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Bob Chubon

Just an Innocent Kid

An Autobiography

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By

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Preface

Over the course of my adult life, a number of people have suggested that I write an autobiography. These usually have been people who referred to me as an inspiration or a hero as a result of my efforts to cope with my spinal cord injury. I have always been uncomfortable with such references. There is often a difference between people's outer appearance and inner self. To quote the often cited lines in one of Shakespeare's plays, "All the world is a stage, and all the men and women are merely actors." The fact is that much of the way we present ourselves to others and what they see is outright acting. For example, we put on a smiley face to cloak our pain or suppress our fear in an effort to reassure others. Writing about myself has caused me to look inward and ask, "Am I really what others have seen?" When I hear terms like "inspiration" and "hero," I am left wondering if they know the real me or if they have been taken in by my acting. These questions have compelled me to attempt to set the record straight. I have done my best to present the whole story in the following pages.

Growing Up

Bradford

About four months old

The time a person is born can have a significant impact on his or her life. In my case, being born in 1937 did. That was during the struggle to overcome the great depression and near the beginning of World War II. The depression left many, if not most, people poor. I will tell you up front, I was not one of the rare babies back then who were fortunate enough to be born with a silver spoon in their mouth. Watching parents struggle to make ends meet and seeing how they manage life in general can instill a set of related values. Dad and Mom could have embarked on a course focused on building an economic bastion that would forever insulate them from the poverty they came to know, as some people did. However, I never detected that they felt accumulating a big pile of money was a significant priority. What seemed important was their relationship with people and their personal integrity. Being kind, hospitable, truthful, and keeping commitments were the kinds of things they valued. As my life unfolded, I accepted and absorbed those values. Looking back at my life, I think they made the right choice. People and relationships in my life have been far more important than wealth. There were times when more money would have been appreciated. However, it could not give me what people did.

The second thing about the relevance of time in shaping me and my future was the fact that I was the second born. Growing up with an older brother had its advantages and disadvantages. According to a child psychologist I once heard, first babies are the ones parents learn on, and most should probably be thrown out. Second and successive babies have the benefit of more experienced and sensible parents. I cannot argue about that but I do know that the second baby lives in a world of hand-me-downs and with someone more competent to catch up to. It can be frustrating because you can never catch up with the first. The bar you have to cross keeps getting higher and higher.

I do not have a lot of detailed memories from my early years in Bradford, PA, the town in northwestern Pennsylvania where I was born. We lived in the second story of a house owned by one of Dad's co-workers, Louis Palandrani. It was somewhat unique in that we had a porch that extended out to a street higher up on a hillside. That was our primary entrance and where Dad kept the car. Across the street the wooded hillside continued upward, and we took walks there from time to time. The major player during these early days and throughout my life was my older brother Richard (Dick). Some of my earliest memories relate to our competition for the few toys we had in those days. As soon as we were old enough to scuffle, it was a frequent part of our interaction. When our tussles were sufficient to gain the attention of Mom or Dad, punishment usually ensued. I recall one incident when we were given the choice of punishment; either time out in the closet or a spanking. Dick chose the closet and I took the spanking, reasoning that I could quickly resume play. Already our core personalities were evident and shaped the sibling rivalry that continued until we each went a different way following high school. Dick was somewhat reserved and a bit of a pacifist. I was more action oriented and a bit of a provocateur, to say the least. In general, this was a happy time. Even when Mom went to the hospital for several days when she developed appendicitis, it was a fun time because our Aunt Eva Weritz came to stay with us. She brought along some fresh duck eggs from the farm and I was fascinated. She certainly managed to alleviate any concern about Mom's well-being.

Mom and Dad had a close social relationship with the Palandrani family. We occasionally had dinner together. One of their daughters, Florence, sometimes babysat with Dick and me. I recall our families having a fun get together in the basement, which was the tasting of the new wine being opened for the first time. It seems that many of the Italians in Bradford made their own wine at that time. I recall Dad mentioning that the Italian community shared a whole boxcar load of grapes each fall. At the tasting, Mr. Palandrani gave me a teaspoon or two in a glass to try. I do not remember how the wine tasted but it did make me feel grown up.

I remember my first haircut. Traumatic events stay with you. It was a rainy day and I remember the windshield wiper on the Model A swishing away. Walking quickly under the large black umbrella Dad held over both of us, we entered a small but crowded barbershop, with perhaps 3 barbers busily cutting hair. After what seemed like eternity, my turn came. A barber called to me and Dad sort of shooed me over to the chair. By the time I got there, he had placed a board across the armrests of the barber chair and instructed me to crawl up. He draped the large bib around me, and there I was, sitting up with the big guys. After a short discussion with Dad, I remember him saying that because this was my first haircut, he was not going to use his electric clippers as they might scare me. Instead, he grasped a pair of manual clippers from the shelf and went to work For whatever reason, the clippers did not work very well. Frequently, they would pull my hair, I would let out a yelp and jerk my head, and more would get pulled. At one point, tears were shed when the barber and Dad scolded me in front of the men for not sitting still. Then, of all things, when Dad paid the barber, he apologized to the barber for bringing such a "sissy" to the shop. After a couple of months or so, Dad regained his courage. He told me we were going for my second experience. I was terrorized and pleaded with him to get the barber to use the electric clippers. I may have been a kid but I saw that the men getting their hair cut did not have any problem. I did not see that things could get any worse, and besides, the electric clippers might get the ordeal over faster. He agreed but made some serious threats about what would happen "if I did not behave this time." It was a totally different experience. The electric clippers had a warm, comforting feel as the barber guided them along my head. In a few minutes it was done and we were all relieved.

When my oldest sister Joyce was born, we moved to a small, one story house on Jackson Avenue. My memories of that place are few. I remember Mom and Dad having to put one of my baby sisters in the bathroom some nights because she cried a lot and it was the only way we could get some sleep. I am puzzled that I do not remember my mother being pregnant with ether of my sisters. I was only about 3 when Joyce was born, and maybe that explains why I did not remember that pregnancy. However, my sister Sandy was born when I was going on five, and I do remember a good number of other things that occurred earlier. My most vivid memory is of a flood threat. Apparently the house was situated in a flood plain, and during the late winter or early spring, the house was threatened. Mom and Dad were fearful that the sewers would back up and discussed the need to plug the toilet and other drains to prevent the sewage from getting in. They also talked about the terrible mess that would result if the putrid, oil laden water from the nearby creek got into the house. We must have escaped the danger because I do not recall any cleanup.

Lamont

My first memory of Lamont, which is also my only memory of Grandfather Peter, is that of his funeral in January of 1942. Grandfather was laid out in the living room. All of the family arrived at the farmhouse a day or so before. The crowd of relatives, and perhaps others, occupied my attention, and to me, grandfather was not particularly relevant. I remember sleeping on the floor in one of the rooms with Dick and our slightly older cousin Rosemary Piersa. It was sort of exciting and a fun occasion from my perspective, but hey, I was only four.

It was not long after grandfather's death that we moved to his farm, which was on the edge of Lamont. Lamont was an unincorporated village with about 30 families concentrated around a natural gas pumping station. Because all of Dad's brothers were in the military service, he was the only one available to take over. I do not remember the details of the move, but I knew that Mom was not happy. In retrospect, the move was a real hardship because of the primitive living conditions at the farm, and there were plenty. Even the outhouse had to be replaced because the existing one was falling down. There was no indoor plumbing. Water was obtained with a pitcher pump on the kitchen sink. We each had a large metal, baked enamel covered pot at our bedside that we used at night. They had to be emptied and cleaned daily. We took our weekly bath in a large metal tub placed in the middle of the kitchen. Water was heated in kettles on the stove. Poor Mom. What a tough life. I note that the move occurred when sister Sandy was still a pretty small baby. Fortunately Mom had learned how to cope with such a situation. She grew up under much the same conditions and helped care for her younger sisters as they came along. She hardly ever smiled, and when problems arose, which were frequent, she and Dad would have some curt discussions. Dad was working at the foundry in Bradford, and between commuting, often working a 12-hour night shift, sleeping part of the day, and getting farm chores done, he did not have much time to spend with us.

We went to the Wilcox elementary school, which was about 8 miles away. Many of the Lamont kids, including us, met the bus at a stop which was probably a quarter of a mile walk from the house. It was a bit of a challenge in the winter when it was bitter cold. The bus was sometimes late because of snow conditions. Every year there was talk about building us a shelter to at least protect us from the wind, but it never happened. At times, when we arrived home in the afternoon, the Lamont road would not be plowed, and the bus could only make it to Novosels. We would have about a half mile walk home through the deep snow. There was no such thing as cancelling school because of bad weather. In the spring of the year I was to start school, I remember going with brother Dick to spend a day getting acquainted with what I would be dealing with in the fall. The pre-schoolers who did not have a sibling to escort them went with a neighbor. Dick and I shared his desk for the day, but that is about all I remember.

The first grade was memorable only because of one event. Miss Deveraux, the teacher, was quite elderly and a bit of a witch. Probably a month into the school year, we were practicing writing the alphabet or something. My best friend and Lamont neighbor, Frank Bergman, who sat in front of me, started whispering to someone across the aisle. Miss Devil, as we came to call her, angrily called me to the front of the room by her desk, pulled out a red painted paddle, and proceeded to give me a paddling on the backside for whispering. I started to plead my innocence but she threatened to paddle me more. HUMILIATION FIRST CLASS. She taught me that there is injustice in the world, a lesson I have never forgotten. It was not until several years later that I realized this was an omen.

Second grade was memorable only because the teacher was Sarah Jane Vail, a Lamont neighbor, who rode to school with us on the bus. We had to mind our Ps and Qs or word certainly would be passed on to Mom and Dad. Third grade was fun because Miss Peterson introduced us to science, which I loved. For me, it was also the year of successive illnesses. I had them all; chicken pox, measles, whooping cough, you name it, I must have had it. Somehow, I survived them all with plenty of bedrest and glasses of hot fresh milk with a dollop of home churned butter on top. The warm, rich flavor was always a comfort. Fourth grade just seemed to slip by quickly, and in the fifth grade, Mrs. Dickenson embarrassed me a few times by praising some of my art work in front of the class. The downside of the Wilcox school was the Zimmerman brothers, who were the school bullies. Fortunately I was able to ward off most of their threats by reminding them that I had an older, big brother. Sometimes an older brother can come in handy.

During World War II was not the best time to be a kid. We had very few toys because all the metals were needed for the war effort. Plastics were still in the laboratories. In fact, we even saved the tin cans from food, etc. and took them to school which was an official collection site. We also picked milkweed pods, which were used in navy life jackets. The seeds are attached to hollow thread-like fibers which make them very buoyant. Some of the few toys we did get were made from cardboard or compressed sawdust held together by some kind of binder. None lasted very long, especially if they got wet. As a consequence, we had to make our own toys from whatever materials we could find. Boards, twigs, newspapers, boxes, stones...we used them all. Similarly, the games we played required little or no resources. Tag, hide-and-seek, marbles, and stick ball were standards. It was not necessarily a bad thing. We learned to be self-reliant and creative. We even made kites with salvaged sticks and newspapers. They flew remarkably well. At times, I honestly enjoyed the challenge of finding something interesting to do. At some point we did acquire a Radio Flyer wagon and later, a secondhand Western Flyer bicycle that we shared. Dad bought it from family friends. The one advantage of being on a farm was that we could have a pony. However, Scout was a limited asset in that Dad was the only one who could put the saddle on him.

Me and Scout (1946)

When the war ended, Dad, with Mom's urging, quit his job at the Bradford foundry. He had been coughing and occasionally even spit up blood to the extent that he actually went to a doctor. He was told that the likely cause was the sand dust in the foundry. For a short time he worked at the Sargent Glass Works, which was only a few miles away. Eventually, he started a meat market in the garage, which he had remodeled. Together with some limited farming, he was self employed. That is a bit misleading, however, because in fact, it was a family operation, and we all worked. Dick and I spent hours trimming bones and doing other chores in the meat market, which was also a slaughter house. We also helped with the farm work. We helped butcher hogs and other cattle, killed and plucked chickens, and delivered meat to homes in the neighborhood on the bicycle. I made one memorable trip to the Novosels, about a half mile down the road. On the way back, I passed by the Bergman place and the two huge Doberman dogs they owned were catching frogs in the swamp along the road. They looked up and started after me. I tried to out peddle them but it was no contest. In a few seconds, one had my rear end in its jaws, and I went down in the dirt beside the road. Fortunately, Frances, their owner, heard the commotion and called them off. The pain did not stop there. Mom painted the teeth marks with iodine, the standard antiseptic in those days. Ouch!

I sometimes took groceries or meat to Grandma Weritz across the road from our farm. For the most part, these were enjoyable visits. Her limited English was sometimes difficult to understand, and she had some nasty geese that chased people like watch dogs do. A trip there usually resulted getting rewarded with a piece of cake or homemade doughnut, and some coins. The coins were appreciated because Dick and I received no allowance or pay for the work at home. We had to earn our money by helping to weed Uncle Paul’s corn fields by hand, and helping him to make hay. That usually netted about 50 cents a day. We also sold garden seeds door-to-door to the neighbors every spring, which is how I got my first BB gun. I also sold newspaper and magazine subscriptions for various prizes. One year Dick and I both won a bus trip to Pittsburgh for selling subscriptions for the Pittsburgh Post Gazette. I remember the trip to the “Smokey City.” We visited such sites as the airport, Phipps Conservatory, and the planetarium. That was the farthest I traveled from home until I was an adult.

Sadly, life in Lamont came to an end because Grandfather did not leave a will when he died. As is often the case, settling the estate turned into a family feud. Dad was unable to reach an agreement with his brothers and sister to buy the farm so he could continue to operate the meat market. He looked at other options and happened upon a family friend who was an elderly Slovak widow struggling to keep up a farm after her husband died. He offered to buy the farm so that she could move to town. It turned out to be a mutually beneficial transaction.

Highland Road

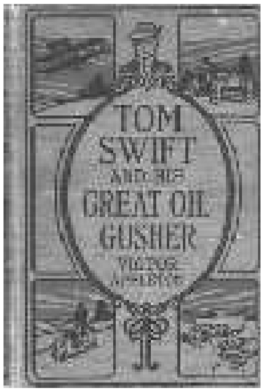
We moved to the Undrovic farm about 3 miles from Lamont during the summer of 1948. The timing was important because we kids would be going to a different school. The house was a real step upward with its indoor plumbing and gas heat. The work was much more diverse and demanding, and we all were pressed into service. Milking cows by hand, feeding chickens, separating the cream from the milk with a hand cranked separator in the pantry in the house, carrying the heavy cans of cream to the spring water cooler in the spring house...and on and on, often before sunrise and well after sunset.

From the onset Dad knew that the farm, which had been minimally maintained by an asthmatic old timer Mrs. Undrovic kept as a border, had to be upgraded. The team of horses he had been using were sold before we moved there. We had the small Farmall

A tractor, a grain combine, and Dad's 1937 Chevy pickup truck to start farming with. Dad moved things quickly along, again with free labor, and extreme frugality.

The whole family in the early 1950s.

Within a couple years, we were well on the way to becoming a moderate sized dairy farm. When enough cows were acquired, we began selling milk to the most respected dairy operation in the area. The other major operation was raising chickens and selling eggs. We even raised capons, which was interesting. After attending a couple demonstrations conducted by the agriculture extension agent, Dad decided it was something we could do. He arranged for a demonstration at our farm. For the unknowing, capons are castrated roosters. We learned to cut a small slit in the rooster's abdomen just behind the breast muscle and under the wing, spread it open, and reach in and grab the testicles with small tongs. They were pulled outside the abdominal cavity, snipped off, and the rooster was free to go. From that time on, because of the hormonal change, they would mostly eat, sleep, and grow twice as fast and twice as big as other chickens. They were the Thanksgiving bird of choice for a lot of people. Nowadays roosters are given hormones (estrogens) to turn them into capons. When the dairy operations grew sufficiently, poultry farming was phased out and the coop was converted into a granary.



In the early days on the new farm, we spent a lot of time exploring our new surroundings. On a trek to the attic, I slid a large, rather heavy box that had been left by the Undrovics out from the area where the roof met the floor. I quickly opened the box, and to my surprise, it was filled with books. At first, that was a bit of a disappointment. As I examined them, it was obvious that it was some kind of set. They turned out to be a large part of the Tom Swift series. When I looked at some of the titles, they were about his sky racer, his dirigible, etc. That caused me to look deeper. For this kid interested in science, reading one chapter got me hooked. Tom was a boy inventor who did what everybody said could not be done. I loved those books, and in retrospect, that is probably what cemented me to science for the remainder of my life. I still love the challenge posed by the statement, "it can't be done."

The new farm was just across the township line, and we were in the James City school district. In a way, the change seemed a good thing because the school was much closer to home. However, when I arrived there for the first day, I had a rude awakening. The school was a large old wooden building with unmaintained, mostly bare grounds. I was in the sixth grade, but the classroom was shared with the fifth grade, something I never imagined. It took some getting used to, but eventually it came to seem normal. Recesses and lunch times were pretty much unsupervised. We had to "brown bag" it because there was no cafeteria, which we had at Wilcox. For the most part all of the kids were from relatively poor families, with a few reaching into the middle socioeconomic level. Recess was a "do it yourself" experience. There was no real playground, only the bare building grounds on which we played. We literally played stick ball. Occasionally, a couple of the older kids brought a real baseball or softball and bat. For the most part, we used a rubber or any kind of ball we could get our hands on, and we had an assortment of boards, broom handles, and pieces of tree limbs that we used for bats. Marbles were the spring game. Sometime we would sneak off to "Death Hill" in the winter where we rode a big bobsled owned by one of the James City kids. The hill was actually a small gas pipeline right-of-way, and in part, got its name from its 75 degree slope. At the bottom where it leveled out, there was about a fifty foot stretch on which to stop. If the sled was not stopped, at the end was "shit creek," into which it would plunge. The creek was aptly named because it carried the raw sewage generated by the nearby homes and probably the school. The James City post office, which was part of a small store, was across the street. It was our source of candy, ice cream, and soft drinks.

The two years of education I received at James City proved to be adequate. For the eighth grade, we went to the Kane High School, along with kids from other area elementary schools, such as Mt. Jewett, Ludlow, St. Callistus, and the other in-town schools. It is my understanding that we were all merged at that point to get us on a standard curriculum and be on relatively equal ground when we started high school.

I always enjoyed school. I certainly preferred it to shoveling manure. However, there were pressures. Mom and Dad insisted that we do well in school. To a large extent that was because they realized the limitations imposed by their shortened educations. The real problem was that “doing well” was defined by my brilliant, popular brother. His grades were always better than mine. He did not flaunt his superiority, but his grades and other achievements were always there for Mom and Dad to compare. School was easier than farm work, but the farm work did affect school performance. To some extent my grades suffered because there was little or no time to do homework or study at home. If it did not get done during our study periods at school, it did not get done. Consequently, I sometimes found myself struggling to keep up.


Senior Photo

There was one memorable negative event that occurred in biology class. The course started off on a very positive note. I finally found a course in which my farm background actually gave me an advantage. I “A”ced the first exam. I appeared to have done the same with the second exam. I quickly finished and turned my answer sheet over on my desk. There were 10-15 minutes left until the end of the period when the exams would be collected. I was seated in the second row in from the windows and began watching the girls play field hockey on the athletic field. I was watching no more than a minute or two when Mr. VanOrmer, the teacher, jumped up, darted to my desk, and proceeded to crumple up my answer sheet. He began yelling that he would have no cheating in his class and that I was receiving an F/0 on the exam. “Let that be a lesson to you all,” he yelled. HUMILIATION BIG TIME…AGAIN! I tried to explain that I had finished, but he would not listen. I received “A”s on the rest of my exams. However, the zero made it impossible to get a final grade higher than a “B”. When the course ended, I tried to reason with him, pointing out that I had received “A”s on all the other exams and he obviously made a mistake. His response was that I should leave his office before he decided to give me a “C.” After my experience with Miss Deveraux in first grade, I guess this lesson could have been titled, “Intermediate Injustice.”

I was able to participate in a few extra-curricular activities like the small arms and science clubs. I even recall taking some dancing lessons that were provided for students in the gym before regular classes started in the morning. In my junior year, I was the intramural wrestling champion in the heavy weight division. I went to some of the school dances and dances at the YMCA when I could hitch a ride with Dick. I got my drivers license during my junior year. That proved to be of limited value because we only had our family car. I was the low person on the priority list for using it. The farm imposed real limits on my social life. On the other hand, hunting and fishing were close at hand when we could find the time.

One of the things that made high school enjoyable were a half dozen classmates who formed a tight knit group. We called ourselves the "Big Wheels." The name was derived from the fact that two of them had been class officers. Although we did do some pranks, we were mostly just there for one another when some need arose. One of the members was Monte Montgomery, who was a teacher's son. He was a polio survivor and needed one long leg brace to ambulate. His slower pace was nearly responsible for us getting caught at our pranks a couple times. Because it was the polio era, I had another classmate who contracted a much more severe case during our junior year. Ron was left quadriplegic and wheelchair dependent. When he recovered sufficiently, he returned to high school but it was a major challenge. There was no elevator in the multistory school so he had to be carried up and down the stairs to get to different classes. I was one of about a half dozen students who served as his carriers. The difficulties these two classmates experienced formed the basis of my perception of disability. Polio was something to be dreaded, and in those days was the major fear of both parents and kids.

There were some other guys that I spent a good bit of time with. Jack Christenson, a classmate, and three or four of his friends were model airplane builders. I was really interested in airplanes and Jack invited me to watch them flying their models. I immediately fell in love with the hobby. With the help of Jack and his friends, I learned the model building fundamentals. I also saved up enough to buy a small alcohol fueled engine. I invested a lot of spare change in models, some of which crashed and smashed into pieces during the first test flight. However, I learned a great deal about airplanes and flying. It also gave me a greater appreciation of birds, bees, and butterflies.

At the beginning of my senior year, things began falling into place. I wanted to become an engineer, but until then, college seemed out of the question. Early in September the school guidance counselor told us about an opportunity to talk to a Navy recruiter about NROTC scholarships. I met with him when he came to the school and it seemed like the scholarship was made for me. They were looking for candidates who were interested in engineering and other science degrees. Upon completion, the scholarship recipients would serve out their 5 year payback obligation as Navy pilots if they could qualify for flight training. Not only would the scholarship cover all the college-related expenses, but recipients would be paid a $350 a month stipend. Candidates had to pass both a written test and a physical exam, and then gain admission to a college or university that had an NROTC unit. In discussions with the guidance counselor, he felt that I would have no problem gaining admission to Penn State, which had both an NROTC unit and several engineering degree programs. It was late in September when I took the exam with some other classmates. About a week later, I received a letter congratulating me for receiving a passing score and indicating that I would be scheduled for a physical exam in the near future. It was a dream coming true.

The Big Fall

Humpty Dumpty sat on a wall.
Humpty Dumpy had a great fall.
All the king's horses and all the king's men,
could not put Humpty together again.

Until October 26, 1954, Humpty Dumpty was just a nonsensical children's nursery rhyme. On that day, the rhyme took on some real-world meaning. My gym class was the last period before lunch. We were having a great time learning the fundamentals of the trampoline. We got to the point where we were doing air borne summersaults and landing on our feet. Classmates had the trampoline surrounded, ready to catch anyone who bounced toward the edge, and calling out words of encouragement to the timid. Each student would make five attempts, and then get off. I did four just fine, but on my fifth attempt, my foot slipped a bit and I did not get the full upward thrust I needed. Instinctively, I went into a jackknife position and began tucking my head. However, lacking sufficient height, I landed on the back of my head and continued downward as the canvas gave way. When it yielded no more, there was a flash of lightning in my brain and I was in a hands and knees position. My body rolled over and I was on my back. I felt like I was floating in warm water. I could see my classmates standing around the trampoline waiting for me to get up. Then I realized I could not move and in a matter-of-fact way, told my classmates. They quickly got Vic Gentlemen, the gym teacher. He felt my pulse and asked if I could move my hand. He instructed me to stay still while he called a doctor. From that time, it was hurry up and wait. No pain, just a tingling in my neck. My body felt relaxed. First one doctor came, then a second. At some point, Mom came, brought in by a neighbor. Dad was at the cattle auction in Brockway. By this time the other students were gone from the gym. It was lunch time and I was hungry. Finally, one of the doctors, Vic, and Mom came to the trampoline and informed me that I would be taken directly to the Hamot Hospital in Erie. No diagnosis was given. At that point, I knew it was very serious. I had already put two and two together. I knew my spinal cord was involved. It seemed that the trip took forever in the hearse turned ambulance as was the custom in those days. There was bump after bump, and the siren shrieked from time to time. It was not fun.

We arrived at the hospital emergency entrance and were greeted by concerned staff. More importantly, Uncle Frank Veritz, who lived in Erie and recently had back surgery at Hamot was there to greet us. Someone had alerted him and I must say, he was a godsend. He knew the hospital and physicians, and became our navigator and advocate. He and Aunt Barb put Mom up at their house and provided transportation and respite from her long stays at my bedside. I do not believe she could have borne the stress she was subjected to in the ensuing weeks without his help.

I was immediately taken to a curtained off area and nurses, doctors, and others were poring over me. They issued a number of instructions and all left but one nurse. I was still in my gym trunks. She cut them off with her scissors to avoid moving me. The second thing they did was to put a catheter in my penis to drain the urine. A real trauma. Then x-rays were taken and I was taken to an unoccupied "quiet room," usually used for combative patients. After what seemed like an eternity, a physician came in with Mom. He said that I had fractured my neck and they needed to do surgery as quickly as possible to relieve pressure on my spinal cord and remove bone fragments.

“Okay,” I said.

Then he told me they would have to put me in traction on a special kind of bed.

“Okay.”

"Any questions?" he asked.

“No,” I replied.

"I will be back in a few minutes."

Here I am in traction on a Foster frame.

From that point on, staff activities were continuous. First the special frame-like traction bed. Not comfortable. Then the trauma. The physicians came in, one holding a drill and the other, a stainless steel ice tong-like apparatus with pieces of rope dangling. One began:

"First, we are going to drill two small holes, one on each side of your head. Then we are going to attach these tongs, which have small pins near the bottom. The pins will fit into the holes." He held the apparatus up and pointed them out. "Once they are attached, we will thread the rope through the bracket just behind the top of your head. Weights will be attached to the end of the rope and your neck will feel stretched, as it should. That will help realign your spine and help reduce any pressure on your cord.” When they finished, 22 pounds of weights were dangling from the end of the frame stretching my neck. The traction ordeal lasted 11 weeks.

It was about two weeks later that Mom brought in some mail that had been brought up to Uncle Frank’s from the farm. There were a few get well cards and a letter which she opened last. It was a notice from the Navy indicating that I had been scheduled for the physical exam required for scholarship candidates. Mom had to write a letter explaining what had happened. Needless to say, there were a lot of tears shed over the dream that somehow evolved into a nightmare. Mom stayed by my side for more than a month. However, she had to get back to the farm. In a way I was glad. Neither of us had to look at the pained expression of the other any longer.

Cards and other well wishes poured in from my classmates and others. In addition to the cards, my classmates sent me an envelope of money they collected and a clock radio. A few students and Vic Gentlemen and a couple other teachers came to visit on weekends during the early days following my accident. However, because of the distance and onset of winter weather the visits stopped.

After about a month, I started to get a little movement in my arms, but nothing dramatic. I was terribly confused because my reflexes did work, often causing my legs to jump around. Then the bad news: I had developed bed sores on my lower back and the calves of my legs. The staff did not know there was a mattress for the frame I was on. I had been lying on the canvas bottom which was hard as a board.

Every day, I would ask, "How much longer before I am walking?"

“We are not sure,” was the usual answer.

Finally, after a few weeks, I pleaded with a resident physician and he caved in.

"Another 10-12 weeks."

That was a long time, but there was an end to the dark tunnel. As each week passed, there was some barely noticeable increase in the movement of my arms but nothing else. Each week the docs would stop by and poke around the lower part of my body with a needle to see if I was gaining any sensation. Nothing. Then 10 weeks came, and finally 12. Nothing of significance had changed. I had been lied to. Why? The only logical conclusion was that they wanted me to feel good but they really expected me to die. I lost trust in the "system." There was no hope left. I also noted that as the outlook became bleaker and bleaker, the staff began to avoid me. I could see the troubled look on their faces when they did stop by. Eventually, my care was pretty much left to student nurses and nurses aides and orderlies. The student nurses were a godsend. Perhaps because of their inexperience and naivety, they talked to me and treated me as if I were just another teenager. It felt so good to be treated as a human instead of the medical tragedy I was. But even they could not prevent me from falling to the depths of depression. If they expected me to die, why doesn't it happen? Why do I have to be tortured too? I hardly ate anything. For what purpose? Also, after two or three months, the cards and other correspondence had dropped down to a trickle. I felt forgotten, and at times, the loneliness was overwhelming.

Eventually, I was moved from a private room to a 4-bed ward. Next to me was an elderly man dying from emphysema, struggling for every breath. The 8-year old boy and ex-boxing coach who had been visiting me almost daily in my private room to watch television both died. The nurses started getting me up in an old wood and cast iron wheelchair, a type still used in hospitals in those days. What a terrible glimpse of the future. I did everything I could to get out of my room. I was strong enough to propel the wheelchair one wheel at a time and zig-zag down the hall. No one told me anything was out of bounds. I ventured far and wide, often with a helpful push from a passerby.

One afternoon I made it to the morgue in the basement. The door was open so I just wheeled in. There were three resident physicians who just arrived to do an autopsy on a patient who died. I recognized one of them who had been on rounds and he recognized me. He introduced me to the others, and I started to leave.

"What is the matter? Scared to stay?" the one I knew asked.

Another said, "He would probably puke."

"You mean I can stay?" I asked.

A wheelchair like I used at Hamot

"I don't see why not if your stomach can handle it...and if you don't blab around too much. There are some people who like to jump on our ass every chance they get."

"I think it would be interesting."

