Celebrations and Change

In this issue, we share legislative news from both the Community of Vermont Elders (COVE) and the Vermont Coalition for Disability Rights (VCDR); offer some thoughts on leadership, introduce some Vermont groups working on transportation and access to dental care, and introduce a new VCIL column, “Got Access?” Morgan Brown reminds us of the power – and dangers – of the words we use to cloak power and frame policy, and K.K. Wilder reminds us of what to cherish in life as age and disability make the gift of life both vivid and challenging. Her beautiful words remind me of the cardinal outside my window yesterday – vivid, alive, and rarely observed; it is a reminder of the short glory in Vermont’s fleeting spring and summer.

We have emerged from a winter and a hard legislative session to the dappled sun and rain of summer amidst rumblings of the upcoming election season and a new biennium in the Legislature. We hope you vote and speak up about what matters to you. Your participation and all your stories are more important than ever. But in between, in this vivid and lovely season, the (very small) writing and editorial staff of The Independent also wish you time off to celebrate life, a fleeting and glorious gift.

- Deborah Lisi-Baker, Editor
Letters to the Editor

EDITOR’S NOTE: Limited space prevents us from printing all letters in full. Our apologies and gratitude to those who write to thank us and share your stories. Thanks, too, for the donations to help keep The Independent going. We are very grateful!

In Praise of Self-Managed Care

I enjoy The Independent and have been receiving it for many years. My husband and I have a 45-year-old son who lives at home with us. He has been Deaf-Blind since birth. He works at a local college with an aide who has been with us for 17 years. Our son has a Medicaid waiver that we family manage to pay his worker. We are so thankful for his trusted worker and how that waiver allows him to work.

Keep up the good work on The Independent. I am sending $20 to help you keep it going. Thank you.

Janet DeMatties
Poultney

Artist and Poet Speaks Out

I am hunting and pecking my way in order to let you know how much I appreciate your endeavors on behalf of needy and disabled people of all types and ages in Vermont. For about two years I have encountered such kindly and helpful people that my life has been made appreciably better than it would be without their support...Cuts on their funding would be so hard on so many truly needy people...Plus cuts from funds for the Department of Disabilities, Aging & Independent Living... home health, etc. All programs that should be considered only humanitarian in a civilized, basically affluent society such as ours.

Thank goodness I live at The Commons in Middlebury...if not, and were I not eligible for the Attendant Services Program in order to hire help to keep me going, I’d no doubt be in a nursing home right now...BUT...

I don’t intend to give up! I am a well-known and liked poet, and until the sudden onset of Myasthenia Gravis, which makes it virtually impossible for me to paint as I have done for the previous 40-odd years, was nationally known for my paintings of Vermont. I understand that even the governor has one of my large prints of the Middlebury Green hanging in his home...

I hope I am wrong but I sometimes feel that entitlement programs are highly suspect by certain segments of the population ... They may even question reliable statistics about poverty and child hunger. (And isn’t the latter a disgrace in the most powerful country in the world?) It is a good thing I don’t have a soapbox handy or, come good weather, I might try to make it down to the Green to make a fool of myself on behalf of the needy people who truly DO exist in our beautiful state.

In any case, it has taken me two hours to type the above, so I will close here, with just two words: THANK YOU!

Betty Hampel
Middlebury
A good friend wrote to me recently, quoting the great disability rights advocate Justin Dart’s constant call to all of us: rich and poor, famous and more often not; “Lead on,” he would say. “Lead on.”

If I had room on these pages I would write the name of every Vermonter who has inspired and moved me this year: speaking out at the Statehouse, sharing your stories at community gatherings on disability and senior issues, talking about transportation and health care and other services for Vermonters, sharing a story about what worked or what didn’t. For each of you I have been fortunate enough to meet, there are a thousand more. We need every voice and everyone’s commitment: Lead on.

On the second day of May this year I was there to watch 10 Vermonters present their personal plan to take on an advocacy and awareness issue. These 10 Vermonters are part of the first leadership series weekend co-sponsored by the Vermont Developmental Disabilities Council and the Center on Disability and Community Inclusion. They brought their own experiences, particular gifts and personal vision to the shared experience. That – more than anything – made the weekend take off. Each person has a goal and will be working on moving it forward; while coming together periodically to share experiences, explore advocacy strategies and then go back to their communities to get things done.

I just learned that Dolly Fleming, the amazing director of the Community of Vermont Elders, is leaving for another job: She will be directing the PACE Program in Chittenden County. She will be greatly missed at COVE even though she will still be out there reaching out and speaking out for older Vermonters and others whose voices are not always heard. Dolly likes to see people come together and make change. I admire her ability to speak the truth with great courtesy; to give people courage and hope in hard times and to inspire moments of celebration when it is time to dance. She will keep us dancing whatever she does.

In May, Susan Hasazi retired from UVM. Her friends and former students came from different parts of Vermont and from all over the country to thank her for inspiring them to take their place in the work for disability rights in small towns and places of political power. An innovator leader in education since 1976, Susan has been an international voice for inclusive education and has mentored and inspired many of the teachers and researchers promoting inclusive education, here in Vermont and across the country. In addition to teaching and research, she worked with parents and others to form the Vermont Coalition for Disability Rights. Susan will continue to inspire so many of us to step up and use our particular gifts to help make the world change for the better.

Finally, I remember three women: Nancy Chard, Edna Fairbanks-Williams and Sarah Littlefeather. These three Vermonters were tenacious in working for needed change and were not afraid to speak truth to power. They left us recently; their lives over, but their memories and spirits still with us. I can hear them saying: “Lead on.”
2010 COVE Legislative Summary

by Michael Sirotkin, Esq.

The 2010 Vermont legislative session was mostly about money and budgets. Indeed, at the outset, Vermont faced over a $150 million general fund deficit with many programs, benefits and services for seniors targeted for reduction and/or elimination. In the end, however, little was cut and we made progress on a number of fronts. Overall, it was a very tense, but good year.

FY 2011 Budget (H.789): The governor’s proposed budget called for close to $100 million in human service reductions, a significant portion of which would have impacted seniors and the aging network. Programs and benefits suggested for significant cuts included: adult day; area agencies on aging; kidney dialysis transportation; foster grandparents; senior companions; long-term care ombudsman; caregiver registry; neighbor to neighbor; home modification; housing and supportive services; cap on adult dental benefits; increase in pharmacy premiums; and a range of provider and utilization reductions in home and community-based services (e.g., personal care, case management, etc.) under the Choices for Care waiver.

In the end, virtually none of the above was reduced. Again, this is a remarkable achievement given the budget climate throughout the session. One reduction that is still on the table revolves around reduced nursing home utilization under Challenges for Change (see below).

