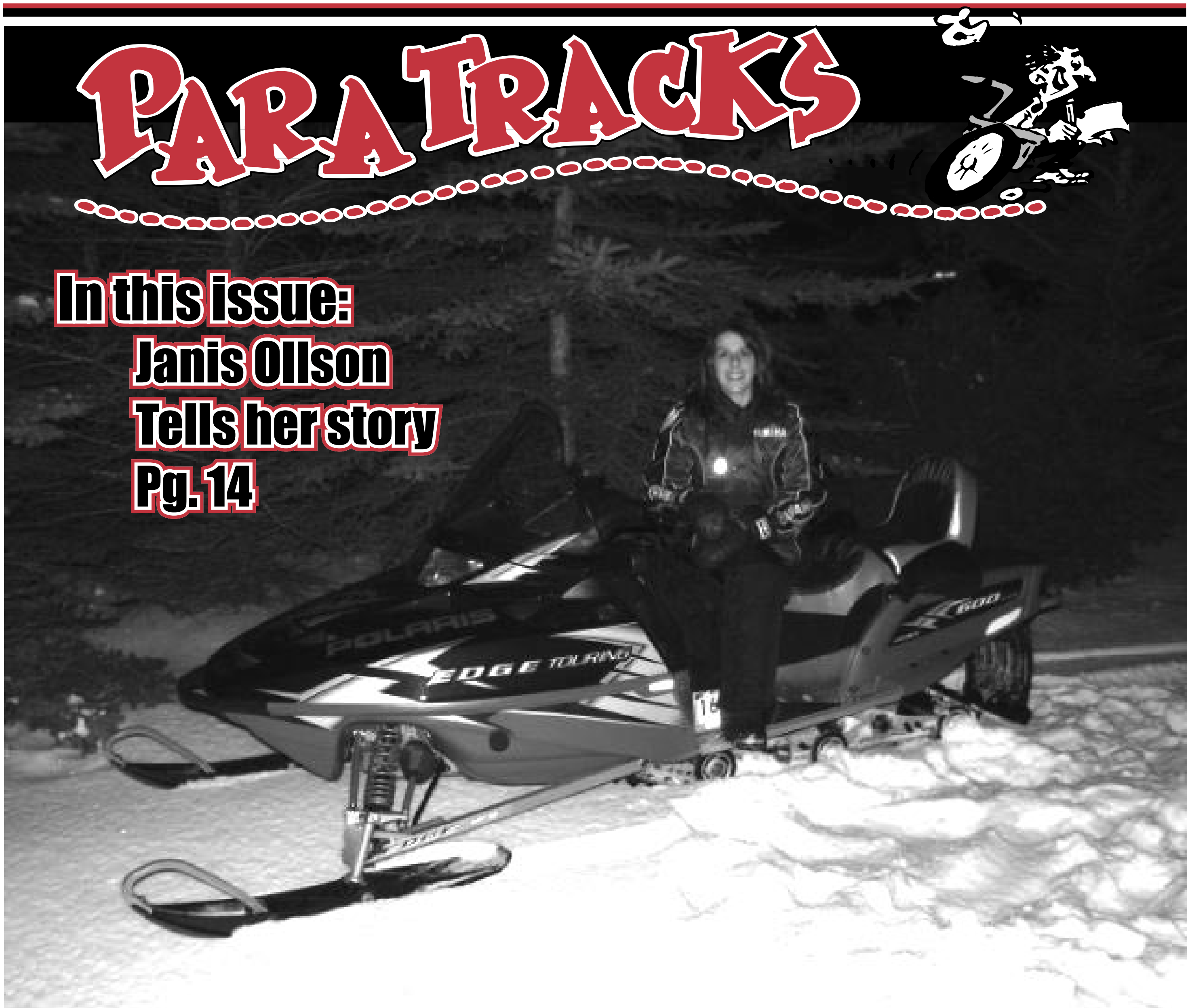
Canadian Paraplegic Association (Manitoba) Inc.
Association Canadiénne des Paraplegiques

MPF MANITOBA PARAPLEGIA FOUNDATION INC.

October 2010 Fall Issue

Newsletter of the Canadian Paraplegic Association (Manitoba) Inc.

PARA TRACKS



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***paraplegic or tetraplegic*

Canadian Paraplegic Association (Manitoba) Inc.
Association Canadiénne des Paraplegiques

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All Charities Campaign

On June 22, 2010 CPA (Manitoba) Inc. received a cheque in the amount of $1,133.36 from the All Charities Campaign. All Charities is a workplace campaign that enables employees to donate to charities of their choice through the convenience of payroll deduction or a one-time gift by cash or cheque. The All Charities Campaign is volunteer driven by employees of the Manitoba Government and its affiliates. Since its inception in 1966, the All Charities Campaign has raised nearly $29 million for thousands of charities.

In 2009 $1.75 million was disbursed to 1346 charities within Manitoba and across Canada. For many years CPA (Manitoba) Inc. has been a recipient of a portion of the funds raised through the All Charities Campaign.

CPA (MB) thanks you for your generous support of the campaign!

Ron Burky accepting a cheque from the All Charities campaign

CPA Says Good-bye to Total Access

CPA National has announced that they will no longer be publishing the *total access* magazine. The Summer 2010 issue, which was recently sent to CPA members, was the very last issue of the magazine.

CPA National states that the magazine, originally called *Caliper* and first published on November 19, 1945, has served its purpose of community building very successfully. As Bobby White, Interim Executive Director stated "Tough times mean tough decisions and – make no mistake – these are tough times for voluntary organizations that provide vital health and social services." He stated that the last issue of *total access* focused "on what CPA is really all about: people – the people across Canada who have made CPA what it is and who continue to carry on our proud tradition of service."

CPA members will continue to receive ParaTracks three times per year!

2010 Merit Award Presented to Assistive Technology Products & Services

CPA Manitoba's Merit Award was initiated in 1965 to recognize organizations, supporters and persons with spinal cord injuries who have made a contribution to the Association either through their personal efforts or as an example of successful rehabilitation.

At CPA's Annual General Meeting on June 15, 2010, President John Wallis presented the 2010 Merit Award to the Assistive Technology Products & Services program at the Health Sciences Centre for "its dedication and commitment in supporting persons with spinal cord injury and other disabilities to achieve greater independence, self-reliance and full community participation".

Assistive Technology Products & Services has had many names over the past 30+ years. In 2004 Assistive Technology merged with the Rehab. Engineering Department. The mandate of the Rehab. Engineering Department, which includes Orthotics as well as Assistive Devices, is to assist individuals with gaining the highest possible level of independence by custom designing, manufacturing and servicing electronic and mechanical devices and by modifying commercial equipment for Manitobans with disabilities. The staff of the program pride themselves on their problem-solving abilities with the goal of maximizing capabilities, opportunities for independence, and quality of life for individuals with physical disabilities.

Three recently retired staff members – Scott Bentham, Bill Brereton and Paul Tustin – were in attendance at the Annual General Meeting, along with current staff members Ed Slyker, Mick Williams, Richard Rodd and Lori Knott. Staff members unable to attend were Wayne Lipischak, Dennis Stanley, Jeremy Bock, Brad Masiowsky and Ray Fulford.

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David Tweed, President

- ❖ You're dealing with people that actually use the same products.
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- ❖ We have access to virtually any brand name of medical, wheelchair parts, tires, lifts, specialty items or urological products all available conveniently online. The leading Manitoba supplier for Coloplast, Hollister, Savaria, Access 2000 to name a few.
- ❖ We receive the highest amount of support and education from the top brand name industry suppliers & manufacturers.
- ❖ Our response time is second to none, including service calls.
- ❖ We are authorized to bill to all 3rd party agencies including Blue Cross, DVA, NIHB, WCB, MPI and Family Services.
- ❖ We offer discounts to all CPA members.
- ❖ *AND* most important we care about ensuring that each individual gets the right product for his or her needs!

What's New

- ❖ **Brand new website with complete secure online ordering**
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CPA (MANITOBA) INC.