With that, one of them pushed my wheelchair around to the head end. "We will be working from the side. We want to examine his liver. He was jaundiced and we do not know why." And so they finished putting gloves on and uncovered most of the abdomen. One brought a cart with instruments and a couple specimen jars. It did not take long to slit the abdomen and the liver was right there. I could see one of the residents look my way every few seconds. One lifted the liver and another cut it loose from the blood vessels. They carefully examined it.

"Looks perfectly normal," one said.

"Well, let's take a look inside and take specimens from each quadrant," another suggested.

They laid the liver on a towel and proceeded to carve it up. One took a piece and pointed his finger, "look at the spots. Know what they are?"

"Don't look at me, I'm urology," another said. The other just shook his head.

The one with the liver brought it to me and pointed to tiny dark spots visible on the cross section. "That's our surprise. I guess pathology will have to enlighten us," he said. "Okay, we are going to be cleaning up so we need to move you out in the hall. You did very well." I looked at the time on my wrist watch, a Seiko Aunt Verna had given me for Christmas.

"I need to head back before they start looking for me. Thanks guys," I said.

"Stop in anytime we are here. We'll gross you out yet."

"I will," I replied smiling. I did not tell them about all the butchering I had helped with at the meat market and farm. Before I left the hospital, I got to see a heart, lungs, kidneys, and a spinal cord section. The latter was at my request.

Nothing much happened the last few weeks I was at the hospital. At times the staff and Uncle Frank begged me to eat, and offered to get me anything I wanted. From time to time, Uncle Frank would bring me some wine in a coke bottle. That I drank, but it disproved his theory that it would increase my appetite. My bed sores did not heal and I did not appear to be regaining any significant function in my body. In fact, I had additional sores on my hips because they kept me on my sides so the back would heal.

Finally, I was told that the day of my discharge was not far away. It was a real mental struggle to accept or envision that. Never did I imagine I would be returning in the condition I was in. Eventually I concluded that I was being sent home to die, which was consistent with my expectations all along. Several years later, Mom told me that in fact it was true. It was just too painful to tell anyone at that time, and they genuinely thought it was best for me to not know. However, the result was that I no longer trusted anyone. They managed to get me a wheelchair made of metal that folded to make it more compact for transporting. It was a improvement over the hospital relic that I had been using, but not much easier to propel. A week or two before discharge, Mom spent half a day being shown how to care for me. I say shown, because she never got to do the catheter and dressing changes that she would be doing at home. They also got a hospital bed for me at home and set up my room next to the bathroom, in a work room where Mom had done the ironing and other household chores. There was one last revealing act that the hospital performed. A couple days before discharge, they weighed me: 97 pounds, down from the 179 I weighed the week of my injury. For the record, I was about 6 feet tall at the time..

I bounced on a trampoline one fall day.
One slight slip and on the canvas I lay.
All the caring nurses and all the medical men,
could not put my spinal cord together again.

On discharge day, Mom and Dad came to pick me up. It was a nice day in late April or early May and I was pushed out to the car which was in the emergency room parking lot. Dad had borrowed a station wagon from someone, because the old family car would not hold the wheelchair and all the other paraphernalia that I had accumulated. Someone opened the passenger door. Dad bent down, and in a second, I was in his arms and sort of tossed into the car, an act that he would repeat many times. They tilted the back of my seat as far as it would go, Dad loaded the chair in the back of the wagon, Mom got in the back seat, a quick goodbye to one of the nurses who accompanied us, and we were off. This was my first time out of the hospital and I looked at the world again through the window. Little was said on the long drive. What was there to say?

My arrival home from Hamot. In the back (left to right) Sisters Joyce and Sandy, and Mom In the front is Dad with Aunt Betty's children, Jennifer and Allen. Aunt Betty took the picture.

The hero in this story is Mom, who rallied to the task. With a half day of instruction at the hospital, she had become a skilled nurse. She spent countless hours at my bed side. In addition, she was continuously sterilizing needles, syringes, etc. There were no plastic disposables in those days. She had no medical support. The family physician never came to see me, and the usual answer he gave Mom when she called to tell him I was not feeling well was, "he probably got a virus. Give him some aspirin." I later learned that I had probably survived numerous urinary tract infections as evidenced by kidney damage. Shortly after I arrived home, Dad gave me an ultimatum: "Start eating or I will force feed you like a goose." There was no arguing, and it did not take long to get in stride with Mom's cooking.

In some ways, I missed the hospital. I was really isolated on the farm. There were few visitors other than the uncles and aunts in the area. Most of my school classmates were working or were too uncomfortable with my situation to visit. A few weeks after I returned home, I was visited by a teacher who taught homebound instruction for the high school. However, when she saw that I was unable to write or hold a book, she said that even homebound instruction was not feasible. I spent much of my day in bed watching old movies on a black and white television set.

Rescue?

Although I was feeling somewhat better by mid-summer, the outlook was pretty bleak. I was gaining weight and my bedsores were healing. I was still completely dependent on Mom for care and only able to tolerate staying out of bed for a couple hours at a time. For some unexplained reason, after sitting for a while, I experienced severe pain in one of my shoulder blades. Thought of the future only brought feelings of futility and despair. With all hope of ever being fit or walking again gone, I was destined to live out life with a pitiful, marginal existence.

It was sometime in July when the visitor came. Mr. Shay was a counselor from the state vocational rehabilitation agency. His visit had been encouraged by the school nurse, who was aware of my situation and was determined to do whatever she could to help me and the rest of the family. Mom welcomed him at the door, having expected him. After he introduced himself, she invited him to come to my bedside and meet me. He briefly explained that the role of his agency was to help disabled people to become functional enough to be able to do some kind of work despite their problem. Sometime, it even involved providing special training to do some kind of work from a wheelchair. As examples, he mentioned repairing watches and bookkeeping, pointing out that these jobs are performed while sitting down even if the worker can walk. For someone who could sort of flop his arms around, becoming a bird seemed more realistic than repairing tiny watches. Finally, he said that they were starting to look at more severely injured people to see what could be done for them. After glossing over some information he had gotten from the school nurse, he asked me to do a few things, like raising my arms. He jotted down a few notes and paused for a few moments. "You are by far the most disabled person I have dealt with. I cannot make any promises other than that I will get back to you after I confer with some other people." At that point, he put a hand on my shoulder and gave it a bit of a squeeze as we exchanged goodbyes. That was different. He did not awkwardly try to shake my hand as most visitors were prone to do.

He was quickly forgotten, but in about two weeks, he telephoned and arranged for a follow-up visit. I think we were all surprised. When he arrived, both Mom and Dad were present, as he had requested. He got right down to business. "Look, this is a tough situation and I want to do something. I discussed things at the office and we called some doctors and others familiar with cases like yours. Maybe we are going out on a limb, but we sketched out a plan that I want you to consider." That caught our attention. He went on to explain that the first thing that needed to be done was to have me evaluated by people who were familiar with patients like me and see if my functioning could be improved. Then, we could look at where to go from there. He went on to explain that there were two places that specialized in rehabilitating persons with spinal and other severe injuries using techniques that had been developed to help war veterans. They use physical and occupational therapy, braces, and artificial limbs to improve functioning. He said the places were working with people like me, but he had not sent anyone and did not know a lot of details. If I wanted to give it a try, the agency would send me. "Any questions?" To be honest, what he said did not really register with me.

"Where are these places?" I asked to break the silence.

He said one was the Institute for Rehabilitation in New York City, and the other was the Kessler Institute for Rehabilitation in West Orange, NJ, outside of Newark.

"Are there any differences?"

"I don't know much about them. The one in New York is in a large hospital and the one in New Jersey is a smaller place by itself just outside the city. They are both reported to be very good and that is all I know."

Dad asked how much it would cost to send me to one of the places. "Probably nothing. We need to get some information, but our program is funded from taxes and so we pay for it. If people are able to get back to work, then they pay taxes so we get the money back." Dad relaxed and after several questions, they went to the kitchen table to fill out forms he brought.

It was probably close to an hour before they got up from the table and came back to my bedside. "I have a couple of things for you, young man. I really need to know if you are going to give this your best. You are going to have to work hard." What is a person supposed to say in this kind of predicament? There is only one sensible answer. I said yes, but I honestly did not understand what I was agreeing to. "Rehabilitation" was no more comprehensible to me than something uttered in Chinese.

"One more thing," he continued. Then came the unbelievable. He explained that because much of the money to pay for my rehabilitation came from the Federal government, there was a requirement that I take a loyalty oath. He proceeded to read it to me, and essentially, I was asked to swear that I was not a member of the Communist Party or involved with any other organization that was intent on overthrowing the government of the United States. Think about that - a paralyzed seventeen year old farm kid planning to overthrow the government. Even if you were, it is not something you would admit to. After I politely swore that I was not, the first awkward moment came. He looked at his paper and then at me. "You are supposed to sign this, but you can't write, can you?" I flopped my hands up and told him I could not hold a pencil or pen. "Do you think you could hold a pen in your teeth and make an X if I hold the pad?" he asked. He went on to explain that occasionally they encountered a person who could not read or write and it was acceptable for them to make an X. I made a pretty good X, considering it was something I had never practiced. And that was how my rescue from despair began.

It was just a few days until Mr. Shay called back. His plan had been accepted, and there was one last decision I had to make so he could begin making arrangements. Which facility did I want to go to? Based on what I knew, the choice was between a big city hospital and a small, less urban place. Not particularly comfortable with the idea of going to a big facility in a big city, I chose the Kessler Rehabilitation Institute. With that information, he went to work. Within a week, he called and indicated that just about everything was in place. Kessler would be able to admit me early in October, but a specific date could not be established until late September. He advised us to be prepared for me to go any time during the first half of the month. Then came a surprise: They would fly me there! An agency medical consultant felt that the two hour plane ride would be better tolerated than a 350-400 mile all-day ambulance ride. Recalling the ambulance trip from Kane to the Hamot Hospital, I was not about to disagree. I would not be flying alone. Because I would need an attendant, they would pay for Mom or Dad to accompany me. As it turned out, Mom and I would be taking our first airplane flight from Bradford to Newark NJ in early October. I honestly do not know how Mom felt about it, but for someone who wanted to be a pilot, under the circumstance, it was a dream come true.

First Flight


DC-3

It was late afternoon in early October when we arrived at the Bradford airport for our flight. We checked in with Allegheny Airlines (a.k.a. Agony Airlines) and sat in the waiting area with a half dozen other people (I do not think "gates" were yet invented). Yes, we were flying on a regular passenger plane, a twin engine DC-3 - not some chartered ambulance plane. Our plane arrived from Erie, and we watched as they pushed the set of portable steps up to the door and a few passengers and the flight crew came out. It was clear that my wheelchair was too wide for those steps but I said nothing. It was about five minutes until the pilot and flight attendant came over to where we were waiting. "Ready to board?" the pilot asked. “You are going to be loaded first.” At that moment, another uniformed person pulling a narrow stool-like chair on wheels stopped beside me. "We have to carry you up the steps on this, he explained, "your chair is too wide for the steps and the aisle between the seats. Ready?" After a short discussion about how to lift me, the flight attendant, a 20s something guy, and the man in the uniform lifted me on to the boarding chair. Dad showed how to fold my wheelchair, we said quick good byes, and were off past the waiting passengers, out the door and headed toward the plane, with the pilot leading the way with my wheelchair.

Given that I only weighed about 125 pounds at the time, boarding me was no problem. I was placed in an aisle seat near the middle of the plane, with Mom next to the window. My seat was tilted back, and I was really quite comfortable. The rest of the passengers quickly boarded and the flight attendant gave his little safety talk. As the plane taxied to the runway, he came and helped Mom buckle and tighten my seatbelt. The engines were reved up, and with a sudden burst, we were off. It was already dusk, and I hardly took my eyes away from the window. The clouds, colorful tree leaves, fields, roads, houses, ...the view was amazing. As the sky darkened, lights on the ground became visible, interrupted by clouds. When we got to the southeastern part of the state, the lighted areas multiplied. Then came an announcement from the pilot. "We will be in the Newark/New York area shortly. We are on time but there are some local showers so air traffic is backed up about 15 minutes. I have received permission to take you on a circle around the Newark/New York City area. Keep your seatbelts buckled as there is a little bit of turbulence." What a sight. The bright lights were reflected by the wet pavement. I have never seen a photo of New York that compared with our view. The pilot brought various parts of the city, like Broadway, to our attention as he dipped the wings to give us a better view. Occasionally the plane shuddered from the turbulence, but it was no big deal. Then it happened. All of the sudden the plane seemed to drop like a rock. Then it seemed as if we hit bottom. We had actually been lifted from our seats and then dropped back down on them. Just as we seemed to bottom out, there was a loud crashing sound that came from the back of the plane. Everyone looked back, and would you believe, it was my partially folded wheelchair crashing down the aisle. The pilot or attendant had stashed it in a small alcove at the back of the plane, but they did not set the brakes or secure it. The flight attendant, who had been seated in the front row, ripped off his seat belt and quickly ran back and grabbed the chair. He took it to the back of the plane and presumably secured it. On his way to the front of the plane, he stopped by me to say that it did not appear to be damaged. He was more worried about my chair than we were about the plane. Then the pilot informed us that we had encountered a downdraft, and that all was well. I think that bump ended our interest in sightseeing. We were all glad to hear him announce that we were preparing to land.

The Promised Land, a.k.a. Kessler

Buildings containing the dorms, dining area, kitchen, and nurses' station.

I was taken off the plane last and there was an ambulance waiting a few feet from the plane. I was placed on the ambulance stretcher and quickly loaded, followed by my wheelchair, our luggage, and then Mom. I called out a thanks to the flight attendant, who was about to leave, the doors were closed, and we were off to Kessler. There was little conversation, and not much was visible from my position. The trip was short. One attendant began preparing to unload me, and the other made a quick trip into the well lighted building. He soon returned with another man. "You are right on time," he called out, and then introduced himself, indicating he was an attendant. I was quickly unloaded with the stretcher, and our suit cases were loaded onto the wheelchair. Then the five of us headed into what appeared to be the main entrance of the building. Wow! As the stretcher entered, Fats Domino was blaring from a large stereo off to the side. There were a couple card tables surrounded by people in wheelchairs. People in wheelchairs were playing shuffle board, and others in wheelchairs were just scurrying around. What a revelation. There were other people like me doing "normal" things. As I soaked up the sights and sounds, a well-built young man passed us. He was rapidly moving down the hallway using crutches and leg braces. As he passed, he gave me a glance and said, "Welcome to Kessler," and kept on going. It was only a few more feet and we stopped by what was obviously a nurses' station. A nurse got up and greeted us. The ambulance attendants gave her our medical records and asked where she wanted them to take me. She eyed my wheelchair, and asked if I was up to sitting in it or was ready for a bed. "My chair, please." I was on an adrenalin high.

The nurse had Mom sign some forms, and asked us if we had eaten. The airplane peanuts hardly qualified, so she took us to the nearby cafeteria. There were two workers in the kitchen area, and on instruction from the nurse, they fixed us a couple of chicken salad sandwiches and some left over apple pie. As we wolfed the food down, Mom commented that it was not the hospital-type food we expected. She was concerned about the food because she knew how important gaining weight was. I had been gaining weight steadily on her home cooking, but after having been down to 97 pounds on my return from Hamot, I had a long ways to go to be "healthy." More about the food later. We quickly finished and Mom pushed me back to the nurses' station. The nurse pointed out that it was getting late and took us on a quick tour of the relatively small facility. It was pretty much shut down except for the dorm, where residents were getting ready for bed. She showed us my bed at the end of a dorm, which I quickly learned was for "dependent" residents. Then we went back to the entrance where a driver was waiting to take Mom to a hotel. It was a quick goodbye, for which I was grateful. Mom was to go directly to the airport early in the morning, and we both knew we would not likely see one another until my return home. For the first time, I was on my own, and Mom would not be able to protect me. In retrospect, I think the separation anxiety that one normally would have felt was shut out by what we had seen. We were awed. After being "tucked in" by an attendant, I slept soundly.


One of the men's dorms at Kessler.

I woke up early in the morning as the others in the dorm began getting up, some on their own, and others getting assistance from attendants and other staff. It was probably 7:30 a.m. when a nurse came to my bedside with my medications and informed me of the day's schedule. I was going to remain in bed until later in the morning after a physician gave me a physical exam and wrote some orders. In the meantime, an attendant helped to get me washed up and brought me some breakfast. With regard to breakfast, he informed me that it was probably the last time I would get bedside service because ordinarily everyone ate in the cafeteria. I had no problem with that because I had been eating at the table at home for a month or so. In the meantime, several residents in the dorm stopped by my bed and introduced themselves. I marveled at the way they had been rolling about in bed putting their pants and shoes on. Some even got into their wheelchair by themselves. "I can do that."

The physical exam took longer than usual because of the detailed strength and sensory testing done by the physician He explained that he was a resident, and that Dr. Kessler would be in charge of my care. I was going to be under the care of a guy who started the facility. When he finished, he said that his findings were interesting in that there was a wide range between my sensory and motor functioning. He then informed me that later in the day, I would be evaluated by physical and occupational therapists, and that on Monday, Dr. Kessler would see me during "grand rounds." He and the therapists would then put together my rehab plan.

Sometime later an attendant came and dressed me, and then lifted me into my wheelchair. He informed me that I would soon be dressing myself after "Tiger Lil" got hold of me. I was left on my own, and took the opportunity to do some exploring. Immediately, it became apparent that I was not in a "city." The facility was on a hillside overlooking a golf course and the back and sides were bordered by an old undeveloped wooded area. I felt very much at home. I met many of the residents and realized that I was probably the youngest there. Later I learned that admission was limited to people 16 and older. I also learned that males were given priority, and consequently, there were only rooms for up to four women. They were smaller rooms apart from the male dorms. Most of the males had spinal cord injuries, and most of that group were coal miners injured when rocks fell from the shaft top onto their back. There were others with paralysis from neurological diseases, and a number of amputees, often with multiple limbs missing. With few exceptions, it was a "working class" population of men who worked in hazardous jobs.

I went to the cafeteria for lunch as instructed, and the room quickly filled. One of the attendants brought my food and informed me of the rules and procedures. As it turned out, the cafeteria was one of my favorite places. The food was superb, largely owing to the fact that the kitchen was overseen by a chef who ran an upscale restaurant in nearby West Orange. I got introduced to such things as grilled lamb chops and brussel sprouts which we never had on the farm, and fresh seafood regularly. Crab cakes with a hollandaise sauce, sea bass, fresh clam chowder... Mom sure did not have to worry about me losing any weight. For lunch, we often had the NY deli type fare. I had my first Reuben there. Fresh rye bread piled high with steaming corned beef, barrel sauerkraut, a thick slice of Swiss cheese, and the chef's homemade dressing, then toasted to perfection. And we could have all we wanted! In a way, it was both a bit of culture shock for me and the coal miners, but we did not complain.

There was one especially poignant moment that I remember from the cafeteria. Two coal miner buddies who were sitting near me were engaged in a conversation, discussing the food.

The first said, "I don't write my Elly about the way they feed us here. I just tell her the food is okay. Back home, most of the time we kin only afford a small piece of meat for flavoring. She'd cry if she knew how people eat aroun here."

His buddy replied, "Ain't that the truth. When I see the way they are feedin us, I just can't imagine what rich folks around here eat."

Maybe we were not so poor on the farm.

In the afternoon I got channeled to the physical and occupational therapy departments for my evaluations. They did a lot of things to test the muscles in my arms and hands, as well as the areas where I had sensation. The most memorable part was when the PT said that my monstrosity of a wheelchair had to go. They measured me so they could order a custom made chair for me, but immediately located a spare from their storage room and sat me in it. It did not quite fit my tall back and long legs, but as soon as I gave a hard push on the wheels, I understood why everyone raised their eyebrows when they first saw the one I arrived in. I almost toppled over backward when the chair lurched ahead, something I never expected. It actually coasted a couple of feet before it came to a stop. My old chair, which was a great improvement over the wooden hospital chair, would have moved a couple of inches. It was about 6 weeks before my custom fit chair arrived, but by then, I had become a wheeling maniac. These vastly improved wheelchairs were made by the Everest & Jennings company, which monopolized the market until the 1970s.

Getting the Treatment

On my first Monday at Kessler, I was introduced to "grand rounds," which began promptly after breakfast. Every rehabilitant was lined up in the lobby area. A nurse had a cart loaded with our medical charts. All the other therapists and a few staff I had not met were gathered there. Then the resident physician arrived with another physician, who was welcomed as "Dr. Kessler.”

I was positioned near the end of the line, along with a couple other newly admitted residents. Dr. Kessler proceeded down the line, reviewing the status of each person, and exchanging comments with therapists and others, sometimes issuing orders. On one hand, it was very business-like and methodical, but Dr. Kessler always engaged in a personal discussion with each rehabilitant. Sometimes he reassured them that they were making progress, sometimes he challenged them, to others he gave explanations and encouragement, and sometimes a pat on the shoulder. Despite the very public gathering, everyone, including myself, seemed at ease. As I realized later, it was a learning experience for all. We knew what problems to anticipate from the discussions with others having similar conditions, and in general, what to look forward to.

Eventually Dr. Kessler got to me and perused the chart the nurse had handed him. He then looked at me.

"Robert," he began.

The nurse interrupted, "He prefers Bob, doctor."

"Okay, then Bob it will be," he responded. "Welcome to our program. I learned a lot about you from the people who worked to get you here. I hope you are as eager and motivated...and are the tough farm boy they said you were. Are you ready to work?"

"Yes sir." What else could I say? That I had no idea of what I was getting into when I made the commitment?

"You have had a few days to look around. What is it that you would like to accomplish while you are here?"

I was totally unprepared for that. Awkwardly, I put together a response. I do not recall exactly what I said, but it was something to the effect that I wanted to be able to take care of myself and to walk with leg braces, as several others there were doing. "You wouldn't be satisfied just getting around in a wheelchair?" he asked. I said that I knew I could walk again and that was my intent. "Alright," he said, and instructed the physical therapist to have me fitted with long leg braces as soon as possible. He asked if I had any questions, and having none, he advised me to be prepared to work. He gave a couple brief instructions to the therapists and nurse, and moved on. I was overjoyed.

At the conclusion of rounds, we were all sent off to various activities. I was scheduled for physical therapy during the morning, and occupational therapy after lunch. Then at 3 p.m., I was scheduled for activities of daily living (ADL) training were I would learn to dress and get in and out of my wheelchair, and other self-care activities.

I was somewhat familiar with physical therapy because when I was at Hamot, a PT came to my room a couple times a week. She flexed my limbs so they did not stiffen, and helped me exercise the muscles in my arms that I could still control. However, at Kessler, therapy was much more vigorous. Each morning after breakfast, all who were able gathered in the large, relatively new PT gym. During the first hour we all engaged in calisthenics to the extent possible, with some of the therapists urging us on and giving individual assistance to those needing help. What made the group really work was that the leader for each day was a rehabilitant chosen by the therapists on the basis of the preceding day's performance. If you were the leader, you got to carry on like a drill sergeant, yelling out orders, repetition counts, and in general, making everyone sweat. At the end, the supervising therapists met briefly and announced the leader for the next day. After a short break, smaller groups were formed on the basis of needs. These small groups exercised together, and the therapists turned these sessions into competitions. They were masterful in finding ways to get the most out of us. At the same time, others were kept out of the groups for individual attention by therapists. There was no time wasted waiting during these three hours of conditioning.

After lunch, most of us had the opportunity to rest for 15 minutes or so. In the afternoon, we had another three hours of therapy, split between PT and OT based on need. At first, I spent an hour in PT lifting weights, getting stretched, etc. In OT, the therapists focused on my hands and fingers. My fingers had started to curl from contractures and much time was devoted to stretching them. Also, some motion was detected in a few fingers and my thumbs. I was engaged in games like checkers, and crafts, such as leather lacing, to develop the muscles. I even did some oil and water color painting. It was interesting and fun at times, but mostly boring.

Around 3 p.m., I went to Tiger Lil's place. She was an OT but had the disposition of a Marine drill sergeant. Although not large, she was all muscle. She was a tiger in her relentless pursuit of performance. You only complained once and quickly realized she was not going to cut you any slack. On our first meeting she asked me to take off my t-shirt. Not having done that since my injury, I looked puzzled. After about 30 seconds, she put her hands on her hips and said, "you have not been doing that? and why not? You wheeled in here, your arms work." I started to tell her that I had never tried, but quickly dropped the idea and began grasping at the bottom of the t-shirt. "Well, now you are getting the idea. As soon you are able to dress and undress yourself and get in and out of bed, you will not have to put up with me." She knew how to motivate a person.

Actually, I was surprised at how well things went...at least at first. With a few tips from Lil and watching others in the dorm, I was able to dress and undress myself. However, it took a great deal of time and energy, often 45 minutes to an hour. She said that as I gained strength and flexibility, and integrated some of my own shortcuts, it would go faster. From that point, I was on my own as far as dressing was concerned. That was about the 3-week point. What did not go so well was transferring from the bed to my wheelchair and vice-versa. Although I could move around easily in a sitting position on a mat in PT, I just did not seem to have enough strength to do it. I struggled for weeks, much to the frustration of Lil and me. We tried using a trapeze apparatus on the bed, and a "sliding board" which was used to bridge the gap between my chair and the bed. Nothing helped.

My transfer breakthrough came rather unexpectedly. It happened one evening between dinner time and bed time when a number of us were watching television in the dorm. Some were lying in bed, one of whom was a jockey. There were two jockeys there at the time, and both were envied by most of us. Because of their 75-80 pound weight and athletic ability, they were able to move themselves around and do things so much easier than the rest of us. Also, they both seemed to have a lot of money and flaunted it in front of us mostly poor people. One, however, was really an arrogant bastard, to put him in the best light. He enjoyed putting the rest of us down at every chance. This evening, he made a remark about the "poor farm kid who could not even get himself into bed." It took about 5 strokes of my wheels to travel the 30-40 feet to his bed at full speed. I aimed my wheelchair toward the middle of his bed and when I was about a yard away, I slammed on the brakes and literally flung my body on top of him laying there and started beating on him. A few loud cheers from some of the others quickly brought the attendants running in. They grabbed me and threw me in my bed. That brought jeers from the others. I got off with a warning, but it was a while before what I did sunk in. I had done a remarkable transfer to his bed without any assistance. It appeared that all I needed was to get my adrenalin flowing.

It was a different scene at Tiger Lil's the next day. I wheeled along side the bed, pulled out the removable armrest from my wheelchair and plopped my butt on the bed with one quick pushup. She was momentarily startled and then seemed to reach for me to prevent me from falling or something. However, I was already reaching for a leg to lift into the bed. When I shared my story, she actually cracked a smile. After a couple days refining my transfers from the bed back into the chair, she placed me on the list to be transferred to the independent dorm.

Looking back, the therapies were the most rigorous I have seen over the years. We were pushed to the maximum at Kessler and no one complained. The coal miners and other heavy laborers were used to hard, dangerous work and took the therapy in stride. Everyone understood the conditions they would be facing when they returned to their inaccessible homes and communities. This was long before the ADA mandated such things as curb cuts. There was a danger element to some of the therapy we engaged in. They taught us how to fall out of our wheelchairs by dumping us out onto mats after a few instructions. Falling forward out of our wheelchairs became the way we got down on the floor mats for other exercises after we had a few controlled dumps. Those who were learning to walk with crutches and braces would get a crutch kicked out from under them to learn to fall and get back up. Many of these activities are now discouraged because of liability issues. However, they are necessary to develop skills for functioning in the real world.

Facing the Facts

About three weeks after my braces had been ordered, they arrived. During my afternoon PT session, the brace maker brought them to the therapy table on which I had been placed and readied by my therapist. They put the braces on and found that they were rubbing my legs in a couple of places. The brace maker marked them, made some notes, and took them back for adjustments. I was disappointed, but was assured that they would be back in a couple days. Sure enough, two days later we were all gathered in the PT gym for another fitting. This time they were perfect. "Ready to test them?" the PT asked. It seemed like an eternity while they helped me into my wheelchair and got me positioned at the entrance to the parallel bars. We straightened my legs out and locked the braces. The weight of my legs and braces pulled my feet toward the floor and lifted my rear up from the seat cushion. I was almost halfway to standing again. The PT instructed me to put my arms up on the parallel bars and to lift myself into a standing position. There was an awkward moment as I realized that I could not grip the bars with my non-functional hands. I put my forearms on the bars and began pulling my self up from the semi-sitting position. It was no easy task, and after I struggled for a few moments, the PT gave me a boost. I was standing, looking eye to eye with the PT who was standing in front of me. Wow!

I will not bore you with the details, but this was a short-lived joy. What I quickly realized was that walking with braces is a tremendously demanding activity. When one is paralyzed, it requires lifting nearly the whole body to be able to slide a foot forward a few inches. I quickly realized that this would never be practical for me. After about two weeks of struggling, I was ready to move on to wheelchair living. A wasted effort? No, as I later learned, this was part of Dr. Kessler's treatment strategy. He learned the futility of trying to convince rehabilitants they would not be able to walk with braces if they were intent on doing so. By spending a few hundred dollars to enable these people to find out for themselves, he sped up the rehab process by weeks or months. Until they tried, they would have little enthusiasm for activities directed at enabling them to manage life from a wheelchair. I admire Dr. Kessler's insight. Words can easily be pushed aside, but personal experience is hard to deny.

Standing with my braces at home.

The braces were not a total waste. I did continue to stand and exercise in the parallel bars. I am happy to report that Dr. Kessler never brought up my short-lived attempt to ambulate with braces and crutches. When I returned home, Dad built me a set of parallel bars on the porch, which I used. As I moved on into activities consuming more and more of my time, they eventually fell by the wayside.

My Partner in Crime

A few weeks after arriving at Kessler, another memorable event occurred. A 16 year old spinal cord injured kid was admitted for rehabilitation. Bob Whitney broke his neck during the summer when he hit a submerged object diving off an ocean-side dock. He and his family lived in Livingston, NJ, which was just a few miles from Kessler. We immediately became friends, and I became a tutor and competitor. Initially I was able to share my experiences with him, and later we competed in such things as dressing and wheelchair racing. It was instrumental in getting my dressing time down from about 45 minutes to about 10-15. He was only there a couple of weeks when he and his family invited me to dinner one weekend. Bob was going to be spending most weekends at home since they lived relatively close. They thought I might like to come with him occasionally. First they wanted me to check out the accommodations for staying over night. I did that on the dinner visit.