Challenges for Change (H.792): One of the major new ideas to meet this year’s budget crisis, which was heralded by the governor and legislative leaders alike, was Challenges for Change (CFC). Through a new law, CFC challenged and required the executive branch to come up with $38 million in general fund savings (probably twice that when one included lost federal matching funds) through efficiencies and other creative approaches to delivering state services. It gave the governor’s office authority to institute programmatic savings without the normal legislative budget oversight or review. Many advocates feared this approach would lead to budget cuts harmful to their clients, without the notice and transparency that usually accompanies the appropriations process.

Human services were targeted for $17 million in CFC state savings. While several controversial proposals were suggested that would have impacted seniors (see estate recovery and Medicaid liens below) the only major change enacted in this area was a call for $5 million in savings from a “decrease of nursing home utilization through early intervention, prevention and increased use of home and community based services.” DAIL has met, and will continue to meet, with stakeholders as to the details of how they will decrease utilization. Bundled rates for providers based on consumers’ needs and preferences are one idea being explored. DAIL is expected to receive $500,000 in upfront expenditures to serve additional persons at risk of nursing home placement until savings begin to materialize.

Estate Recovery and Medicaid Liens: One of the most objectionable proposals to surface from the administration, in both Challenges for Change and in the budget, were suggested changes to restrict eligibility for long-term care Medicaid; and increased estate recovery efforts to recoup, through probate court or through liens on the beneficiary’s home, the equivalent of any LTC assistance provided to seniors. Other proposals included reducing the amount a community-based spouse could retain in assets; make non-probate assets (such as joint property) subject to probate and recovery; count retirement funds as a countable asset; lower income eligibility standards; require formal contract arrangements by family caregivers, etc.

Fortunately, none of these proposals went through. If they had, or if they resurface, they could have serious unintended consequences of impoverishing spouses and denying otherwise needy elders of timely nursing home or home and community-based long-term care services. For example, it is clear that some of these proposals –such as placing liens on beneficiaries’ homes – would have a chilling effect on seniors even applying for the services they need and deserve.

Continued on next page
Choices for Care Waiver: At the beginning of the session, the “waiting list” for the Choices for Care high needs group was approaching 70 elders. The waiting list was in reality a “freeze,” as no new seniors gained eligibility even when a senior already on the program passed on. COVE and the Senior Citizen Law Project challenged this practice as being in violation of the Choices for Care waiver we had received from the federal government, and also the new federal stimulus bill which does not allow tightening of eligibility for Medicaid programs while giving states receive enhanced Medicaid matching dollars. In January the Department of Disabilities, Aging and Independent Living moved everyone off the waiting list and into services. They have, however, now started a new waiting list, which bears watching.

Adult Protective Services (H.698): It is well known that Vermont lags behind other states in the resources devoted to protecting vulnerable adults from neglect, abuse and exploitation. As such, COVE proposed legislation this year which would have: 1) required an independent analysis of the APS services in Vermont, and 2) required annual inspections of residential care homes and assisted living facilities (currently only nursing homes require annual inspections).

Because of all the budget challenges above, affirmative legislation costing money had little chance for success this year. Nevertheless, we were able to get provisions passed in S.209 that requires the independent analysis of the APS services in Vermont, and 2) required annual inspections of residential care homes and assisted living facilities (currently only nursing homes require annual inspections).

Long-Term Care Insurance (H. 202): This bill would have established a new type of LTC insurance policy called “partnership” policies. On face value they are a good idea as they offer a feature to protect more assets of policyholders if and when they need Medicaid assistance. In other words, when the benefits of these partnership LTC policies run out, and individuals have to look to Medicaid to pay their bills, they won’t have to pauperize themselves before gaining access to state assistance.

Our concern with this bill is that it would have brought thousands into the LTC insurance market without the necessary safeguards in place. We raised concerns relating to marketing abuse (as we have seen with medigap policies and Part D policies); complexities of the product; portability of the benefits if one leaves the state; potential “State of VT” seal giving buyers a false sense of suitability; solvency of insurance companies 30 years into the future; meaningful enforcement against wrongdoers, etc.

Without addressing these concerns we suggested that the Legislature wait until we could gauge the experience from other states with this rapidly expanding product. The issue was further complicated by the recent enactment of federal health care reform, which included new universal limited LTC insurance through the CLASS Act. In the end, our concerns were heard and the Legislature declined to act.

Fuel Assistance (H. 456): This new law represents a significant expansion of this important program and years of work on COVE’s part. Vermont has always had generous benefits (compared to other states) for those who qualify. The problem has been that our asset and income eligibility tests were quite restrictive, thereby limiting those who could qualify.

The new law removes any asset test (a step that should especially help seniors) and increases income eligibility from a net income of 125 percent of the federal poverty level (FPL) to a gross income test of 185 percent of FPL. It is expected that over 10,000 new households will be made eligible by these new eligibility standards.

To help pay for this major expansion newly eligible households will receive about half the benefit current recipients receive (projected to average about $450 and $900 respectively) and current beneficiaries will see about a 20 percent reduction from the current relatively generous benefit levels.

Volunteer Drivers (H.639): This new law will ban auto insurers from denying coverage or adjusting rates because some people use their car for volunteer purposes. Apparently, surcharges...
or denials based on volunteer driving had been causing problems for both the volunteers and the nonprofit community alike.

Sales Tax on Dietary Supplements: COVE testified and worked successfully to defeat proposed taxes on dietary supplements. The original proposal had been even worse in that the House was considering taxing all over-the-counter drugs. We made the case that either proposal would hit seniors especially hard as they disproportionately rely on these items. Moreover, we argued that many of these products like vitamins, fish oil, etc. were important to cost-effective preventative health care.

Public Pension Reform: The treasurer’s summer task force recommended significant reductions in the pensions of both state employees and teachers, as both pension funds were unsustainable as currently structured and financed. The teachers ultimately agreed on annual savings of $15 million of the $20 million suggested by the task force, through increasing the retirement age and teacher contribution rates. However, it was also agreed that pension benefits for long-term teachers would go up and a retiree could elect to receive spousal health care coverage for the first time. Current retirees and those within five years of retirement would not be impacted by these changes. Action on the state employees’ pension fund was deferred to next session.

Court Reorganization (H. 470): In 2009, the Judiciary was charged with finding $1 million in savings from their budget. Their response to the Legislature was a major restructuring of the courts, which would have downsized the number of probate judges from 14 to 5 and limited the jurisdiction of assistant (side) judges. COVE was concerned that access to probate courts not be diminished. In the end all 14 probate judges will continue in each and every county in Vermont, although their compensation may be adjusted to more accurately reflect their workload. The new law also requires that all probate judges be lawyers, although there is a grandfather provision to allow current non-lawyers to continue serving.