BOARD OF DIRECTORS UPDATE

During the past year, resignations were accepted from:

Shannon Guerreiro:

Shannon served one and a half years on the Board. Shannon acquired her Bachelor of Nursing degree in 2007. Her first nursing position in 1989 was on RR4 at the Health Sciences Centre providing care to persons who sustained a spinal cord injury or amputation. It was during that time that Shannon states she was fortunate to meet such impressive, resilient and influential individuals as Tony Mann and Arnie Schyrvers. In 2006 Shannon returned to the Rehab/Geri program as the Manager of Patient Care.

Nicole Dubois:

Nicole served one a half years on the Board. Nicole graduated in 1989 with her diploma in nursing and immediately started working at the Health Sciences Centre Rehab. Hospital SCI Unit from 1989 to 1997. For the next two years Nicole divided her work between HSC and Northern Nursing. She earned her Bachelor of Nursing and pursued a full time career in Northern Nursing. Nicole returned to the Rehabilitation Nursing and began a position at the HSC Rehab. Outpatients Clinic in 2006.

In December 2009 CPA welcomed Patti Bonas to the Board of Directors.

Patti Bonas:

Patti previously served on the CPA Board of Directors for 11 years from 1980 to 1992. She has been a T1 paraplegic since a diving accident in 1969 and was one of the original tenants of Ten Ten Sinclair.

Patti completed the Certificate in Management Program through Continuing Education at the U of M and spent 16 years managing the Special Functions Department at the U of M, planning meetings, conferences and a wide range of special events.

While various health issues have slowed her down, she has engaged in a variety of volunteer projects over the years. At her Mom's nursing home, Patti volunteered with Recreation in fundraising and special event planning. She also participated on the Accreditation Committee for several years, and the Strategic Planning Committee.

Patti's work garnered her a WRHA Volunteer of the Year award in 2005. For CPA she has co-chaired the 65th Anniversary Committee and participated on the 2010 Rick Hansen Wheels in Motion Committee. She would now like to turn her attention to help motivate and encourage newly injured individuals, and explore issues with aging and spinal cord injury. She is delighted to be able to serve on the CPA Board once again.

At CPA's Annual General Meeting on June 15, 2010, Nominations to the Board of Directors were accepted from:

Ron Fortier:

Ron is the Director of Emergency Social Services with the provincial department of Family Services and Consumer Affairs (FSCA). He has been involved with numerous Emergency Social Services responses including the 1989 Manitoba Forest Fires and the 1997 'Flood of the Century'. Ron is an active member of the Inter Agency Emergency Preparedness Group (IEPG), and the province's Disability Emergency Management Network (DEM-Net) whose mission is to minimize the risk to Manitobans with disabilities as a result of an emergency or disaster through networking, training and educational opportunities for organizations of and for persons with disabilities and emergency managers.

Prior to his current position, Ron was a Director of an Employment and Income Assistance (EIA) office in Winnipeg.

Ron has also been involved with the Department's Vocational Rehabilitation (VR) program for the last seven years as a 'Program Specialist' within the Department's Service Delivery Support Branch at 114 Garry Street. As one of the two VR program specialists in the Branch, Ron approves vocational plans and funding requests for education and employment services and supports - generated from the service delivery system (including the three Designated Agencies - CNIB, SMD and CPA) and the Family Services delivery system in Winnipeg and the Rural & Northern regions, as well as the Regional Health Authorities.

Ron is also the government co-chair with the Vocational Rehabilitation Self Directed Committee. Ron is also a member of the Department's Vocational Rehabilitation - Provincial Common Table.

Tim Toor:

Tim is a Certified Management Accountant (CMA). He is currently employed as a Controller with Syn-tex, A division of ITW Canada. As a member of the senior management team, Tim contributes to setting the strategic direction of the company.

As a professional accountant He has extensive experience in the following areas: Financial and Strategic Planning, Budget Development and Management, Finance and Accounting Management, Banking and Cash Management, Staff Management and Development, F\X Management, Management Report and Insurance and Risk Management.

In Tim's personal time he enjoys spending time with his family. He has a 13 year old daughter (Kamisha), a 6 year old son (Jaitin) and wife Michelle. He is involved in his children's sports activities and has coached soccer in the past.

Tim states that when Board President John Wallis spoke to him about the CPA Board of Directors and the work that the Board does, it peaked his interest in the Board.

Tim states furthermore that he would like to assist the Board in reaching its goals by contributing his time and skill sets.

Day at the Beach

This year was my first time going to Canadian Health Care Product's (CHCP) Day at the Beach at Grand Beach. Being my first time I was not sure what to expect. I am 24 years old and when I think of beach day I think of Miami Beach, Florida at Spring Break.

After a long drive I was very happy to arrive. I live in Winkler so it was three and a bit hours to get there, but it was well worth the drive. When we first got to Grand Beach, I was amazed at all the people that were there. When I say we, I mean my wife Charity and myself. After we parked, we were hungry so we grabbed a burger and let me tell you, the food was great. Sometimes when you go to a customer appreciation the food is the cheapest garbage they can find; this was not at all the case here.

After we ate we reserved a ride on the three person tube and then decided to check out the new wheelchairs. My two favorite chairs had to be the 4-wheel drive power chair and the Marvel manual chair. The 4-wheel drive chair was impressive as I found it perfect for an outdoor person like myself because it could climb up some pretty steep hills and power through sand like it was nobody's business. The Marvel chair is just like any manual chair but with a twist, it has full rear suspension. If you haven't seen one of these chairs, go on YouTube and search Marvel Wheelchairs and you will see why it is so cool.

After checking out the chairs we went on the tube, which was awesome. There was me, my wife and one other guy that I won't name, but I have never heard a grown man squeal like that ever in my life. We all had a lot of fun. Getting out of the tube is a little tricky but there were enough big guys to help lift people in and out. They did a very good job.

Once we were back on land I started talking to one of the CHCP salesman about his hand cycle that he had brought for people to try out. That bike was so much fun. It actually was very easy to pedal and was very fast. The owner said the fastest bike he had could get up to 26 kph, which is pretty fast. In the following week I bought my own. The event also had an adaptive golf cart. I didn't get a chance to try it, but basically it is a single person golf cart where the seat turns out and up where the individual is almost standing. It looked really easy to use but would take a little practice to get comfortable.

We were just about ready to leave when a guy showed up with a tank chair. The tank chair was so cool. I visited with the owner for a while and he told me that the chair would go through mud and water well over the foot-plate.

Needless to say, I was very impressed. Beach Day was very fun, very accessible, the food was great and the staff were very friendly. For anyone who has never gone before, I recommend going to see what is available out there and just go hang out for the day.

~ CPA member, Josh Shiskoski ~

'Anything will be possible' for quadriplegic soon

~ Event is a fundraiser for accessible tractor ~

As a volunteer paramedic, Doug Barker knew after his head hit the boards during a hockey game he was likely a quadriplegic.

But Barker, who had fallen facedown after tripping on a rut in the ice, still had to spend 20 minutes on the ice imploring his fellow Teulon Tiger teammates not to turn him while waiting for an ambulance to arrive, while trying to move parts of his body.

It was a long wait: Body heat from his face began melting the ice and forced his teammates to use straws to suck the water away from his nose.

It was Jan. 8, 1993, about 9:10 p.m.

Now, at age 45, Barker, married and a father of two, knows how the story turned out: His initial diagnosis was right because his neck had been broken in six places.

"I have up to C5/C6 level of motor and sensory function," Barker said from his farm near Teulon.

"I can move my arms and fists, but not my fingers at all."

While the injury cost him his profession as an electrician and stopped him from doing farming chores, Barker's drive to get back his independence has seen him do things doctors didn't think he'd be able to do, including driving a modified van.

"When they told me I would never drive again, I just said 'That's not acceptable,'" Barker said.

And now, with the help of the Rick Hansen Wheels in Motion organization, Barker is hoping after a 17-year break he'll soon be back feeding cattle and horses, plowing snow from his driveway, drilling fence post holes and helping fellow farmers.

That's because Barker and his buddies are busy making a Fehr Trac Magnum tractor accessible to him and his power wheelchair. The annual Rick Hansen fundraiser, held Saturday, June 6th at Canad Inn Stadium is helping to pay for the modifications.

