandra Kelly, syndicated columnist of "Sex What's New," has offered help for readers with their sewing and altering problems. Write to her at St. Louis Society for Crippled Children, Inc., 4108 Lindell Blvd., St. Louis, Missouri 63108.

LINGERIE AND UNDERGARMENTS, plus velcro by the yard. Fashionable, Inc., Box 23188, Ft. Lauderdale, Fla. 33307.

FREE ELECTRIC PAGE TURNER. Edythe Downey, 3665 River Rd., Endwell, N.Y. 13760.

NUDIST COLONY. A TG reader who is a muscular dystrophy quad businessman has hired a naked cook and handyman and is still looking for a nude secretary to work for him at Sunland which he recently purchased and renamed Naked City.
BENEFITS
CHECK YOUR SOCIAL SECURITY BENEFITS. If you were disabled before age 18 and you are unable to work - you may qualify for Social Security disability benefits if either your mother or father is receiving Social Security benefits or has died. If you become disabled between ages 24 and 31, you will need credits for only half the time between age 21 and the time you become unable to work. If you are disabled before you reach age 24, you will need only 1 1/2 years of work credits out of the 3 year period ending when your disability began. Contact your nearest Social Security Office. If you are homebound, a representative will come to your home to check your eligibility.

HOW TO PROVIDE FOR THEIR FUTURE. Much of the information applicable to the disabled. National Association for Retarded Children, 420 Lexington Ave., New York, N.Y. 10017.


FEDERAL BENEFITS FOR VETERANS AND DEPENDENTS. 55 pgs. Supt. of Documents (address above). 20c.


DIRECTORY OF ORGANIZATIONS INTERESTED IN THE HANDICAPPED. 92 pgs. Committee For The Handicapped, People-to-People Program, 1218 New Hampshire Ave., NW, Washington, D.C. 20036. 50c.

WIVES OF VETERANS with permanent and total service-connected disability and WIDOWS OF VETERANS who die of service-connected disability are now entitled to educational assistance from the Veterans Administration for up to 36 months of schooling, for full time institutional training, and an allowance of $130 a month.


INTERNATIONAL
COOK BOOK FOR THE DISABLED. Recipes and solutions to problems are being collected by Mrs. N. Robertson, 40 John Perrin Place, Preston Hill, Kenton, Harrow, England

ENGLISH DLAG PUBLICATIONS. An Introduction to Domestic Design for the Disabled. 12s.6d. List of Kitchen Equipment 5s.9d. (Not free as erroneously reported in the 1968 TjG.)

HOW TO PROVIDE FOR THEIR FUTURE. Much of the information applicable to the disabled. National Association for Retarded Children, 420 Lexington Ave., New York, N.Y. 10017.


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DIRECTORY OF ORGANIZATIONS INTERESTED IN THE HANDICAPPED. 92 pgs. Committee For The Handicapped, People-to-People Program, 1218 New Hampshire Ave., NW, Washington, D.C. 20036. 50c.
QUAD OWNED/OPERATED MEXICAN RESIDENCE. Quads $160 per month; paraplegics $120 per month. Rates include room, board, maid and laundry service and, for quads, 24 hour aid and attendant. Swimming pool. Accommodations for women. L. Kegan or P. Patino, Calle San Antonio 67, Fracc, Las Fuentes Guadalajara, Jalisco, Mexico.

PARALYZED VETERANS OF AMERICA IN MEXICO need books and magazines for their library. PVA Club, 226 Las Palmas, Ciudad Granja, Guadalajara, Jalisco, Mexico.

PHYSICIANS MAY DONATE THEIR MEDICAL JOURNALS to colleagues overseas. Doctor-to-Doctor Program, % The World Medical Assoc., Inc., 10 Columbus Circle, New York, N.Y. 10019.

ENGLISH EDUCATION INFORMATION SERVICE is known as "ACE." Designed to provide guidance on all types of education without charge, it maintains a question-answering service and publishes a journal six times a year. Advisory Centre for Education, 57 Russell St., Cambridge.


SWISS THREE-WHEELED ELECTRIC WHEELCHAIR. "Gradient approx. 20% (1 in 5), drives up onto the pavement (max. 15 cm.–6 ins.)." Electro Drive, Eidnattstrasse 16, 8032 Zürich CH.

ENGLISH FOOT-STEERING DRIVER of an automatic Mini will share details of his steering disc, etc. Peter N. Spencer, 94 Claremount Road, Wallasey, Cheshire, England.

Cunard's QUEEN ELIZABETH II has special facilities for wheelchair passengers.

MOTEL GUIDE FOR THE DISABLED; EUROPEAN HIGHWAYS. ICTA Information Centre, Fack, S-161 03 Bromma 3, Sweden. 50c.

BACK ISSUES AVAILABLE
TOOMEY J GAZETTE
Box 149
Chagrin Falls,
Ohio 44022

$3 per copy from the non-disabled
$1 per copy from the disabled

Vol. III, 1960. QUAD BUSINESSMEN.
FEATURES: Photos and job experiences of insurance salesmen, accountant, magazine salesman, engineer consultant, systems engineer, textile researcher, engineer-inventor, real estate broker, security salesman, advertising salesman, and tutor.
EQUIPMENT: Artificial muscle, portable aspirators, remote controlled tape recorders, adaptations for playing cards. 32 pages.