Health care reform (S.88): The major pieces here were: 1) the requirement of three new studies, including one on single payer, to potentially guide state reform efforts next year and beyond, and 2) the advancement/enhancement of Vermont’s efforts on chronic care management (the Blueprint). The latter should be of particular concern as it is, in significant part, premised on the federal government allowing those on Medicare to become active Blueprint participants. This could add support to those trying to better monitor complex multiple chronic conditions. However, certain protections under Medicare could also change if Vermont receives the waiver it seeks.

One issue that became very controversial at the end of the session was whether pharmaceutical manufacturers would have to disclose to the attorney general the amount of samples they provide for free to doctors. Doctors were split on this. Some felt they would no longer give their patients samples if this information were disclosed. Others said this will soon be required by federal law anyhow, and it would benefit future prescribing patterns by avoiding the tendency to continue with unneeded costly brand name drugs. Ultimately, the bill did include the required disclosure to the attorney general of providing free samples.

$250 Part D “Donut Hole” Rebate: The new federal health care bill requires a one-time rebate check to go to all Medicare recipients who reach the donut hole under part D. Checks for $250 will start going out in June and will continue until next March.

At the very end of the session, the Legislature decided that the state should receive the $250 for those seniors who are on VPharm (which provides partial donut hole relief, and other Part D wrap around benefits). COVE objected. We have submitted comments and are waiting to see how the state responds.
VCDR’s 2010 Legislative Session Wrapup

by Karen Lafayette and Deborah Lisi-Baker

Here is a summary of highlights of legislative action this year on policy and budgetary issues of importance to the Vermont Coalition for Disability Rights. This report covers the legislation that saw significant action this year.

All legislation that has been passed by the House and Senate is now law – either signed by the governor, or allowed to become law without his signature.

Although the focus this legislative year was largely on the budget deficit, proposed cuts and the Challenges for Change restructuring legislation, VCDR was able to facilitate the passage of a number of important pieces of policy legislation that have been part of our platform priorities for a few years. This update also summarizes other legislation that passed and is also of interest to VCDR, but not necessarily “promoted” by VCDR.

Legislation that was not acted on this session will need to be re-introduced next year.

POLICY LEGISLATION

The following bills were passed except for H.400, which is being addressed through administrative rulemaking (see summary below):

H.524: An act relating to interference with or cruelty to a service animal guide dog. As passed, this bill (1) prohibits a person from interfering with any service animal in the course of the performance of its duties or training as a service animal; (2) establishes penalties for cruelty to a service animal or for the killing of a service animal; and (3) permits an owner or user of a service animal that has been harmed in violation of this act to obtain restitution from or file a civil action against the person who violated this act among other items added to the legislation.

H.66: An act including secondary students with disabilities in senior-year activities and ceremonies. After substantial testimony last year and again this year, the graduation participation elements of H.66 were taken up by House Education and passed. The Senate added the School Merger section of the bill (originally House Bill H.782) and the bill passed both houses. H.66 is now law and the section on “Graduation Participation” is effective immediately.

This bill ensures that each secondary student with a disability has the opportunity to join his or her age-appropriate peers in all senior-year activities and ceremonies even if the student’s individualized education plan (IEP), 504 plan, or both anticipate that the student will need more than four years in which to complete all graduation requirements. The student receives a certificate of recognition and participation does not affect or limit the student’s eligibility for special education services, related services, transition services, or Section 504 services following the ceremony.

S.150: An act relating to parking reserved for people with disabilities. This bill increases the fees for a violation of parking in spaces reserved for people with disabilities from $100 to $200 and adds signage language. This bill was signed into law by the governor on April 20.

H.400: A bill to promote positive behavioral intervention and supports in schools, reduce the use of physical restraint, and prohibit the use of mechanical, chemical and prone physical restraint and seclusion as methods of addressing challenging student behavior. The bill did get a hearing in the House Education Committee. Groups interested in this legislation were encouraged to continue to meet to work out differences. The Department of Education has promised to address VCDR concerns through regulations (rules) with involvement from concerned Vermonters. VCDR is working with the DOE in the attempt to have rules in place for the 2010-2011 school year. These rules were to be submitted to the State Board of Education for consideration at the State Board of Education’s June meeting.

Additional Policy Bills of Interest to VCDR

These bills were monitored by VCDR but were not part of the platform:

Continued on next page
S.262: An act relating to insurance coverage for autism diagnosis and treatment. This bill was passed by the House and Senate and signed by the governor on May 27. It requires health insurers to cover the diagnosis and treatment of autism spectrum disorders for children 18 months to age 6 or when they enter first grade, and calls for the Agency of Human Services to evaluate the feasibility and budget impacts in providing insurance coverage for autism spectrum for school-age children.

S.88: An act relating to health care financing and universal access to health care in Vermont. This bill establishes the goals of universal access to essential health care services in Vermont through a publicly financed, integrated, regional health care delivery system; provides mechanisms for cost containment in the system; and provides a framework, schedule and process to achieve that goal. The bill requires three studies, including one on single payer, to guide the state reform efforts for the next few years. The legislation also approves the expansion of the Blueprint for Health, an initiative to refocus medical care on prevention and chronic-care management to help patients avoid as much as possible the expensive and debilitating consequences of chronic illnesses. Design and implementation plans are due to lawmakers in February.

H.507: An act relating to voluntary guardianship and children in foster care. It modifies permanent guardianship law for children to comply with new federal provisions and enable guardians to access federal funds for guardianships.

S.205: The Revised Uniform Anatomical Gift Act includes language requiring the Agency of Human Services to undertake an independent evaluation of the Adult Protective Services provided by the Department of Disabilities, Aging, and Independent Living's Division of Licensing and Protection, if funds can be identified and secured for this purpose. Other sections change some of the language on forensic evaluation of individuals in custody, and call for the convening of a work group to address issues relating to forensic examinations of mental health patients and defendants.

H.639: An act relating to motor vehicle insurance for volunteer drivers. This law will prohibit auto insurers from denying coverage or adjusting rates because some people use their car for volunteer purposes.

H.456: An act relating to fuel assistance. This bill increases eligibility providing more low-income Vermont households with fuel assistance for the purchase of essential home heating fuel. The bill also adjusts the application acceptance, processing, and eligibility determination to coordinate with other economic benefits administered by the agency of human services. (See COVE update for additional information).

FISCAL YEAR 2011 BUDGET

The 2010 Vermont legislative session started with a $150 million general fund deficit, with a budget presented by Gov. Douglas that called for dramatic cuts in human services benefits and programs, totaling over $104 million ($53 million general funds and $51 million federal matching funds).