"When it is completed, anything will be possible," Barker said. "Wouldn't it be something if a quadriplegic can come to clear out snow from somebody's driveway in winter?"

Scotiabank's Sandi Edie, co-chairwoman of the local Wheels in Motion event, said they're hoping to raise $100,000 this year. Scotiabank is presenting the event this year.

For more information, go to:
www.wheelsinmotion.org or call 1-866-609-4335.

By Kevin Rollason
Republished with permission from the June 26, 2010, edition of the Winnipeg Free Press.

Back row:
Tim Toor, Tricia Conroy, Cathy Simms, Ron Burky
Front row:
Patti Bonas, John Wyndels

Transitioning from School to Work in Rural Manitoba

The economy in Canada's prairies that has been based in agriculture and a dependence on the existence of rural communities, has now moved towards a diversification trend and an emphasis on economic development to sustain rural communities. The stakeholders we are working with are more likely to return to or remain in their home communities because their natural supports and interests are fulfilled by living in these locations. What was needed was a program to help students correctly identify their vocational strengths and assist them with planning a future that includes involvement in their local community.

The Southwestern Manitoba Vocational Assessment Demonstration Project is a partnership consisting of Career Connections Inc., Southwest Horizon School Division, Turtle Mountain School Division and the Vocational Rehabilitation Division of the Department of Family Services dedicated to providing vocational assessment services to rural students who may have limited access in their own community. Presently, rural students are not afforded as much exposure to information about future employment opportunities as urban students. Summer and part time positions that are available to students in rural areas, although somewhat limited in scope, may not be as effective in helping guide the students in planning for their future employment opportunities.

The project has allowed for students in six rural

High Schools to have access to more vocational information and possibilities, which has in turn allowed the students and their support networks to better plan for their vocational futures. By continuing this proven form of vocational assessment with the educational systems in this area, we have strengthened and provided better futures for not only the youth, but the entire surrounding areas as well.

Provincial High School Curriculum is set up in such a way that students must make career choices in Grade 9 and Grade 10 that affect their course of study. Without proper vocational assessments to assist with planning, these students were making decisions based on incomplete and inaccurate information. This program has provided students with realistic and achievable career goals, but more importantly has increased their self-esteem, motivation, and desire to remain in school. It has also made them more aware of their strengths, aptitudes, and abilities, and helps them see their potential for successful vocational outcomes. The assessment results are a starting point for school teams to incorporate and implement the educational and vocational plans to assist the student in developing a program to develop the necessary skills to meet their vocational goals.

Extensive Vocational Assessments were provided by Career Connections Inc. using their Professional Vocational Assessment Tools consisting of the Pro 3000 Computerized Assessment, the Pro 3000 Guide for Occupational exploration, the Pre Vocational Test Battery, fourteen Valpar International Work Samples, the Hall Occupational Orientation Inventory, the Reading Free Interest Inventory, the Wide Range of Achievement Test 4, the Canadian Adult Achievement Test, Select-a-Level and the Reading Level Indicator. The results of these comprehensive Vocational Assessments were then used to develop an Individualized Education Plan together with a Transitional Plan for moving into the world of post secondary education such as Community College, University, and Apprenticeship or directly into satisfying employment opportunities.

The target groups for the Southwestern Manitoba Vocational Assessment Program were identified by the school and the Vocational Rehabilitation Counsellor using the following criteria:

- Students with disabilities
- Students with disabilities at risk of dropping out of high school

This Career Planning program is a major tool for proper vocational and educational preparation for youth. The following outcomes have been evidenced as a result of the project:

- An increase in the number of students moving on to post-secondary education
- More students prepared for the changing job market based on their transferable skills
- A decline in the unemployment rate of the participating students
- Increased community development opportunities through a focused labour force
- Reduction in school drop-out rate of the participants
- Increased self-awareness and confidence regarding their career path
- Earlier access to provide information regarding post-graduation vocational services
- Students were better prepared for competitive employment
- Parents could better focus their efforts in supporting the student in their specific vocational/post-secondary planning
- Students and educators planned courses and work experience opportunities based on appropriate career goals

This pilot project has proven successful, with 40 students having completed vocational assessments. It is recommended that this program become permanent in status and allow for earlier assessments for students to facilitate proper vocational planning in school. Below are some information highlights for students:

- Graduation from Giselle's School of Aesthetics

and subsequent employment
- Attendance in Assiniboine Community College Culinary Arts Program
- Graduation from high school while staying away from previous criminal activities
- Application to college upon high school graduation
- Single parent graduated from high school, employed, and planning on furthering her education at a post-secondary institution
- Student enrolled in first year at Brandon University after 2009 high school graduation
- Student enrolled in first year at University of Winnipeg after 2009 high school graduation
- Numerous students in full-time employment upon graduation from high school
- Student with summer employment with Manitoba Hydro; returning to college in the fall

The success of this program is due not only to the process of Vocational Assessment but to the dedication and hard work of the students who participated in this project. Once participants had developed a plan to follow, they were motivated to work with their educational team to complete High School and successfully transition into Post Secondary Education or meaningful career paths to become self-sustaining citizens.

Dayle Hughson
Career Connections Inc.
Brandon, Manitoba

Urban Development Initiative
PROVINCE OF MANITOBA

Funded through "Going Forward Together: The Government of Manitoba's Contribution to SCI Leadership in Manitoba," the Urban Development Initiative is a project focusing on services being delivered to Aboriginal Peoples with SCI.

Time is limited and we have been busy establishing the foundation for this initiative. We now have developed a questionnaire that focuses on services that have been provided from the onset of injury to the transition to the community. As a result, the Urban Development Initiative has put in place group sessions with Aboriginals with SCI. The biggest part of this initiative targets the relationships between the Services and the Service Group Stakeholders.

Let us look at what type of needs this particular group requires.

The majority of clients in this group are persons moving into Winnipeg from rural areas that have very little to no urban life experience. Now they will not only be experiencing the shock of living with an SCI but the realization that they will also have to adapt to an urban lifestyle. The unknown of what the future holds could be very traumatic.

The group that we will be working with will specifically target the Aboriginals. Many of these individuals have had very little contact with the world outside their reserve or community and many have only seen urban lifestyles through television or heard about it through radio. Service providers need to remember that the daily routine of Aboriginal Peoples in their communities is very different than the everyday routine of urban living.

The thing that we must all remember in dealing with this group is the lifestyle to which they are accustomed. When working with the Aboriginal community we must take into account "what Aboriginals with SCI individualized needs are" and not "what we think their needs are". Service providers need to remember that the majority of the Aboriginal population have many of their everyday affairs looked after by Band Council or other political groups. Everyday tasks, that many individuals living in the urban setting take for granted, need to be dealt with care and caution with individuals in the Aboriginal population.

This leads us into our primary focus, which is looking at their experiences, good or bad, and the barriers that our group members have had to face. Gathering client feedback will ensure that we develop a guide that will help others attain self-reliance within an urban setting.

We are presently looking at a two-step information gathering system which involves group sessions and one-on-one general information sessions.

I look forward to updating everyone in the next ParaTracks.

Willie Ducharme
Project Coordinator
Urban Development Initiative

Emergency Response Information Kit

ERIK

I would like to introduce you to a tool for all of us to use and have in our tool boxes if we wish. This tool is known as ERIK.

Why ERIK? Let us look at our members and their overall needs and see if a program like ERIK would benefit them and other service providers.

ERIK is a program that collects medical information from an individual so that in time of an emergency, paramedics or other services providers can quickly determine what an individual's medical needs are. The information gathered by ERIK is basic information focusing on individual medical history and contact information. This will include what medical ailment they have, drug prescriptions, time and dates the medications must be taken and an emergency contact person's information.

ERIK packages come with example questions and answers that are user friendly. Upon completion, the package has a magnetic pad on itself so that it can be placed on your fridge. Provided is a red sticker that needs to be placed at an entrance point so emergency units know that you're on the ERIK program. Should you be unconscious or unable to speak, medical personel will know where to find your medical information. If a new caregiver is appointed to an individual it also provides simple information for him or her to check the list and know how much and when to administer medication to the individual.