I have to digress a moment to tell you about the Whitneys. They were originally from Boston and had typical Bostonian accents, which really fascinated me. It was so different from the Slovak accents that I grew up hearing around home. Bob's dad, Bob, Sr. was an engineer and worked for the Pratt and Whitney aircraft company [no relative] at a facility where engines were designed. Given my interest in airplanes, that was so neat. He was almost a hero to me. Mrs. Whitney was the perfect hostess and an outstanding cook. She made real Boston brown bread and baked beans from scratch, but her first love was cooking over the open fireplace. We had steaks and roasts, and even a clam bake done on the wood fire. It was awesome.

Back on subject. They had moved a second bed into Bob's bedroom for me and everything worked out great. After dinner, they "officially" adopted me with a toast, and so I became Bob #3 or son #2. I continued to spend 2-3 weekends a month with the Whitneys for the rest of my stay at Kessler.

Bob was a real buddy. We were hardly ever apart. As an example of how close we were, Bob shared his girlfriends with me. He was a good looking blonde kid and he had a flock of girls regularly coming to visit. They certainly were not like my high school classmates. I also learned that big city girls were not nearly as reserved as Kane girls when it came to “making out.” We would spend evenings in the almost dark PT gym playing records on Bob’s small 45 rpm record player, necking, and having great fun. We could always count on a shoulder massage from them, which was greatly appreciated. The gym was not used in the evenings but was left unlocked. We sometimes turned the lights on to play catch or something but usually we settled for the bit of light that came in through small door panes. It was more sociable that way. Everyone knew what was going on, but they were probably glad we were not getting into worse trouble.

We did get into trouble. One evening during the winter the charge nurse gave us a hard time about something. We came up with a plan to get even. About 8 p.m. we slipped outside in our t-shirts and made our way to the parking lot through about 3 inches of snow while it was still snowing. We managed to get to her car and let the air out of the tires with an instrument we lifted from the dressing cart. We got back inside just in time to be sent to our dorm to get in bed. When we got up in the morning, the story of the nurse's ordeal had spread. She went to her car about 11:30 p.m and found her tires flattened. But it was not just her ordeal. A night shift attendant got the job of removing the tires and taking them to a service station. It took them two trips because they could only raise one side of the car at one time. And then there was the mystery of how the tires got flat because the service station could find no leaks. If they had found out what happened, we would have been dead meat. Fortunately, no one ever suspected us. Given the conditions that night, they would not have believed us if we had told them.

We both got in plenty of trouble on our own. Bob was in OT one afternoon and got into an argument with his therapist. She had a uniform that buttoned down the front, and somehow Bob gave it a jerk and the buttons popped off from the collar to her waist. Of course, her bra was exposed. She shrieked and was totally embarrassed. The next day, Bob was summoned to the library where Dr. Kessler, the OT and a couple of other staff were seated around a large table. He was scolded, put on probation, and threatened with expulsion. After about two weeks went by and Bob's parents had not been told of the incident, we concluded it was all a bluff and went back to being ourselves again.

One of my most memorable individual trouble making incidents occurred when one of the male attendants was harassing me for being in his way when I was getting a drink at the water cooler. I tossed my cup of water on him for giving me a hard time. He retaliated by pushing me out onto a patio which was off the room with the water cooler. He proceeded to lock the door so I was stuck outside. After about 15 minutes, it started to sprinkle and it was looking like a hard rain was not far behind. Obviously, I wanted to get inside but the door was locked and there was about an 18 inch drop to the ground from the elevated patio. Being a relatively inexperienced wheeler, I reasoned that if I got a fast enough run, my chair would sort of fly off the edge of the patio like a skier from a ski jump. I backed as far away from the edge as I could get, and then gave it everything I had. Of course, when I got to the edge of the patio, my front wheels dropped down. I somersaulted out and started rolling down a steep bank a few feet from the patio. My wheelchair somehow uprighted itself and went rolling down past me. One of the staff was driving up the road to the Institute not far from where I was and saw me. He stopped his car, jumped out and came running to where I finally stopped. He briefly looked at me and went running up to the patio where he thought the nearest entrance was. When he found that the door was locked I could hear him banging and screaming for someone to open it. It did not take long for him to get attention and in a couple minutes a nurse and the resident physician were running toward me. From the distant end of the building, a couple of attendants were running pushing a gurney. The doctor and nurse gave me a quick going over, and concluding nothing was broke, I was loaded on the gurney. By then, the rain was coming down harder and hitting my face as I was pushed back to the rear entrance of my dorm. They put me in bed and the nurse came to find out what happened. It was obvious that she was trying to laugh but somehow, managed to restrain herself. She told me that I was grounded indefinitely and to not expect my wheelchair. I was not about to take that because it was the attendant who provoked the incident. What's a guy to do? Well, I was angry so I just slithered out of bed onto the floor and started dragging myself up to the end of the dorm where I figured my wheelchair was parked. As you probably guessed, the nurse came in bringing me my medications and caught me. Well, the attendants were summoned back and carried me back to the bed, obviously getting angry. They raised the hospital type bed to its highest position. "You go down there and you will be going to the hospital," one said pointing to the floor. He was right, so I gave up. I spent the evening/night in bed and went without supper. Geeze, they treated me just like a kid!

The other incident of note occurred on a Saturday evening when some of us were playing poker...for toothpicks, of course. I was having a very losing evening. The cards just did not come and I was frustrated. Ordinarily, I could handle the losing. I had plenty of practice doing that, but I was really aggravated because this big paraplegic coal miner was sitting behind me kibitzing. As the evening went on, every time he made a snide comment, he started poking me in the back of my shoulder with his finger. Eventually, my shoulder started getting sore and I told him to stop. That just encouraged him to do it more. I told him a second time without any result. Finally, I gave him a "last warning." Not only did he continue to poke me, but he pinched me. That was the last straw. I pulled the removable armrest out of my wheelchair, raised it as high as I could, turned around and brought it down hard, all in one swift motion. If I had aimed, I could not have done better. The end of the metal tubing on the front of the armrest came down in the middle of his forehead. Everyone watched as he toppled forward and slowly slipped to the floor with blood already pouring from his head. He lay sprawled out behind my wheelchair and for a few seconds, did not move. I admit, I was scared, thinking I might have killed him. Someone had summoned the charge nurse, and by the time she arrived, he had started to move. He rubbed his head and smeared blood all over his face. The nurse got a quick account of what happened and by then a couple attendants arrived. She sent one for a gurney and she and the other attendant dragged "Red," as he was called because of his balding red hair, from behind my chair so she could examine him. As soon as the gurney arrived, they lifted him on and he started cursing me. Much to my surprise, the nurse said, "Do you want him to do it again?" as they started pushing the gurney to the dorm. Nothing was ever said to me about that incident. I think that reflects the way everybody felt about Red. He lived the rest of his life with a crescent shaped scar in the middle of his forehead. We went back to playing poker, and I was able to lose in peace.

There is one unique policy at Kessler that I have to mention. It is the only facility that I have ever been treated in that allowed residents to have alcoholic beverages on the premises. Looking back, I suppose it was a better alternative than having the coal miners, longshoremen, etc., take a taxi to a bar to get drunk. I have to say, despite the fact that nearly everyone had a case of beer under his bed or his bedside stand stocked with wine or hard liquor, it did not create problems. Except in one instance while I was there, no one ever got drunk.

This incident occurred between Christmas and New Year's Day. Juan, a large, mostly Spanish speaking longshoreman, only drank hard liquor. He had many friends who kept his bedside stand stocked with a variety of liquors. However, the bottles were getting low. Juan decided that after the holidays, he would have his friends refill the stand. He planned a party for the half dozen of us who remained there over the holidays. We would drink all the leftovers. He could then throw the bottles away and make room for the new stuff. We talked the kitchen staff into making us some party food, which they gladly did. About 7p.m. we started to party. We were eating and drinking and making merry, including the couple of attendants who were supposedly working. Juan noticed that Ben, a trotting horse trainer, who was a quadriplegic and in his 70s, was not drinking. Ben broke his neck falling off the back of a sulky when a horse bolted. Juan asked him what has wrong and he said he only drank corn whiskey and there was none. Juan left us for a few minutes and when he came back, he said nothing. About a half-hour later, one of the attendants came in carrying a pint of corn whiskey. Juan had given him money and sent him to a bar to get it for Ben. Ben joined the party at last and drank right from the bottle. He had to make up for lost time I guess, and really started draining his bottle. Around midnight, the staff insisted we end the partying, got us all into bed, and turned the lights out. We continued to sing and carry on, but one by one the voices faded out. It had been quiet for about a half hour when suddenly there was a terrible loud crash in the corner of the nearly dark dorm. We began turning our bed lamps on and heard moaning and banging coming from the corner where Ben's bed was. Within a half minute or less, the attendants and nurse came running and switched on the ceiling lights. They had heard the crash way out at the nurses' station. We were all pointing to the corner and calling out to Ben because his bed was empty, including the covers. The staff found Ben on the floor struggling to get his head out of the trash can and from under a tangle of covers. He got sick and could not find his light switch. He leaned over the side of the bed to vomit in the trashcan which was always there. However, he slipped and fell head first into the can, dragging the covers with him. Fortunately, he was not injured except for a terrible black eye! A night we all remember.

There was not a recreation program at Kessler. There were plenty of games, cards and a shuffle board at our disposal. There were also televisions in the dorms and lobby area. Around Christmas, there were a few carol singing group that came to entertain us, but we were left to find things to keep busy on our own. Given the rigorous therapy program we had, there was little desire for physically demanding activities. There was a group of squirrel hunters. Some of the old trees that surrounded the facility were oak, and the acorns kept plenty of squirrels around. These guys made slingshots in occupational therapy and gathered road chips for ammo. They would wheel to the edge of the woods, sit quietly, and when squirrels came around they would get bombarded with chips. To the best of my recollection no one ever killed a squirrel, but there were plenty of stories about those that almost became squirrel stew.

A Real Angel of Mercy

This account would not be complete if I did not pay tribute to a nurse who literally saved my life. The day after Thanksgiving, I was transported to a hospital in nearby Newark for relatively minor surgery that would enable my paralyzed bladder to drain better. It was the Crippled Children's Hospital which was for adults too. Apparently at one time it had an excellent orthopedic service and Dr. Kessler was on the staff. When he started the rehab facility, he needed a place for people to go for surgeries and other medical treatment and it made for a convenient arrangement. However, the largely charity supported hospital had deteriorated beyond belief by the time I was admitted. To give you some idea of the conditions, the beds in the large 20+ bed ward I was placed in were squeezed in so close to one another that the orderlies had to make one bed and move it against the previously made one so there was room enough to work on the next. Only one shift had an actual R.N. The staff were afraid to go to the pharmacy in the basement because of rats. And last, bookies were free to come and go to work bets for patients and staff. I do not understand why the facility was permitted to operate.

My surgery seemed to go with out problems until 3 days later, the day before I was to return to Kessler. I started to spike a fever in the morning. When my temp was first checked, it was about 102. Because I was already on an antibiotic, I was given some aspirin. That did not seem to help. I kept getting more and more uncomfortable, and when the one nurse who was on duty took my temp at around 2 p.m., it was over 104. In those days there were no hypothermic blankets or even intensive care units. Her only recourse was to start bathing me with a mixture of ice water and alcohol. Eventually, my temp was climbing above 105 and I was informed that Mom and Dad had been called and told that I was critical. I then realized that it was now late in the evening and that nurse was still there bathing me, well past the 3:30 p.m. quitting time. Sometime during the night, my temperature started to drop slowly. This same nurse continued to bath me with the icy mixture until the next afternoon, when my temperature had dropped below 103. She tended to me at least 24 hours, only taking bathroom breaks. She did not have to do that. I still ask myself why someone would do that for a complete stranger. Why did she care so deeply? The sad part of this is that I never got to thank her and I do not even know her name. The nurse had a long Polish name, and everybody called her "Ski." I often think of her. She was an angel.

The following evening, although I still had an elevated temperature, I was whisked back to Kessler. Apparently, the doctors and staff understood what the hospital conditions were like, and felt that I would be better cared for there. Some good did come from my experience. A few days after I returned to Kessler, a nurse told me that I was the last person they were sending there. Dr. Kessler had worked out an affiliation with another nearby hospital.

I had learned to write in occupational therapy and was able to begin keeping Mom and Dad informed of my progress. Until then, their only contact was through an occasional call to the nurses' station to check on me. In late February or early March, they borrowed Aunt Verna's new Chevy and drove out to see me one weekend. They arrived and spent Saturday afternoon with me, and then began the trip back. I can only imagine the discussion in the car because by then, I was quite different from when I had left for Kessler.

The Final Stretch

About a month before my discharge, I got summoned to one of the offices where a professional looking man was waiting for me. I do not recall his name, but he informed me that he was a vocational counselor. He went on to say that the one goal left for me was to decide on a career, because that was, after all, the purpose of my being rehabilitated. As I have heard many times since then, my objective was "to get a job and become a taxpayer." In effect, the government viewed my rehabilitation as being an investment. I would pay back the cost and hopefully, much more. Being preoccupied with independence and strength building activities, it had not been something I had thought much about. It was a painful discussion in that it reminded me of my forfeited NROTC scholarship, engineering degree, and flying a fighter plane. After I told him about my pre-injury plans, he said that he would be getting my high school records and talk to the staff about my progress. He ended by saying that he would be meeting with me again after he got all the information that he needed. Afterward I was a bit puzzled, remembering that I was deemed not to be suitable for homebound instruction in Kane. I still could not imagine what kind of work I could do with all my limitations.

It was less than two weeks later that we got together again. This time he had several files spread on the desk, and my OT was there with him. He indicated that he had come up with an idea, at least something to consider. He began by saying that I was obviously a candidate for a sedentary or sitting job, and would probably do well in a technical school. In fact, there were a few training programs that were being started to accommodate people in wheelchairs. There were specific occupations that were being selected because they could be performed while sitting. He then went on to state that one of these was drafting, and asked if I was familiar with it. It was something we had done in a Shop course in high school. The question in his mind was whether I could handle the drawing instruments with my limited hand function. When he mentioned that matter, it certainly raised doubts in my mind. On the other hand, if I could do it, there would be the possibility of working with engineers, and it seemed related to my earlier interests. The counselor then asked the OT for her opinion. She was rather non-committal, saying that while my hand function had improved, I had not been doing things requiring fine dexterity. The closest activity I had done was an attempt at water color painting. Although I did all right with a brush, it was not especially precise work and not nearly as demanding as using small drafting tools like a compass. Her suggestion was that we try some things in OT where she could possibly make some adaptations to the tools. We left it at that.

For the next several OT sessions, she had me using some real drafting instruments. I was surprised at how quickly I was able use some, although I needed both hands to manipulate others. That was the way I did lettering. I was able to grasp the pencil tightly between my two hands and get the necessary control to form small letters. The big question was my speed. It was probably too slow for the workplace. My therapist gave the counselor a report at the next and last meeting. It was her opinion that my speed would likely improve with practice but that there was no way to determine how much. After a sort discussion, the counselor said he would send the information to the Pennsylvania Bureau of Vocational Rehabilitation, and they would make the decision about the drafting training. If they concluded it was not feasible, it seemed that bookkeeping might be an alternative. Me, a bookkeeper? No way.

It was sometime in April that departure day came. I had been a bit "down" for the preceding couple of weeks, recognizing that I would be leaving a lot of friends, even family, behind. I included family because the Whitneys were my adopted parents, and I was their adopted son. That is the way they introduced me to their friends and relatives when I was at their house. They had a going away party for me the last weekend I stayed with them. We all shed tears as I got out of their car for the last time when they brought me back to Kessler.

I continued to correspond, and Sandy and I visited them in the 1970s. We stayed with Bob Jr. and his wife Judy during the visit. It turned out to be somewhat eventful when their dog got into our bedroom and ate Sandy's string of pearls! Bob Jr. had done quite well. After completing college, he worked his way up to a bank manager position. Sadly, we lost contact sometime in the 1990s when Christmas cards stopped coming.

Flying Home

I flew back to Bradford alone. After all, I was quite independent and a seasoned traveler. It turned out to be the flying adventure of my life. There was no problem getting to the Newark airport or getting boarded. I got boarded on the DC-3 just as I did for the trip to Kessler. However, when we got to the end of the runway and the pilot started to rev the engines for takeoff, one of the passengers called out, "There's smoke coming from the engine." As the people on that side of the plane looked out their window, you could hear the gasps. Then the pilot's voice came over the intercom, "Some oil apparently got spilled during maintenance, and we have to return to the hanger." The plane did taxi back and quickly workers swarmed to the engine with fire extinguishers, opened some panels, and began spraying it. We just sat there for a few minutes as the flight attendant paced up and down the aisle assuring us that there really was no danger. After about fifteen minutes, the pilot came out of the cockpit. "Folks, we are going to unload and you will be boarded on another plane. Please take all your belongings with you. Stay grouped together so you can be boarded as quickly as possible." At that point, we could see another plane being towed toward us. Steps were wheeled into place by our plane and the flight attendant opened the door. Everyone left the plane and the pilot instructed the attendant to unload my wheelchair from the storage nook in the rear. "Young man, we are going to carry you off. It will take too long to get a boarding chair. We will be careful. We have done this before." That was reassuring...I guess. It was only a matter of a couple minutes until the flight attendant returned with another rather large airport employee. I think he was a baggage handler. They lifted me from the seat and backed down the aisle to where the door was and turned me around. It was kind of awkward getting me down the steep, narrow steps but we made it to my wheelchair.

They were readying the other plane, and it was obviously a different kind. The bottom of the tail came down and was actually the stairs. They pushed me in my chair to the steps and carried me onboard. When I was seated near the back, a new attendant informed me that there was room for my wheelchair in the baggage compartment of this plane. Then a new pilot came on board, introducing himself as he walked down the aisle to the cockpit. He then came on the intercom and informed us that we were on a new Martin Executive 202 airplane and this was its first commercial flight. I have to admit that it did look quite shiny and clean compared to the DC-3s. He also said that the flight would likely be on schedule again when they arrived in Erie, which was the stop after Bradford. The engines were started, and after a couple of minutes, we began taxiing down the runway again. The pilot began to get the plane into position to takeoff, and suddenly, someone cried out, "look! It's crashing." I looked out the window in the direction the woman was pointing just in time to catch a glimpse of a helicopter crashing off in the distance, and a large plume of black smoke that followed. About that time, our plane lurched forward and we were off.

An Allegheny Airlines Martin Executive 202

It was the middle of the afternoon when we got to Bradford. A few of the passengers left the plane, and finally the flight attendant brought in the boarding chair. He and the pilot got me transferred and strapped in, and I was quickly taken down the steps. They wheeled me in and Dad was waiting. "It's about time." An airport worker who came to help said my wheelchair would be coming with the luggage and that would take a few minutes. They unstrapped me and put me in a waiting area chair. Out the window, we could see the plane being readied for takeoff on the last leg of the flight to Erie. The baggage wagon was pulled into the end of the waiting area and the people headed toward it. The worker who had remained with us asked Dad to come with him to get the chair and my luggage. I watched as my suitcase was pulled off and then I heard Dad bellow, "Where the hell is the wheelchair?" Obviously, they did not take it off the plane and the plane was gone. I could hear Dad, "What's he supposed to do? He can't walk." Other airport employees apparently heard the commotion, and after a brief discussion, one went running. To conclude, they had to radio the airplane pilot to return, which he did in about a half hour, and I got my chair. Finally, we headed home. It was a flight I would like to forget, but it is etched in my brain.

Coming Home II

My return from Kessler. I look human again.

It was good to get home from Kessler, but I felt a bit out of place for a while. I no longer had the regimented life I had gotten used to with my days filled up with therapy and my evenings hanging out with the guys. I had been instructed to continue doing exercises and Dad built me some parallel bars in the enclosed front porch of the house. I used them just about every day for an hour or two. The weather was pleasant, and I spent a good bit of time outside. This was my real therapy. There was just a short stretch of sidewalk at the side and back of the house that went nowhere so I spent most of my time wheeling in the "rough." That was real exercise. I got to the point that I was wheeling on the paved road up to the neighbors, which was probably a quarter mile. Then I started wheeling out on the dirt field roads, which was a bit more of a challenge. Eventually I started going off to places that seemed impossible to reach. Sometimes it would take an hour to move about 10 feet. Luckily, I never had a serious accident, but I did give Dad quite a scare once. I was coming back home from the neighbors on the paved road. It was a slight downgrade and easy wheeling, so I was going at a pretty good clip. One of my front wheels hit a road chip just right and the chair stopped as suddenly as running into a brick wall would have done. When that happens, the person in the chair doesn't stop. I went sprawling out alongside the ditch at the edge of the road. It was no big deal. I had been taught how to nosedive gracefully at Kessler. The real problem was that I could not get back in my wheelchair which was sitting a few feet away on the side of the road. There was nothing I could do but wait for someone to come along. As it turned out, that "someone" was Dad, who was coming from the opposite direction on the tractor. When I saw the tractor, I waved and yelled. Dad saw me and I saw the tractor lurch when he pushed the throttle wide open and raced toward me. His first thought was that I had gotten hit by a car. Needless to say, he had some choice words to say about my meandering around. My response was that I was not about to sit on the lawn and wait for a bird to fly over and shit on me. I also learned to speak up for myself at Kessler, learning from the coalminers. For better or for worse, I had an attitude adjustment.

Next on the List

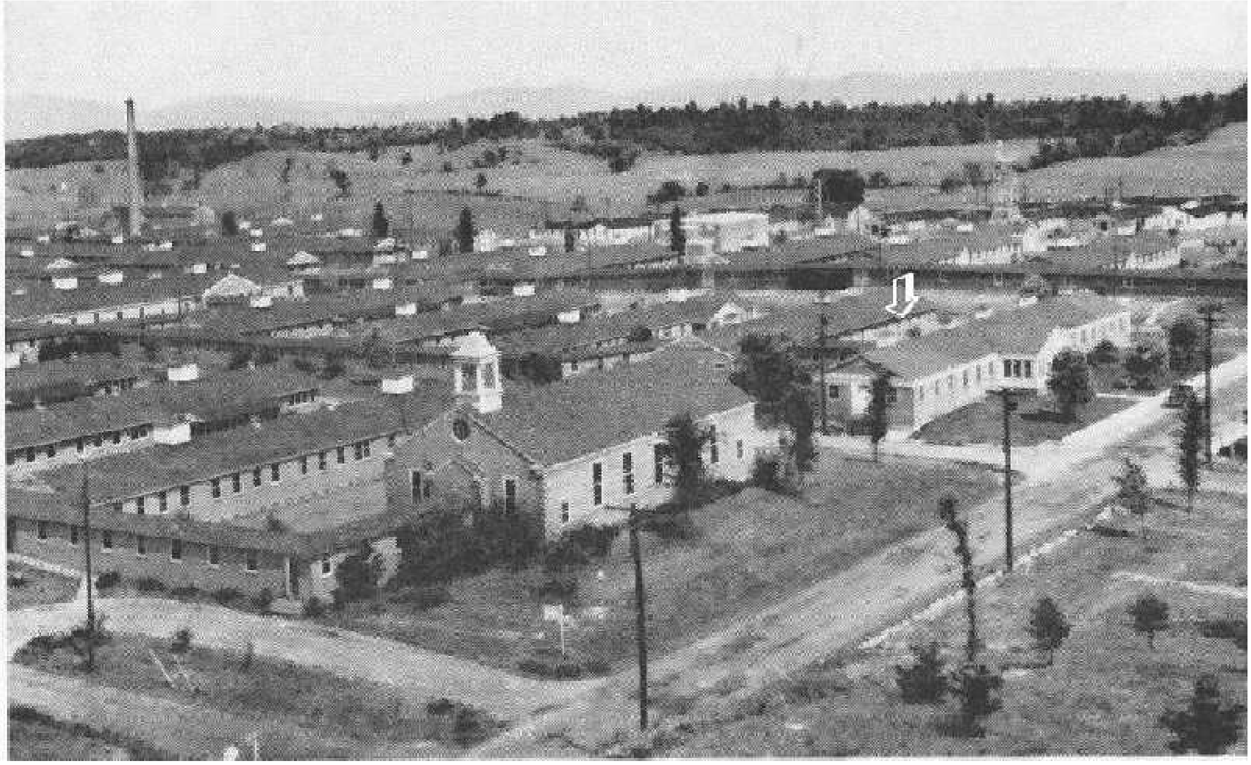
A week or two after returning home, we got a phone call from the voc rehab agency to schedule a visit from Mr. Shay, the counselor. A few days later, he arrived and we all sat around the kitchen table to discuss my training. The agency staff decided that because I did so well at Kessler, they were willing to sponsor me for training to become a draftsman. Although there was a training program that could accommodate students in wheelchairs that was located in New York City, they felt that a facility in Virginia would be more suitable. It was the Woodrow Wilson Rehabilitation Center located in Fishersville. He explained that it was located in the Shenandoah Valley and in a rural setting just outside the small town. That seemed like a good match for me. I certainly had no objection. It would be an 18-month program beginning in May. I would be going down a week or two before the summer classes started to get settled in. That was it. Dad and I signed some forms and the counselor said his office would be in touch working out the details. His last bit of advice was that if I could think of anything to prepare for the training, I should do it, as well as keeping physically fit. He warned me that the center was quite large and I would have to do plenty of wheeling.

The few week interlude went by fast. I kept up my meandering. Somehow, I slipped into the role of Mom's kitchen helper. Those were the days before dishwashers, and that became my job. She even let me tend some of the things cooking on the stove. I also practiced ambulating in the parallel bars that Dad built for me. Most importantly, I spent some time developing my two-handed writing skill because lettering was such a basic part of drafting.

We got calls from the counselor from time to time regarding arrangements. We also got a packet in the mail from Woodrow Wilson confirming my acceptance and instructions about what clothes to bring. The one disappointment was that I would be transported to the Virginia center by ambulance. The only close airport was quite small and flying was not possible. Because of the distance and travel time, some kind of legalities related to my disability status required the State to transport me in an ambulance rather than a car. It was also decided that Dad would accompany me. He worked out arrangements with Uncle Evertt Johnson to do the milking. The trip would take 7-8 hours one way, and the plan was to drop me off and return home the same day. There were two ambulance drivers who would take turns driving.

Woodrow Wilson or Parris Island?

The Woodrow Wilson facilities. The arrow points to my room.



The concept behind the Woodrow Wilson Rehabilitation Center (WWRC)

For most people with severe disabilities, vocational training was a necessity if they were going to work. However, most ordinary educational facilities were inaccessible for persons in wheelchairs and the idea of making them accessible was pure fantasy in the 1950s. A more plausible approach was to develop some accessible educational facilities for wheelchair students along with a supportive residential environment. The Woodrow Wilson Rehabilitation Center was developed as part of a complex that also included residential facilities, an attached accessible high school, and a technical school. The schools also served the able bodied population in the region, maximizing cost effectiveness. The facilities became viable because of a gift to the Commonwealth by the Federal government, i.e., a military hospital that was no longer needed when World War II ended.

The Center

The technical school and rehabilitation center were established in what had been a massive temporary hospital built to treat World War II casualties. It covered 223 acres and consisted of 58 interconnected single-story buildings. It was estimated that there were about 7 miles of hallways within the complex. It was given to the Commonwealth of Virginia in 1947 and conversion into the rehabilitation and educational complex began shortly thereafter. At the time I arrived, the complex included a rehabilitation center that accommodated approximately 300 rehabilitants from all over the U.S., a technical school serving the region, a large high school with a fleet of more than 60 buses, a military reserve section, and housing for much of the rehab administrative and professional staff. Obviously, from a size perspective, the facilities were impressive. The important thing to understand, however, is that the Woodrow Wilson General Hospital, as it was originally called, was built to be a temporary structure because it would only be needed until the war ended. Thus, in 1943 it had been built to have a life expectancy of about 10 years. When Virginia acquired the complex in 1947, they began using it with very little renovation. Consequently, when I arrived there in 1956, the facilities were, in my opinion, past their life expectancy and looked “terminal.” It was a low budget operation as reflected by the per diem rate of $15 covering all necessary rehabilitation services, and room and board. Even in 1956 dollars, that was inexpensive. In essence, the story about my stay there is mostly about my confrontation with the massive, dilapidated, low budget facility.

My Experience

I arrived in early May of 1956, which was about two weeks before the tech school classes started for the summer term. The ambulance arrived at the administration building and I was checked in. Dad had to sign a couple forms and was invited to go on a tour of the place. Because he had to return with the ambulance, he declined so he and the ambulance drivers could begin the long drive back. I was then taken to the infirmary area where I was to stay until examined and evaluated.

Once I left the administration building, I quickly realized that this was no Kessler. We went through a number of corridors which were painted either olive drab or gray, and with floors of well worn tile sagging in places. Periodically we passed somewhat rusted steam heat radiators along the wall. It was mid-afternoon and quite hot. There was no hint of air conditioning. By the time we got to the infirmary, needless to say, I was feeling a bit uneasy. I was directed to stop at a nurse’s desk where my escort placed my luggage. He then introduced me and excused himself. The nurse was quite pleasant and after giving me an overview of what was planned for me, escorted me to a room. On the way we passed an aide twirling a urinary catheter like a watch chain with his gloved hand. “Webster!” she scolded. Finally we reached the room. There were four well-worn army cots with olive colored blankets on them. I was given the choice of beds because I was the first of the new students to arrive for admission and evaluation. When I got in, the rather hard mattress got my attention. The fear of another pressure sore filled my brain.

I spent two days in the infirmary while I got a physical exam and an activities of daily living checkout. I also spent time in the large PT and OT areas where I was evaluated. On the third day, I was sent to the PT department after breakfast, along with a half dozen other “students,” as we were called. One was my infirmary roommate, “Cowboy,” who was a ranch hand from Wyoming. He had been thrown from a horse and became a paraplegic. He was at WWRC for physical rehabilitation, not for training as I was. When we arrived, we were greeted by a group of therapists decked out in spotless white uniforms. They had worked out our therapy programs and were to present them to the physician overseeing our care. When he arrived we were introduced one at a time and our programs were discussed. When my turn came, the PT told him that I had been rehabilitated at Kessler, was independent in ADLs, and he reported the findings from his muscle testing. The therapist concluded by telling him that I had braces and could ambulate in the parallel bars.