The session was focused for the most part on the state budget and on the Challenges for Change legislation, a new approach to reducing “spending” through restructuring government programs to be more effective and efficient: $38 million of general fund “savings” in targeted agencies was built into the fiscal year 2011 budget. The reduction targets in Challenges were in addition to the cuts proposed in the FY 2011 budget.

Although the House and the Senate restored most of the reductions and program eliminations in DAIL and DCF proposed by the governor, most budgets were level funded. There was little opportunity to fund new programs, to increase existing funding, or to restore any reductions made last year, with the exception of some caseload increases.

Many Important Services Maintain Funding

Proposed budget cuts that were restored by the Legislature include:

Department of Health (VDH): AIDS services, Children with Special Health Needs clinic and respite services, and a Kidney Association grant.

Department of Children and Families programs: Reach Ahead, case-management for post secondary education students, and Individualized Development Accounts (IDA).
Department of Disabilities, Aging and Independent Living: Vocational Rehabilitation set-asides and contingency funds, flexible family funding, targeted case management, HASS Housing and Supportive Services grants, Area Agencies on Aging, Foster Grandparents Program grant, Senior Companion grant, Long Term Care Ombudsman grant, Attendant Services Program, Neighbor to Neighbor Program grant, and partial restoration of the Caregiver Registry.

Office of Health Access: Dental services cap maintained at current level, children’s personal care funding maintained, and no cuts made to Home and Community Based Services, though implementation of the Challenges law may result in changes in funding and practices.

Action on Other VCDR Budget Priorities

Funding for Developmental Services caseload was increased to $6,680,537, which includes funds for graduates and public safety. There was no appropriation for peer navigators to replace their grant funding. There was no funding restored (from last year’s position reduction) to Green Mountain Self-Advocates.

In the last days of the Legislature, the Senate Appropriations Committee did review these two programs along with a number of others and wanted to consider how they might fit into Challenges for Change. In the end nothing specific was included, but it was suggested that each or both of these programs might be able to apply for the grant money detailed in the Challenges $2 million investment for community proposals.

The budget bill was amended while being passed on the floor of the House to include the continued service of the Vermont State Hospital canteen.

Though many programs were protected from cuts this session, there is great concern that the next legislative session will see significant proposals to cut spending on human services, health programs and other state-sponsored programs.

CHALLENGES FOR CHANGE

The governor signed H.792, the Challenges for Change law, on June 1. This bill implements earlier Challenges for Change legislation, making changes to current law which allow policymakers, administrators, service providers and school administrators to create outcome-driven changes in service and performance, to implement these changes with reduced state funding, and to maintain accountability for meeting goals through clear measures of outcome achievement.

This legislation calls for a reduction in spending by about $38 million in FY 2011 in general fund savings, and a reduction in spending of $72 million in the fiscal year 2012 budget. The law gives the charge and the authority to the current administration to present further proposals to reduce spending (savings) by the $8 million not yet specified to meet the “targets.” (The reduction numbers are approximate from the most recent documents available, but there may be discrepancies as numbers continue to be adjusted and updated).

The law states that the Agency of Human Services “shall achieve the same or better outcomes for clients and achieve the associated savings under this act without reducing government benefits, limiting benefit eligibility, or reducing personnel unless reduction is a direct consequence of achieving the required outcomes or specifically provided for under the Challenges legislation.” The new law also says that AHS must “engage the direct participation of service recipients, their families, service providers, and other stakeholders” to develop plans that meet Challenges goals and that, “the agency of human services shall make available to community providers and organizations existing data on demographics and program outcomes and indicators to assist in the community planning.”

Goals that are being used to guide Challenges restructuring include: elders, people with disabilities, and individuals with mental health conditions live with dignity and independence in settings they prefer; families and individuals live in safe and supportive communities; adults lead healthy and productive lives; Vermonters receive affordable and appropriate health care at the appropriate time, and health care costs are contained over time.

These goals are very general. It is important that individuals with disabilities, seniors, families and others are able to provide ideas and suggestions

Continued on next page
on what needs to be available from the Agency of Human Services to make these goals work for all Vermonters.

**Pilot Project and a Governing Board**

The Agency of Human Services is authorized to fund some pilot projects, designed to test new ways of providing community services at lower cost. The law also establishes an oversight board, that will review and make recommendations on proposals from community service providers and other groups.

The agency has come up with $31.6 million in proposed savings in human service and health programs. These are not achieved but anticipated savings that need to be reported on as the work to restructure services goes forward. These include restructuring for cost reductions in Medicaid utilization review, developmental and mental health, integrated children’s services, employment initiatives, corrections, and in proposed “community-driven” initiatives.

**Required House and Senate Oversight**

The administration will meet quarterly with the legislative committees overseeing the Challenges initiative and must report on the “milestones met and progress made” as well as summarizing how success is being tracked and sharing any data showing progress made in reaching the stated goals. Legislative oversight includes review by the Joint Fiscal Committee of the House and Senate.

The law states that any proposal for a reduction in excess of 5 percent of the gross expenditure of the appropriated funding for any single function, program, benefit or service requires the secretary of administration to submit the plan to the Joint Fiscal Committee. The JFC can approve or disapprove within 21 days. If they disapprove, the secretary can submit a revised plan, but in the end, the administration can “proceed as originally proposed.”

**Getting the Word Out? Maybe Not**

Section G.26 of the Challenges for Change legislation limits the number of copies of the calendars, bills and journals that will be published. In effect, paper copies will be made for House and Senate members but no longer be made available to members of the public. (They will be published online.)

Advocates have spoken to the issue both at the end of the session and more recently at the Joint Government Accountability Committee, asking legislative council to find some way to accommodate members of the public that cannot afford to pay for copies and/or, for whatever reason, cannot get the information online, or does not work for their purposes.

The Challenges legislation is still a work in progress and requires many things: stakeholder involvement, quarterly reporting to an expanded Government Accountability Committee, Joint Fiscal review of the administration’s proposal to realize the $8 million more in reductions, and the creation and execution of an RFP process for community-based initiatives. In addition to the budgetary implications, the Challenges legislation involves numerous policy changes as the state restructures the delivery of services to Vermonters. VCDR will continue to monitor Challenges activities over the summer and hope that individuals with disabilities and families will get involved with public meetings and planning activities.

The Joint Legislative Accountability Committee has a regular meeting schedule throughout the summer and fall. We will publish that schedule and update members on the implementation process. Interested readers can contact us if they want to join VCDR’s e-mail alert list.

VCDR would like to thank the Vermont Developmental Disabilities Council for its support. We also want to recognize the hard work and dedication of the hundreds of Vermonters who spoke up for disability rights and services this winter. We thank you all!