If this type of program interests you, it is readily available at the Age & Opportunity Inc. office at 200-280 Smith St, Winnipeg, Manitoba, R3C 1K2.
For more information on this program you can also call 956-6440 in Winnipeg or toll free 1-888-333-1808.

Willie Ducharme
Program Coordinator
Urban Development Initiative

The Informational Interview as a Career Planning Tool

The informational interview is an activity that enables you to network and explore employment opportunities in a particular industry or it can be used as a vocational planning step to explore career options and assess your fit for a particular career. I will review the latter in this article.

An informational interview is an interview that you can initiate with someone who works in an industry for which you have interest or the informational interview can be facilitated by your vocational counsellor. The intention of the informational interview is to gather information related to an occupational/career area in which you have interest but limited knowledge and information. Your goal is to assess the fit between your interests, abilities, and values and an occupational/ career area and to explore the educational and training requirements to secure employment within that industry.

Roberto, to whom I provide vocational services, recently expressed interest in graphic design. He had completed computer training to develop basic computer literacy skills. The computer course also provided him with limited exposure to computer graphics, and this brief exposure peaked his interest in graphic design.

I suggested we conduct an informational interview with an individual who works in the graphic design industry. I explored options in the local business directory and contacted Circle Design Incorporated, a design consultancy business, co-founded by Robert L. Peters in 1976. During the course of my initial telephone conversation with a staff person from Circle Design Incorporated, I indicated that I was working with Roberto who was interested in the graphic design industry and that we wished to meet with someone employed in the industry to gather information related to the educational training requirements, work demands, salary range, and future employment prospects. I was advised that someone from Circle Design Incorporated would respond to my request.

In preparation for that meeting, I suggested that Roberto consider what information he wished to secure from the interview and prepare questions that would elicit that information. Preparation for the informational interview is necessary to maximize the information obtained, as time is limited. You need to be respectful of the interviewee's time. You should also consider that you are always making an impression. Preparation and suitable attire will promote a good impression.

Typically, the interviewer might consider the following questions as a guideline for the informational interview. What education/training is required to be employed in the industry? What skills/qualities are required to succeed in the industry? What do you find interesting/rewarding about the work? What are some of the demands and challenges associated with the work? What is the salary range? What is the future employment outlook in the industry? What can I do to gain experience, enhance my skills, and develop my network within the industry? Are there professional organizations/associations with which I should become involved? Can you suggest anyone else to whom I might speak to gather additional information?

Mr. Peters, the principal of and a designer with Circle Design Incorporated, met with Roberto and me. Mr. Peters stated that persons considering a career in graphic communications have two educational options: pursuing the Graphic Communications program at Red River College or a Bachelor of Fine Arts, University of Manitoba, with a specialty in graphic design. He indicated that, ideally, persons wishing to pursue a career in graphic design would complete both programs, as this would render them well-rounded.

Mr. Peters suggested that students become involved with professional associations such as The Society of Graphic Designers of Canada and The International Council of Graphic Design Associations to develop a network of contacts and keep abreast of best practices in the industry. He also recommended that students draw frequently, consider taking art classes, read books and articles on graphic design, learn about typography, and review graphic design portfolios online.

Mr. Peters advised those students newly graduated from programs who are the most likely to secure related employment are those who bring extra thoughtfulness, passion and talent to the workplace. He indicated that new graduates can expect to earn around $25,000/year and, if they possess exceptional talent, can expect, at the discretion and ability of their employer, a 10-20% annual salary increase. He identified tight deadlines as a significant stressor in the graphic design industry, citing the example of a client calling on Friday and expecting to have a design completed by the following Monday morning.

Mr. Peters advised us that media is powerful and that the power of media brings responsibility. When hiring, Mr. Peters indicated that he seeks honest people with passion and talent. He advised graphic designers need to use both hemispheres of their brain: the artistic side that creates impactful images and the analytical side, which enables designers to consider the needs of their customer and to deliver a product that is customized to those individualized needs. In order to accomplish this, Mr. Peters indicated that he and his colleagues spend time with clients, building a relationship and developing an understanding of their specific needs.

Mr. Peters indicated the local market for graphic design is challenging, that Winnipeg clients expect maximum benefit within the confines of conservative budgets, that he and his employees constantly need to prove their value to their clientele, and that designers have to acclimate to criticism. He advised that 40 - 50% of his work involves web design and that many of his clients represent corporations from across Canada.

Deciding on a career path can be exciting but also difficult, as the options are unlimited. An informational interview conducted with someone who is employed in a career for which you have interest but limited knowledge can provide you with the information you require to make an informed decision regarding your career path. A thoughtful and well-planned exploration of career options provides some assurance that the path to which you ultimately commit is likely to be a good fit for you.

~ Laurence Haien ~

My Trip Down Under

by CPA Member, Amanda Cunha

This planet contains two very different types of people. There are those who want stuff (a nice house with artwork hanging on the walls and filled with fancy furniture, a big screen television in the living room, and an expensive car sitting in the garage) and then there are those who want experiences. This is not to say that the majority of people do not want both--who wouldn't? All I am saying is that everyone I have ever known has had the tendency to lean pretty heavily to one category or the other. It is easy to see why a whole lot of people fall into the stuff side of things. I would love to live in my dream house and drive my dream car everyday... but what is really important to me is having experiences. I thrive off of having stories to tell. I live for adventures--my most recent one being three months of traveling around New Zealand and Australia.

There is no such thing as an adventure without some mishaps, and I, being the smart girl I am, decided to get my biggest incident out of the way right in the beginning. The day my friend Sandra and I were to fly out of Vancouver, B.C. and make our way to Auckland, N.Z. was ruined on account of a missing passport--my missing passport. We tore up the whole house trying to hunt it down. After realizing it was nowhere to be found, we rushed around town making our finest attempt at getting me a new one. We ended up missing our flight and catching another one out five days and an extra $1400 later.

Though New Zealand was absolutely gorgeous, there were a lot of things that we wished we would have done differently. With the Magic tour bus package we bought, all of our bus rides and hostel stays were prebooked. This didn't give us a lot of freedom at all... in fact, we were stuck. We were stuck traveling on a bus all day everyday, only to arrive exhausted and at a loss for what to do so late in the afternoon.

It was definitely not all bad though. The bus stopped at a lot of the main touristy spots and we were usually given enough time to check things out. For instance, during one stop in a small town called Waitoma, a group of us decided to go black water rafting. Everyone was given a wet suit, a flashlight helmet, and a little black tube before the guide walked us over to the cave we were to be making our way through. At one point our guide told everyone to turn the helmet flashlights off so we could see just how dark it was. Before he ran off ahead of us, he got everyone to grab onto the tube or the arm of the person in front of them, so no one would get lost. I had been right behind him, so this left me having to lead the group through the next part of the cave without being able to see a thing besides the amazing array of lights above us provided by the millions of glow worms which inhabited the cave. It was a sight that will never be forgotten.

After making our way around both of New Zealand's beautiful islands, Sandra and I flew to Adelaide, Australia. Not long after arriving we met up with a guy we met through a couch surfing website, who offered to let us stay with him for the week. Though he was a very fun, friendly, nice guy, we ended up only staying one night. I cannot say I have ever stayed in a house that dirty before. In the morning I woke up with one of my eyes swollen shut convinced that a cockroach (whom had watched me shower the night before) had laid eggs in my eye while I slept on the cold hard floor. It is almost a good thing that we had such a lack of money and had to attempt couch surfing again, because there is no way we would have made some of the great friends that we did if we hadn't.

One of the huge highlights during my travels was the apartment Sandra had found for us to stay at for a month in Bilinga on the Gold Coast. I still remember the day we picked up the keys and the moment we first unlocked the door. It was just an average sized, average looking place until you walked out onto the balcony and took in the view of the sand directly below us-- the ocean out ahead. The location of this little three floor apartment building could not have been better. It is impossible to explain how lucky I felt to have only two staircases standing between my living room and the beach.

The month I spent on the Gold Coast was filled with relaxation; attempts at surfing, going to theme parks, and being taken around to all the touristy places by a local friend we had made. This local, Luke, worked at a wildlife sanctuary where he took us on a private tour to hold, and in some cases play with some of the animals, such as an eagle, a koala bear, a baby crocodile, an owl, snakes, possums, kangaroos, and my personal favourite, the adorable eight month old dingoes.