Vol. IV, 1961. HOLIDAYING WITH IRON LUNGS.
FEATURES: Trailer for childsize bed, tank, and chestpiece; English caravan; house trailer with built-in plywood respirator; converted school bus for iron lung; yacht-borne rocking bed and Portalung.
EQUIPMENT: Easels, Emerson wrap-around chest respirator, Tunnicliffe jacket.
OTHER ARTICLES: Physically handicapped cloistered nuns. A veteran contest winner. 32 pages.
Vol. V, 1962. (Spring) QUADS ON QUADRANGLES.
FEATURE: A special 20-page feature of the experiences of quads acquiring higher education by telephone, correspondence, and attendance.
EQUIPMENT: Reading aids, self-aspirators, bed bathtub, portable tub, shampooing.
OTHER ARTICLES: Home-based magazine service. Dr. Sandiford on English respirators. The Voice-pondence Club. 64 pages.

Vol. V, 1962. (Fall) COMMUNICATIONS.
FEATURES: A special 9-page feature of the experiences of quads as writers in various fields; amateur radio, listing of individual hams and clubs; tape clubs.
EQUIPMENT: Telephone adaptations, typewriting aids, electronic multi-controllers.
OTHER ARTICLES: Dr. Holbert on kidney stones. Low V.C. and altitude. Designing and selling greeting cards. 52 pages.

Vol. VI, 1963. HOUSING AND QUADS AT HOME.
FEATURES: Family life and fun, adoption, post-paralysis marriage, volunteering, swimming, fishing, camping.
EQUIPMENT: Rubber and sheepskin cushions, custom-built elevators, Australian fibre glass lung, English self-adjustable bed/mobile chair, singular wheelchairs.
OTHER ARTICLES: Vacation directory. Housing projects in the U.S.A. and abroad. 52 pages.

Vol. VII, 1964. QUADS INTERNATIONAL
FEATURES: Photos and letters of quads in New Zealand, Australia, India, Canada, England, Scotland, Ireland, Switzerland, France; International magazines.
EQUIPMENT: Foot-typing, fashions, portable fibre glass lung and portable rocking bed, mouthsticks, painting aids, hand and arm slings, toileting.
OTHER ARTICLES: Home study - Institute for University Studies; studying writing. Home Businesses - TV monitoring, telephone calls to elderly people, selling Amway products, typing and telephoning with gadgets. Hobbies - chess and postal chess, bowling, photography, contesting. Dr. Holbert on cold prevention. 84 pages.

Vol. VIII, 1965. TRAVELING QUADS - MEDICAL ENGINEERING.
TRAVEL FEATURES: Honeymoon trip to the Bahamas, Mediterranean cruise with respiratory equipment, Hawaiian tour, use of respiratory equipment in flight, Mexican vacations, German visit and a respiratory fiasco, by air to Japan and Hong Kong, across Canada with a rocking bed in a trailer, three months in England and Germany - solo - using a rocking bed at night, pilgrimages and travel tours.
MEDICAL ENGINEERING FEATURES: Polyester functional orthosis, research arm aid, toothborne telegraph transmitter, foot-operated coded typewriter, English reading aid, New Zealand disstaff appliance, gated inertially controlled matrixed control system, electronic multi-controls.
EQUIPMENT: In-wheelchair travelers using special chairs, ramps, hydraulic tailgates and lifts; quad drivers, foot-controlled driving; wheelchair loader, carrier, cover, and narrower.
OTHER ARTICLES: Dr. Agerholm on helping the disabled to live to capacity. Adoption of Korean-American war orphans. Slot-racing. Bookshelf.

Vol. IX, 1966. VOCATIONAL REHABILITATION AND WHEELCHAIRS.
REHABILITATION FEATURES: Federal and state.
WHEELCHAIR FEATURES: English respiratory chair, self-reclining, "Pushup" arms, wheelchair lore, foreign sports models, convertibles, climbers.
EQUIPMENT: Remote controlled typewriter for under $50, tongue switch, sight switch.

HIGHER EDUCATION: A special 21-page feature on the experiences of 23 severely disabled students at various colleges and their reports of campus facilities for wheelchairs.
EMPLOYMENT: A special 19-page feature of profiles of 35 severely disabled writers, doctors, counselors, teachers, lawyers, etc., the majority of whom earned their degrees post-disability.

EQUIPMENT: Citizens band radio, Egerton Stoke Mandeville bed, Stryker flotation pad, one-hand typing, transportation oddments and endments, chin-controlled wheelchair, Swedish curb-climbing wheelchair, remote controls, frog breathing, portable lungs.

Vol. XI, 1968. TENTH ANNIVERSARY. HOMEMAKING AND HOME-BASED BUSINESSES.
HOMEMAKING: A special 24-page feature of the problems and solutions for the wheelchaired with severe arm involvement.
HOME-BASED BUSINESSES: A special 13-page feature of readers' experiences and opportunities.
EQUIPMENT: A special 14-page feature on quad driving, remote controls, wheelchair accessories, new models, oddments and endments, electric wheelchair carrier, drop-back dolly and wheelchair surfboard; portable lungs and portable rocking beds, bed pans, urinals, mouth-operated phone with lightweight headset.