"But you said his motor functioning was limited to C-7," he protested.

"This is a first," the PT said. "Bob, would you show him?"

I wheeled over to the parallel bars and in a minute or two, I had my braces locked and went hopping to the end, turned around and came back. The doc came over and watched as I unlocked the braces and scooted back in my chair seat.

"You do that pretty good. I have never seen a quadriplegic do that," he said. "I really do not think you need any PT, do you?"

"I have done okay without any all summer," I replied.

"All right," he said. "I will not order any. But if you feel the need to work out, I am giving you permission to come in anytime the PT area is open and work on anything you like. I wish everyone was like you. It would make my job a lot easier."

Of course, everyone laughed. I have to admit, it felt good to have a doctor allow me to be in charge of myself for a change.

It had also been determined that the OTs should start working with me to figure out how I was going to use the various drafting tools I would need in school. We set up a schedule, and I was dismissed.

When I got back to the infirmary, the nurse intercepted me before I got to my room and told me I was going to the dorm as soon as they could get my things packed up. That only took a few minutes, and soon an attendant with my belongings piled on a gurney and I headed down the hallways. As it turned out, I was assigned the last room in dorm, C-17. This immediately struck a chord because in the early 1950s, there was a movie, a comedy about American soldiers in a German prison camp called "Stalag 17." [Sometime later, a TV comedy series called "Hogan's Heroes" was based on the film.] On the surface, the WWRC seemed like a prison. Everything seemed to be on the forbidden list, ranging from alcoholic beverages to expressions of affection. As you will find out, first impressions can be misleading.

My room was an olive painted double. There were singles, but quadriplegics were placed in double rooms along with an ambulatory roommate. It supposedly was a safety issue because quads were thought to be prone to falling out of their wheelchair. Also, there were no phones in the rooms. There was another difference in that singles had a nook with a toilet and sink in it. Double room inmates had to use a common public bathroom. The beds were army cots. The rest of the furnishings were wooden relics, scuffed and splintered to the extent that Goodwill would have trashed them.

As it turned out, my room was conveniently located. The bathroom was across the hall, and the dining hall, my classroom, the canteen, the rec room, and the chapel were all located within a city block distance. There was a theater/auditorium [rarely used] in a far corner of the complex, and the therapy departments were about two blocks distance. As I indicated before, these were all interconnected, but the connecting corridors were not all enclosed and many were not level. The terrain was not leveled when the buildings were constructed so there were hills and valleys, some of which tested one's wheelchair skills. At times, it was a bit dangerous going down some of the long sloping corridors because most had closed fire doors at the bottom. If you could not stop, you ended up like a bug on a windshield. During my stay, a guy hit a radiator going down a steep corridor and sheared one end off. The rumor was that his chair was totaled but he got off with skid marks on his butt when he flew out of the chair and slid for about 10 feet.

As I soon learned, people with a variety of disabilities were served by the center. Many were SCIs, but there were people with other neurological disorders such as MS and epilepsy, and even a few with mental illness. [I think they were limited to people with severe depression, including one who committed suicide while I was there.] There were also a significant number of amputees. Because most students were involved in both rehab and going to tech school, they had to be competent and otherwise capable of participating in one of the tech school programs. These included drafting, bookkeeping, accounting, watch repair, shoe repair, tailoring and basic sewing, janitorial services, small engine repair, basic building maintenance, and barbering.

Culture Shock

I grew up in a multi-ethnic rural area that had been mostly populated by turn of the century immigrants who sought work in a thriving glass manufacturing industry and wood product industries. The glass industry died in the 1930s with the depletion of cheap natural gas from local wells and the depression. There were some African-American families who were recruited from the south to tend the hot glass ovens. When I was a kid, most of the immigrants had already died but their descendants hung on, trying to eke out a living any way they could. There were a lot of ethnic jokes directed at the "dumb Swedes" and the cooking challenged English, but no discrimination. Some truth underpinned the jokes because many of the Swedes who settled in the area had been given a one way ticket to America by relatives back in Sweden in an effort to cleanse the family and country of "embarrassments." As for the English, you quickly learned to take only a polite token serving of the food they brought to covered dish suppers and other public gatherings.

The few African-American families were hardly noticed. There was an African-American girl in my class at school, and although her dark skin made her stand out, a "so what" attitude prevailed. My brother had an African-American guy in his class who went on to become a boxer of some repute, but fell short of making it to the big time. The town podiatrist was also an African-American. Before my injury, Dad scraped up a few dollars to invest in an ancient piano and some lessons for my two sisters. Their teacher was a kind African American woman, who was the boxer's mother. She could coax a lot of music out of that relic and could inspire anyone to give it a try. Because race was not an issue, when the Supreme Court rendered its decision in the milestone Brown vs. The Board of Education case in 1954 declaring segregation in public schools unconstitutional, it received only momentary attention. Although I was aware of the ensuing upheavals around the country, I was so consumed by my injury-related problems that I remained emotionally detached from what was happening in the rest of the world.

It should be no surprise, then, when I report that it took about two months before I realized that there was something drastically different about Woodrow Wilson. I had not seen a single African-American since I arrived. At Hamot and Kessler, many of my caretakers had been African-Americans, including my PT at Kessler. My OT confirmed that, yes, this was a part of the segregated south. She was originally from Florida and spoke frankly about the situation. There were a few African-Americans employed in the kitchen to do menial tasks and a few working with the grounds keepers, but that was it. They were not used in any place where they would have direct interaction with the Center students or staff. It appeared that Virginia had a governor cast from the same mold as the infamous George Wallace of Alabama and Orval Faubus of Arkansas.

African-Americans in the south had no access to rehab. What services they got were likely provided at poorly equipped hospitals for Black people. The segregation posed a real problem for many of the non-Dixie states because they had no other place to send their disabled workers and others for rehab services and/or vocational training. They were faced with the dilemma of using a segregationist facility or denying even their white population the services. In a sense, the situation pushed a number of states into developing facilities of their own. In fact, before I left WWRC in 1958, Pennsylvania was well on its way to opening a large rehabilitation and vocational training center in Johnstown that would serve the whole state.

My Roommates

It is interesting that when I started my stay in the dorm, there was only one other student, a paraplegic, who had a room at the opposite end. [He claimed to be a distant cousin of singer Johnny Cash.] I guess it was okay for my wellbeing to be in jeopardy for approximately two weeks until the others came. The need to have someone residing in the rooms with quads had been underlined.

While I was there I had three roommates. Roy was in his late teens and enrolled in the barber training program. Roy had epilepsy, with a history of grand mal seizures, supposedly under control for the past year. I say “supposedly” because about two weeks after classes started, I arrived at my room one afternoon and found him thrashing on the floor. It was not long after that he had a seizure while I was in the room. That time I had to push him aside so that I could get to the door to summon help. Roy only lasted about three months. He was terminated after suffering a seizure while cutting someone’s hair in the school’s barbershop. They concluded that the pressure of school was too much and responsible for the recurrence of seizures. However, he had been there long enough to acquire the nickname, “Pretty Boy Roy.” It stemmed from his practice of combing his hair every few minutes with a comb he carried in his shirt pocket. If you remember the character “Kookie,” played by Edd Byrnes in the old TV series 77 Sunset Strip, that was Roy. To this day, I am not sure who was supposed to be looking after whose safety.

My second roommate was Jimmy, who was also an epileptic. He was much better controlled, although sometimes it was difficult to wake him up because his medication seemed to act like an anesthetic. He was enrolled in the building maintenance course, which came in handy. Someone donated a truck load of cans of house paint to the Center. With the low budget, there were no extra staff who could apply the paint. Consequently, they let students have some if they wanted to paint their room. Painting was in Jimmy's curriculum so he got some paint and did very well for his first job. The olive walls became a light blue, and the ceiling and trim were white. However, instead of leaving his work exposed to be admired, he covered up a good bit of it with Playboy centerfolds.

Jimmy's course lasted a year and then I got a third roommate. Cecil had cerebral palsy, but the symptoms were limited to a staggering gait. He was in the small engine repair course and kept my wheelchair in good shape. All three were really nice guys.

My Dorm Neighbors

The occupants of the room next to mine and the one beyond arrived just a couple of days before classes started after Labor Day. Next to me was Matti, a naturalized citizen who was originally from Finland. He had been a merchant seaman and got injured when he slipped on a platform and his back hit against a railing on the ship. He was a low level complete paraplegic. We quickly became friends, and I soon learned that Matti drank vodka by the water glass. When he got drunk, he usually ended singing songs in the Finish language and would fall out of his wheelchair a couple times. Matti was learning to repair shoes and expected to start a shoe repair shop when he finished school and returned home to Hoboken, NJ. In the room next to Matti was Harvey. Harvey was a middle aged guy who happened to be from Trenton, NJ. He had the misfortune of not fully recovering from the Guillian Barre' syndrome. His legs were weak but he could stand for a minute or two. He used a wheelchair for mobility. He was in the accounting program. It turned out that Harvey and I were in OT at the same time, and we quickly became friends.

The Dining Hall

When I first faced the food in the infirmary, I hardly paid attention because I was somewhat overwhelmed by my surroundings and the fear they evoked. When I moved to the dorm, reality struck me. There was one large dining hall for the students with several rows of tables lined up end to end. One corner appeared to be an extension of the kitchen. It had a serving area where trays could be slid along a waist high shelf. It was only used for breakfast, which few students seemed interested in. I cannot imagine why they passed up the scrambled eggs (a.k.a. gov. surplus powdered eggs), dried beef gravy over toast (SOS or shit on a shingle), speckled gravy biscuits [If you looked hard, you could find a few tiny specks of sausage in the gravy. At least we hoped it was sausage.], or 7+ day old porridge. To give you some idea of how dismal things were, the SOS and speckled gravy biscuits were probably my favorite meals.

Lunch and dinner were served family style. That meant if you were 10 minutes late, you were left slim pickins. Platters and bowls of the prepared food were placed on the table and passed around for each to take a portion. However, there were no portion rules, and if you were too far away from where the food started, you might get crumbs. If it was something inexpensive, like the mashed (dehydrated) potatoes, the kitchen staff sometimes would bring more. If it was a meat dish that ran out, forget it. Canned green beans, simmered pinto beans and dry cornbread were regular fare. For lunch, hot dogs and baked beans (canned) and sandwiches were regulars. Sunday dinner was real special. They alternated between fried chicken and chicken fried steak. They were okay but you hoped that the breading would not fall off the chicken and reveal the unpicked feathers. There were many jokes about the chicken and the feathers. Much of the food was fried, and I cannot recollect ever seeing a salad, fresh vegetable, or a dessert. It was in an apple growing region so we did get fresh apples in the fall. They would set baskets of apples by the exit door so we could help ourselves on the way out of the dining hall. We could get an edible hamburger at the canteen, but most of us could only afford them once in a while. The candy machines, with their 5 and 10 cent candy bars, often were empty because of the high demand.

My Haute Cuisine

I mentioned the food situation in a letter to Mom and sometime later, I received a package in the mail. I opened it and to my surprise, Mom had sent me an electric skillet and a few cooking tools. This must have been 4 or 5 months after my arrival because Jimmy was my roommate. Jimmy thought it was hilarious. He said most mothers sent their kids cookies and other things to eat. I told him about the "teach a person to fish" parable, and that because I had spent a considerable time in the kitchen with my mother, I had learned how to cook. The problem was, I did not have anything to cook or a way to get it. There were supermarkets in nearby Staunton, but it was a few miles away and was a taxi trip. Both cost money that I did not have. However, the problem was quickly solved. A short time later, Matti came to the room and spotted the frying pan. "You cook, Bob?" he asked. I explained the situation and he had a big smile. "Saturday, we'll eat real food," he said. "You guys don't go to the dining hall for dinner."


Harvey, Jimmy, and me during our eat-in. Matti took the picture.

Saturday Matti called a cab and went to the supermarket. Later that afternoon he returned and brought his shopping bag over to the room where Jimmy and I were waiting. We watched as he pulled out three large, thick t-bone steaks, a loaf of bread, an onion, salt and pepper in disposable shakers, a pound of butter, and a bottle of sweet port wine. Well, what could we say? That was the kind of wine he liked and that was what he bought. "Okay Bob, you cook now," he said in his somewhat accented English. We had not thought about dishes and tableware, so there were none. Jimmy went to the bathroom, and fortunately there were still a few paper towels in the dispenser. It took only a few minutes to get the steaks and onions sizzling in the butter. Soon there was a loud knock on the door. "What's going on in there guys?" It was Harvey. The smell had already reached his room. Oops! We never thought about Harvey and only had 3 steaks. "Let him in," Matti said, "we can each give him a piece. But we will not open the door for anyone else." We let Harvey in. He had just returned from the dining hall when the smell got his attention, so he was perfectly content with a few strips we managed to cut off with my small paring knife. He made a steak sandwich. The rest of us used a paper towel for a plate and gnawed the meat from the bone. Heaven. After we relaxed a bit, Matti poured the wine into glasses and cups and we drank a toast to our best meal in months. Regrettably, Jimmy had to abstain from the wine because of his medication. From that time on, we had these "eat-ins" at least twice a month. Harvey added coffee to the menu and got a supply of paper plates. We borrowed some table knives and forks from the dining hall and we were all set. At least we were able to keep our protein intake up. Cholesterol was not yet a health concern.

It was not long until I had a second source of real food. For some unexplainable reason, almost from the beginning of my activities in the occupational therapy department, I developed an unusually close relationship with my therapist. She was the first professional that I felt totally at ease with. She impressed me with her knowledge of drafting which she had acquired working with other students. She came up with some very helpful ideas for me. She continued to push me to work on improving my hand function, and I discovered that I had a very useful tenodesis action, that is, by cocking up my wrist, my thumb would come together with my index finger. This resulted in a pinching or grasping action that enabled me to pick up light objects. To hone this skill, we started playing chess which required that I pick up and move the pieces on the board. One day I started relating the game to my life, and she instantly became the closest thing I ever had to a psychotherapist. I have to give her credit for keeping me together mentally and enabling me to endure the conditions at the center.

One day when I was doing my OT activities I told her about the eat-ins that we had started in my room, and we had some good laughs about the food situation. Shortly after, she asked me if I would like to go out for breakfast the coming Sunday morning. Obviously, I was not about to pass up an offer like that. She instructed me when and where to meet her. When Sunday came, I followed through. I went through the maze of corridors and came out by a road between two of the units where there were staff apartments. I expected her to drive up in a car, I would jump in, and we would be off to a restaurant without being seen. Fraternizing with students was a real no-no! Staff could get reprimanded or even fired for such unprofessional behavior. Suddenly she appeared on foot out of nowhere, whispered "hang on," and pushed my chair around a building and up a steep ramp where her roommate, another OT, was holding open the door. She had sneaked me into their apartment. We had a great breakfast, and some great laughs. I did not realize it but they had timed my coming and going with the Sunday chapel services so most people would either be in the chapel or asleep. From then on, a couple of Sundays a month I was indulged in pancakes, waffles, maple syrup, sausages, ham, and real eggs cooked to my request. I do not know why they gave me this treatment or if they did the same thing for others. I am just grateful that there are some really caring people in this world of ours.

Drafting

The drafting program was smaller than I expected, occupying one half of a building similar to the dorms. It consisted of a large classroom and a smaller room which contained the blueprint making equipment and a small library. Enrollment varied between 20 and 25. Only 2 other students had a disability. One was a paraplegic and the other, an amputee. Some of the other students were veterans attending the tech school under the G.I. Bill. Our instructor was Mr. (Henry) Keller. He had retired after working for a major manufacturing corporation in Syracuse, NY, but was not yet ready for the "pasture," as he put it. His experience was apparent as he guided us through an array of real projects, some of which were from area businesses. This gave meaning to our work, once we mastered the basics of lettering and drawing. Our lettering had to be as precise as that of typewriters. It took me three weeks of lettering line after line of the alphabet and numbers in various sizes about 6 hours a day to meet the standard. Because of my two handed writing technique and the need for some experimentation, that was a week more than most students required. To Mr. Keller, it was a near miracle. After he congratulated me, he told me that he really did not expect me to make that hurdle. From his standpoint, I had acquired the most difficult skill of a draftsman. He expected smooth sailing for me the rest of the way. Instruction was individualized, with no two students working on the same project. I worked on projects ranging from a gun silencer to a highway bridge to be built somewhere in Suffolk County, VA. My last project was to design and draw up the blueprints for a Cape Cod style house. Mr. Keller had the perfect teaching job. The students were mature, wanted to be there, and were eager to learn. He never had a problem student during the entire 18 months I was there.

There was a major problem for the drafting students. It was summer. Summers in the beautiful Shenandoah Valley are hot, and as I mentioned earlier, there was no air conditioning. The classroom had ceiling fans that ran at a slow speed and stirred the hot air up a bit, but that was it. Consequently, students would sweat and that was a work hazard. Blueprints are made much like photos are made from negatives. The plans are drawn on an onion skin like paper which serves as the negative. From time to time, a student would be leaning over a drawing and beads of sweat would form on his forehead and drop off. When they hit the drawing paper, it would immediately blister the paper and have to be discarded. When that happened to a drawing that had many, many hours of work put into it, it was a disaster. There would be a loud string of profanity intermingled with paper violently being crumpled followed by the student stomping out of the classroom. No explanation was needed. Everyone knew the feeling. Sometime the student would not return until the next day. As Mr. Keller said, during the summer his classroom was no place for a deeply religious person! Thankfully, I endured and was awarded my certificate in October, 1957.

Escaping the Summer Heat

When I arrived in August, 1956, it was hot. After I moved to the dorm, I found some relief by going without a shirt and making frequent trips to the bathroom where I splashed water on my upper body. When the summer of 1957 came, I learned that there was another way to get a respite from the heat on Saturdays. After lunch, groups of 3-4 guys would get together and take a cab to Staunton, splitting the fare. The cab drivers were not always happy with us. After struggling to get 3 heavy E & J wheelchairs in the trunk, they would get a minimal tip because most of us were pretty poor. Besides, there were additional expenses ahead. We would use some of our remaining money to get a couple of six-packs of Richbrau beer and go to an air conditioned movie theater. We would stay all day, drinking beer, munching on candy bars, and watching the same movie over and over. When the last movie was over at about 11 p.m., we had to hurry and beat it back to the center to make the midnight curfew. Either the theater management did not care or were very sympathetic because we never got thrown out. What a life.

I had one memorable incident. One night we left the theater to start back to the Center and headed for the phone booth to call a cab. The last block was downhill, enabling us to coast at a pretty good speed. I lagged behind the others, who were paraplegics, and when about half way down the block, I did not see a drop off between sidewalk slabs. When the front wheels went down, for some reason they jammed, sending me sprawling out on the sidewalk. The open can of beer that I had been carrying between my legs was under me and the beer started pouring out. My chair stayed upright and went coasting down the sidewalk another 20 feet until it careened into a building. It was not until they reached the phone booth that the guys missed me. On looking the situation over, they concluded there was nothing they could do. They called a cab, and when it arrived, they called the police to come get me and left! I knew that if the police got me, it would be over. The drinking age was 21 and I was only 19. If they took me to jail or back to WWRC and brought me to the attention of the administration, it likely would have resulted in my expulsion. Fortunately, as their cab was pulling away, I was saved by a good samaritan, who happened to be a rather large African-American guy. As soon as he saw me lying there, he came running over and offered to help. He got my wheelchair and was able to pick me up and set me in it. He then pushed me down to the phone booth and called a cab for me. The cab arrived, and just as I was about to get in it, the police drove up. One asked if I was the guy who had fallen on the street and if I was okay. When I said “yes,” they drove off. I dodged a bullet that night. What stands out in my mind is the way that African-American guy unhesitatingly came to my rescue and was so kind. It really drove home the injustice to which they were being subjected.

Gender Discrimination

There were quite a few women students at the WWRC. They were housed in dorm units that were a good distance from the men’s dorms. Also, the entrance to each unit was guarded by older women sitting at a desk. Someone was on guard 24/7. The men’s dorms had no such beasts. Also, the tech school curriculum was quite limited for women. They were limited to sewing, tailoring, bookkeeping or high school diploma completion. On the other hand, it was rumored that their dorms were much nicer than the men’s. However, no one knew that to be fact because guys were forbidden in those dorms. There was a zero tolerance policy. Entering meant instant expulsion from the center.

As it turned out, I got to see one of the dorms legally and may have been the first and only male student to do so. It came about because of my relationship with the OTs and their connivance. There was a young woman, a C-6 quadriplegic, who was receiving her therapy the same time that I was. She had been one of the water skiing babes in the Cypress Gardens water show in Florida. During some idle time, she and some of her cohorts were playing around in a children’s pool area. For excitement, she tried going down backward on the sliding board that ended in the pool. She did not think about the fact that the water was only about 18 inches deep. Shallow water has resulted in a lot of broken necks. I chatted with her from time to time, usually offering her ADL tips and sharing some of my wheelchair experiences. At some point, I noticed that she was not coming to OT. On inquiry, my OT told me that she had developed a pressure sore and was likely to be grounded for several weeks. She was, however, getting some therapy in bed. Innocently, I asked my OT to pass along my regards and wish for speedy healing.

A week or so later, my OT approached me with a rather somber expression. “Charlotte is terribly depressed,“ she said. “Would you consider going on a mercy mission?”

“What’s up?” I asked.

“Well, Charlotte has always admired your independence. You have probably done more for her than we have. Pat [her OT] and I were just talking and we think you could cheer her up.”

I was completely puzzled, but admittedly flattered. “What can I do? She is grounded in her room and we do not even have phones.”

“Would you be willing to visit her and just say hello?”

I interrupted before she could finish. “She is on a woman’s dorm. I cannot go there.” I thought my therapist lost her mind. “You want me to get expelled?” I protested.

“No, no, no,” my therapist said laughingly. We can get approval for you to go with one of us. We need a doctor’s order, and we think we can get it. He will understand how important this is.”

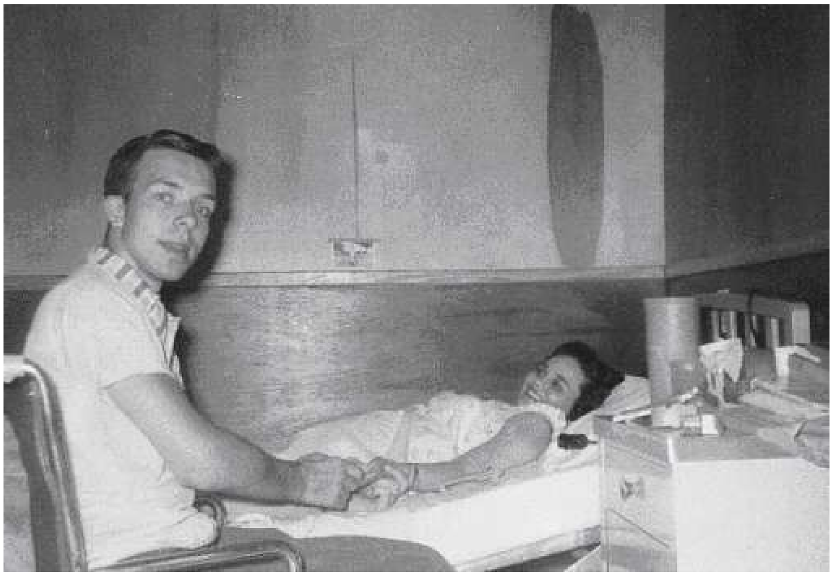
What do you do in a situation like this? They seemed genuinely concerned about Charlotte and I wanted to help. So I agreed to this mercy mission. My therapist said she would get the order and then work out arrangements with me and the dorm. It took a few days. In the meantime, I realized that I would have an opportunity to check out one of the women’s dorms.

After class I headed for the OT department instead of my dorm. Both my therapist and Pat were waiting for me and we headed right to the women’s dorms. When I started down a corridor linking them, I got a lot of stares from the women who I passed. When we approached the desk at Charlottes’ dorm, the woman at the desk peered down the dorm hallway and said we could proceed. As we started down the hall she called out. “A half hour. One of you check the hall before he comes out.”

Pat knocked on a door and called out, “Charlotte, O-T.”

“Come in,” Charlotte replied.

Pat opened the door and went in with me and my therapist following. There was poor, depressed Charlotte lying in bed giggling. I looked up at the therapists, who I suspect were trying to contain their laughter. As I quickly came to realize, it was more than my independence that Charlotte admired. You might say she had a crush on me, and the three of them had connived to set me up, all in the interest of fueling a romance. That was the last thing I was interested in. However, I remained a gentleman and visited civilly.

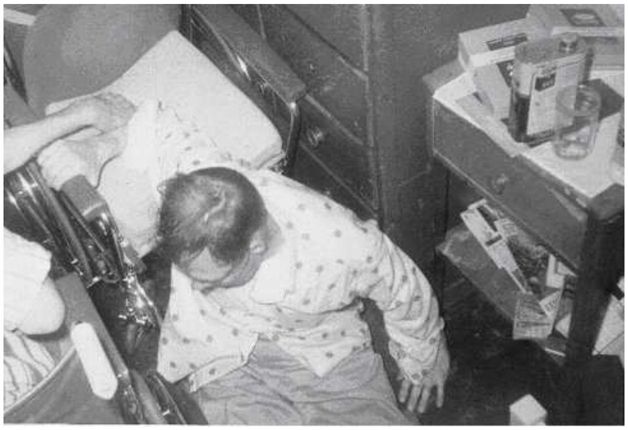


Gullible me and smiling, “depressed” Charlotte.

There was more to come. I did not realize how gullible I was. One of the therapists asked me to check out the progress she had made stretching her fingers, which she had been working on in OT. When I grasped her hand, one of the therapists called to me and snapped a photo when I looked up. To add insult to injury, they later had an enlargement of the photo printed and Charlotte put it on her bulletin board. As things worked out, I was later able to convey to my therapist that I was trying to avoid that kind of relationship. They backed off. As I pointed out, if we had developed a relationship, it would have ended in heartbreak anyhow when I left a few months later.

I did get to check out the room and learned more than I wanted to. I already mentioned Charlotte’s room had a bulletin board. The men did not have them. She had drapes and all we had were paper roll-up window blinds, she had wood paneling on her walls and we had olive colored paint on drywall, or boards that looked like outside siding, she had shiny new looking furniture and ours was Goodwill rejects, and it even appeared that her floors had been waxed. Ours saw a mop about once a month. To add insult to injury, Charlotte let it slip that for those who needed assistance with personal care, the female aides came to the dorm. I was told that southerners pampered their women and would never subject them to the conditions in the men’s dorms. Men could “tough it out.” Oh well. They did not do gender change surgeries back then so I had to continue toughing it out.

Here is Matti on the floor, as usual. Note the condition of the furniture and compare with Charlotte’s.



Wheelies

During my stay at Kessler, I never saw anyone do or attempt to do a wheelie. For non-wheelers, a wheelie is balancing the wheelchair on the back two wheels and wheeling around as if riding a unicycle. Perhaps it was because of the sensibilities of the mature population at Kessler that wheelies were not done. It was not long after my arrival at WWRC that I saw one of the guys from my dorm wheeling around on his back wheels outside the entrance. Texas [his real name] was a paraplegic from Texas. He was a wiry guy and quite a hell raiser. There were many weekend nights that guys on the dorm had to quiet him down when he returned drunk and singing country songs at the top of his lungs. I do not believe that anyone else could approach his speed in a wheelchair. I swear he burned rubber in the hallways. Tex enjoyed enticing others to attempt wheelies and watching them fall. Some did master the skill, and one day I was tempted to try when watching another guy who was learning. He seemed to be making good progress. Then I saw him give a hard push on his wheels. Over he went backwards and his head missed hitting a nearby bench by no more than an inch. He missed the bench but got his bell rung pretty good, as he later admitted. That event erased all thoughts of attempting to do wheelies from my mind forever. One broken neck is enough for me.

My UTI

I tossed and turned all night. When I awakened in the morning, I knew I was going to crash. I was hot but was intermittently chilling. Jimmy helped me get up and into my wheelchair and we headed for the infirmary. A nurse took my temp and it was up to 102 F. She told Jimmy he could leave and said that they were going to put me in bed. A doc would be by later and she would have him check me. Her diagnosis was a urinary tract infection. Of course, I suspected that to be the case. When I got to the room, I got a bit of a shock. Before I could be put into the bed, the aide got a towel to brush away the cobwebs that were stretched between the head of the bed and the wall. Memories of the Newark Crippled Children's Hospital danced in my head. A half hour later she checked my temp again and said it was rising. She left and within a few minutes returned to tell me she had talked to the doc and they were going to send me to the hospital. I was at the point of not really caring. I just wanted the misery to end.

It was a short ambulance ride to the Kings Daughters Hospital in Staunton. From the time I was strapped into the stretcher, I was limited to looking upward. When I was taken into the hospital, I did notice the bright ceiling lights and white paint. After a brief stop, the ambulance attendants took me to my room, joined by a nurse when they reached the door. They put me in the bed and I could see around. A mattress at least six inches thick, a colored bedspread, drapes, sun shining in the clean window, shiny furniture – pure luxury. I think the surroundings actually reduced my discomfort. It was not long until a physician came and they got me started on an antibiotic. My temp began dropping from the 103 F measured on arrival and within 24 hours, I was feeling like a new person. I stayed at the hospital for a whole week while they did a urological evaluation. When everything checked out okay, I returned to Stalag 17 where I finished my course of antibiotics. Compared to my room, the one at Kings Daughters was like a palace.

Give Me Heat or Give Me Booze!

In the winter, it does get cold in the Shenandoah Valley. It even snows occasionally. It started getting pretty chilly in Woodrow Wilson as October slipped by. As the saying goes, “the natives started to get restless.” All of us newcomers were wondering when they were going to turn the heat on.

“Oh, it will be soon,” the residence hall manager kept saying.