As nice as it is to be back home again in this house full of stuff--my own bed, my computer and TV, my car in the driveway--I can not help but replay the memories of floating through that cave, sky diving over Taupo, kayaking in Franz Joseph, bungy jumping--hang gliding--and drinking way too much in Queenstown, New Zealand. I will never forget sleeping under the stars with dingoes howling nearby in the outback, walking around Ayers Rock and hiking up Kings Canyon under the scorching sun, renting a car and making our own way across the Great Ocean Road, seeing the opera house in Sydney, partying at the University of Wollongong during orientation week, sailing around the Witsundays, scuba diving and snorkeling in the Great Barrier Reef, camping on Fraser Island, and going to see my first pro rugby game-- go Gold Coast Titans! The want to go back to Australia to relive it all enters my mind daily. For now though, reality will have to do--back to school then back to looking for work. It is all part of my life cycle: save up money then travel... then save up money. Travel has always been a passion of mine that burns deep and I'll get out there to explore again as soon as I get the chance.

Janis Ollson's Story

My name is Janis Ollson and I am a 31 year old wife and mother of two. That is how I define myself anyways. To others I may be defined in many other ways. One of those definitions being a disabled lady in a wheelchair. It's always been a little odd for me to even consider myself a disabled person. I guess that is because of how I define a disability. To me it means you have difficulty performing certain tasks or functions. However, that definition encompasses a good majority of people, but they don't consider themselves as disabled persons.

My husband has a fused ankle and can't walk any distance or run, but he isn't considered disabled. My neighbour has a bad knee and can't lift heavy objects, but he isn't considered disabled. My friend has a bad back, which limits her time on her feet, but she isn't considered disabled. So if they aren't considered disabled, then why would I be?

If you took a look at me from an inexperienced eye, you would assume there are many things I can't do. Maybe it is that quantity of things that makes me disabled. Or maybe the importance of those things, such as not currently full time employed. Or just maybe *my* definition is correct. Although there are tasks and functions I can't perform, I am no more disabled than a good majority of people. Thus I choose to define myself as not a person with a disability, or a lady in a wheelchair. Rather, I choose to define myself as simply a wife and mother of two. It is that definition that leads me through life with courage, strength, determination, confidence, and enthusiasm.

Husband Daryl , Janis
son Leiland and daughter Braxton

So when the Canadian Paraplegic Association (CPA) asked me to write my story for them, I was honoured, but also a little bewildered. I wasn't considered a paraplegic until about a year ago, although I have been using a wheelchair for over three years. Again that is due to the fact that I just don't consider myself anything other than 'my' definition, and had never even thought of applying to CPA.

It was only due to a need for help finding resources that one of my Doctors suggested the CPA. My response to her suggestion was "but I'm not a paraplegic". Imagine my surprise when I discovered that it was another definition that I did indeed fit into it. So although I seem to fit into the box definition of a disabled person, a person who uses a wheelchair, and a paraplegic, I will tell my story from 'my' definition. The definition to which we all define ourselves. Not based on what we look like, or based on what we can't do. Our definition of who we are based on the things we choose to do, the people we are on the inside, and the things that are important to us. The true definition of us, not the perceived one.

The things that are important to me have always been my family. Even before I had one of my own I always said the only thing I ever wanted to be was a mother. So in the summer of 2004 when, after four years of marriage, my little daughter arrived, I was elated. Being a mother was everything that I ever thought and hoped it would be. It was all I ever wanted, well almost. I wanted it twice! I always saw myself as a mother of two, one boy and one girl if it was really up to me. So two years later when I found out I was expecting again I couldn't believe my dream was coming true! I actually remember driving to work one morning and thinking I am so happy, my life is going exactly how I had always wanted.

It wouldn't have been too many days after that one, how things would end up progressing, that I could barely stand to be at work. My back hurt so much, and my waddle could have won an award. The thing was I was only three months pregnant. I knew every pregnancy was different, but I also knew the baby didn't weigh as much as my wallet at that point. I knew it shouldn't be hurting my back that much. Although I did report it to my OBGYN (mommy doctor) I didn't focus on the negative. After all, I had pain after my daughter that never totally went away.

The pain however continued to progress, and quickly. In no time it was cruel and brutal. At five months pregnant I was no longer working. At seven months I was no longer driving, and hardly walking. Each time I would go to my OBGYN I would ask for help and there just wasn't anything she could do to mask the pain. She finally said "I've done all I can do, there isn't anything else unless I admit you to the hospital". I asked her what then, and she didn't really give me any assurance that if we did that I would be helped.

I went home feeling completely helpless. I tried to be strong and plug through it, but I just couldn't. In just a few days I threw in the white flag and admitted myself to the hospital. At first it really didn't look like there was anything they were going to be able to do. I did mention earlier in this story that I am usually an optimistic person; I didn't however mention that I am very stubborn. I ended up NOT going home, as first suggested. In the end I was prescribed a baby safe medication that took the edge off the pain, and allowed me to sleep through the night in the first time since I could even remember. I was so relieved. I thought I would just stay for a night or two, get some rest, and try and ride out the rest of the pregnancy.

It didn't turn out that simple. Among the many people that visited my room to try and help was a neurologist that either clued into something that no one else had, or just asked me the right questions. When he found out that I could no longer go up on my tippy toes on my left side a red flag went off. To that point I was thought to have 'pregnancy sciatica', but he said that sciatica doesn't cause function loss. That red flag caused me to have an MRI the next day, and the result from that test would change my life and those who love me, forever.

I was told that as my test was performed on a Saturday, it wouldn't be read until Monday. I would get the results after that. You can imagine my surprise when what seemed like minutes later a team of doctors from different areas met in my room to deliver the news that there was something found on my test. I was told they didn't know what it was at that point. In hind-sight however I think they did know but were trying hard not to shock me. Within a couple of days I was told that they thought it to be sarcoma. A term I had never heard before, and I wish I could still say I have never heard. It meant cancer, bone cancer. Always the optimist I thought it would be something easily cured. Some radiation, or chemotherapy, and as good as new. That is how little I really knew, because obviously that itself isn't an easy fix. However it wouldn't be anything close to easy to fix.

The first decision was for us, with some guidance from the medical side, to decide when we were going to deliver our baby because no further testing could be done while I was pregnant. No further testing also meant no further answers. Being a mother first and foremost I did what was safe for the baby, as I really didn't know if there was a life in me to be saved.

We did deliver our second baby early, but only four weeks early. The doctors said that by that time everything on the baby would be developed, and the last four weeks is more or less to fatten the baby up. So at thirty-six weeks I delivered my baby boy.

At last, I had my perfect family. If only for a moment in time, I was truly happy. One might think that his birth was burdened with grief and pain, but for me it wasn't at all. The circumstances certainly were different from my daughter's, but I was just as elated to meet him. I believe that need to be his mother and focus on feeding him and caring for him gave me the positive focus I needed. I was told I probably wouldn't be able to see him for a couple of days, as he needed to go to a different hospital than I. It's like the old saying goes 'not even wild horses could drag me away'. I woke up from the surgery, asked for lunch, and headed over to his hospital.

He gave my dreams a reality, and my life a sense of further purpose. What we then needed to figure out was how long I would enjoy that happiness. How long would my premature son and his big sister have a mother? That answer we didn't receive until much later. We were told long after I had been saved that I would have had two to three years. Lucky for us all, I am writing this story three and a half years from that point.

To figure out how to save me was their task. What a monumental one. Sarcoma is one of too many cancers that are rare and extremely difficult. There was no messing around; I was sent to Canada's best. I traveled from Winnipeg to Toronto to see a sarcoma specialist. After many tests and biopsies, answers were still fleeting. I was thought to have a chondrosarcoma, which rare in itself, would have been extremely rare for me to have. After all I was a twenty eight year old female, and chondrosarcoma was typically a cancer of an older adult and more often found in males.

The specialists were hesitant to believe these results as it would be much more common for me to have osteosarcoma, a bone cancer of young adults.