For more information, or to get involved in VCDR’s legislative and policy work, contact VCDR at:

11 East State St., Suite 2
Montpelier, VT 05602

or visit our Web site:
www.vcdr.org.
Ever try to park in front of one of those blue signs, but there is another van or car there already – a vehicle with NO PLACARD hanging from the mirror and no universal wheelchair symbol on the license plate?! We have good news for those unhappy about lax enforcement of accessible parking spaces!

On July 1, the fine for vehicles illegally parking in accessible parking spaces went up to $200 statewide. The Vermont Center for Independent Living celebrated this victory with a recent press event in Bennington attended by lawmakers, local law enforcement and community members.

VCIL worked with Sen. Dick Sears, D-Bennington, to pass this bill into the law now named Act 82: “An Act Relating to Parking Reserved for People with Disabilities.” VCIL also had strong support from Sen. Bob Hartwell, D-Manchester, on the Senate Transportation Committee and Rep. Tim Corcoran, D-Bennington, on the House Transportation Committee as well as Sens. Phil Scott, R-Montpelier, and Dick Mazza, D-Colchester.

Vermont law requires that parking provided for public buildings must include at least the number of parking spaces required by ADA Accessibility Guidelines (ADAAG). The ADAAG requires one accessible parking space for every 25 parking spaces. The ADAAG also stipulates a one-in-eight spaces requirement for van-accessible spaces. Vermont Act 82 also clarifies that accessible parking spaces be marked by clearly visible ADA-compliant signs. Authority is granted to responsible parties (those in charge of the building or law enforcement officers) to remove vehicles illegally parked.

You can help enforce this law!

Educate your local law enforcement officers. Help the parking enforcement officers understand that issuing one ticket to an illegal vehicle in an accessible parking space or the adjacent access aisle is far more efficient use of time and resources than tickets for minor parking violations. One $200 fine accessible parking violation equals 20 $10 overtime tickets!

Help enforce the law. Take a photograph of the illegally parked vehicle. If an officer receives a picture with details of when and where the vehicle was parked, the officer has the right to issue the violator a ticket.

Educate other drivers. Inform those pesky parking violators who are “just parking there for a minute” that their time must be pretty darn valuable at $200 per minute. An average consultation rate for a lawyer in Vermont is $200 for an entire hour.

Encourage your municipality to make accessible parking a priority. Increased revenues from parking fines would be well spent improving sidewalk and building access. It might even make sense to increase the number of accessible parking spaces downtown. More spaces to enforce, more fines to collect! Department of Justice specifications for accessible parking spaces are available through www.ada.gov or VCIL.

The Community Access Program works to improve access to buildings, services and programs in the state of Vermont – and is supported by the regional DBTAC ADA Technical Assistance provider: New England ADA Center from the National Institute of Rehabilitation and Research (NIDRR).

For more information, contact the Community Access Program: 1-800-639-1522 (Voice/TTY) or visit: www.vcil.org.
Two Vermont Farmers Share Their Stories

by Deborah Lisi-Baker

Miles Horton, one of the great American community organizers, credits a farmer, his grandfather, for some of the best words of advice he was ever given: “It is OK to hitch your wagon to a star but make sure your wheels are planted firmly on the ground.” I have carried this suggestion with me for many years and consider his words when I need to find practical solutions to personal and social problems.

Maybe farming teaches some people the orientation and skills needed to be practical visionaries. Recently I interviewed two farmers: Vermonters from different generations with a shared connection to both farming and disability. One turned 90 recently and the other is 24. They live in different parts of the state and don’t know each other well. What they share is a love of farming and the creativity and determination that help make ideas turn into reality.

Merton Pike: A Voice for Vermont Farmers and a Pioneer in Peer Support

I used to ride to meetings with Merton Pike, a farmer from Stowe recognized for his leadership in the Vermont farming community. He is a lean man with a quiet, expressive voice and a wonderful collection of personal and family farming stories. Listening to his recollections, I heard his belief in the families who worked in farming and the importance of their coming together to organize a fair market for farm products. His public work on behalf of farm families began in 1955, when he was elected to serve as one of four Vermonters on the board of directors of an early farmers’ cooperative, the Eastern State Farmers Exchange. Ten years later the Eastern Star Farmers Exchange and three other cooperatives voted to merge into Agway. Merton told me, “We voted ourselves out of a job.” Or so he thought: It turned out his job continued. He was asked to serve on Amway’s board, representing Vermont farmers. Altogether, he spent 28 years serving on these two boards.

Merton has had a disability since 1971. It happened on the farm. He remembers ’71 as one of those years with a lot of spring snow. Finally the snow had settled enough that he thought he could spread manure. When he got off the John Deere Crawler to deal with a broken bolt, it slipped backward, over both his legs. Both feet had to be amputated and one leg later needed further amputation above the knee. In the hospital on his 51st birthday, he had to deal with gas gangrene and a long rehabilitation.

It was a hard time. He said it was “a glad day” for him when he was over the infection and able to move on with learning to live with a disability. His message for others going through something like this: “Don’t be afraid to ask for and accept help. It’s available, if people know about it.”

Finding the right help isn’t always easy and sometimes individuals and groups have to create new resources to address an unmet need. Farmers have some unique equipment needs and many have pretty independent spirits. Finding the right help and accepting it can be hard. “AgrAbility had been started by then but I didn’t get wind of it till later. I heard about their first conference though. I went and suggested starting a support group for farmers with disabilities; so we could get together and help each other.” The support group idea Merton suggested took off and these groups are an important part of what AgrAbility offers Vermont farm families.

Vermont AgrAbility is a collaborative partnership with VCIL, UVM Extension and Rural and Agricultural VocRehab. It offers information, peer support and assistance to farmers with disabilities who want to continue to work in agriculture. Services include assessment and job counseling, help with assistive technology and modifications, as well as peer support.

At age 90, Merton still goes out to talk with and

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support other farmers who are adjusting to an amputation or other disability. He told me, “I think the support groups are the most important part of what AgrAbility does: As a person who has been through it, there’s a lot of satisfaction in helping someone else.”

Kenny Young: Doing a Job He Loves and Building the Future

Kenny Young also has a personal connection with Vermont farm history; his family has been farming by the Connecticut River for many generations. We talked by phone and e-mail and then he invited me to meet him on his Springfield farm. A friend and I took the afternoon to drive down Interstate 89 and take the turn toward the river road. Stopping in front of the farm, I looked across the narrow road to follow the bend of the Connecticut River toward a stand of trees on a rise beyond the water. It is beautiful here with the working farm and the still water.