“You will know when it’s on,” the old timers said in an ominous voice. Finally, sometime in mid-November the heat came on with a vengeance worthy of hell. The old steam radiators snapped, crackled and popped. Soon we were stripped down to our t-shirts. Then after about an hour, the noises stopped and the buildings creaked as they cooled. In about another hour, we were back to putting on sweatshirts and jackets again. I’ll cut to the chase. For the rest of the winter, we got an hour of heat on schedule every six hours – 6 a.m., noon, 6 p.m., and midnight. Fortunately, we could get extra army blankets for our cots. We adapted and took it all in stride. We never bothered to complain about the loose window panes that let the cold wind blow in. It did not rustle the curtains because we had none. But, hey, I was a tough prisoner in Stalag 17. I could take anything the enemy threw at us.

Antifreeze is necessary in the winter. Besides wearing up to four or five layers of clothing to cope with the cold and momentary bursts of steam heat, we learned that a swig of alcohol could give relief from the cold, at least for a few minutes. Our E&J wheelchairs were well designed to support our need. The seats on the folding chairs hammocked or sagged. All spinal cord injured residents were prescribed a cutout seatboard to place on top of the sagging seat. The cutouts were at the back of the seatboards so that when the wheelchair user was sitting on a foam cushion on top, the ischial tuberosities were over the opening and pressure was reduced. At the front of the seat, there was a space between the seatboard and seat where it sagged. It was just large enough to hold a pint bottle or flask of liquor. I estimate that approximately half the male wheelchair users carried antifreeze. We had no choice. There were no St. Bernards with a cask of brandy tied to their neck to save us from the cold.

Easter Flood

It was a dismal, damp, cold Easter morning when I returned to the dorm after eating breakfast consisting of two hard boiled eggs that had been dyed by a group of church ladies and a sweet roll provided for the occasion. I just closed my door when suddenly there was a tremendous roaring sound in the hallway. I opened my door just in time to see water start pouring out from under the door of one of the rooms up the hall. Some other students came out of their room and one ambulatory guy started pounding on the door. There was no response, only the loud roar. Someone went to get the residence hall manager but he was not in his office, which was locked. Then someone ran to the infirmary to get the charge nurse who had a master key to all the rooms. By the time she came, the whole dorm was flooded. Water was running out the doors to the outside and was in every room because there were no thresholds. The nurse made the mistake of opening the door and was almost blown away by water being sprayed by the sprinkler in the ceiling. I do not know how much pressure was in the sprinkler system lines but I never would have thought so much water could come out of a little hole. The roaring sound was from the water beating against the walls. The soaked nurse ran to call the maintenance department, but since it was a holiday, everyone was off. It was at least two hours before someone who knew how to turn the water off was found. The sprinkler had been set off when the student went to the chapel services forgetting to take his coffee pot off a hotplate. It apparently got red hot and caught a calendar on the wall on fire. The sprinkler worked like it was supposed to and certainly put out the fire.

What a mess. Water was a half inch deep in most places. Finally, by early afternoon, they brought in some maintenance department workers. Their solution was to open sealed doors under the hallway floor tile that gave access to the crawl space beneath the dorm. That let some of the water drain out. There were no shop vacs in those days so they just mopped things up the best they could. There was not even mention of moving us out of the dorm. We just went on as usual. Weeks later when the squishing tiles started to peel up, they just put some tile cement under them and stomped them down. The student from the flooded room did go to another dorm. The flooded room remained untouched the rest of the time I was there.

Bonnie Consolo

While I was at WWRC, I met a remarkable young woman, who was about my age. Bonnie Consolo had been born without any hands or arms. Her shoulders appeared as if her arms had been amputated at the shoulder joint. The amazing thing was that she learned to do everything with her feet that others did with their hands. She opened doors, wrote, ate, and even drove a car. Everything! I even watched her put a cloth diaper on a doll and fasten it with safety pins, as was done in those days.

Bonnie was a guest invited by one of the therapists who had known about her. A young man from the Midwest who had his arms torn off when they got caught in a corn picker had arrived at the center for rehab. On invitation, she volunteered to teach him how to use his feet. During the two weeks she was there, he got to the point where he could open doors and even drive her car. He was not yet doing things that required fine dexterity, but he was progressing faster than anyone imagined possible. In that respect, I think he was more amazing than Bonnie.

While at the center, Bonnie stayed with the therapist but spent most of the day working with the amputee or mingling with the other students. I had the opportunity to observe her working with the amputee when I was in OT, but the real treat came when she joined me for lunch in the dining hall one day. How can you not stare at someone sitting beside you eating with her feet? I have to admit, I was humbled by the fact that she could handle the utensils much better than me. It was a real privilege seeing her in action.

Final Comments

The facilities at Woodrow Wilson were dismal but the professional staff were special, doing their very best in a difficult situation. I am sure they could have gotten jobs in much better settings, but they understood that we needed them. My training in the drafting program was excellent. Although it turned out to not be a viable occupation, it did provide me with tools I needed for becoming one of the early accessibility “experts.” The Commonwealth of Virginia must be credited with being a pioneer in early rehab and cleared a path that others would follow. I must also mention that the WWRC I experienced no longer exists. The complex was replaced by a modern facility that provides physical rehabilitation and vocational evaluation services for Commonwealth residents. http://wwrc.virginia.gov/

Survivors of WWRC felt prepared for anything the hard, cold world could throw at them. To be perfectly honest, however, after experiencing the Newark Crippled Children's Hospital and WWRC, I had deep concerns about what lay ahead. I was surprised how few students threw in the towel because of the harsh conditions. I think most people realized that it was the last chance for living a life outside a nursing home or worse. For a person with a disability, I do not think the experience was much different than Marines go through during their basic training. When the military surroundings are added to the experience, the analogy with Parris Island seemed appropriate.

Perhaps the most important legacy I took away from Woodrow Wilson stemmed from my confrontation with segregation and the outrageous injustice being imposed on African-Americans. Coming face to face with that reality instilled a seriousness in me that I had not yet acquired. The segregated center and an African-American stranger who lifted me from the street one night had a lasting impact on my life.

Coming Home III - Intermission

Did you ever feel like your life got put on hold? That is what happened to me when I got back from Parris Island (a.k.a. WWRC). I arrived home flashing my hard earned certificate from drafting school fully expecting to become the voc rehab poster boy. I could envision the poster with me holding my first pay stub and pointing to the tax deduction. The background would be half tone images of drafting tools. At the top, in large print, it would say, "Young Man Succeeds in Overcoming a Crippling Disability in a Valiant Struggle to Gain Taxpayer Status." Maybe that's a bit of an overstatement, but working and earning a living were on my mind.

Actually, the first few days at home were taken up by visiting relatives and neighbors, and getting reacquainted with the farm. It was the second week that we got a call from my voc rehab counselor, Mr. Shay. He scheduled a visit so that we could talk about my future. Things seemed to be going smoothly. He arrived, and after congratulating me for completing the program and apparently getting some good reports from the center, we went to the kitchen table to talk.

Get a Job

"As you know, the next thing is for you to get a job. Have you made any inquiries yet?" he asked.

"No. Truthfully, I have not thought about that," I replied. "I have just been getting settled in."

"Do you know of any places in and around Kane that use draftsmen? Factories, machine shops, construction companies?"

“Well, there are a couple plants, but I do not know if they have drafting departments. Dad would know better than me,” I said.

“Okay, talk with your dad, and if you come up with any prospects, give them a call. I will give you a call next week.”

We then talked about my experience at Woodrow Wilson, and he filled me in on the PA center progress. Then he was on his way.

After he left, I started thinking. If I did find a job, how was I going to go to work? Was I still going to be living at home? Where else could I go? I do not think I encountered an accessible residence or store in Kane. How much money would I earn? If I left home, how would I get around since I could neither drive nor afford a car? In Kane, there was not even a taxi service. I felt deflated.

That evening, I told Dad what transpired. The only two possibilities he could think of were Stackpole Carbon, which made electronics components, and Kane Sash and Blind, which made window and door frames. He suggested that my Uncle Pete and Uncle Ed, who were carpenters, might know of something. Over the next couple of days, I did some calling. Neither factory had drafting departments. Uncle Pete indicated that people were mostly building pre-cut homes, but occasionally people wanted a modification and I could be of help there. Suggestions were made that there might be some opportunities in Bradford or Warren, but commuting would be prohibitive for me. Someone suggested that I call the high school shop teacher who taught drafting basics. I had completely overlooked him despite the fact that I had taken the instruction. Regrettably, when I finally tracked him down, he had no more to offer than the others. He suggested places as far away as Erie.

When Mr. Shay called and I reported my findings, he was at a loss for words.

“Nothing at all?” he asked.

“Nothing,” I repeated.

“I should have checked this out before,” he said apologetically. “A couple of years ago an amputee client of mine had two offers here in Dubois. I never thought there would be a problem like this.” Then I raised the other questions I had on my mind like commuting, accessibility, and living with my parents. “Yes, I see there are many problems that I did not understand when we put your plan together,” he said in a soft tone.

He went on to explain that he had been a vocational education teacher before he started working for voc rehab and was still learning about disabilities on the job. Until he started working with me, his clients had relatively limited disabilities. He was just starting to understand how much more difficult it was to get people like me back to work. He assured me that he would keep my case open and if he had any ideas, he would be sure to get in touch with me. He ended by urging me to keep looking around.

It is accurate to say that my homecoming celebration was over. The upbeat atmosphere was replaced by the more somber daily farm routine. Immediately I was challenged by boredom. I resumed my pre-Woodrow Wilson activities of helping Mom in the kitchen. Clearing the table after meals and washing dishes became routine. [These were the days before dishwashers were common.] Mom even became comfortable with me monitoring the cooking when she got it on the stove.

The cooking chores and meandering around outside in my wheelchair were really not enough to keep me occupied. Sitting around thinking was not good. It usually resulted in my listening for an airplane that might be kind enough to come crashing down on me.

One day my Uncle Paul Weritz came to the farm to help Dad. He brought along his almost finished jacket made from deer hide he tanned himself to show it off. Uncle Paul was always doing neat stuff like that. He went on to explain that he got interested when he saw an article in a hunting magazine. It was timely because he had gotten bored with the leather tooling that he had been doing. He showed me the belt he made and was wearing. That gave me an idea. I had seen a couple guys at Kessler doing leather work in OT, and I admired their work. I asked Uncle Paul if I could use his tools if he was not. “Sure,” he said. “I’ll be glad to get them out of the way.” He sent the tools back with Dad when he got home, including some unused pieces of leather and a catalog from the place he had been ordering supplies.

There were just a few basic tools. When I tried to make some designs in the leather pieces, the results were both horrific and hilarious. Obviously, I did not know what I was doing. I looked through the catalog and saw a “beginner” kit for a belt, complete with necessary tools and instructions, and a “basics of leather carving” instruction book. I had saved up a few dollars and ordered the two. In a few days, my order arrived, and I went to work. It was a bit more involved than I had thought but certainly explained why my earlier attempts failed. I took over the end of our old dining room table and went to work. It took about a week to finish the belt because I was learning as I went along and had to adapt some of the tools so I could use them with my hands. It turned out to be an impressive piece of work, deeply carved and burnished in places to highlight parts of the pattern. When a neighbor saw it, he had to have it, and I sold it for a small profit. Within a few months, I had worked my way up to making wallets and then large women’s purses. For a while, I used some of my profit to buy additional tools and had a very extensive collection. It turned out to be a good way to occupy my time and to earn a few bucks. Business has its downside too. I had to put up with a lot of grumbling over the prices despite the fact that I charged less than half of what they would have had to pay at a leather goods store. As I once calculated, I was earning about $.35 an hour!

I was getting some drafting work from Uncle Pete and even some from Uncle Frank in Erie. Some jobs were for house plans. They paid much better than the leatherwork and were given priority. I made the houses wheelchair accessible despite that not being requested. There was at least one entrance with no more than one step so it could easily be ramped, doors and hallways wide enough for a wheelchair to get through, a bathroom on the ground level floor and a room that could be converted into a bedroom. I did not even


At my drafting table at home.

tell my uncles what I was doing. I just knew that if someone in that house would become disabled he or she could continue to live there. I was driven by the totally inaccessible world I had to confront day after day.

My next venture was to join the ranks of amateur or ham radio operators. Aunt Eva Weirtz-Udovich had a neighbor, Ed Weidow, who was a ham radio operator. I don't know all the details, but in a conversation with Aunt Eva, he asked her to check whether I would be interested in getting an amateur radio operator license and getting on the air to kill time. It was something that really excited me. I got in touch with him and it was only a matter of a week or two that he got me set up to start learning the Morse code and electronics and radio theory which were necessary to obtain a license. It only took a couple weeks for me to master the basics necessary for a novice license. Ed was so impressed, he said we would skip the entry level and go for the next higher level license. He had given me a basic key and oscillator to learn and practice sending Morse code, but he felt I should have a shortwave receiver to listen to code being sent at higher speeds. I was able to buy an inexpensive kit, and managed to put it together. It only took a few weeks to get up to the level that I needed to pass the exam. I sent in my application, received the paper work, and Ed administered the exam. He then sent it in to be scored. He tested my Morse code speed and certified that I could send and receive the code at a rate of at least 15 words per minute.

It was an exciting day when I received the packet in the mail from the FCC congratulating me for passing the exam. It included my license and station call-letters. I was K3MRZ. Now all I needed was a transmitter. By then I was just about broke, but Dad came to my rescue. He gave me enough money to get a 50 watt transmitter. Ed came out and he and Dad put up a long wire antenna stretching from the house to an apple tree in the orchard. It was made from copper wire used for our electric fences in those days. Late in the afternoon the connections were completed and I made my first radio contact. I doubt that Marconi was more excited with his first successful transmission. It was the beginning of a real love for ham radio. As I earned money from my various activities, I added to the station. Within a few months, I was doing voice transmissions and chatting with other hams within the three hundred mile range of the small transmitter.

Then another thing happened. One day I was talking to a ham located near Buffalo, NY, and he and I exchanged stories about one another. When he learned of my injury and situation, he said that if I was interested, he and a couple of his ham friends would enjoy coming down to meet me. The real reason for the trip, however, was to put up an antenna that would enable me to transmit my limited strength signal to just about any place in the world. That was an offer I could not refuse. Dad and I collected some information about where the antenna could be erected, which I sent to them.

The three hams arrived on a Saturday morning with a loaded pickup. It was a dreary fall day and after some introductions and hot coffee, they quickly went to work. It was obvious that they had done the job together before. They seemed to know exactly what to do. By lunch time, they had erected a cubical quad 15 meter band antenna right near the dining room window where my station was setup. Mom served lunch and then we did a test run with the antenna. It had a rotator so it could be turned in all directions and I could switch between it and my long wire antenna used for more local communication. After a flip of the power switches on the receiver and transmitter and a couple minutes to warm up, I began tuning the receiver across the 15 meter spectrum. It was only moments until I heard the crisp code beeps. “C-Q looking for someone in the states.” I tuned the transmitter to a nearby frequency and responded. To everyone’s delight, I was engaged in my first overseas communication with a Scot.

Shortly after the checkout, my newfound friends headed back to Buffalo. Within a few days after becoming familiar with the 15 meter band and the antenna, I was using the voice mode to connect with hams all around the globe. It was surprising what I could do with just 50 watts of signal power bouncing off the ionosphere during certain times of the day. Before my love affair with ham radio ended in 1966, I had logged conversations with hams in 77 different countries. It played a major role in occupying the seemingly endless hours and days between jobs.

Even with the hobbies and occasional drafting job, there was no way to escape the loneliness and frustration. Imagine being stranded on an island with no hope of rescue. Family members and neighbors stopped by from time to time, but they were middle-aged or older adults with whom I had little in common. Most of my classmates had abandoned me within a few months of my injury because I was not improving and they were visibly uncomfortable in my presence. Those who had been my closest friends were away to college, married, or simply moved away in search of employment. This day to day existence continued for nearly two and a half years after my return from technical school.

Age of Aquarius

Eventually 1960 came, and as a song of that era goes, maybe it was the “dawning of the Age of Aquarius.” As a scientist, I accept the fact that there are some things that cannot be explained by the cause-effect framework that I operate from. For example, scientists have gained a great deal of insight into how the spinal cord attempts to repair itself, but haven’t a clue as to why a particular person is singled out to sustain an injury. The same is true of love. Although scientists have the biology and chemistry charted in considerable detail, there is nothing to explain why two individuals come together at a given place and time and set that process in motion. Some people believe that the alignment of the planets and stars determines our destinies as far as matters like these are concerned. I cannot argue against that. Unbeknown to me, the planets and stars began taking hold of my life in the summer of 1960. There is no other explanation for what happened next.

A Spy is Born

I thought that I was still bumbling along when the apologetic, shortsighted Mr. Shay from Voc Rehab stopped by to see what I was doing. He had no reason other than that he had been in the area and had been thinking of me. He seemed to genuinely feel bad about my situation, but saw no solution. We talked for several minutes and then both of us seemed to have run out of words. After a few quiet moments, his eyes lit up. He asked me when I had my last medical checkup. When I told him that I had not seen a doctor since my hospitalization while at Woodrow Wilson, he offered to send me to a new medical rehabilitation facility in Pittsburgh for a much overdue checkup. From his perspective, he felt that although it was not a solution to my problem, he could at least provide a needed service and it would be of value to him. Because of my experiences at Kessler and Woodrow Wilson, he thought I could provide some useful feedback about the quality of the facility and help him determine if it would be an appropriate place to send some of his clients. Although he did not say so, I was to be an agency spy. Without hesitation, I agreed to go, but for a different reason. I just wanted to give Mom and Dad a break. Having survived Woodrow Wilson, I figured I could handle the mission.

My Clandestine Journey

It was sometime in August when Dad took me to Pittsburgh to the St. Francis General Hospital and Rehabilitation Institute, as it was called in the 1960s. When we got to the area of Pittsburgh where the vague directions we were given brought us, Dad thought we could save time if he got directions from a policeman he saw standing on a street corner. He stopped and called out to the policeman who then came over to the car.

“Where is the St. Francis Hospital?” Dad asked.

“Dono,” the officer replied. “I heard of it but never been there. There’s a service station two or three blocks down. Maybe someone there will know.”

”Okay,” Dad said, obviously disappointed. We started off and suddenly Dad turned right at the first intersection. “I think this is the street,” he muttered. Sure enough, two blocks up the street was a sign pointing to the St. Francis Hospital emergency room entrance. Needless to say, we were not impressed with the Pittsburgh police.

It was early afternoon when Dad and I arrived at the nurses’ station in the shiny, new facility. We exchanged greetings with a nurse, who identified herself as Miss Karpinski, the head nurse. “You are in a wheelchair. We thought you would arrive by ambulance.” She seemed puzzled and paused a moment to look at a patient chart, presumably mine. Dad asked if there was anything she needed from him. She said no and he indicated that he had to head home to get back to the farm for evening chores.

He started toward the elevator, then hesitated and turned to the nurse. In a loud, stern voice he said, “ I am leaving my son here without any bedsores. I expect to take him home that way. Understand?”

Her face flushed. “Yes sir. We’ll take good care of him.” With that, Dad left.

“Your father is a big man,” she said.

“Yes, and he is very strong. He can pick me up and toss me in the car as if I was a pillow or something.”

What did she expect me to say – that he’s a pussy cat? She wrote something in a notebook and then looked at me. “You are the thirteenth patient to be admitted to our new unit,” she said. Those were not words I wanted to hear. She went to the intercom and summoned a couple staff to take the “new admission” to his room. She informed me that they would put me in bed and do an examination, and that a physician would examine me and write some orders for my care.

Off I went with an aide pushing my wheelchair. We entered the room and they parked my chair beside one of the beds. Then a bit of a struggle began as I removed the armrest so I could transfer into the bed.

“Don’t do that. You’re going to fall,” one of them called out, grabbing me.

“I won’t fall. Don’t you want me to get in bed?” I protested.

“We will put you in bed,” they insisted. “We aren’t going to let you get hurt.”

“But I did it at home and other places. I know how to do that,” I tried to explain.

“Our staff will teach you how to do it safely,” one of them countered.

The argument continued for a couple minutes and I finally threw in the towel. They lifted me onto the bed, proceeded to undress me, and pulled the covers up. Then, to add insult to injury, one of them pushed my wheelchair out of the room, ignoring my protests. I was both angry and apprehensive.

A few minutes later, a nurse came in and checked my vital signs. “Dr. Hohmann is on the floor and will be in to examine you shortly. I will finish later.” She was pleasant enough, but I was not into talking. For what? Nobody wants to listen. Shortly after she left, a tall, imposing man came in carrying the traditional doctor satchel. “Robert, I am Dr. Hohmann.”

“Bob,” I corrected him.

“Bob, I am going to examine you, as well as some others on the team here, and we will put together a rehab plan for you to get you moving. Hopefully, by the time you leave, you will be quite independent. We will all work together.”

He paused momentarily and I was able to interrupt him. “I am already independent. I have already been to two different rehab programs – one for ADL and one connected to a technical school in Virginia.”

“Oh?” he said, obviously puzzled. “Tell me about that.”

I briefly described my experiences at Kessler and Woodrow Wilson. Apparently all they knew about me was my diagnosis, date of injury, and basic demographics that were in a request for service contained in a brief letter from the voc rehab agency. It simply stated that I had been referred for evaluation. They had assumed that it meant that I was referred to be evaluated for a rehab program. When I explained that my counselor and I discussed a medical checkup, he was smiling. “Boy, we messed up. I guess we are going to have to work with the agency to get more complete records on their referrals. I assume you know that we have just opened this center.”

“Yes, they told me I was the thirteenth patient.”

“Maybe that explains things,” he said jokingly. “Well. let me get to work and see what we can do for you.” [I hoped that that was the extent of my bad luck.] With that, he began checking me out, literally, from head to toe. Periodically he stopped to ask me questions about both my medical condition and about my life in general. He was business-like but congenial, and in general seemed to be upbeat. As it turned out, we had a commonality in our backgrounds. Dad and Mom had a dairy farm and his father drove a milk delivery truck, delivering milk house to house as was done in those days. He told of his summers riding with his father and helping to carry the bottles to houses. I know the examination lasted more than an hour. Finally, he closed up his bag. “Okay,” he said, “I have done my job and now I want to see you work. Point me to your clothes and things and I’d like to see you get dressed and get out of bed.”

He brought my clothes from the closet. I also asked him to bring in my wheelchair so I could have it at my side to grab onto when turning myself. Of course, I was not going to pass up an opportunity “to show my stuff.” I put myself in competition mode as I did back in the days when Bob Whitney and I competed. It probably only took 5-6 minutes until I was sitting in my wheelchair.

“Young man, if you were trying to impress me, you certainly did. I’ll bet you can teach us some things. I will see you early tomorrow morning when the team stops by during rounds. The nurses will explain our procedures. I will tell them that you are quite independent and will tell them what you need.” With that, he departed. After a couple of minutes, I left the room and began checking out the place.

The next two days were consumed by various tests and examinations. I was truly impressed by staff, most of whom were relatively young. Also, I quickly learned that the aides were not exactly the usual patient caregivers. Most were ex-steel workers who were retrained because of the rapidly dying steel industry in Pittsburgh. These guys were used to hard, dirty work and highly appreciated by both patients and staff.

On the third morning the team arrived at my bedside as usual. I had been told that the tests that had been done were all okay so I expected to be told to make arrangements for Dad to pick me up and take me home. Instead, I got a real surprise. The doctor asked if it would be a problem if I stayed for a few more days. He said that the staff wanted to do a more in-depth evaluation because they were learning a great deal from me. He stated that he could probably persuade the voc rehab agency to authorize more time. Actually, I was having a good time and it would keep me out of Mom and Dad’s hair, so I told him it would be okay with me. Then I was really surprised. The rest of the team applauded and said, “thank you.” For a short while, I was a bit confused by that. However, in a day or two, it became clear as to what was going on.

My 3-4 day checkup turned into a collaborative effort involving Voc Rehab, the facility staff, and the University of Pittsburgh which had never admitted a wheelchair using resident student before. Driven by the rising idealism of the 60s, the staff was intent on righting some wrongs. During an earlier conversation with one of the staff, I had talked about my failed effort to become employed and digressed to talk about how my injury thwarted my college plan. I got called into the conference one afternoon where Dr. Hohmann and several of the staff were meeting. He said that they had been discussing my situation and concluded that I should have the opportunity to go to college and wanted to know if I was interested. Of course I was. Little did I know what was ahead.

It quickly became apparent that a staff conspiracy had been going on for sometime. The University of Pittsburgh was targeted not only because it was a fifteen minute commute from the hospital, but because Dr. Hohmann and the staff psychologist, Dr. John Muldoon, were both alumni and knew some of the administrative staff. Moreover, as was pointed out to me, it was a large university and had a wide range of academic programs. I would have a variety of majors to choose from. I will be quite frank. I committed myself to this undertaking because it was something to do beside hang around the farm under Mom and Dad’s feet. I had no particular goal or idea where it might lead to. Odds were, it was just going to be another dead-end adventure.

The University quickly agreed to the idea of admitting a wheelchair using student. Of course, the student would have to be academically qualified as determined by the admission committee. In essence, I would have to apply as any other student and successfully complete the process. The rehab psychologist assisted me with this undertaking. He contacted the Kane High School guidance counselor and discussed my situation. Although my grades were not stellar, they had been sufficient to impress the NROTC screeners before my accident. In reviewing the Pitt admission requirements, I would have to take the SAT. Because I would be applying for fall, 1961 admission, I could take it when it was given for Kane area students. In addition, the psychologist gave me an IQ test which he felt would bolster my credentials. We were both surprised and pleased at the result considering my mediocre school grades. .

There was one other important issue. Who would foot the bill for Pitt? Mom and Dad were still in debt from my Hamot Hospital medical bills. The 30 days of hospital coverage paid by the family Blue Cross insurance policy had been a drop in the bucket and they had to take out a second mortgage on the farm. The state vocational rehabilitation agency seemed like the best and only possibility. When approached, the agency resisted based on the fact that they had already paid for my vocational rehab which failed. The second problem was the severity of my disability. They had not been sponsoring persons with severe disabilities for training in settings not designed and staffed to accommodate us. Consequently, their response was, “sorry but....” Dr. Hohmann was not about to accept their response. From his perspective, giving me a chance was the right thing to do. He continued to pressure the agency to change its mind, including calling the head of the agency in Harrisburg. Then I got a message to call my counselor, which I did. Poor Mr. Shay was caught in the middle and told to resolve the problem. When I called he said there were some matters he needed to explore with me. If I went to college, what would I major in and what kind of a job would I get that would not end up the same way my drafting career went? I was at a total loss. These issues had not been discussed. My gut reaction was that I would pursue some kind of engineering degree program because that was my pre-injury goal. That was all I could offer.

The following day, Dr. Hohmann received a call from the agency district administrator. The agency would consider sponsoring me under one condition, that is, the hospital would have to agree in writing to employ me if and when I graduated. They threw the ball back in Dr. Hohmann's court. He went to the hospital administrator. She agreed but only if a specific position the hospital needed was identified and that I could qualify for it upon graduating. Upon hearing that, the psychologist made a suggestion. He was aware that Pitt had just received a grant to start a rehabilitation counselor training program. It was a master's degree program with the purpose of better preparing counselors to work in vocational rehab agencies and in other rehab facilities to help newly disabled people adjust and help guide them into appropriate careers. In other words, create professional Mr. Shays. The psychologist envisioned the need for such a person to absorb some of his functions as the program grew. Certainly the need could be justified by the time I graduated. That was almost too good to be true. In fact, there was a small problem. Such a people oriented profession was not consistent with my interest in science and engineering.

The psychologist discussed the situation with me. Driven by my survivor instincts, I told him that due to involvement with rehab and related professionals my interests had become more people oriented. He was skeptical and decided he had to give me an interest inventory. It was easy to shape my responses to be consistent with people oriented activities. The results provided convincing evidence for him.

The voc rehab agency had no way out. They agreed to support me and a quick meeting was arranged for all involved before I returned home. At the meeting, all the arrangements that were required and the person responsible for each were discussed. When things were summarized at the end of the meeting and the voc rehab representative spoke, I began to realize what I had gotten myself into.

I had become a test case for the agency and university to determine if someone with a disability like mine could make it through college. In essence, my success or failure would determine whether future wheelchair students would be admitted and supported. What I initially saw as a chance to give Mom and Dad an extended respite was turning into a nightmare. I felt like the weight of the world was now on my shoulders. Where are the planets and stars when you need them?

Returning home was a bitter-sweet experience. I had good news, but was cognizant of the burden that came with it. Also, I was back in the day-to-day humdrum and missed the camaraderie with the rehab staff. Ham radio was my escape, especially when the weather turned cold.

I obtained the application materials and catalog from Pitt and began taking care of business. I was fortunate to have the support of the Kane High School guidance counselor. Without him, it would have been difficult to put together a respectable application. He also was able to get me scheduled for the SAT exam, which was to be given in Bradford. Taking the exam was a rude awakening. It was then that I realized that being out of school for several years takes a toll, and never having completed my senior year of high school did not help. I was the only one left in the room when the time ran out. I did not quite make it to the end of the test. I do not recall what my score was. It must have been satisfactory because in early May, 1961, I got my letter of acceptance from Pitt. Needless to say, everyone was relieved. It was full speed ahead with the arrangements.

Just when you think you are on a roll, shit happens. It was sometime in early June when Mom called me to the phone to talk with someone from Pitt. The caller identified himself as the Dean of Men. “I have been reviewing your application,” he said, “we have not received the transcript with your senior grades. We need that as soon as possible.” I explained to him that there was no additional transcript because I never completed my senior year. “But you have to be a high school graduate,” he explained. I told him that everyone knew my situation and no one raised that issue. “I do not know how this happened but I fear there has been a terrible mistake. Let me check into this and I will get back to you.” He was obviously upset and I immediately called the rehab program psychologist. He was surprised but acknowledged that no one raised the issue. He too said he would get back to me. I will spare you the details of the next two frenzied weeks of negotiations. In the end, the University agreed to accept me if I could meet the state minimum graduation requirements. I accomplished that by quickly taking two parts of the GED exam to fulfill two required courses that I had not completed. To this day I have not officially graduated from high school. However, at the time, I was still Pitt bound.