I was told that at times with a biopsy a tumour can present itself as one thing, but once out and fully dissected, it can present itself as another. Which cancer I really had wasn't something we could worry about later, that diagnosis was critical. If I had osteosarcoma, chemotherapy was required before the tumour came out. If we took it out and found out it was osteosarcoma, we would have lost our opportunity for prior treatment which is essential in successful treatment of that cancer. If it was chondrosarcoma as it seemed to be presenting, then chemotherapy would not be necessary.

I asked if we could do the chemotherapy just in case. That too wasn't as easy as that. The chemotherapy that would be required, if it was indeed required, would be one of the most toxic amounts that they administer. Not only would I be gravely ill and in the hospital, I would be in treatment for almost a year. That wasn't a 'just in case' the doctors were ready to prescribe.

I have to give them credit for really focusing on what was important to me and my children. How could I bond with a new baby when I was deathly ill and in the hospital for a year? I was really wanting to nurse my baby and be there for him as I was for my daughter. In the end that wouldn't be as easy as that, however the doctors really focused on those goals.

I guess there was enough evidence to convince them that I had chondrosarcoma. Well, either that or they flipped a coin and heads-chondrosarcoma won? They decided to treat me for chondrosarcoma. I had already given up hope by that point that any fix would be easy, but what I was about to hear would really turn my world upside down.

I was in Toronto, in a semi-private hospital bed with another couple on the other side of the curtain, when I finally met this amazing doctor I had heard so much about. Although his reputation was great, his news for me wasn't. He explained to me how chondrosarcoma isn't curable through chemotherapy or radiation. The only hope to rid it was to surgically remove it. The problem was that the tumour was very large; at least the size of my hand, and it was in several bones. To remove it meant my body would have to almost be cut in half and the bone that holds the top half to the bottom half would have to be removed. I would most likely lose a leg, and the nerve damage I would permanently suffer would be great.

He told me of another young man who, when faced with similar news, declined the surgery and decided to live his life as is, for as long as he could. Hearing this news while my five week old was waiting for me at home again gave me a sense of purpose. There was no way I would give up on his mother. I remember hearing a phrase 'if you don't take care of your son's mother, then who will take care of your son?' I would never give up on taking care of my children. So as hard as that was to hear, I knew I needed to do whatever was necessary. That still didn't make the next sentence I needed to hear any easier to take.

I was told from this top surgeon "I believe I could take you apart and remove the cancer, but I don't know how I would put you back together". The emotions I felt at that moment were emotions I had never felt up to that point in my life. I felt like my body just couldn't process that information and was rejecting it however it could. I felt like I could no longer listen. I felt like I couldn't breathe. I felt like I was going to throw-up. I even felt embarrassed and mad because I knew another couple was hearing all of this. I felt like I had just been told, 'we would love to help you but just don't know how'. End of story, end of the road, last stop. That's it, my life is over. One day we will all be faced with that news, and I assure you that you can't know how that will feel until it is true for you.

However, I just couldn't believe this news was mine to own when just a number of months ago I was counting my lucky stars that life was perfect and in order. It certainly was sobering news. At that point I was told they would do everything they could for me to watch my children grow. I was a mother that was always fully involved in everything. I lived off the chaos motherhood provided me and thrived on being busy. Now my best hope seemed to be just to be alive to see my children grow.

That thought provided me with months of terror induced nightmares where in them I seemed to be just a head in the corner of the room literally just watching my children live and being uninvolved in their lives. I was told they would send my information to the Mayo Clinic in Rochester, MN, USA to study and assist in developing a plan.

A couple months passed as I waited to hear the news that they had found some angel for me capable of developing a plan to save my life. It was in the first week of May I received a phone call from that angel, Doctor Yazemski from the Mayo Clinic. He had developed a plan that he believed would do just that. The plan was almost as cruel and brutal as the initial pain. At the end of our conversation he said to me, "I will leave you with that, you have a huge decision to make". It didn't seem to me like I had a decision at all. My options were; don't go along with this plan and die; or go along with this plan and possibly live. I already committed to never giving up, so there was no decision. I told him without hesitation, and without even speaking to my husband, my answer was to go ahead.

Within a few weeks I was laying in front of Dr. Yazemski on the operating table as he held my hand while I drifted off to sleep. He would operate on me for twenty hours straight one day. Then I would be in a medically induced sleep for a week before my second surgery of eight hours was performed. In the end my left leg would be completely taken off. Half of my pelvis would be removed, and my lower spine. I would be left with limited sensation in my remaining leg and no ability to feel or move my only foot. The remaining half of my pelvis would be grafted to my spine using some of my leg that was removed. The surgery was the first ever of its kind. I would require twenty-two units of blood and about as many tubes would be attached to my body for various reasons.

However the only thing I needed to hear, I heard. I woke up after seven days and asked my husband "am I dying?" With his reply "no, everything was a success, you are cancer free" I knew it wasn't game over - it was game on!

My recovery would be intense and I would be on bed rest for a minimum of three months. The graft would take about 18 months to heal. Heal I did. Almost as if the whole time there was an angel sitting on my shoulder. I imagine I don't need to list the things that could have gone wrong at any point during this. Yet not one did. I knew I was lucky, but these past three years solidified that. I was the first to ever have this radical surgery.

After me there were three more. Only I and another young lady are still alive to tell our stories. I believe we both are proud to tell our stories. I tell mine not so people will feel any sadness for me, but just because I am really proud of what I have been through and I still have my head held high. I'm three and a half years later, cancer free, and I continue to move forward with my head held high.

I am still learning how to do things, and learning of more and more things I can do. I don't like to have people do things for me that I know I can do myself, even if it takes me a lot longer. I think that is just stubborn pride. The things I know to date that I can't do are drive the motorcycle that I used to, run, and skate. However I do ride on the back of the motorcycle. I can wheel as fast as my kids can run anyways, and I go on the skating rink with them in my wheelchair. Most other things I have figured out how to do, or a substitute for. I take care of my children no different than most. I grocery shop by myself. I drive, not just my van, but also my quad and my snowmobile. I swim. I volunteer at school. With the help of prosthesis I even walked down the aisle to renew my wedding vows this year. It most certainly is "game on" for me, and that idea of saving my life so I can watch my children grow is far exceeded. I don't watch them from afar like I feared. I am as hands-on as a mother as I was before. I continue to live off the chaos and keep up a hectic pace.

I believe most people that get to know me learn that they are wrong with their perceived thoughts about me, and I love to prove people wrong. Do you know others that can't drive a motorcycle, run, and skate? You probably do. However, are they considered disabled? No, it's all just a perception. If you however believe in that perception, than you will make yourself a disabled person. If you don't, you are just you. You have pros and cons. You have abilities and disabilities. You make choices, and you sometimes need help. If today my story leaves you with anything I would like it to leave you with a sense of confidence in yourself. A knowledge that no matter what you have been dealt, you can persevere and still be you. Have faith in yourself and don't let any definition define you, but your own.

~ Janis ~

Braxton, Leiland & Janis

Fall O Up To Summer

By : Paul A. MacDonald

Once again, another Manitoba summer has come and gone. I trust that for everyone with air conditioners, umbrellas and bug repellant, it was a pleasant one. To those lacking those necessities, I offer my deepest condolences. We now journey into my favorite season, autumn. Cooler nights, dazzling colours and a return to routine are hallmarks of the season. It's also the prime time to prepare for the inevitable arrival of winter.

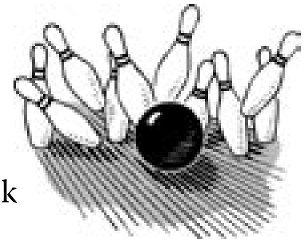
Today I would like to review some safety tips for using powered mobility devices during the cold months. Some of these apply year round.

- Have motor chairs, scooters and cell phones fully charged before going out.
- Have emergency numbers programmed into your cell phone.
- **Visibility is a key concern year round; but vital in winter.**
    - When snow blankets our world, you may have to drive on public roadways to get to and from stores. Sidewalks are very unpredictable. Wearing dark clothing in daylight during the winter only makes sense. You can also choose from reflective tape, reflectors, clip on L.E.D. lights and/or flags to cure your visability problem. Personal need will dictate your specific choices.
    - Parking lots & back lanes are always hazardous.
    - It's a prudent idea to try and confine your shopping to daylight hours.
    - The colder it is, the less distance you'll get out of your battery.
    - It's a good idea to carry a folded blanket in case of breakdowns in cold weather.
    - To avoid possible Carbon Monoxide poisoning, charge your mobility devices in a well ventilated area.