“It is beautiful. We’ve been here so long, we take it for granted; then people stop us to enjoy the view and remind us,” Kenny says. The farm spreads out down below the house. It has been in the family for more generations than he can count. He just built his own home down the road, on a spot bought from his family. The farm is a place of friends and family, of long memories and longer days: planting corn, taking care of 200 heifers and repairing farm equipment for their own use and for other farms.

Kenny has grown up working on this farm. He’s always loved the work. “Book learning was not my thing. I wanted to be out there doing things.” Farming was the job he wanted and the life he planned.

Four years ago, when he was 18, his future in farming was suddenly uncertain. A champion snowmobile racer, he had been badly injured during a race in Quebec. A rainstorm and then freezing temperatures had caused the ice track to freeze unevenly and break up; and the ice buckled under three racers, one of them Kenny. He and his machine smashed into blocks of hay that had been put there to protect the racers if they skidded off the track. No one had realized that the wet hay had frozen into hard immovable blocks. Kenny and his 500-pound machine pounded into the frozen bales and his spine was broken, paralyzing his lower body.

He was transported to Sherbrooke for nine days of emergency care and then to the local Mount Ascutney Hospital for five weeks of rehabilitation. Quick and skilled medical intervention was essential to his recovery, he told me; but the real rehabilitation starts at home. “When you get home that’s when you really learn how to get on with life. When I was lying in bed up in Canada, I was thinking about the farm. I told Dad, ‘I think I can still farm and earn my way if we bought the right tractor.’”

When he got home, they bought a tractor with automatic shift and retrofitted two others so that Kenny could use them, using rods on the clutch and brakes. He has a manual chair he uses at home and an electric chair he keeps for getting around the farm: He is protecting his shoulders and saving muscle strength for the farm work and living his life.

Vermont AgrAbility helped pay for the adaptive drive lessons and hand controls. The driving

Continued on next page
instructor had some great tips and suggestions to make adaptive driving easier. AgrAbility has also given good leads to other adaptive farm equipment. As farmers, he and his family and co-workers know a lot about fixing and retrofitting equipment. Thinking of his own adaptations isn’t hard and is something he enjoys. What Kenny really wants is to buy an old telephone truck and adapt it for use on the farm. He knows how he’ll to put it to good use as an adaptive farm aid, getting to the places and equipment on the farm. AgrAbility also hooks him up with other farmers with disabilities. Like Merton, he is a mentor. He went to Connecticut to talk with and support another farmer who became disabled. “The best people to learn from are the people who live it,” he tells me.

“If there’s a will there’s a way,” Kenny says. He spent this spring planting a field of new corn: plowing and harrowing the field to get it all smooth, planting the seed. They board heifers for other farmers and grow hay. “The first cut goes to horse people; the second cutting to two alpaca farms. It is a good product,” he says. They have no trouble finding buyers. In the winter they repair farm equipment for their own use and for other farms.

Disability slows him down sometimes; but does not stop him from staying active and doing the things he loves. The farm work, workouts, adaptive skiing with Adaptive Ski & Sports and recreational biking with his girlfriend keep him in great shape. “In the winter there is not as much for me to do on the farm. “I met someone, another man, who has a spinal cord injury. He has become a good friend and he introduced me to adaptive sports. Larry has lived with a spinal cord injury for 11 years. In addition to showing me that I did not have to give up sports, he told me the really practical things about living with spinal cord injury, simple things that make a difference. He would say, ‘Move your legs to this spot and then transfer.’ He showed me things he figured out from experience that I never got in rehab.”

Larry introduced Kenny to the Adaptive Ski & Sports Program at Mount Ascutney where they have skiing equipment that makes it possible to ski sitting down. They help others learn during the formal adaptive skiing programs. “I am not certified as an instructor; but I can show people practical tips that come from having a disability, like how to move your hips as you ski.” Other times he and Larry go out on the slopes alone. Larry loves downhill skiing on a monoski: “We go during the week when the slopes are pretty empty and ski all day. “There’s nothing like the freedom up on the mountain all day,” Kenny says. “If I could stand up this minute, I would still monoski,” he says.

What would he tell someone newly disabled? “Don’t give up. I know a few people who just stay at home and don’t get out. They think their life is over. It’s not… or it doesn’t have to be. There are hard times- I know - but there is a lot of opportunity out there. Go out and try it. Talk to someone who’s been through it.” Kenny pauses awhile; and then says, “If they want to talk with somebody, they can call me.”

He credits his new friendship with Larry for helping him regain his life in sports; and his faith and the love and support of his family for helping him make it through this life transition. “A lot has changed in the last four years. I feel bad for anyone who has to go through this without a close family.” He said there are times when things seem bleak but more often there are good days – days doing the things he loves with people who matter to him.

“You just have to take it one step at a time.” He talks about the important things: traveling and doing adaptive biking with his girlfriend; working up on heavy equipment on the farm; fulfilling his long-time dream to build his own house. “It is all accessible,” he says. “People just don’t realize how many barriers there are in most buildings until you face them.” It gave him great pleasure being part of the construction crew: operating the excavator and seeing his house take shape.

And farming with his family. He has been ill a few times, with infections related to his injury, but when he is at work he keeps farmers’ hours. “It is 12- to 14-hour days, when I can do it. I like what I am doing,” he says. And I can tell he does.
Paying Tribute To Departed Friends

In recent months, we here at the Vermont Center for Independent Living have lost three people who are near and dear to our hearts.

Board member Nancy Chard died on Feb. 18, 2010. Nancy served on the board for more than three and a half years. Among the qualities she brought to the table were a sharp mind and an ability to grasp complex issues and find realistic and sensible solutions.

Nancy served in the Vermont Legislature for 12 years, most recently as a senator from Windham County. A lifelong educator, she served as a dean at the Community College of Vermont and was a founding director of the Southern Vermont Education Center. She also founded the Adult Basic Education program in Brattleboro. Her wisdom, honesty and forthrightness were strong assets to the many organizations in which she was involved. Nancy is greatly missed.

Sarah Littlefeather, a former employee and consultant to VCIL, passed away on May 1, 2010. Sarah had experienced progressive physical disabilities in her later years that led her to become a strong advocate for disabled adults and for the importance of supporting them in independent living. She served on local and state boards in Vermont and was actively involved with the Statewide Independent Living Council at the time of her death.

VCIL Executive Director Sarah Launderville said, “Sarah was an amazing woman with a great spirit and she will be missed. I will always remember her wonderful sense of humor, incredible advocacy for our movement, as well as her gentle heart.”

Steve Rhoades, an original VCIL board member and former president, died on Oct. 6, 2009. He served on the board for six years and was also active in the Participant Directed Attendant Care Program.