During the summer, I had to register for classes and brother Dick took me down. When we arrived, things got off to a rough start. When he was pushing my wheelchair, we hit an unnoticed raised sidewalk slab. The wheelchair stopped abruptly and I went flying off onto the sidewalk. Fortunately, I only tore my pants on one knee which got skinned in the process. Torn pants and a bloody knee were not the sort of thing that would create a good impression on my academic advisor, who I was about to meet for the first time. Registration was unimpressive. My advisor was a first semester assistant professor who was just getting oriented to the University himself. We perused the lists of freshman courses and chose four that were required. It seemed to be a sensible thing to do. When we got to that point, he asked me how many hours of coursework I wanted to take. I asked how many fulltime students typically took each term and he told me 15. “Well then I will take 15,” I said, assuming that was what I was expected to do. The advisor said I needed one more course and that I might want to pick something that would be easy for me. In part, that stemmed from the fact that I signed up for Russian to meet the contemporary foreign language requirement. He thought that was likely to be tough. “If that’s the case, is there a math course I can take? Math was always fun for me in high school.” He gave me a peculiar look, but after perusing his lists, he suggested the introductory calculus course. It sounded good. (It was a decision that would come back to haunt me.) I signed the necessary forms. He gave me copies and I was on my way.

Setting Up Camp

Classes at Pitt were scheduled to start near the end of August, but I was admitted to the rehab department at St. Francis two weeks earlier. I was officially admitted for a pre-school medical evaluation. However, it actually served as a temporary residence while the rehab staff and Pitt personnel worked out my housing arrangements and other necessary supports. None of the available dorms at Pitt were wheelchair accessible. I ended up being assigned to a dorm that also housed the student union on the lower floors. The rooms were large in the former Schenley Hotel, and the student cafeteria was located there, as well as some of the student organizations. At the time, the football team was housed on one of the upper floors. That turned out to be a fortunate coincidence. The big problem with the building was that to get in and out, I had to be carried up and down the 8-10 steps at the entrance. I had to solicit volunteers to do that and the big football players were usually willing when they were available. In my room, they had to remove the bathroom door to make it wide enough for my wheelchair to get through. It was replaced with a curtain. My desk was placed on blocks so I could use it. Otherwise, the arrangement was quite convenient having the student union, activity offices, and the cafeteria close by.

Although Pitt is a metropolitan campus, it is quite large and classroom buildings are scattered. Some of the campus is quite hilly. There were no curb cuts and it snows in the winter. Getting to and from classes was a major concern. There were no reliable power wheelchairs, but given the absence of curb cuts and ramps, that would have been a limited solution at best. The vocational rehab agency counselor agreed to pay a student to push me to and from classes. Final supports included an arrangement for a nurse from the visiting nurses association to stop by twice a week to deal with medical issues. I also got an electric typewriter which I could use with a typing stick, and a tape recorder to record lectures. (In those days, portable recorders were reel to reel and held 30 minutes of recording per tape, and measured about 10” x 10” x 2”)

The living arrangement at St. Francis allowed me to travel to the campus with rehab staff and work with the Pitt personnel. It also enabled me to become familiar with the campus, including the classrooms where my classes were scheduled. As a result, when I moved to the dorm a couple days before classes started, I was fairly comfortable with the arrangements. I spent an afternoon at the book store a block away and was all set. Interestingly, as the students moved into the dorm, they did not pay much attention to me. I thought they would be quite curious about the “guy in the wheelchair.”

A Pioneer’s Life

Dealing with the physical demands was a challenge. Fortunately I had gained plenty of experience surviving difficult conditions when I was at the Woodrow Wilson Rehab Center. Getting to and from classes posed some problems. However, thanks to Lon Bell, who was paid by voc rehab to assist me, it was not a major problem. I am sure Lon would disagree about the magnitude of the problem when he remembers the snowy, icy streets he had to push me across and the flights of stairs he had to drag me up and down.


PItt was a lonely place at first

The real storm was the coursework and related difficulties and inefficiencies in writing and typing. The tape recorder was quickly shelved. Things like changing reels of tape during class were difficult, but the real problem was the time consumed by having to play everything back. I had to resort to a sort of short hand note taking and relying on my memory. Much of the content in my courses was foreign to me. Knowing 10 different words for “manure” did not help me to understand terms like Weltanschauung that I encountered in sociology. The calculus course, which I expected to be easy, left me in a fog. In fact, my first exam was in calculus. I got a low “F”. When I saw that, I wondered what I was doing there. Essay exams were torturous because of my slow writing speed. Believe it or not, I learned to write concisely. I managed to survive by abandoning any thought about a social life. When I finished the semester, my grade report listed 3 “C”s and 2 “A”s. One of the “A”s was in English, my worst subject throughout high school, and the other was in Russian, which was feared only slightly less than Chinese by students. I managed to get a “C” in calculus, which was better than about 30 percent of the class, but the experience ended my love affair with math.

The second semester was slightly better, coinciding with improvements in my vocabulary. During my sophomore year, I found my rhythm. My grades began to improve dramatically with less study time, allowing for the start of a social life. At the beginning of my junior year, I was approved to enroll in some honors courses. My grades had risen to mostly “A”s and a few “B”s. Needless to say, all those in my support system were grateful.

Another Adoption

To step back a bit, there were other things happening beside my academic ordeal. The staff at St. Francis had lined up another candidate for Pitt. At the beginning of the second semester, Jack Karns became my roommate. He was also a spinal cord injured quadriplegic (a wrestling mishap in high school) who was from a Pittsburgh suburb. Jack had been able to finish high school and had just turned 19. He was very bright but his personality was arrogant and abrasive. It turned out that he was the oldest of four children and the only male. Consequently, at home he ruled the roost and had been spoiled rotten. I got the story from his parents who ended up adopting me much as the Whitneys did at Kessler. Once Jack settled into his studies, his parents started taking him home weekends because it was only about a 45 minute drive. They moved an extra bed in his room for me. I went home with Jack about once a month and enjoyed home cooking and his 3 delightful sisters who he treated like servants. One of the benefits that came along with Jack was a constant supply of delicious pastries and other goodies courtesy of the large bakery his parents owned and operated. For someone with little or no money for snacks, it was no small thing.

A New Era at Pitt

Conditions at the University started improving. During the following summer, the University built a ramped entrance for the dorm. Also, they worked with the city installing a few curb cuts in critical places. During my sophomore year, they began building a complex of three dormitories nearby, which were redesigned to be wheelchair accessible because of the experience gained from me and the others who had arrived. We moved into the Litchfield


The Litchfield Towers in the background.

towers during my junior year. We were undergraduates, but they moved us into a graduate dorm which had private rooms. Although Jack and I lived in adjacent rooms, I was free of his demands. Moving accomplished something that nearly two years of, "No Jack, do it yourself," did not.

In the fall of 1962, the admission of wheelchair using students really began to grow. Because of my survival followed by that of Jack, who quickly became an honors student, St. Francis and the voc rehab agency began lining up other potential students. One of the fall, 1962 new admits was a near catastrophe. The student was a spinal cord injured quadriplegic from eastern Pennsylvania who supposedly had been rehabilitated in a Philadelphia rehab facility and was supposedly capable of attending. I say "supposedly" because when he arrived, he could not even get into his bed from his wheelchair and vice versa. Sam Poole, a paraplegic who I had met at St. Francis had also arrived to begin classes, and I struggled to get him into bed that night. We spent the next few days before classes rehabilitating him. We managed to get him functioning. He was always marginal but was a survivor and managed to graduate. When the new dorms opened, the population of wheelchair students continued to grow. When I left the University in 1965, there were 13 fulltime residential wheelchair students. I still shudder to think what would have happened if I had bombed that first semester.

War Stories

I had my share of near catastrophes while at Pitt. The first occurred in a new, not quite completed classroom building during my first trimester. I was wheeling through a lobby area to one of the adjoining lecture halls. A girl was bent over drinking from a water fountain by one wall and I was momentarily distracted. The next thing I knew I was plunging down a set of concrete steps and landed on the sidewalk with my wheelchair on top of me. I was immediately surrounded by people. Eventually, I concluded that nothing seemed to be broken and a couple people helped me back into the wheelchair. Instead of going to class, I got a push back to the dorm and examined myself more thoroughly. Other than a few scrapes, I was okay. When I went back and looked at the accident site, I concluded that it was nothing short of a miracle that I did not get hurt seriously. I had plunged down 8 concrete steps and landed on a concrete sidewalk. My accident happened because workers had propped lobby doors to the outside open while they were carrying in supplies for unfinished rooms. Because I had been distracted, I did not notice the open entrance.

There were plenty of slips and near catastrophes when I was been carried up and down steps. Fortunately, I was always saved somehow. Once while Lon was getting me down a long flight of the slate stairs in the Cathedral of Learning, he slipped. He was sitting on the stairs with his feet under my wheelchair. He clung to my wheelchair handles keeping me precariously balanced on the edge of a step until other students came to our rescue.

The other accident I remember occurred in the new dorm shortly after it opened. The elevators were not large and usually there were people in them when I used them. I got in the habit of wheeling in and staying in place facing the rear wall because trying to maneuver around would have caused a major commotion. When I got to my floor, I would back out. One evening I was returning to my dorm floor when no one else was on board. I parked the same way I did in packed elevators. When the door opened, I pushed back. The next thing I knew, I was seeing stars and my ears were ringing. Then I realized I was on my back on the floor and a few students where standing near me. Witnesses said that when the elevator door opened, the elevator had stopped about 18 inches above the floor level. Of course, when my wheelchair went back, I toppled over backwards. Fortunately two medical students were among those who saw the accident and they had the sense to take me to the nearby University hospital emergency room to get checked out. After a few tests and 3-4 hours of observation, I returned to the dorm, carefully checking whether the elevator stopped in the right place.

A Bloody Bad Time

The real catastrophe occurred in August of 1963. During my years at Pitt, classes were scheduled on a trimester basis, that is, there were three 15-week sessions with complete course scheduling. That enabled students to attend year round and complete a 4-year degree program in less than 3 years. During the month of August the University shut down for maintenance, etc. This included the dorms so students had to move out, usually going home for the break. At the end of the summer trimester, all the spinal cord injured students who had been patients at the St. Francis rehab unit were admitted to the rehab unit for a medical checkup before going home. The checkups were done over a period of four days. When I checked in after classes ended, everything seemed to be going smoothly. On the second day, I returned from the operating room where a complete checkup of my bladder had been done. I was immediately started on an antibiotic regimen to prevent an infection from developing, which was standard procedure. Early in the evening, a nurse brought my second dose, which she popped into my mouth, and I had a few swallows of water. About an hour or so later, I started to get nauseated and called for a nurse. I vomited for about a half hour and all of a sudden, we saw that I vomited some bright red blood. She put in a call for a physician. By time he arrived blood was coming out by the mouthful. It was quickly apparent that this was a major medical crisis. Transfusions were started but the bleeding did not seem to let up. It was not long before I started going into shock. Dr. Hohmann and several other physicians were by my side trying to figure out what needed to be done. It had been concluded that I had a gastric ulcer that must have perforated an artery in the wall of my stomach. No one had a solution, so they continued to transfuse me. At one point, they tried to get the blood to run faster by wrapping a blood pressure cuff around the blood pack and pumping it up to put pressure on it. The plastic pack burst, splattering blood every where, including the ceiling and walls.

Later I learned that the bleeding was likely caused by a medication error. They learned of the error within hours after the bleeding started. The last antibiotic that I received was actually a medication used to treat rheumatoid arthritis that put patients at risk for gastric bleeding.

The transfusions went on around the clock for over two days. On the third day, things were pretty bleak. I was in shock and non-responsive much of the time. I just wanted the misery to end. It was in the afternoon that a late middle-aged man came into my room and introduced himself as Dr. Madigan, the Chief of Surgery. He pulled up a chair and sat down facing me. I was lying on my side so we were face to face. He began:

“Bob, are you lucid? Can you understand me?”

“Yes.”

“Dr. Hohmann asked me to talk to you. We know you have a bleeding ulcer. Ordinarily what we would do when we cannot stop the bleeding is to remove that part of the stomach. We can do studies to locate the ulcer so we know what part to remove. Dr. Hohmann asked me to consider doing this to you.”

”Good. Do it as soon as you can. I am so miserable.”

“If only it was that easy. The problem is, we do not know where your bleeding is located, and with your stomach filled with blood, we cannot do any studies to find out where it is. We would have to guess and just take out a large section and hope we guessed right.”

“I understand. Just do something.”

“I am not finished. In your condition, I do not think you will even be able to survive being anesthetized let alone the surgery. The odds are very much against you surviving. Do you understand?”

“But I am dying anyhow. Please try if there is nothing else.”

“Well young man, we will do our best.”

“Thank you. Please hurry.”

That was the last thing I remember. It was a few hours later when I opened my eyes and saw Miss Karpinski, the head nurse for the rehab unit, sitting where Dr. Madigan had sat.

“Mr. Chubon, if you can hear me, you have a blood pressure now. The surgery went well. They think you will be okay.”

I could not talk and seemed to be tangled in tubes. It was sometime before I realized that I had the surgery. I will not bore you with the details of my recovery. I did quite well and after a week, I started to eat liquids and started getting out of bed. As soon as my incision was sufficiently healed, I began to exercise in physical therapy to overcome the deconditioning that had occurred. They wanted me to take a semester off from Pitt but I resisted. I missed the first week of classes but quickly caught up. I was back in my groove.

They removed about two thirds of my stomach. In the days before surgery I had received 27 units of blood. The surgery was talked about for years. It was actually performed by a surgical resident, Dr. Safee. Dr. Madigan considered him to be the better technician and assisted. The nurses who were in the operating room described it as the fastest gastrectomy they had ever seen and that Dr. Safee performed like a combination of a finely tuned machine and a ballet dancer. I recovered quickly and had to eat small meals for a couple of months. It was supposed to be a lifetime problem but was incompatible with university life. In a few months, I was back to three regular meals a day with minimal problems. The ordeal did have one benefit. I lost approximately 20 pounds and have never gained it back.

I was never angry about the medication error, although it put me in a pill checking mode that continues to date. They acknowledged the mistake as soon as they realized what happened. What I cannot forget is the tremendous support I got from the staff during the ordeal. The nurses volunteered their time when they were off duty to work with me, so I had care around the clock as long as it was needed. Dr. Hohmann did not go home until after the surgery. For three nights, he got short naps sleeping in an examination room. As he later said, they were not about to let me go down without fighting as hard as they were capable. It is reflective of the bond that had developed.

I mentioned that Miss Karpinski was at my side when I returned from surgery. That was no coincidence. From the time Dad dropped me off for my first admission to the rehab unit and issued an ultimatum about pressure sores, she was my protector. In fact, after a while, she started referring to herself as my mother, and sometimes introduced me to others as her son. Over the years, Karpy has remained my protector, advocate, counsel, coworker and friend. She has seen me through every crisis I experienced while in Pittsburgh. If it was humanly possible, I am sure she would have been down here in South Carolina overseeing my hospital admissions. It is too bad she cannot be cloned. The U.S. could have a super health care system.

Getting a Life

At any university, students get as much learning from social life as academics. As I alluded to earlier, during my freshman year I had little time to spare. There was one exception. One of the student organizations was an amateur radio club, which was housed two floors below my dorm room. I did manage to get down there for an hour or two every week. It gave me an opportunity to keep in touch with a few of my over-the-air friends that I had made from my station on the farm. I did not even go to a football game that first fall semester.

Women and dating were not on my agenda. They were off the radar ever since I left Kessler. It was a real torment because deep inside, I longed to feel a soft warm cheek pressed against mine. I last experienced that with one of Bob Whitney’s girlfriends. That slowly changed. During a trip back to St. Francis for my annual checkup, I encountered a rather vivacious and playful student nurse. I was in the patient cafeteria eating one afternoon where she was assigned to assist patients who needed help eating. We started kidding one another every time she passed by. Eventually, she passed me and I reached out my hand and messed up her hair. She turned around and started to do the same thing to me. Just as she started, her instructor, who was a nun, walked unnoticed into the cafeteria and saw her messing my hair. All of the sudden we heard, “Miss Leja, come to my office immediately.” We both looked up and saw the nun approaching. The student turned pale and uttered, “Yes Sister,” and headed out of the cafeteria, followed by the nun. I later learned that she had been placed on probation, grounded for the rest of her senior year, and threatened with expulsion if another “unprofessional” incident occurred. I felt really bad and apologized to Becky when I got a chance. My checkup findings were okay so I went home.

When I went for my checkup the following year, much to my surprise she was a member of the rehab nursing staff and we became friends. She expressed an interest in visiting the University when school resumed, so I invited her over when I got back. After the tour we stopped for a cold drink and she suggested we get together from time to time, which we did. It was not a romance but she was impressed with what I was doing and she kept me up on the rehab happenings. After nearly two years, she informed me that she had started dating a guy and thought she ought to stop her visits. It does not sound like much, but it did open my mind a little about the possibility of a girl friend.

I did have an almost official date once during the period. One afternoon I got a call from Jack's oldest sister, Jan. She was furious. She had started nursing school at Duquesne University and when Jack was home, she mentioned to him that she got assigned to a patient who was a really good looking guy. I think the guy was an amputee. Jack made some remark like "don't get any ideas about dating a cripple." If she stooped that low, he and the rest of the family would disown her. She asked me to go out with her to a movie so she could look Jack in the eye and tell him that not only did she date a cripple, but he had a spinal cord injury. She figured that would shut him up. Of course, I accepted and she picked me up and we went to a drive-in movie. You can imagine how difficult it was for me listening to Jack telling me about his "stupid" sister and how he would kill the guy if he found out who he was.

During the fall of 1963 when the new dorms opened, one of the new students was Dave. He not only had spinal cord damage from a cancerous tumor but had both legs amputated above the knees. Dave was the son of a University professor. Although he was estranged from his family, he had learned his way around the University. He introduced a few of us wheelchair using students to one of his friends who was a doctoral student in the sociology department. Some of the guys had been commiserating with Dave about the lack of attention they were getting from the coeds. Dave mentioned the discussion to his friend and he offered to put his knowledge to use and help us. His plan was to arrange some get togethers with us and a few sociology students who were looking for term paper topics. They would join us in an informal public setting and we could share some of our experiences dealing with our disabilities. He maintained that once we were observed interacting with coeds, others would become curious and feel comfortable interacting. We arranged for a couple evening meetings at Frank Gustine's Bar and Grill, which was near the dorms. To say the least, we had a couple raucous, fun filled evenings. After a couple beers, the stories of poignant events from our lives cloaked in a sick humor style flowed freely along with tears from laughter. It is surprising that we did not get thrown out, but then, we were good customers. The events did seem to have some impact. Some of the guys reported that coeds were joining them in the snack bar and cafeteria. As Dave later said, his friend knew his shit. However, a couple of us continued to get calls from the sociology students inviting us to parties and other happenings. I did not realize it at the time but some were graduate students. Being their age, I got invited to some of their keg parties.

Back to Academics

You may recall that when my plans to attend Pitt were developed at St. Francis, the goal was graduate school and a master's degree in the new field of rehabilitation counseling. It is difficult to understand how a group of well educated professionals could make the assumption that someone who was sort of a high school drop out was going to successfully complete undergraduate school let alone qualify for and complete graduate school. My undergraduate major of psychology was selected to serve as an appropriate foundation. Fortunately my grades steadily climbed to a level that grad school did seem like a possibility. During my senior year, I got the application materials and began the process. I took the required exam and got a respectable score. During my last semester, I completed an interview with three of the Rehab Counseling faculty and was encouraged. They seemed very positive and indicated that I should receive the decision in about two weeks. I was most excited because at that time, every student was awarded a federal traineeship grant as part of an effort to recruit people into the fledgling profession. Not only would it cover my tuition, housing and books, but I would get a $275 a month stipend for other living expenses. More than half would be left after I bought a meal ticket. For someone who had been surviving on $20 a month to cover my laundry costs and other personal needs, it was like hitting the lottery.

Two weeks passed following my interview and I did not hear anything from the program. Then 3 weeks. It was getting near the end of the semester and people were asking me if I had been accepted. Finally I got the nerve to call the faculty member who had been assigned as my temporary advisor.

“I will be very honest Bob, your application has run into a problem that we hope to resolve soon. Some of the faculty on the admission committee raised the question as to whether a person with a disability could be professionally objective working with disabled clients. You are the first applicant we have had who has a disability.” His voice seemed somber.

I was stunned. Somehow I managed to ask him what was going to happen. He said that they were going to have a meeting with all the faculty and discuss it. Then the faculty would vote and whatever the outcome was would be their policy. It boggled my mind that people would think that a person with a disability could not help another. I had been doing that since my first admission to St. Francis. He assured me it was nothing personal but that was no consolation. We ended the discussion when he promised to call me after their meeting.

It was a few days later when he called and reported the good news. I would be admitted. I would receive a letter of acceptance as soon as all my final grades we available for review. I could begin making arrangements to attend classes at the start of the fall trimester. Whew!

Little did I realize that there was more to come. People had told me that getting into graduate school was difficult, but I thought it was because of the necessary high grades. I was packing some things up in my dorm room when the phone rang. I answered and recognized my rehab counseling program advisor’s voice:

“Robert, can you tell me what is going on? An F.B.I. agent has been here asking all kinds of questions about you.”

I certainly had no idea. It took some time before I was able to put the pieces together, but this is what happened. The cold war was very cold in that era. You may recall that I had to sign a loyalty oath to become a client of the state vocational rehabilitation agency. The federal government, which provided most of the funds for the state agencies, did not want any of it to be used to provide services to communists. Not even totally paralyzed ones. You may also recall that the required contemporary foreign language that I studied in undergraduate school was Russian. As part of our early studies, the professor recommended that we subscribe to a low reading level Russian publication. With guidance from the library, I subscribed to the monthly magazine of the "Young Pioneers" who were somewhat analogous to the Boy Scouts. That's what I was told by the librarian. The reading level was at about an eighth grade level. As I eventually found out, the "Young Pioneers" were actually the official communist youth organization. Moreover, our government was monitoring the mail coming from and going to Russia. They noted my subscription. Having subscribed to the paper of the communist youth organization, I was put on a watch list. When my application materials for the federal traineeship grant were received in Washington, the names were all checked against the government lists of suspicious characters and I was on one. Consequently, they had to check me out before my traineeship was approved.

Once classes began, everything went smoothly. At the urging of a friend, I got a job as a security assistant in the cafeteria. At assigned times during meals I casually wheeled around the dining area watching for food thefts. It was an all you can eat arrangement and there were self-serve sandwich bars for students who did not like the entrees. However, students were not permitted to take food out of the dining hall. Some tried to smuggle out food for their friends and my job was to report them to security guards at the exits who would apprehend them. For example, on one occasion, I saw a student filling a guitar case with sandwiches. It was interesting work and for an hour a day, five days a week, I got my meal ticket free. With my whole monthly stipend check to spend for other things, I was living high on the hog. I even was able to buy some new clothes. That was bolstered by my friendship with the University Shop manager who invited me in when he was getting ready to have a sale. I could have the first pick. After beer, cigarettes, and laundry I still had money to bank!

The graduate program was a wonderful experience. Through clinical practica and an internship, I was able to work with children and war veterans. I completed the required coursework in four successive trimesters and graduated with my master's degree in rehabilitation counseling in December, 1965. The Trimester system at Pitt enabled me to complete both my undergraduate and master's degree in four calendar years. Very honestly, I was burned out as far as academia was concerned and vowed to never return.

The Planets and the Stars Get it Right.

If I were a real writer, I would not be jumping back and forth like this, but I have to go back and pick up on social life issues. When I left off, I was actually getting comfortable with the coeds. My now ex-roommate Jack scoffed at the "dates" with sociology students. Somehow he had reestablished contact with one of his former high school flames and began dating her. Yes, Jack who forbid his sister to even think about going out with a "cripple." However, things must not have worked out because after a few months, we noticed that she had disappeared from the scene. No one said anything, not wanting to kick a guy when he was down. He began law school the fall trimester of 1964, the same time I began graduate school. To everyone's amazement, he began dating a coed who turned out to be a graduate student in nursing. In a way, she turned out to be responsible for Jack's redemption, at least in my eyes.

Early one evening I was wheeling around the cafeteria with a tray on my lap looking for a place to sit when I heard someone call out to me. It was Jack sitting at a table with Marge, his girlfriend, and another girl. It was a bit of a surprise but he asked me to join them since there was an empty side of the table. He introduced me to Sandy Hildebran who was a friend of Marge' s from her dorm floor. We engaged in some small talk and I learned that she was from a small town about 60 miles from Kane and that she grew up on a farm. It turned out to be a very pleasant meal but it was otherwise unremarkable. A couple of evenings later, I was eating and saw her looking for a place to sit and invited her over to my table. As you might have guessed, it was the beginning of our romance.

We began dating. At first we were limited to going to campus events. However, somehow we talked Jack into lending us his new Oldsmobile Toronado one evening. It was an indulgence from his parents and a fairly expensive vehicle, being the first front wheel drive model on the market. We parked in nearby Schenley Park. We spent the evening listening to the radio, but when we were ready to leave, the battery was almost dead and the car would not start. It was not long before the police stopped to throw us out. They did not have jumper cables but gave Sandy a ride to a nearby service station. She rode back in a wrecker and they got the car started. We drove around for a while to recharge the battery some. It turned out to be a much more expensive date than we planned on. Of course, we never told Jack.

Sandy had a '57 Chevy that she had bought earlier. However, when she started at Pitt, parking was a major hassle so she left it at home. Sometime after the episode with Jack's car, she brought it back. The old Chevy helped our dating a lot. In the spring, we took weekend trips to visit some of Sandy's friends in Cleveland, where she had gone to nursing school. We had some memorable near death experiences because her friends all lived in second and third floor apartments with no elevators. You can picture Sandy, sometimes without assistance, struggling to pull me up one step at a time.

Things Get Serious

Eventually, as our relationship grew serious, Sandy made the decision to tell her parents that she was dating a guy who used a wheelchair. The news was not well received by her mother. Her mother's words were, "I forbid you to see him again. Why would you want someone like that? He would not even be able to go to the store for a loaf of bread." Things went downhill from there. A couple weeks later, I made a visit with her. I had a very nice visit with Sandy's father. Her mother spent most of the time in the kitchen banging pots and pans around.

Sandy's first visit to the farm went smoothly. There was no big production. I managed to get home for a few days between trimesters and Sandy had gone to visit her family. We had arranged for her to come to the farm to pick me up for the return trip to Pittsburgh. When she arrived, she came to the front porch door where Mom greeted her and led her into the house. Dad was at the kitchen table reading the newspaper. When I introduced Sandy, he looked up and said, "I didn't hear you come in," and went back to reading the paper. Mom was happy and excited and by the time we left, Sandy was one of the family. As I look back, if things had not worked out for Sandy and me, I would have been in real trouble with Mom and Dad. We made a couple more trips to the farm.

Then on a late summer trip we stopped near the farm and I formally proposed. We broke the news to them first.

Breaking the news to Sandy's parents did not go so smoothly. Sandy's grandfather had multiple sclerosis and continued to farm even after he was quite debilitated. When he could no longer walk, he crawled, scooted, and even had a team of horses trained to stop and wait for him when he fell off a piece of machinery. Sandy's parents had watched him deteriorate slowly over several years and that was the future they saw for me. Her dad gradually accepted our decision to marry. He told me that his father always found a way to do what needed to be done and he knew that I would do the same. All he wanted for Sandy was for her to be happy. Sandy's mother took considerably longer to accept our marriage. After about 10 years she got to the point that she could accept a bottle of Southern Comfort from me during a visit to our house in Pittsburgh. Of course, it was for medicinal purposes..

The Final Sprint

Things got really hectic. So much to do in so little time. We would both be graduating in the middle of December. I had formally accepted the rehab position pending my graduation and would start work the first week of January. Sandy also had a job lined up for January. It only made sense to move from the dorms to an apartment so we would be settled by the time we started work. The big problem was money. We had managed to save about a thousand dollars between us.

We bought a new car that I could drive, using her old Chevy as the down payment. The rehab OTs installed hand controls on it, and all I needed was a learner's permit. That is where I hit a pothole. In Pennsylvania, ordinarily one just had to pass an eye exam to get a permit. However, I had heard war stories from other guys in wheelchairs who were subjected to all kinds of absurd tests by the state police before they would issue a permit. In one case, they had made a paraplegic change a tire. Sandy and I looked for a place where I could quickly start learning and prepare for whatever they threw at me when I went for a permit. We found a large cemetery on the outskirts of Pittsburgh and I began practicing there. It was not long before the cemetery workers figured out what we were doing and threw us out. When I reported what had happened to the guys at the dorm, Jack Karns came to my rescue. He had gotten a permit without any problem at a state police station where it just so happened that a state policeman, who was his uncle, was stationed. Jack assured me that he could alert his uncle when I was going for the permit and that all would be well. When I went to the place, an officer had me transfer on to a driving simulator. He told me to use the steering wheel to keep the car on a projected image of a road when it started. There were no spinner or hand controls but I managed to keep the car on the road for a minute or two. Then the officer asked me to raise my hands above my head. I guess that is a necessary checkout to see if you can respond properly when being arrested. It certainly is not especially useful for someone who drives with one hand grasping a steering wheel spinner and the other holding the handcontrol lever. Without further evaluation, I was issued a permit. When I later went for my driving test, everything went smoothly.

Our wedding budget was $500 max. We decided we would get married in the University chapel, which was available to students for a token fee. We used the University chaplain. It had to be a small wedding, so we limited it to our parents, two attendants, and their significant other. Sandy asked Sara Willoughby, a student and close friend, to be the bridesmaid. Gil Bartholomew, a friend who had been pushing me to classes after Lon left Pitt, was the best man. We decided to get married the afternoon of November 26, which was the Friday following Thanksgiving Day. Since most of the students would be gone for the holiday, we could have a short reception in the dorm lounge area. That would be followed by a sit-down dinner at a nearby, upscale restaurant. We reserved a room at a suburban Holiday Inn for our honeymoon.