Door & Store Busting:

Getting through doors is a quickly learned skill that does not take a lot of practice. The methods may vary somewhat according to your abilities and where the controls are on the device you are piloting, but once mastered, you may be able to zip through a doorway even before some well-meaning person offers help you didn't ask for!

- If the door swings inward, try to approach so that your free hand can push the door and hold it open while the other hand controls the speed & steering. It's highly advisable that you reduce speed before you reach the door ... especially if it's locked!
- Pull-open doors are a little trickier, but using your free arm to pull open the door is still the best way to go, if it's not a self opening door.
- If you do not have the use of your hands, or are not strong enough to push a door open, look for a wheelchair access door. Many have push control buttons located near the ground so that you may be able to open the door by carefully nudging the button with the footrest of your wheelchair.



Shopping in crowded stores can be an extreme obstacle course. I liken it to trying to drive a car through a crowded shopping mall without hitting anything or anyone.

- You must score an "A" for anticipation. People do not look where they are going, so you have to be vigilant for them.
- Approaching intersecting aisles or corners at high speed is wreckless. There are no traffic signals and the pedestrians think they have the right of way. Let them have it! You will make up the lost time on the return trip home.
- You will quickly learn how much you can carry in one trip. It is important that the weight be distributed evenly to avoid tipping your wheelchair or scooter.
- Re-usable cloth bags are greener & very sturdy to hang on your mobility device.
- Through much personal trial and error, I have determined that the two best shopping days for wheelchairs are Tuesday or Wednesday between 3 and 5 P.M. The stores are not too crowded and the shelves have been restocked after the weekend! Results may vary with location. *I will gladly switch stores to shop at the first one that sets up a Diamond Lane for mobility devices!*
- If you cannot get out to shop, or are unable to carry home your purchases, many grocery stores have a delivery service, but it may not be free. Call your local store as they often don't advertise the service.

Most of the preceding tips may seem like stating the obvious to seasoned users of mobility aides, but if you are about to spend your first winter exclusively on wheels, they should be taken as helpful tips only. You will define your own rules as you adapt to your new circumstances. *I wish all a Happy Thanksgiving and a Spooky Halloween!*

It is a pleasure to be doing this column for ParaTracks and I am inviting readers to submit their own tips and comments directly to me. Please send emails to:

pmacdonald@smd.mb.ca

The Chair-Leader Event

Local 'celebrities' to learn trials of spinal cord injuries

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Winnipeg's police chief is one of five notable Winnipeggers participating in an event to give them an idea of what it's like to live with a spinal cord injury.

The Canadian Paraplegic Association's second annual Chair-leader program, which is being held this week, matches a local "celebrity" with a person who suffered a spinal cord injury.

In Police Chief Keith McCaskill's case, he will be paired with Scott Coates, who injured his spine diving head-first while swimming with friends about 18 years ago.

Paralyzed from the chest down, the 35-year-old was told he would never walk again but he defied the odds and now walks with the use of a cane.

On Wednesday, Coates will spend half the day with McCaskill, who will be wearing leg braces and using a cane to simulate Coates' limited mobility and make the experience as realistic as possible.

"I'm hoping to be able to understand a little bit better what Scott is going through," McCaskill said.

Coates, a rehabilitation counsellor with CPA, said he endures muscle spasms after he awakens in the morning and pain when he walks long distances.

Climbing stairs or getting over a curb can pose a challenge most people never face, he said.

"This is a great awareness event. Walking in someone else's shoes is an important experience," Coates said.

Other participants, including former lieutenant-governor Yvon Dumont, radio personality Resby Coutts and Winnipeg mayoral candidate Judy Wasylycia-Leis, will be using a manual or powered wheelchair or walker.

Organizers said the event's goal is to raise awareness about the organization and people who have spinal cord injuries to help them gain independence, self-reliance and participate in the community.

Scott Coates & Police Chief Keith McCaskill

Resby Coutts & Harold Swick

Judy Wasylycia-Leis & John Wyndels

Lindor Reynolds & Yvette Cenerini

My Day at the Canadian Paraplegic Association's Chairleader Event

Harold Swick used to curl. He doesn't anymore. He used to golf and he still does. The two are unrelated but this is a curling website so I needed to start there as an explanation for my challenge (or maybe it was an invitation) to come back to curling. If he does come back, I'll have recruited a new member for the growing number of wheelchair curlers in Manitoba. I wouldn't say I was real successful in getting Harold to try curling again next winter. For a while, though, he thought he would never golf again either. Within a very few days about 4 years ago, a still unexplained viral condition took away his ability to walk.

The retired school teacher, went from a very active lifestyle to one of immobility. Today, he walks with the aid of a walker and drives a van with handbrake and gas controls. And he's playing golf again, thanks to a one-person power-rig called an adaptive golf cart, some very good friends and a very supportive staff at Larters at St. Andrews Golf Course.

The cart has hand controls, a swivel seat, which rotates his body into position and a tilt-elevator seat to push him up into a standing position to play his shot. All this I learned Wednesday afternoon when Harold and his buddy Butch Hochman took me golfing as a part of the Canadian Paraplegic Association's annual Chairleader event. The awareness event partnered me with Harold while Police Chief Keith McCaskill, Free Press journalist Lindor Reynolds, and Mayoral candidate Judy Wasylycia-Leis all had a chance of their own to experience the lift and challenges of other partners.

The golf was the fun part of my day. The staff of the Association fixed me up with a walker of my own and weighted my legs to simulate Harold's condition. Like the retired teacher he is, Harold worked me through the challenges he faces every day. Simple things like getting that walker folded and into the van while having to hold onto something (like the side of the car) with one hand. Simple things like having to open that door to the pro-shop while trying to figure out how to get the walker out of the way while the door opens toward you. Simple things like trying to get into the washroom cubicle when the door is just a little narrower than the walker. Simple things like facing the buffet line and trying to figure out how to handle your plate and the food when the walker is a two-handed job.

Harold handles these things with a smile and a wonderful (occasionally slightly wicked) sense of humour. For example, the smile on his face as he helped me figure out how to get my clubs onto the front of the cart (easily in reach) and as he helped me figure out how to get my bottom moved onto the seat of the cart while holding onto the walker for balance. That smile turned into an ear-to-ear grin when I proudly proclaimed myself ready and he reminded that I had forgotten a key point – the golf balls were still in the bag, well out of reach on the front of the cart.

And then he explained to me what had been one of the toughest lessons of all – that is to ask for help is OK. That's where Butch comes in. A long-time golfing buddy, Butch knew how important it was going to be to find a way to get Harold back on the golf course and helped with the research which identified the specially designed golf cart, along with the discussions with Larters Director of Golf & General Manager Peter Ewert which created the opportunity. Harold and Butch have become pros in the awareness business. They attend golf tournaments, malls and trade shows to demonstrate the cart. No – they're not selling it. They're just trying to make people aware of its existence, recognizing that it could be an asset to an aging population, as well as to those with physical challenges.

To set up for a shot, the cart can be driven directly onto the tee boxes and greens. It is lined up pointed on the desired line-of-flight then the seat is swiveled and elevated to get the golfer into swing position.

It is mainly an upper-body and arms swing and the result will not be quite as long a shot. However, the satisfaction provided by the click of the clubhead on the ball and the sight of the ball flying down the course are maybe even greater than when they were taken for granted.

And that's where some resistance has come. Not many clubs are yet ready to allow the golfer to drive the cart up onto the greens. Yet, by my own observation there is simply no issue. And you don't have to take my word for it. One of Manitoba's good young curlers, Derek Samagalski, was on the course today, cutting grass. I asked for his thoughts. He says the large tires on the three-wheel cart cause no damage to the greens. By comparison, the damage caused by the shoes of many of the size-large golfers who play occasional recreational tournaments is often much greater.