VCIL founder Barry Bernstein recalled a story about Steve attending the White River Junction town meeting, which was held in an inaccessible building. In order to make his point of access for everyone, Steve was willing to go along with the “Let us help you mentality” while a few of the men tried to lift him up the stairs – in his 400-pound wheelchair! He was a true activist – never afraid to take action to make a point.
VCIL Gets Makeover Thanks To Gift From EverBank

VCIL’s Montpelier office is sporting a new look thanks to EverBank of Stowe’s furniture donation.

VCIL held a reception in February to thank EverBank. Sarah Launderville, the executive director of VCIL, said, “By receiving this donation, VCIL does not have to spend money on its physical space and can continue to put money into working with people with disabilities in the community.”

Elizabeth Brown, EverBank’s vice president/senior business strategist, explained how the work stations became available: “When we decided to move our Stowe, Vt., office to a smaller building, we realized the cubicles were going to be a tight fit, so we offered them for sale. After a few for-profit companies inquired, we received a call from VCIL. A representative from VCIL came to look at the cubicles and explained why they were such a great fit for VCIL’s needs – their easy accessibility for VCIL employees with disabilities.”

Brown said that donating the cubicles to VCIL felt like the right thing to do. “It provided EverBank the opportunity to support VCIL’s mission and further the quality of life for those who depend on VCIL.”

EverBank’s Stowe location is a professional office whose team works in the areas of Web and application development, marketing and other corporate business strategy functions. EverBank is primarily a branchless, direct-to-consumer bank interacting with customers online, by mail and by phone.

VCIL was pleased to be able to “pay it foward” in terms of EverBank’s generosity by donating its old furniture to other organizations in the state. Eight organizations, including Greensboro Wonder & Wisdom, benefitted.

Brown said, “At EverBank, we view giving back to our community as another way of doing what we do best, which is to identify pressing needs and provide innovative solutions. We feel we make a real difference when we focus our charitable efforts on the most critical concerns of our community. EverBank agrees that VCIL’s mission of working to promote the dignity, independence and civil rights of Vermonters with disabilities is a critical one.”

The VCIL staff all chipped in to get the space put together.

“What was wonderful for me to see was the teamwork of the staff coming together to change the space, paint the walls and get everything cleaned up for what has become known as our ‘new look,’” said Launderville. “Every person on staff pitched in and I mean everyone. I do not want to mention one person over another – but the whole move was coordinated by Michelle Grubb, our finance officer, and she did an excellent job.”

Launderville said, “I am not sure if EverBank knew at the time of their decision to make the donation how far reaching the donation would be. While the physical space is a wonderful gift, this donation is more than an enhancement of physical space. This is a donation symbolic of community giving and inclusiveness.”

Emergency Preparedness Toolkits In The Works

UVM’s Center on Disability and Community Inclusion, VCIL and several self-advocacy and family groups are working together to create a planning toolkit to help individuals with disabilities and families do the kind of personal planning that can keep you safe in a weather or other regional emergency. Over 50 individuals with disabilities and family members are helping create this Vermont toolkit that helps you prepare for disability and health needs. For more information, or to request a copy of the toolkit, visit the CDCI’s Web site, www.uvm.edu/cdci or contact them at 802-656-1334.
Expanding Access to Oral Health Care

Although oral health is central to overall health, tens of thousands of Vermonters do not have access to preventive or routine dental care. The Vermont Oral Health Care for All Coalition is working to build a statewide consumer voice and raise public awareness of the need for better access to affordable dental care. One important way to bring attention to the unmet oral health care needs of Vermonters is to hear from Vermonters themselves. If you have gone without dental care, we need to hear from you.

• Have you ever delayed dental care because you couldn’t afford it?
• Have your kids ever gone without dental care and why?
• What problems have you faced when trying to get dental care?
• Have you or your children ever had to go to the emergency room for oral health reasons?
• Have unpaid dental bills caused you to go into debt?

Join the campaign: The Vermont Oral Health Care for All Coalition is composed of organizations including consumer groups, children’s advocates, organized labor, disability rights and senior advocates, health care providers and health clinics. We are collecting stories to help expand coverage of oral health care in Vermont. You can share your story by contacting Ellen Gershun at VCHCS, 153 Elm St., Suite 2, Montpelier, VT 05602; by e-mail at ellenvchcs@live.com; or by phone at 802-498-8039.

Settlement Reached in Forced Treatment Lawsuit

According to a recent Burlington Free Press article, an out-of-court settlement between the state of Vermont and a former patient at the Vermont State Hospital creates additional safeguards for individuals served at the Vermont State Hospital. Disability Rights Vermont helped file the grievance and lawsuit. The complaint occurred after a patient was put in seclusion and then force medicated when he continued to yell threats, even though he was by then in a secure room and not a risk to himself or others.

A.J. Rubin, an attorney at Disability Rights Vermont, noted that this use of forced medication is a violation of state requirements that there must be a finding of imminent threat to self or others before forced medication can be administered. VHS did not admit to any wrongdoing; but settlement included a $20,000 award and a written apology from the director of VHS. Fletcher Allen Health Care was a party to the agreement since the doctor who approved the use of forced medication is a FAHC employee.

Medicaid Advisory Board Seeks New Members

The committee that advises on Vermont Medicaid policy is looking for new members to help represent individuals with disabilities and low-income Vermonters. Want to learn more about the role and responsibilities of committee members? Application information is available by contacting Clark Eaton, Office of Vermont Health Access, 312 Hurricane Lane, Suite 201, Williston, VT 05495; phone: 802-879-5900.

Transportation: Share Your Story

A broad coalition has formed to push for more and better transportation options in Vermont. Members of Transporting the Public are working for improved mobility and transportation options, adequate and flexible funding needed services, and integrated planning of transportation and land use policy in Vermont. We are interested in hearing from Vermonters who support public transit options and improvements. Tell us how transportation barriers affect your life or how flexible public transportation options have made work, community life and independence possible. Help us make transportation for all a priority in Vermont. Send your letters to the address listed on page 2 of this issue or e-mail us at TheIndependent@vcil.org
Involuntary?

by Morgan W. Brown

Within the two-year legislative session that recently ended, the state of Vermont once again attempted to make it both easier and quicker to impose its will upon people who come within the mental health system concerning what it perceives and terms as being a necessary form of treatment.

It should also be noted that the context of these efforts were addressing non-emergency settings only and not emergency situations.

In fact the Agency of Human Services and the Department of Mental Health tried to sneak it in as part of the Challenges for Change 2 bill. The Legislature said no.

Rather than focus on those efforts and how they played out, I will instead speak to the use of language as well as some of its consequences; specifically, the use of the term involuntary within the context of mental health treatment settings.

When it comes to the use of force and violence imposed by the state upon persons in any mental health or behavioral treatment setting (i.e., institutional or community), the jargon usually employed is involuntary treatment as well as involuntary medication.