Our wedding went smoothly. Sandy's mother attended and she kept her sniffling down to about 10 decibels. At least it did not echo in the chapel. I'll spare you the details of our honeymoon. I will say that deer hunting is boring in comparison. When we returned to the University, the news had already spread. During our reception, there had been a few students who wandered by and asked what was going on. Our friends were all quite surprised because we told everyone that we were getting married the following week. It was our way of eluding the hijinks they would likely attempt and keeping the wedding small. In fact, a couple of the St. Francis staff were a bit perturbed because they did not get to decorate my wheelchair with cans and streamers like they had planned. The day after final exams were over, we moved out of the dorms into an apartment we had rented. I took my driving test a few days later and passed without a problem. We were set.

Living Real Life

We began apartment life with the bare essentials. We bought a bedroom set and a chair for the living room. We had a used card table and a couple folding chairs which we had confiscated from Sandy's parents. That served as our kitchen table. There was also a metal bookcase that Sandy had in her dorm room. On it was my 9" black and white TV that someone gave me as a Christmas present for my dorm room. We had a few pots, pans and dishes people donated, as well as a couple lamps. That was it. Like most newlyweds, togetherness was all we needed. I began work right after New Years Day but Sandy had most of January off. That enabled her to do a little shopping for a few essentials that were within our meager budget. Gradually, as the paychecks started coming in, we furnished the apartment.

Work was enjoyable. There were, however, some interesting moments in the early days. It was not unusual for hospital staff or security to stop me from going into areas restricted to staff, assuming that anyone in a wheelchair must be a patient. That was especially true of visitors who would see me in the hallway or on the elevator in my wheelchair and wearing a coat and tie. "Going home," they would ask. "Yes. I go home everyday after work." Most were at a loss for words. I spent most of my time working with patients but continued to be involved in staff education activities as well. The program was thriving and now included a resident physician training program in the specialty of physical medicine and rehabilitation or physiatry.

I had been working a little over two years when I was called to Dr. Hohmann's office. It was not unusual because from time to time he needed an update on a patient that I had been working with. However, there were no patient files on his desk. "Bob, I have been thinking about something for a while now, and it is time that I talked to you." He went on to say that the program had grown so fast he was starting to feel overwhelmed.

At that time he was handling both the medical and administrative duties and felt that it was no longer realistic. He was considering dividing the responsibilities between a medical director and an administrator. “That leads me to you,” he continued. “There is no one I would rather have by my side than you. Would you be interested in taking over the administrative responsibilities?” I was stunned, to say the least. I assume he sensed that I did not know what to say. “Take some time to think about it,” he said. “We will talk more. I have some ideas about where I think the program should go, but it is going to take planning. That will be part of the job.” We ended with my thanking him and saying that I would certainly consider it. We did meet and discuss various responsibilities, and it became clear that with the rapidly growing program, there would be some great opportunities and challenges. It offered an opportunity to be creative and to shape services for patients. After deliberating for a few days, I concluded that it was an offer I could not refuse. Dr. Hohmann and I put together a rather vague job description, and he obtained approval from the hospital administration and board. Within a week, I moved into an office near his.

My new Role

The responsibilities were varied. I was responsible for all non-physician personnel management, including screening, hiring and firing of the mostly professional staff. Other responsibilities included budget management, grant writing and administration, educational program development, and project planning and implementation. I retained the right to stay involved in patient and staff education and to serve as a clinical consultant to the rehab counseling department. The program grew, adding a 12 bed unit on which to cluster persons with neurological disabilities such as spinal cord injuries and multiple sclerosis. Eventually, a pediatric rehabilitation section was established within the hospital’s pediatric unit. The program was known internationally. I had the opportunity to help write the initial accreditation criteria for the Commission on Accreditation of Rehabilitation Facilities (CARF). Our facility was one of the first to be accredited.

When Dr. Hohmann appointed me to the position, I was not scrutinized for my administrative training and experience. I had none. That is why I was surprised that he asked me to take on the responsibilities. I was left to develop my own management style or approach. Almost immediately, I put my counseling skills to work in dealing with personnel matters. When it came to screening applicants, I was well prepared to evaluate their skills and training. I was able to glean out those who were unqualified or not a good match for the position they had applied for. However, I did not simply reject them. Rather I would counsel and redirect them, sometimes even giving them more appropriate job leads. Consequently, I was sometimes actually thanked by people for rejecting them. Second, I was a good listener which went a long way in resolving staff disagreements. Knowing that they were truly heard, they were much more receptive to my intervention as an arbiter. My tenure was in an era in which employee relations within the healthcare system were at times quite tumultuous with a constant barrage of discrimination charges and unionization efforts, but there was no major discord in the department. I was always looking for ways to improve operations, spending more time out in the various units with the staff than in the office. I found that sometimes people doing the cleaning have good insight into what is happening in the organization if they are listened to.

One of my most useful activities was to continue to get admitted to the rehab department for my annual checkups or medical treatment. It was frowned upon by the higher administration who preferred that staff be admitted to a VIP or "Gold Coast" unit that catered to the upper echelons. My view was that my department better be good enough for me. If it was not, it was my fault. The reality was that it had the only nursing staff trained to provide appropriate care for spinal cord injured patients and physicians who knew how to care for them.

I was surprised that both patients and staff, who saw me in my administrative role day after day, quickly forgot about that and interacted with me as a patient. Almost immediately, patients would begin sharing their problems and complaints with me. As a result, during one admission I learned that a nursing assistant was abusing a patient by giving him cold showers. During another, I learned that an aide was routinely taking some of the patients' food for his meal. More commonly however, were the policies that patients were being subjected to policies that were not policies at all. They were invented by the staff to make their job easier. For example, during one admission, Sandy, a friend and I went out to dinner one evening at a nearby restaurant. Patients were supposed to be encouraged to begin engaging is similar activities as soon as they were medically stable enough. The purpose was to gradually reintegrate them into community life while they were still adjusting to their disability. When I returned, patients wanted to know why I was so privileged. I found out that they were being told they could not go out because of liability issues. The staff invented that "policy" so they would not have to keep track of patients and help them get dressed to go out. One would think that staff would take extra care in dealing with me as a patient knowing that I was their boss. Regrettably, during every stay there were one or more medication errors. Experiencing hospital procedures first hand enabled me to see any unintended consequences policies and procedures might be having on both patients and staff. Sociologists have written about the revelations stemming from functioning as an "insider" and my experiences made me a believer in it as a useful administrative tool.

Being a patient on the unit did have its disadvantages. During one of my longer stays following surgery, I was in the bathroom brushing my teeth. Suddenly several of the staff came in and began discussing a problem they were trying to resolve.

Those early work years were not entirely smooth sailing. One of the major medical problems that most people with spinal cord injuries have to deal with are urinary tract infections. They were a common cause of early death. I had managed to keep infections to a minimum until the late 1960s. I was having flare ups with increasing frequency and antibiotics seemed to provide only temporary relief. By 1969, I had gotten to the point that I was continuously on antibiotics, rotating from one to another. Even with that regimen, I was not feeling well most of the time. Moreover, x-rays were beginning to show signs of kidney damage. The only alternative was major surgery to remove my malfunctioning bladder and create a urostomy to manage my urine output. I had seen the procedure done on a few patients. It was a long, complicated procedure usually done in two separate surgeries, and post surgical complications seemed inevitable. It was something I was not able to face. Finally, I got to the point that I had to force myself to go to work and had little energy left for my job. I desperately needed to talk to some one, but was reluctant to approach Dr. Hohmann, who had been responsible for my care since the first day I had been admitted back in 1960.

By then, the residency training program was underway. Dr. Jane Gerneth had just completed the residency and had become a member of Dr. Hohmann's practice group. She began her residency shortly after I began working so we both sort of learned the ropes together and had become friends. From the onset, It was apparent that she genuinely cared about the patients and listened to them. She was also competent. I felt comfortable discussing patient issues with her and finally convinced myself that she was someone I could approach. I managed to find her alone in her office one day and just unloaded about my situation. She listened, she cared, she educated me, and she assured me that she would help me face the ordeal. I knew that she understood my concerns and knew what was best. I was able to go home and tell Sandy that I had made the decision.

The two surgeries, which were two weeks apart, seemed to go well. However, recovery after the second stage in which my bladder was removed proved to be unusually difficult because of scarring and other problems from my repeated infections in the past. The first problem was a very low blood pressure which defied diagnosis. That resolved and was diagnosed when I finished the post-operative antibiotic regimen. Within two days after I stopped taking the medication, I was back to normal. Nobody bothered to read the list of possible side effects from it. By then my incision should have been healed, but it continued to drain. After about 6-weeks, the urologist took me back to the operating room. He found a large piece of necrotic tissue that had been left behind. Once it was removed, I healed promptly. It proved to be one of the best decisions I made because I have not had a urinary tract infection since. I must give Dr. Gerneth [Now Garboden] credit. She may have saved my life, or at a minimum, saved my life quality.

Although the job was challenging, in some respects it was easier than my position as a rehabilitation counselor. As an administrator in the upper echelons, I had access to a chauffer driven hospital car whenever I needed to travel or could fly first class. I was in charge of the secretary pool, and they were available as needed. I quickly realized that the higher up the ladder, the less of a problem my disability was.

Sadly, during the 1970s, numerous changes in the health care system began to occur, as well as some within the program. The emergence of Medicare and Medicaid brought government bureaucracy into the picture, and health care began a rapid shift from its not-for-profit foundation driven by caring and charity to a marketplace commodity driven by the profit motive. Consequently, my job increasingly was directed at a deluge of paperwork and regulations, and economic survival. The rehab medical staff had grown to 5, including Dr. Hohmann. Disagreements among them resulted in Dr. Hohmann resigning in the mid-1970s, and his first associate, Dr. Joseph Novak became the new medical director. The changes left me weary and uneasy about my future.

Changing with the Times

It was after I did a guest lecture at the University of Pittsburgh that I saw the light. After reflecting on the response to my presentation, I came to the realization that teaching had been a priority and love of mine throughout my career. Sandy realized that my job had lost its spark and supported my decision to consider getting a Ph.D. and moving my career to academia. I approached the rehab counseling faculty at Pitt and they were unanimous in encouraging me to apply for admission to the doctoral program. I was quickly accepted into the program. In 1976, I began taking one course and tendered my resignation, effective the end of the year. In 1977 I began doctoral studies full time with a doctoral assistantship to keep some income flowing in. Almost immediately, I was assigned many of the program's administrative tasks, such as grants management and student recruitment. I successfully completed the program in December of 1979. The experience was a drastic turn about from when I was in the master's degree program. This time I was welcomed and treated more as a colleague rather than someone whose ability to be "professionally objective" was questioned. The University campus had curb cuts throughout and a support center for disabled students. Most of all, I had a garage parking place near the elevator that took me to the floor of the building where the rehabilitation counseling program was situated.

I did have one very, very traumatic experience. After I submitted the files necessary to gain University approval to conduct my dissertation research project, the dean of the School of Education objected to it. He maintained that the sexually explicit course content was potentially disturbing and harmful to participants. My dissertation project was titled, Development and Evaluation of a Sexuality and Disability Course for Helping Professionals, and contained a desensitization component for participants that used sexually explicit films and other audiovisuals. Its purpose was to decrease the anxiety level of students so that they would be able to openly and frankly discuss the issues raised during the course. Months of research and preparation went into the project and to have it dead-ended would have been a major setback. Fortunately the project had been supported by the faculty from a number of departments throughout the University. They formed a committee of tenured full professors who were free from possible retribution and challenged the dean's decision. After being threatened with First Amendment lawsuits and possible negative publicity from news media reporting about the University's close-mindedness, he relented.

There was one rather humorous event when I was preparing the course. I needed to preview the films and wanted to do it at home in the evening. The problem was that I needed a 16mm movie projector. Getting one from the University and bringing it home would have been a major hassle. We were now living in a house and were good friends with our neighbors, Spike and Cass Baker. When Spike heard my tale of woe, he volunteered to get a projector and help evaluate the films. I do not know if he would have done that if the films were of a non-sexual nature. On the scheduled evening, he arrived with a projector which he borrowed from the Catholic Church he and Cass belonged to. We did not have a screen so we improvised by hanging a sheet from the living room curtain rods. Everything went well and Spike left. Minutes later, the phone rang. It was Spike. "Oh my God. You can see that sheet in the window and the neighbors could probably see the images through it!" I can only add that we never got a complaint.

My project was successful, completing the requirements for my doctorate in December of 1979. I now have Ph.D. One of these days I may go back and graduate from high school!

The Story within this Story

This seems like a good place to digress from my "public" life and to "get up close and personal." Up to this point, I have been skirting around the inner turmoil that I was dealing with. I have not yet told the *whole* truth. To a large extent, it was the catalyst for my dissertation. By the mid-1970s, I had become a nationally known expert on matters related to sexuality and disability. From my standpoint, how I got there has been more my story than the other accomplishments I have been writing about.

From the day of my injury I was plunged into *a struggle to find love*. This is an account of the events as experienced by the teenager and young man I was as opposed to a synthesis or interpretation of the past written by a knowledgeable, understanding adult. In other words, it was the reality of the time as I saw and experienced it.

Just an Innocent Kid

Growing up I was a pretty good kid, at least as far as boys are concerned, with the exception of the perpetual war waged against my older brother Dick. They say that even that is normal. When you grow up on a dairy farm, which operates 24/7/52, there is not much time to get in trouble...or to have fun. That shaped my early love life. Although I had my share of school kid crushes, I never had time to date much, and could only legally drive less than a year before my injury. When I finally got my license, I found it did not matter anyhow. During my teenage years most of the girls turned their noses up at the thought of going to a dance in our flat bed truck with the cattle box on it and the organic smell. Dick had priority for the old family car. Despite the problems, I did manage to get an occasional date. Dick would drop me off at the school or in town. Because Kane is a small town, I could walk to a girl's house and walk her to the school gym or meet the girl at the Y where most dances and social events were held. The thing that made this painful was when I had to compare my love life with that of the few guys from wealthy families who had their own car and took their girls to the drive-in movies. Although everyone knew their stories were mostly bragging, it still hurt. In the 1950s, the "pill" did not exist, and even condoms were under lockdown at the pharmacies and restricted to legal-aged adults. If a kid tried to lie about his age, his parents would be waiting for him at the door when he got home. It seemed that each summer one high school girl would get pregnant, and abstinence would be in vogue the entire following school year. No one had to say a word.

Personally, I never thought much about having sex with a girl when I was in high school. It was probably because I had acquired a distorted, i.e., muted view of the process on the farm. From the time I was able to walk to the barn with Dad to attend a cow in labor, I understood about the birds and bees. In fact, I educated my whole first grade class, with the exception of a couple girls who preferred to stick with the stork. Later, I sometimes helped Dad taking the bull to service cows in heat. She would be secured in the "service station," the bull would sniff around a bit, mount her and be done in less than 30 seconds. He would slide off and look around for some good grass or hay. The cow would turn her head and look at him with her big brown eyes as if to be asking, "that's it?" Cow sex was not impressive. As I later learned, sometimes you should not generalize animal behavior to humans.

I never had a steady girl, and actually never dated one girl more than four times. It just was not practical for a farm kid who was at the mercy of the cow and crop needs. The four-timer was the result of Dad and the farmer who bought our milk. They tried to fix me up with his step granddaughter. It was apparent from the onset that she was not interested in a lowly farm kid. Only a doctor's or lawyer's son was worthy of her affections. Our relationship broke off after she had to walk about 5 blocks to a school dance on a cold, snowy winter evening.

I still remember my last high school date. About a week before my injury, I went on a hayride on a clear, chilly evening with the smell of wood smoke in the air. Our family was not particularly religious, but I had a bit of an ecumenical side to me. I was raised a Catholic, was on a hayride sponsored by the Luther League, and my date was a Jewish girl. And guess what? The girls were “thrilled” to ride on the farm wagon pulled by a tractor driven by a local farmer. He did not even hose the caked manure off of the tractor. Women!

Eventually I concluded that the only way this farm kid could have a steady girl was if she was a neighbor and willing to help with chores. There were a couple nice girls just up the road, but they seemed to lack interest in joining me to help with the milking or cleaning the manure from the barn. Despite the difficulties, I never complained much about my limited social life. Hunting and fishing topped dating as far as recreation was concerned. Besides, I was not ready to think of settling down. My plan was to get an engineering degree with an NROTC scholarship, become a Navy pilot, and possibly marry a woman from some exotic foreign land like my Uncle Tony did. I learned in geography class that in some parts of the world, farming was a respectable occupation and my background likely would not be held against me. Then I would retire from the Navy early, and work as an aircraft engineer. I thought it would be good for our kids if we were settled down before they were in high school. Raising a family was a given.

My Life Sentence

It took me only a few minutes to figure out what was wrong following my trampoline miscue in gym class. My limbs and the rest of my body lost communication with my brain. It had to be my spinal cord, probably in my neck. I had a good biology course and understood the nervous system basics pretty well. The frog I dissected in biology class did not die in vain. I did not, however, understand the consequences of the spinal cord injury, or in other words, the severity of the sentence that had been doled out to me.

My rude awakening came soon after I was wheeled into the emergency room on the ambulance stretcher. I was carefully transferred onto a hospital gurney, and then a nurse took charge as the others left. After a quick introduction, she said they were going to drain my bladder because I had not “voided” for several hours. I soon learned that she meant “pissed.” Farm kids don’t use medical jargon. Then she said she had to remove my clothes first. “No big deal,” I thought.

“We do not want to move you any more than we have to, so I have to cut them off,” she continued.

“Okay.” I was only wearing my gym clothes.

She quickly cut my t-shirt up both sides and down the short sleeves and lifted the top half off. This nurse was a pro with the scissors. When she started to do the same thing to my gym trunks, I realized that she was a woman. I almost threw up when she started snipping. My own mother had not gotten a look at my “private parts” for several years. Now this complete stranger. Then, the finale. She snipped the side of my jock strap and the end flew across my body. A couple more snips and she was done. She did not say a word until she draped a sheet over my naked body. “Are you all right? I need to step out a minute to get the doctor.” I mumbled a weak “yes.”

Before I could catch my breath, she returned pushing a cart piled with supplies. A doctor followed. “Young man, I am going to insert a catheter into your bladder to drain the urine [pee].” He held it up with his gloved hand. I really did not need to see that foot long piece of tubing. “If this hurts, let me know.” Fortunately, it did not. As you see, almost from the onset, I knew my love connection had been affected by my injury.

Before the day was out, I underwent surgery to my neck and awakened lying on a strange contraption with my neck being stretched to the point that I thought I was being hung horizontally. After about two weeks of being functionless with my body being in a total state of shock, my spinal cord began to function on a reflex level, much like a newborn baby. As fate would have it, the first sign was a reflex erection, which a nurse pointed out to me.

“That’s a good sign,” she said after entering my room.

”What?” I asked, eager for any good news.

“That,” she said with a smile, and pointed toward the lower part of my body.

I could see nothing down there. My eyes were fixed on the ceiling because of the traction apparatus.

“Well,” she said, “you have a nice little tent down there.”

There was always something going on down there. Tidal drainage one week, a supra pubic catheter the next, ad nauseam. It was impossible for me get my mind off it. I really did not understand this stuff. All I knew was that if you cannot piss right, you are in big trouble. The medical people are going to cut, probe, and otherwise mutilate your love connection in an effort to get things flowing.

As you know, my hospital course was pretty ugly. In the 50s, intensive care units had not yet been invented. As I later found out, I was only the second spinal cord injured patient to be hospitalized at Hamot who survived more than two weeks. After a month or so with no miracle happening, hope began to fade. Student nurses were always around to remind me of my problem love connection. A spinal cord paralyzes the body but not a guy’s hormones. I remembered that before my injury, when cute things got close, I had to scramble to hide the sudden bulge in my pants or risk certain embarrassment. Now the students could be dangling over me, and there was pure emptiness despite the aroused emotions in my brain. Then when they touched my privates with a wash cloth, my penis would jump to attention. I learned what that was all about from a nerdy student nurse who flaunted her knowledge by explaining everything in detail as she did my morning care. Eventually, she got to my “privates.”

“Don’t be embarrassed,” she began. “That is perfectly natural. Even babies get reflex erections like that. It is not sexual or anything.”

Just what I wanted to hear. Sometimes a girl can really hurt a guy. There were times when I regretted not pursuing sex in high school even if it risked getting a girl pregnant. Now I would never have the chance. To say I was depressed is an understatement. When you are no longer able to walk, do not have sensation in most of your body, everything else half works on the level of babies, and your love connection is on the fritz, who wouldn't be depressed? Everyone knew that but there was no Prozac in those days. The treatment for severe depression during that era was electroconvulsive shock therapy. When the miracle so many assured me prayers would bring did not occur, all hope evaporated. What could I have done to warrant such a severe sentence? After all, I was just an innocent kid.

I left the hospital running on empty, both emotionally and physically. Everyone viewed my discharge to home as a temporary stop on my way to my final resting place. I hoped that the stopover would be a brief one.

I arrived home in the spring weighing 97 pounds, down from the 179 I weighed a week before my injury. I looked like the Auschwitz survivors freed at the end of WW II. I had at least three bedsores that went all the way to the bone and a few others not quite as bad. However, thanks to Mom's home cooking and her 24/7 nursing care, I began gaining weight, and my sores began to heal. Most important, my strength began to increase, and I discovered a great deal of movement in my arms and wrists. There were no girls to deal with so I was able to shut that part of my life out.

In a way, I became an actor. I was aware of the pain Mom and Dad were experiencing, and tried to be as positive as possible to avoid causing them more grief. At night, I often cried myself to sleep. As the saying goes, I was "laughing on the outside and crying on the inside." I put my fail proof suicide plan on hold and became obsessed with death wishes. I realized that if I took the suicide route it would tear up the family even more. Instead, every time I heard an airplane approaching, I wished it would come crashing down on me.

By the end of summer I was improved enough that the state vocational rehabilitation agency sponsored me for some physical rehabilitation at the Kessler Rehabilitation Institute, which I described earlier. I will not dwell on my rehabilitation. When I returned home a few months later, I was a different person...at least from a physical standpoint. I looked human and I was functional to the point of ambulating in parallel bars with long leg braces.

Regrettably, there also was a very dark side to Kessler. Most of the guys who were being rehabilitated were coalminers, longshoremen, and other laborers who worked in dangerous jobs. Most had spinal cord injuries. They were tough, hard working "real-men," and they approached therapy with the same vigor. But on the inside, they were on the same page I was. They no longer viewed themselves as a husband, father or lover. Their manliness had been wiped out by the spinal cord injury. Each, in his own time, wrote the inevitable "Dear Jane" letter. Its purpose was to offer a wife an uncontested divorce or to break off the relationship with a girlfriend. It would encourage the women to move on and salvage the remainder of their lives. We knew when a letter was being written by the empty look and teary eyes of the writer. We supported them with a pat on the shoulder and a kind word, reassuring them that they were doing the right thing. Regrettably, the staff believed as we did, and provided the same consolation. Sometimes they even helped to compose or write the letter for those who had limited literacy. The staff cannot be faulted because they were hemmed in by the limited knowledge about spinal cord injuries and sexual functioning available at that time. No one knew or thought differently. As you might imagine, that was the last blow to the last nail in the coffin bearing a crucial part of my life. My connection to humanity had been permanently buried.

This may sound somewhat contradictory in that I previously reported about the escapades Bob Whitney and I had with his girlfriends in the PT gym. I can only say that it was a combination of an escape to a fantasy land and a way of coping with the need to satiate an otherwise unmet skin hunger. When one is sensory deprived over most of his or her body, feeling a soft warm cheek or hand against yours can lead to the feeling that makes cats purr and dogs wag their tails.

It was at this point that I vowed to stay distant from young women to avoid the possibility of involvement and the inevitable broken heart it would bring. I saw the pain on the guys at Kessler when the time came to write their “Dear Jane” letter. I felt as if I had been unjustly thrown in prison where I was confined to a solitary cell and destined to live out my life alone. A spinal cord injury can make one feel lonely in the middle of a crowd. Years later I ran across an alteration of a poem based on a work by Henry Cust that eloquently described my predicament. It appeared in a story in which a prisoner was confined to a solitary cell in a castle dungeon. Like me, he was never given a reason for the harsh sentence doled out to him. I cannot recall the name of the story but I have never forgotten the prisoner’s lament:

Not unto us oh Lord
The rapture of the day,
The peace of night,
Or love’s divine surprise,

But to us thou givest the scourge, the scorn, the scar,
The ache of life, the loneliness of death,
The insufferable sufficiency of breath.

That was my mindset when I left for Woodrow Wilson a few months after returning home from Kessler. I consciously avoided getting involved with young women. As you know, everything went according to schedule, and eighteen months later I completed my training as a draftsman. Again, after returning home, reality set in: No job, no meaningful income, and no prospect of ever becoming independent from Mom and Dad. I spent most of my time working on hobbies. The new reality was that not only were women and love gone from my life, but I would not become the self-sustaining workplace robot that voc rehab had expected of me. There were times when I was so emotionally drained that there were no tears left to flow.

Once I got to St. Francis, some things began to change. There was at least a muted hope that I had a chance of regaining my status as a workplace robot. However, there was no way of escaping the issue of love. The hurt was rekindled shortly after I struck up a relationship with one of the rehab nurses. We dated, at least we called it that, but I still kept a distance by limiting our “dates” to public places. In a way, she was a godsend in that being my age and just out of nursing school, she understood my academic struggle and cheered me on. Having been a high school cheerleader, she was good at doing that. In turn, I listened to her trials and tribulations stemming from working in the nun-controlled environment and living with her parents. We both viewed our relationship as an adventure because we were defying the professional ethic of the day which said that staff do not get involved with patients. It was the ultimate “in your face” gesture to the nuns. When I would be admitted to rehab for my checkup or other reason, brazenly, she would manipulate the work schedule and get herself assigned to me. The downside came when she would give me a good night or goodbye peck on the forehead or cheek. It sometimes left my insides churning by reminding me what my injury stole from me.

I was not alone. Some of the other guys at the University shared similar agonies over beer at Gustine’s. Our involvement with sociology students played a similar role in all our lives. As one of the guys put it, “we shouldn’t kid ourselves. It only gives the appearance of normalcy.” In actuality, we felt like a poor, starving person peering through a bakery window lined with beautiful pastries. Only we were starved for love, which was beyond our reach.

When I first met Sandy, I was in a real quandary. My brain said to keep my distance, but my emotions kept urging me closer. In retrospect, it may have been the point at which the planets and stars were in perfect alignment, and there was no way of escaping their force. I felt so good in her presence and did not want to lose that feeling. There came a point when I realized that I had to make sure that she understood what she was getting into and we had some frank discussions. To be perfectly honest, the fact that she was a nurse and understood most of the ramifications of spinal cord injury made the task considerably easier than I had imagined. Moreover, she had a nurse-friend in Cleveland who was married to a spinal cord injured quadriplegic, much to my surprise. She was more than accepting of the challenges our relationship presented. It seemed to me that she perceived the greater challenge coming from dealing with her mother. As you know we were married, and the idea that we were destined to a platonic relationship was quickly discarded. It is difficult to express the difference becoming a whole person again made to my emotional health. It was as if years of depression and frustration vanished over night. Indeed, I did have a real life ahead of me. It was as if the prison walls around me crumbled and once again I could feel the warm rays of the sun.

Perhaps our relationship was buoyed by the social upheaval of the 1960s when the hippie culture emerged and began challenging traditional wisdom with ideas of free love and drug use. It certainly helped our non-conventional relationship fit in and for us to feel comfortable. However, aside from Sandy’s mother, there were others who raised their eyebrows on hearing we were getting married or questioned our judgment, if not our sanity. It was shortly after I started working at St. Francis that I started getting questions from some curious staff, who were by then, my friends as well. “Bob, how’s the marriage going?” Physicians were among the curious, which did not surprise me. They were the ones who most commonly used the word “platonic” when discussing patient relationships. It put me in a very uneasy position because it was the issue of sex that underpinned many of the questions, and sharing information about the intimate aspects of our relationship was not about to happen.

There were also questions coming from patients with whom I worked. Some of them had heard about our marriage when staff were talking about it and others noticed my wedding ring. They were wrestling with the same fears, frustrations, and uncertainties that I had lived with for so long. As they talked, I could feel the torment brought about by the belief that the most highly valued, good things in life, love, marriage, sex, children, are gone forever. Earlier I mentioned that I felt that I was destined to become a workplace robot existing only to earn my keep. Actually, a real robot is better off because it does not feel the emotional and physical pain stemming from a severe spinal cord injury. I also understood the implications for the patients when trying to cope with their disability. As I reported, until I met Sandy, my motivators were negative. Things like relieving the burden on Mom and Dad, and avoiding a nursing home. That kind of motivation is hardly the driving force emanating from pursuit of positive, meaningful goals. I could not put these patients off and let them flounder through life with a half-hearted effort like I did for so long. I felt compelled to at least discuss the predicament with Sandy. As I had hoped, she understood the ramifications and encouraged me to do what needed to be done.

Thus, I began responding to patient questions, using the best professional discretion I possessed. As it turned out, their concerns were not nearly as much about details of our intimacy as they were about their ability to function, dealing with prevailing negative attitudes, and opportunities for relationships. I am happy to say that some of these patients went on to get married. In fact, a few of them have remained life-long friends.

What also happened, however, was that I had to report the issues I had been dealing with at our weekly treatment team conferences attended by the other staff who had been working with the patients. As it turned out, the staff got educated along with the patients. The fact was, from time to time, the staff were all being subjected to the same patient questions, but had few, if any, answers. I learned as much from patients as I think they did from me and kept expanding my knowledge. It was sometime after I got promoted that Tom Winner, the head of the physical therapy department, stopped me in the hallway. He had just come from one of the conferences which I no longer attended regularly. He told me that I was missed and no one was dealing with the patients' sexuality concerns as I had been doing. He asked me if I could put together some kind of in-service educational program for the PTs so that they could at least deal with patient questions they were confronted with. I thought it was a great idea. It was not long after I did the hour-long program that the OTs asked me to do a program for them, followed by the nurses, and the student nurses rotating through rehab.