In many ways, it is the same thing icemakers have discovered about wheelchairs on curling ice. And the golf community is learning what we in curling are also learning – innovations like the chair and delivery stick OR the adaptive golf cart can create important opportunities for people like Harold Swick to continue an active lifestyle.

I had the easy part of today's Canadian Paraplegic Association (Manitoba) Inc.'s Chairleader event. I had the recreation component. Writer Reynolds spent her day in a power wheelchair experiencing a day in the life of young mother Yvette Cenerini. Candidate July Wasylycia-Leis was in a sport wheelchair partnered for a work day with Disabilities Issues Officer John Wyndels. Chief McCaskill went about his daily routine with CPA Rehab. Counsellor Scott Coates coaching him on the challenges faced by a person with mobility limitations aided by a cane.

In a de-briefing session to end the day, all of us recognized the obvious and very real difference between the simulation and the real thing. At the end of the exercise, each of us would be able to get up and walk out of the room, ready to return to a normal routine while our partners for the day would be continuing with their lives, dealing with their various degrees of mobility impairment and the challenges big and small they face each day. Hopefully, each of us has a little more appreciation for what those challenges are.

~ Resby Coutts ~

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The View From the Chair

Winnipeg's not hell on wheels, but it could be better!

Yvette Cenerini handles her power wheelchair with the aplomb of a Formula One driver. She's got the speed control set on rabbit (the other option is the sluggish tortoise) as she manoeuvres through her house, down the street and into a Handi-Transit van.

She makes it look easy – or as easy as it can be when you're quadriplegic with very limited use of your hands, no ability to toilet yourself and a constant set of obstacles to performing the most basic tasks. Getting out of bed and ready for the day takes three hours and an aide.

But Cenerini, 34, will not be defined by her disability.

She is a mother to two-year-old Adriel, wife of a man she first met in high school, an artist, a teacher and a bilingual woman who has earned two university degrees. When you look at Yvette Cenerini you don't see the wheelchair. You see potential being used to its fullest.

"People are always acting amazed," she says. "'Oh, Yvette graduated from high school!' Everyone graduates. 'Oh, Yvette went to university!' Lots of people go to university. 'Oh, Yvette got married! She had a baby!' These are things everyone does."

But everyone has not been in a wheelchair since they were 15, the result of diving headfirst into a pool. Everyone has not had to design a life around a disability.

"I don't feel that I have too many obstacles," she says. "I have a really good support network. We're just living day by day doing the best we can."

Talk to half a dozen people active in disability issues and you'll get half a dozen answers as to how accessible Winnipeg is and how much more needs to be done. The basic framework has been laid: cut curbs to roll a wheelchair up and down, an increase in the number of ramps at public buildings, more doors that open with the press of a button and a building code that requires retrofitted buildings to be made accessible if more than 50 per cent of the original building is being renovated.

Under most circumstances the provincial government will not lease buildings unless they are accessible.

Winnipeg has a number of transit buses with drop down floors to allow wheelchairs to roll on. Huge steps have been made. Activists say it's not enough.

"Movement is slow compared to expectations," says Jim Derksen, a policy advisor to the Council of Canadians with Disabilities. "It's a complex area."

Derksen says Winnipeg's infrastructure, especially the number of old buildings in our downtown and Exchange districts, are a barrier to accessibility. So is our weather.

"You might put a ramp up. But how do the snow clearers get around it? We've got special needs that way."

Part of the problem, he says, is that demand for disability aids is growing. Motorized scooters didn't exist 20 years ago. Now they're popular, especially with seniors, and some ramps aren't wide enough for their use. Our population is aging, leading to an increased demand for services such as Handi-Transit.

Derksen is a proponent of universal design, a system designed to "accommodate the diversity of all humanity. Everyone is taken into account."

"This is a kind of ideal where we get an infrastructure that is accessible to all."

He has battled to make buildings accessible. His local drugstore was impassable. He got them to put in a small ramp. A favorite restaurant was accessible only through a back door and a trip through the kitchen. When the restaurant added a patio, he ensured a wheelchair could enter through the patio doors.

"There's no easy cheap remedy," he says. "How do you construct a sidewalk around a ramp? There will always be issues."

Harry Wolbert, co-chair of the Manitoba League of Persons with Disabilities, says it's difficult to say where Winnipeg ranks of the accessibility scale.

"There's a lot of room for improvement," he says. "We're not the worst. We're not the best either."

But there are places that are supposed to be fully accessible that simply aren't. Take the overpass between the Misericordia hospital and its parkade, for example. It's wide enough and the doors open with the press of a button. But the incline is so steep the average person couldn't wheel herself up in a manual chair. Pushing an adult up would be a feat of strength.

"Even when efforts are made to be accessible, it doesn't always work," says Wolbert.

John Wyndels, a policy analyst with the provincial Disabilities Issues Office, points to Ontario, which has a goal of making the province barrier-free by 2025, as leaders in this area. They are now conducting a five-year review of their program.

Wyndels, who has been a paraplegic since a car accident 28 years ago, says his life is now much easier than it was when he had his accident.

"We're an old city filled with old buildings," he says. "But my accessibility issues are surprisingly small. Mine I consider manageable. It's more of an inconvenience than anything."

Public perception has an impact on how accessibility is viewed. Wyndels says there was a sea of change after Canadian Rick Hansen wheeled his way through 34 countries 25 years ago. He travelled 40,000 kilometres and raised $26 million for spinal cord injury research.

"That really may have been when a lot of individuals realized a person with a disability can also do a lot of things people didn't know they were capable of."

MLA Jennifer Howard, the minister responsible for persons with disabilities, says the government is watching Ontario's model closely.

"We do need to come up with a more systematic approach in Manitoba," she says. There are no immediate plans for new legislation.

* * *

Back at Cenerini's house, a representative of the Canadian Paraplegic Association has strapped me into a power chair that's a match to hers. Cloth tubes cover my hands to mimic her lack of hand dexterity. They're bound in tape so I'm not tempted to take them off. In addition to a seat belt, I wear a chest strap. Cenerini can't lean forward or she'll slide out of her chair.

The idea is to give an able-bodied person a sense of what a person with a disability experiences on a daily basis.

I figured it would be relatively simple because I was in a wheelchair two years ago, recovering from a broken pelvis. I had a manual chair and grimly survived the difficulties of curb cuts that were too high to manoeuvre, cracked and heaved sidewalks that couldn't be navigated and buildings I couldn't gain access to. Had my injury been permanent, we would have had to move from our two-storey house.

Yvette and Alain Cenerini custom-built their home. The hallways are wide, the living space without obstacles (other than their little boy's toy cars). Everything, from the bathroom sink to the kitchen counter is accessible. The basement, which contains her painting studio, is reached by a tiny elevator. The front door deadbolt has been lowered to be within her reach.


Yvette Cenerini, son Adriel & Lindor Reynolds

I'm given a few basic tips and left with Cenerini, Adriel and an aide. If I wanted to do anything it has to be something she can also accomplish. The only exception is using the bathroom. Even then I have to get the aide to unstrap me from the chair. The covered hands are a problem. When we eat lunch I can't cut my food.

"You have to learn to ask for help," she says.

We head outside through a patio door. There's a gently winding ramp to the fenced-in play area. I get wedged in the patio door, ending up somehow nearly sideways in the opening. A power chair is impossible to lift, especially with a person inside. The aide somehow wriggles me out.

We're in the yard when I realize I'd like to put my jacket on. I can't. The chest strap keeps me from leaning forward. Cenerini somehow shrugs hers over her head, tugging at the zipper with her teeth. She's like a contortionist.

When we leave her house I bang hard against the doorway. The bruise lasts for days.

There is an incredible vulnerability to the experience. When we unload ourselves at an office building downtown, half the people walking by don't seem to see us. The others have pity in their eyes.

"You focus on what you can do," says Cenerini. "You accept that everything's going to take three times as long."

The effects of a disability, can be, as John Wyndels says, little more than an inconvenience. They can also be as devastating as not being able to live in your own home following an accident.

What every member of the disability community agrees is this: Things have improved in this city but they still have a long way to go. *~ Lindor Reynolds ~*

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CPA extends its sympathies to the families of the following loved ones who recently passed away:

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