These uses of the term involuntary make such actions against individuals much more socially acceptable and also furthers many people’s beliefs that such treatment must be “well-deserved,” oftentimes without any questions asked or concerns being raised (read: deliberate indifference).

Although it might be true that definitions of the term involuntary include any action done against the will of an individual, not willing or voluntary or, put another way, something done without the informed consent of the individual upon whom an action is taken, it is also true that the term is defined as an action having been without intention or done unintentionally, etc.

The truth of the matter is that when the state inflicts its will upon individual persons in this fashion, it involves outright force and violence as well as degradation inflicted upon the person.

It might not be desired to be locked up against one’s will, however it is even worse to be drugged and otherwise receive treatment (e.g., shock treatment, also referred to as ECT) in such a manner; which can often happen by the use of rubber stamp court-appointed guardians that the state recruits for these purposes so they can get their way, if they cannot do so otherwise.

Many of those who have undergone force drugging and treatment compare it to no less than rape.

Not only have I heard people refer to forced drugging as such, but have witnessed the obvious and sometimes not so obvious wounds and scars caused to their emotional health and soul.

This makes one wonder why, if it would of course be totally unacceptable among most people within our society to term either sexual molestation or rape as being involuntary touching or involuntary sex, why is it then permissible as well as acceptable – simply due to it being done on behalf of the state – to term forced drugging and forced treatment as being involuntary medication and involuntary treatment?

Such actions taken against citizens by the state should rather be understood as well as termed what they indeed are: i.e., forced drugging and forced treatment.

It should also be noted that none of this is about the use of politically correct language either.

Instead, what this is about is calling things what they truly are, as well as, defending the civil rights of all citizens, including those whom some in society would like be kept out of sight, out of mind (sometimes quite literally, or so it seems).

Morgan W. Brown is a writer and blogger who lives in Montpelier.
Disability Happens -K.K.

by K.K. Wilder

Growing Old

I started to name this column “Getting Old,” but thought better of it. Actually, we grow old, hopefully in a way that brings about reinforcements of good qualities and letting go of not-so-good characteristics. For example, when I was younger – as so many of us – I saw nothing good in getting older. As I aged, however, I began to see some rounding out of my edges, and some mellowness where competition and striving used to exist.

Unfortunately, again as so many of us, I’ve grown old due to multiple disabilities. Can I say I’m grateful for those infirmities? No. But I can say I’m grateful for what I’ve learned about living life in a way that has changed my priorities and the way I view others like myself. From a young woman who used to cross the street when someone in a wheelchair came toward me because I didn’t know where to look, I now have an outlook that welcomes those people into my life. From a young woman who used to get totally awkward and anxious when I saw a person who was deformed from birth or by illness, I’ve grown into an empathetic cohort, someone who truly wants to get to know such people as who they are, not how they look.

I’ve learned some of the very best things in life from people who are the ones I think of as growing old. “What is, is” you’ll see me often write, and it’s a true motto of my life I learned from an old friend who was dying. Those of us who are nearing the end of life, whether it’s from age or disability, begin to see being alive in a whole different way than we did decades before. When I think of the hours I put in at various jobs to make sure I “got ahead,” I am sorry for the living that younger me missed. Getting to work at 7 a.m. and leaving at 7 p.m. later gained me raises and good performance appraisals, but also brought me debilitating stress and lack of understanding toward others who saw their jobs as only part of their lives – not all of it.

This column is written for people with disabilities and people who are older. How beloved have such people become to me. And although it’s very hard to lose them over time, they each shine like a jewel in my memory. Kindness has become the most important trait I can find in a person. Recently, two men took a morning on their days off to volunteer to come and move rugs out of my apartment. Other times, total strangers have helped me get my motorized scooter out of snowbanks or offered to help me in myriad ways that might seem small to them, but are oh-so-important to me.

As far as I know, disabilities and/or aging can make us bitter or better. I believe the choice is up to each of us. I’ve been visiting a good friend at a rehabilitation facility recently. What a time she has had! She previously suffered a rotator cuff injury and a broken wrist. Then, as fate would have it, she stumbled over a manhole cover as she walked in a public place. Down she went … hard. She broke her shoulder in several places, fractured her knee, injured the previously broken wrist and, of course, ended up in the hospital. She suffered. At first, the pain was too much for her to bear and her friends didn’t know how to help. Eventually, the hospital sent her to rehab, but then after continued pain and no healing, her doctors decided the shoulder had to be replaced.

Here was a terrific excuse for her to become bitter and to get old. Amazingly, my friend started to get better. As the old Helen Reddy song, “I am Woman” said, “Yes, I am wise, but it’s wisdom grown from pain.” Now my friend is still in rehab, but her attitude is one of gratitude for her wonderful care and excitement whenever even the slightest improvement happens. I feel certain many of us have learned from this woman.

We don’t have much of a choice of the happenings in life … the losses, the sorrows, the need to let go of previous abilities. But, luckily, we do have the choice of how we decide to face such things. When we allow them to make us better people, we’ve been given a priceless gift. And growing old is one of them.

(K.K. Wilder can be reached online at KKWilder@aol.com)
Bulletin Board

ADA Celebration
SAVE THE DATE!
Thursday, July 22, 2010
11 a.m. to 5 p.m.
On the Statehouse lawn
Join the disability community for a free barbecue, speeches, and a variety of informational and fun activities celebrating the 20th anniversary of the signing of the Americans with Disabilities Act. This year marks the first year that the festivities will include a community dance featuring a live band.

ReCycle Catalog
The Vermont Center for Independent Living maintains a ReCycle Catalog, a listing of used disability equipment that people are seeking and disability equipment that is for sale. To receive a copy of the ReCycle Catalog or to list an item, contact Ericka Reil at 802-229-0501, or visit us online at www.vcil.org/resources/recycle-catalog

Attend a VCIL Community Meeting
To learn about VCIL-sponsored community meetings and other meetings of interest to people with disabilities taking place statewide, visit our Web site:
www.vcil.org/get-involved/community-calendar
Community meetings provide an excellent opportunity to gather together with people with disabilities to share ideas, talk about local and statewide issues, learn from one another and plan social events.
If there is no community meeting currently being held in your area and you would like to help start one, please contact Information, Referral & Assistance Specialist Ericka Reil phone: 1-800-639-1522 (V/TTY) e-mail: ericka@vcil.org

To find out about other disability or senior programs, activities, and services, contact the Senior Helpline (1-800-642-5119) or the I-Line at the Vermont Center for Independent Living (1-800-639-1522)

SUBMISSION DEADLINE
Submissions for the next issue must be received by September 17, 2010