Then one day I got a call from the director of the school of nursing. She had heard about the students in rehab and she and the instructors thought that it was something all the nursing students needed to get and would I do a presentation for them. Without hesitation, I agreed, not realizing the surprise I was in for. When I arrived at the classroom with 50-60 students, there were two students who were nuns and two instructors who were nuns and sitting in the front row. I am sure I turned pale. I was prepared to talk explicitly and use some explicit visual aids that I had become comfortable using with the relatively young audiences that I had been dealing with. Moreover, I touched on things such as masturbation, the pill, which only recently had been introduced and even abortion. The rehab nursing instructor came over and laughingly made some comment like, "They all came today." I said, "Yes, but I never thought about nuns being here." She told me not to worry and just pretend they are not there. Easy for her to say. I am certain I started off a bit awkward and quickly realized that I could not improvise. I did my prepared presentation but kept my eyes away from the nuns. I always allowed a few minutes at the end for questions and one of the nun students raised her hand and asked a question, followed by a few other students. I left after a thank you from the instructor and a polite round of applause from the students. I was relieved until a few days later. My secretary said I had received a call from the nursing school director and that she asked that I call her. She was a nun and I expected to get an ear full. When I got enough nerve to return the call, I was totally surprised. She said that the instructors thought the presentation was one of the best they had ever heard on the subject and wanted to include it as a regular part of the course if I were willing. The experience certainly caused me to look at nuns in a different light.

Word about my activities spread quickly to other nurse training programs, professional groups, and other organizations, such as Planned Parenthood, The latter sponsored a regional conference dealing with the effects of illness and aging on sexuality, and invited me as a key note speaker. By then, I was dealing with the impact of other disabling conditions. It had become apparent that many people were the victims of an array of pernicious attitudes and misinformation. At the urging of some professional organizations, I became certified by the American Association of Sex Educators, Counselors, and Therapists so that my presentations would qualify for continuing education credits. Eventually, I was doing major conference presentations as far away as Michigan. One of my last projects while in Pittsburgh was to participate in a 35 part educational TV series on human sexuality produced by Group W Westinghouse Television that began airing in the fall of 1980.

This was the background that I brought to the doctoral program at Pitt and served as the foundation of my dissertation project. Knowing that Sandy and I have been the catalyst that resulted in a number of other spinal cord injured persons, as well as people with other disabilities, finding love and marriage has probably been the most rewarding aspect of my life and career. That is the story of this innocent kid.

A New Direction

A few months before my dissertation was completed, I began my job search. As luck would have it, there were economic woes across the nation and academia was hurting. I had a couple of nibbles and an interview at the University of Maryland, but none worked out. Early in 1980 I got interview invitations from a small university in Illinois and the University of South Carolina at about same time. I had an opportunity to meet with Chuck VanderKolk, the USC Rehabilitation Counseling Program Director, at a professional conference in Atlanta, and he was seriously interested in hiring me. Sandy came along because we drove down from Pittsburgh. On the way home, we stopped in Columbia to see the University and city. It was spring and Columbia was awash in a sea of color from the azaleas and dogwoods in bloom. We wanted to get out of the snow belt and it seemed a good match. The faculty and administrators with whom I met convincingly argued that I was needed in the relatively undeveloped state. I was offered and accepted the position to start as an assistant professor for the fall semester.

After a hectic couple of months, in July, 1980 we moved to a high rise apartment that was about a 10-minute drive from the University. We arrived to Columbia’s typical 100+ degree summer weather. We learned to cope by dashing from air conditioning to air conditioning. Sandy was able to get a job as an instructor in the University’s school of nursing.

With the exception of the abundance of committee meetings, I thoroughly enjoyed the environment which afforded me the opportunity to go in just about any direction my curiosity pulled me. In a sense, it was a prophesized job. Back in my early days on the farm, I was always taking things apart to see how they worked, and often scavenged parts to build something new. My curiosity and creative activities earned me the nickname “professor” from Dad. At the time I did not fully understand what a professor was, and I certainly never imagined taking on that role for the greater part of my life work.

Apart from my regular teaching duties, one of my first tasks was to implement the sexuality and disability course that I developed as my dissertation project. Thus, the University of South Carolina was first in the nation to have a regular course for professionals. Some of my colleagues referred to this as a miracle given the fact that the University is in the heart of the Baptist Bible belt. To some extent, it was even paid for with their tax dollars. Academia provided the opportunity to publish professionally related journal articles. As a result, I received inquiries about my course and the underlying research from all around the world. I continued to do presentations at conferences. However, emphasis did change with the times. A glance at my vita revealed that one of my last presentations was at a geriatric conference titled, “Sex and the Elderly: No Joking Matter.”

My official University photo. (1980)

Here I am with a group of rehabilitation counseling students in the mid 1980s. I was supervising them in our counseling clinic where they also had the opportunity to observe me working with clients. They kiddingly referred to themselves as disciples of mine and had the t-shirts made at the end of the practicum. (Left to right) Steve now owns a company that provides case management services for injured workers, Jodi was working as a rehabilitation counselor in Wisconsin when I last communicated with her, Barbara is now the Commissioner of the South Carolina Vocational Rehabilitation Department, and Tim went on to get a Ph.D. and became a professor. I am proud to have given their careers a boost.

Tom Swift Lives!

In the early 1980s, I was immediately enamored by personal computers when they arrived on the scene. Having been wrestling with the University’s mainframe, I was getting somewhat comfortable with the cyber world. I was able to get an Apple IIe with a small grant. There were already people excited about using the computers for word processing and performing mainframe and calculator functions. My out-of-the-box thinking pushed me in another direction: Using the computers for monitoring and controlling real world activities. One of the first things I did was to take my computer apart to see how it worked and to explore its capabilities for connecting with various input and output devices besides the keyboard and printer. I got out my soldering iron and put together what I called a "work task supervision system." The computer would monitor an object manipulation task, and issue oral, graphic, and written instructions or corrective actions when mistakes were made. The concept was designed to assist people with short term memory problems, enabling them to perform and learn complex tasks. I later extended the concept to include monitoring functioning of people with early dementia in the home and to monitor medical conditions.

I also honed my programming skills and began writing educational software programs. These included a game to teach people what coping with wheelchair life was like, a program to simulate the use of a long cane to travel by blind persons, and a program to teach case management skills to rehabilitation counseling students, using the computer to simulate clients. My efforts were well received, and I established my own company to market the software. It was named "People Friendly Technology." The name came from my priority of making the software easy to use. My entry into the technology field led to membership in RESNA, the Rehabilitation Engineering Society of North America. In a sense, it was the fulfillment of my high school career goal.

At some point in the early 1980s, I read a professional journal article concerned with the quality of life of persons with disabilities. The author was puzzled because in his effort to differentiate the QOL of persons with and without disabilities, he found no difference. To me, the reason was quite apparent. He had used an assessment instrument designed for use with the non-disabled population that was completely lacking in items relevant to the impact of disability. Thus, I began a quest to develop an appropriate instrument. In 1984 I completed the instrument called the Life Situation Survey and used it to conduct a study comparing the quality of life of persons with back problems with persons having a healthy back. The findings were published in a professional journal in 1985. The survey's use grew far beyond my expectations and it continues to be used throughout the world, including Australia, China (a Chinese translation) and Thailand.

By the mid 1980s my research activities had increased considerably and that meant an increase in professional journal articles that needed to be written. Additionally, as my work became known, I began getting requests to contribute chapters in books and other publications. These are the things that are supposed to happen to advance in academia, but for me there was a downside. Because of tight budgets and the fact that most faculty had computers capable of doing word processing, support staff were scarce. We were left to do our own typing if we wanted in to get manuscripts typed in our lifetime. When I was student at Pitt, I learned to use an electric typewriter by pecking at the keys with a typing stick. I continued to be limited to that approach when using my computer. I simply was not able to handle the load that I was now facing. There is a saying that necessity is the mother of invention, and that was the catalyst for my next major project. After about four frantic months and a helpful research assistant, I redesigned the layout of the letters on a standard computer keyboard. The new layout had the most frequently used letters clustered in the center, large letter key top labels and color codes differentiating letters, numbers, and punctuation marks. The speed of my stick typing increased remarkably. With less than a month of practice, I was typing 30 words per minute with my simple typing stick. A research study confirmed that the arrangement was much more effective than the standard or QWERTY arrangement for single finger or stick typing. While it certainly helped me cope with my typing load, the concept had a much farther reach. I was a consultant to one of the nation's largest manufacturers of aircraft, assisting them in rearranging the keys on the keyboard of the computer console used during flight by the pilot and copilot. They found that the autopilot system was being underused because it was tedious to input the data using the hunt and peck typing they were limited to. Within the research community, my arrangement has served as a standard against which to compare the effectiveness of other input devices. The keyboard layout has been given the "Chubon" name and is being used internationally. Even a Chinese version has been developed. A photo of the "Chubon" layout has been inserted below. It is the keyboard that I am using to type this manuscript.

My last major research effort involved the use of the computer and Internet to implement online classes. In the mid-1990s I put together one of the early online courses, using audio conferencing as a major component. The foray into technology was most rewarding. My efforts earned several awards. Perhaps most meaningful was my nomination as one of the pioneers who lead the computer revolution for recognition by the Smithsonian Institute. I was not selected, but to have my name and work put forward with Steve Jobs and Bill Gates was an honor. The reason that was such a big deal to me is that I never had a course or even attended a workshop dealing with computers or computer programming. It was my love of learning and creative juices that have been the driving force throughout my career. The challenge I enjoyed hearing was, "it can't be done."

In the mid-1980s, I took on a new, non-university challenge. Chuck VanderKolk, now a colleague persuaded me to become an expert witness in litigation regarding severe injuries. He had been serving in that capacity as a vocational expert testifying about the impact of injuries and disability on employment potential, future income, and related matters. He brought back horror stories about how little severely disabled people were being awarded to cover the cost of related medical care. In some instances, the awards were hardly enough to cover two or three years of care necessary for conditions such a spinal cord and head injuries, which last a lifetime. Part of the problem was attributed to the fact that most of the people serving as witnesses were not knowledgeable. I decided to give it a try.

I was retained by an attorney who was also using my colleague so he could help guide me through the legal process. The case involved a college student whose car was rear-ended by an 18 wheeler resulting in a high level spinal cord injury. I prepared a life care plan and medical cost analysis and determined that the lifetime cost of his injury related care and medical needs totaled approximately $2.3 million. I learned that testifying on the witness stand is a high stress job, to say the least. Opposing attorneys do everything they can to unravel the testimony and if they cannot do that, they attempt to discredit the witness anyway they can. The attorney won the case on behalf of the injured student, and he was awarded the entire amount presented in my report. Needless to say, the settlement made the newspapers. Rather quickly I was in demand, but realistically, I had a limited amount of time because my university responsibilities came first. I usually took on 4-6 cases a year. Within a few years, I was getting calls from out of state, which I turned down except for a few in neighboring North Carolina. During the last few years I served in that capacity, the opposing legal teams stopped contesting my reports because their efforts were futile. I am most proud of the fact that the judges respected my work and in a couple instances asked me to serve as an amicus curiae (friend of the court) in cases they had difficulty understanding or arbitrating.

There were some difficult days in the early 1990s. The University was experiencing a funding crisis and seeking to eliminate outdated and under used academic programs to reduce costs. At that time, the Rehabilitation Counseling Program was located within the University's College of Education. As part of its budget cutting plan, the dean recommended that the program be shut down. The decision was made because the program was relatively small, having four full time faculty, not because it was outdated or underused. There was an immediate outcry by several state agencies and organizations because the program graduates were a critical part of their work force and there was no place else to recruit from.

At this point, I became the program director charged with leading our fight for survival. I formed a coalition of supporters from agencies and they began lobbying the University. Regrettably, our appeals fell on deaf ears. My last resort was to go to the state legislature, which controlled the state funding of the University, and appeal for help. The legislators with whom I talked were incensed by the University's plan. They drew up a strategy that would make funding of our program a specific line item in the budget that could not be altered by the University if the administration did not relent. Of course, the University officials were outraged at my efforts but had to deal with the problem. They seemingly backed off by saying the program could stay if it was merged into another academic unit, but that I would have to find a unit willing to accept it. That seemed like a reasonable solution, but the problem was that the University added a provision that said no funds would be allocated to cover the cost of the program. Although a couple other academic units would liked to have us join them, there was no way they could fund another program out of their existing, already tight budgets. Thus, I was forced back to the legislature.

One of the programs that was very interested in incorporating the program was the University's School of Medicine. Their interest was given a substantial boost by the School's director of graduate studies, who was a fellow Pitt alumnus bent on doing everything he could to save me and the program. The School's dean was receptive and able to negotiate with the legislature and the University to have our funds redirected to the School. Finally, after a nearly two-year battle, in 1994 we officially moved to new facilities in the School of Medicine. I must say, the battle was worth it. Our facilities were much improved. I had a large office with a glass wall looking out over a forested area and parking within 100 feet of the entrance. Moreover, there was even nearby parking for students. The School of Medicine faculty accepted the program faculty without reservation. In fact, in 1995, I was promoted to full professor. I stepped down as director in 1999, because, as you know, administration was not a priority in my career. Also, it was time to make a transition because I was planning to retire in 2002.

Heading for the Pasture

Even the best plans can be unraveled in a moment. 2000 began as a typical year but that all changed in June. A colonoscopy revealed that Sandy had an emerging cancerous growth and she was quickly scheduled for surgery. The surgery went well and she escaped the need for chemo but would require close surveillance for sometime. During the surgery and recovery period, I was pressed into the role of home manager. August came and we were both in the process of getting ready for the fall semester when I came down with a fever. When my temperature kept climbing, we made a quick trip to the emergency room and I was admitted for a diagnostic workup. The fever was linked to a swollen, infected testicle which had to be removed. It was a relatively simple surgery and I breathed a sigh of relief. Two days later, the urologist came into my room and dropped a bomb. He got the report from the pathology lab and the testicle was cancerous. I was in a total state of shock. But that was not all. The urologist went on to say that neither he nor any one else expected the finding because testicular cancer is usually seen in young males and rarely occurs in my age group. What made this a problem was that in instances when cancer might be a possibility, there was an alternative surgical procedure that would have helped remove any cancer cells that were beginning to spread. Thus, I was at increased risk for it spreading. Following discussion with an oncologist, I concluded that I had to forgo chemo therapy because the side effects had a good chance of rendering me bedridden for the rest of my life, if not dead. Consequently, surveillance was the only feasible follow-up. Given my prognosis and the stress I was feeling, I tendered my resignation and officially retired in January of 2001. When processing my retirement file, I made an interesting observation. During the period from August 1980 when I started at the University and August 2000 when I was hospitalized, I used only two sick days. For a twenty year stretch, I did not experience a serious illness.

Regrettably, other health issues quickly followed. In 2001 I fractured my femur, and in 2003, I fractured the same leg again. The latter occurred when I toppled out of my wheelchair while handing Sandy some get well cards when she was hospitalized for back surgery. In 2006, I had part of my hip joint removed because of an infection.

I had hoped that Sandy and I would be able to do some traveling around the country. Instead of traveling, I was limited to a more sedentary retirement life. I began pursing the goal of becoming a playwright/author, which resulted from the convergence of two experiences. The notion of becoming a playwright/author first arose during my undergraduate years at the University of Pittsburgh with encouragement from the late Abe Laufe, professor, and theater critic and historian, and other members of the English department faculty. They were impressed by a series of required personal essays that I wrote in freshman English. What they did not know, however, is that only one was a personal essay. After the first one was written, I had no more exciting things to write about. I had to resort to fiction and was creative enough that it was not detected. From my perspective, it underscored the lurking creative ability they admired. At the time, their attempts to persuade me to embark on a writing career were overridden by my commitment to St. Francis and my desire to support myself.

More recently, my interest was rekindled by Ceille Baird-Welch, a former student, dear friend, and playwright/author, who exposed me to the potential of the "theatre" as a social change agent. In 1994 she invited me to work with her when she was writing "On Wings of a Paper Crane." The play included some events from my dealings with my spinal cord injury. It was produced later that year in the Fine Arts Center in Camden, SC. It proved to be the pivotal experience that refocused my attention on creative writing.

I have written several plays and have submitted them to competitions around the country, which is what fledgling playwrights do. One of them titled, “The Privy War of Printz Cotton,” finished in first place in the 2003 “Carolinas’ Contemporary Playwrights Festival” in Charlotte, NC. Another play, “Love is Blind,” was selected for a reading by the Genesis Theatre Guild in New York City in 2004. Most recently, I have started to test the waters of short story writing.

And in Conclusion……

Over the years, I have known countless numbers of people with spinal cord injuries and other severe disabilities. Regrettably, only a few of them have had as rewarding and productive a life as me. The small successful group includes lawyers, judges, professors, business men and women, prosecutors, politicians, and even a cartoonist. Many of those who were not nearly as successful were just as capable as me and a few others. The big difference seems not to be so much about innate ability as it is about being surrounded by people who believed in us, advocated for us, and were willing to give us a chance to prove ourselves. Mom and Dad had it right when they put relationships with people at the top of their priority list.

My list of people is long, beginning with Mom and Dad who were unwilling to give up the fight. There were several physicians and other professionals, including Dr. Kessler, who charted the course for me to reach heights I never imagined possible, and Dr. Hohmann, who believed I deserved a chance in life and could make it to the top of the mountain. Dr. Safee, and Dr. Gerneth-Garboden fended off the “grim reaper’s” sythe. The best in nursing was represented by “Ski” at the Crippled Children’s Hospital in Newark, Karpy, my second mother at St. Francis, and Becky Leja, my personal cheerleader when I needed one. Betty Hunter-Vinson, OTR kept me sane at Woodrow Wilson, and Helen Hopkins, OTR at St. Francis doubled my functional ability with her creativity, enabling me to cope with the environment at Pitt. Thanks to Harold Potts, PT at Kessler, who taught me one of my most useful skills, i.e., how to fall out of my wheelchair without breaking every bone in my body. John Muldoon, Ph.D., the psychologist at St. Francis proved to be a tireless advocate who successfully cut through the Pitt bureaucracy to get me enrolled.

There was also a cadre of friends and good Samaritans who helped to keep me afloat when I was faced with major challenges. I can never forget the unnamed African-American who lifted me from the Staunton, VA street late at night. Pitt students Lon Bell and Gil Bartholomew managed to get me through the rain, ice, snow, and countless physical barriers during my early years at Pitt. Homesickness never plagued me due to the hospitality of the Whitney and Karns families.

I would be remiss if I did not mention the real heroes in my story. Without their sacrifices I would not be here. They were the few thousand servicemen who became spinal cord injured from gunshot and other wounds during World War II. Prior to the war, only about 30 percent of the people experiencing spinal cord injury survived more than three years, and very few ever left the hospital. World War II, however, was a milestone in the treatment of spinal cord injuries. Because of the advent of sulfa drugs, penicillin and improvements in battlefield medicine, those with spinal cord injuries began surviving and arriving at military hospitals in significant numbers.

Physicians serving in the military scrambled to get a grip on this severely disabled population. Through a combination of trial and error, intuition, and the best practices they could glean from journals, they began using interdisciplinary teams of therapists, physicians, and nurses to treat these servicemen. In essence, these veterans became involuntary research subjects. Using these spinal cord injured G.I.s, Air Force physician Howard Rusk and Navy physician Henry Kessler developed and refined therapeutic approaches and goals for treating this problem. As a consequence of these advances in treatment, 20 years after the war, more than 80 percent of those injured in the war were still surviving.

Moreover, these physicians applied their knowledge to the civilian population after the war. Dr. Rusk, for example, had a regular column in the New York Times which he used to promote the rehabilitation concepts that had been developed and refined for treating the war injured servicemen. I had the good fortune to fall under Dr. Kessler's care and Dr. Tom Hohmann was one of the early students trained by Dr. Rusk. They were able to salvage me because of the experience gained from the war veterans

Of course, you must realize the role that my wife Sandy played. She is the one who put purpose and meaning back in my life. There is little doubt that I would not have endured for the long term without her love and support.

It takes a special person to see beyond the wheelchair. I am grateful for the many who have helped me to make the best out of the difficult situation an innocent kid plunged into on one fall day.

The end

Addendum


[illegible]
[illegible]
[illegible]
Fishersville, Va.

FISHERSVILLE
1957
VA.

UNITED STATES POSTAGE
THREE 3 CENTS

Miss Carole Johnson
731 Mort Hall
State Teachers College
Slippery Rock, Penna.

Letters from the Past

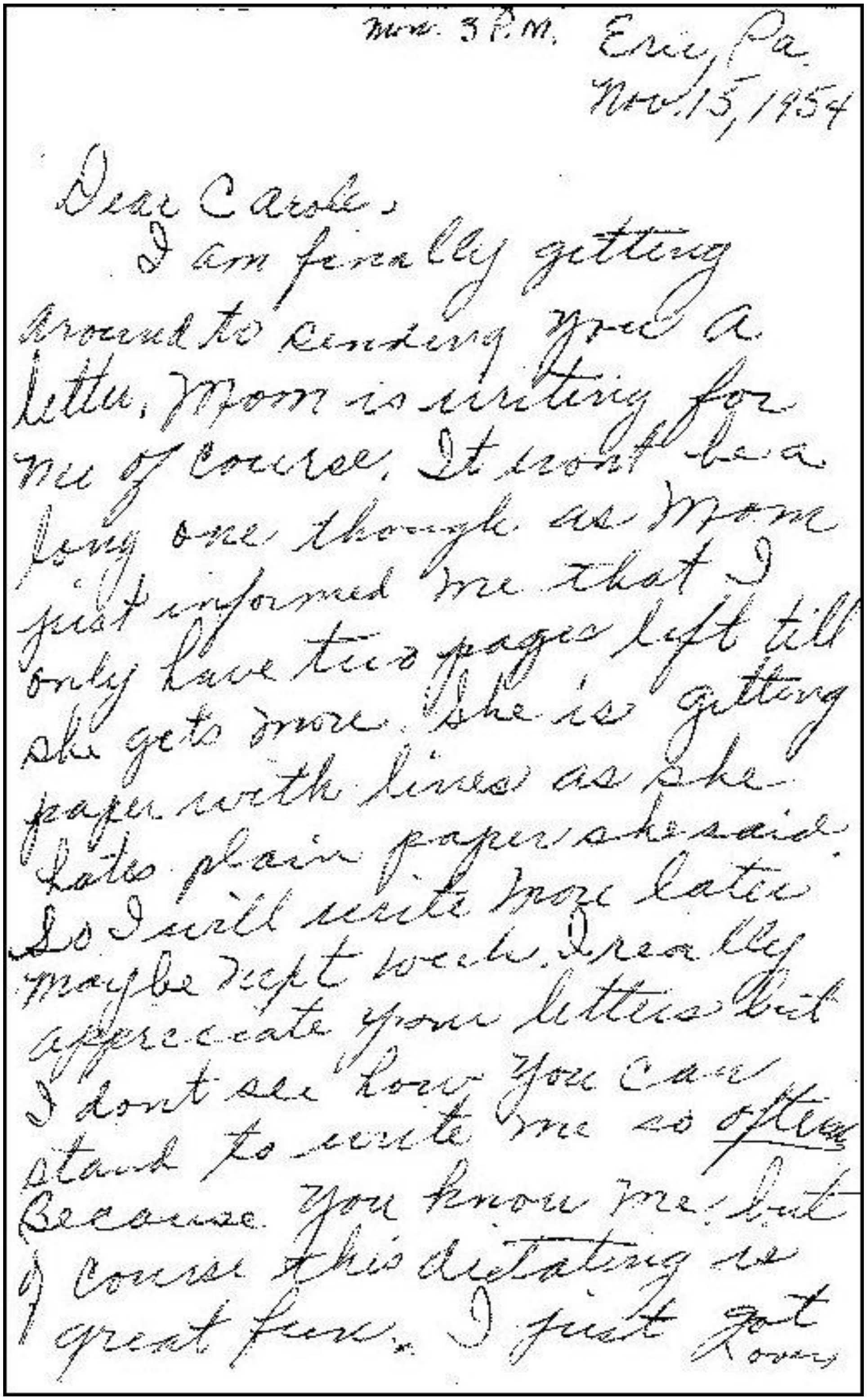
As I was finishing my autobiography, I mentioned it to one of my high school classmates who, in turn, mentioned what I was doing to another classmate. Soon the second classmate and were in touch Much to my surprise she had kept some letters that I had written to her following my trampoline accident. From the onset, Carole Johnson Peterson regularly wrote to me to keep me posted on school and other home town news, and when she went on to college she continued to write. Occasionally I wrote back and she kept the letters. She returned the collection of 13 letters that span the period from November 15, 1954, three weeks after my injury, to January 14, 1958, which was about four months after I finished technical school.

The letters have provided insight into how I was coping during that 5 years of downs and ups that ended with a failed attempt to become employed. As a draftsman. Just seeing my handwriting from those early days brought back old memories. I can now recall struggling to re-learn how to write with my dysfunctional hands in occupational therapy at Kessler. Logically, it seemed that a ballpoint pen would work best. However, the idea was abandoned because the pens were too short to secure in my fingers, and their easy movement on the paper made them difficult to control. Eventually that idea was scrapped and I began working with a longer lead pencil. Securing it in my hand was possible, but I could not press the pencil to the paper with much force. In the end, the best I could do was to write with a pencil that had soft lead. I did not learn to write two-handed until I was about to leave Kessler. Eventually I could write with precision using both hands but that was not practical for writing letters. When I was at Kessler and in technical school at Woodrow Wilson, the dorm rooms did not have desks. Consequently, I wrote letters on a box lid that I placed on my lap. I needed one hand to stabilize the paper and box lid so I had to resort to the one-handed technique learned at Kessler.

Because of the light, sometimes smudged soft pencil writing and yellowed paper, it was a real challenge getting readable images to attach to my autobiography. I have done the best I could but the natural appearance has been altered somewhat. I have included one letter from each year of the spanned period for your perusal. For me, the letters have provided an engrossing look back, and are a most unexpected and highly appreciated gift.

This is one of the first letters I sent. Mom wrote it for me. It was three weeks after my injury and everyone's hopes for recovery were still quite high. I was already quite discouraged and apprehensive but did not want to alarm Mom.

Letter 1, page 1

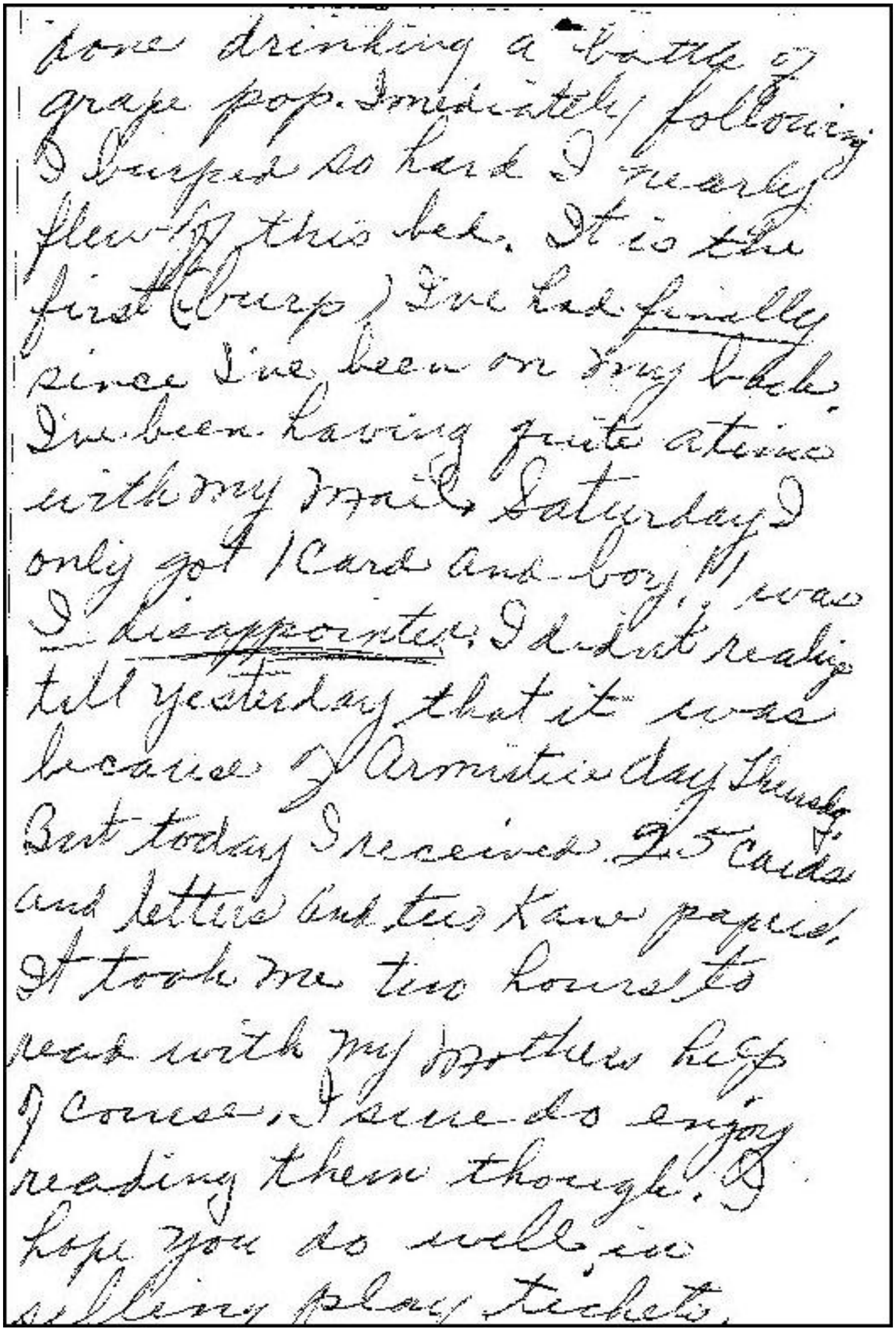


Mon. 3 P.M. Erie, Pa.
Nov. 15, 1954

Dear Carole,

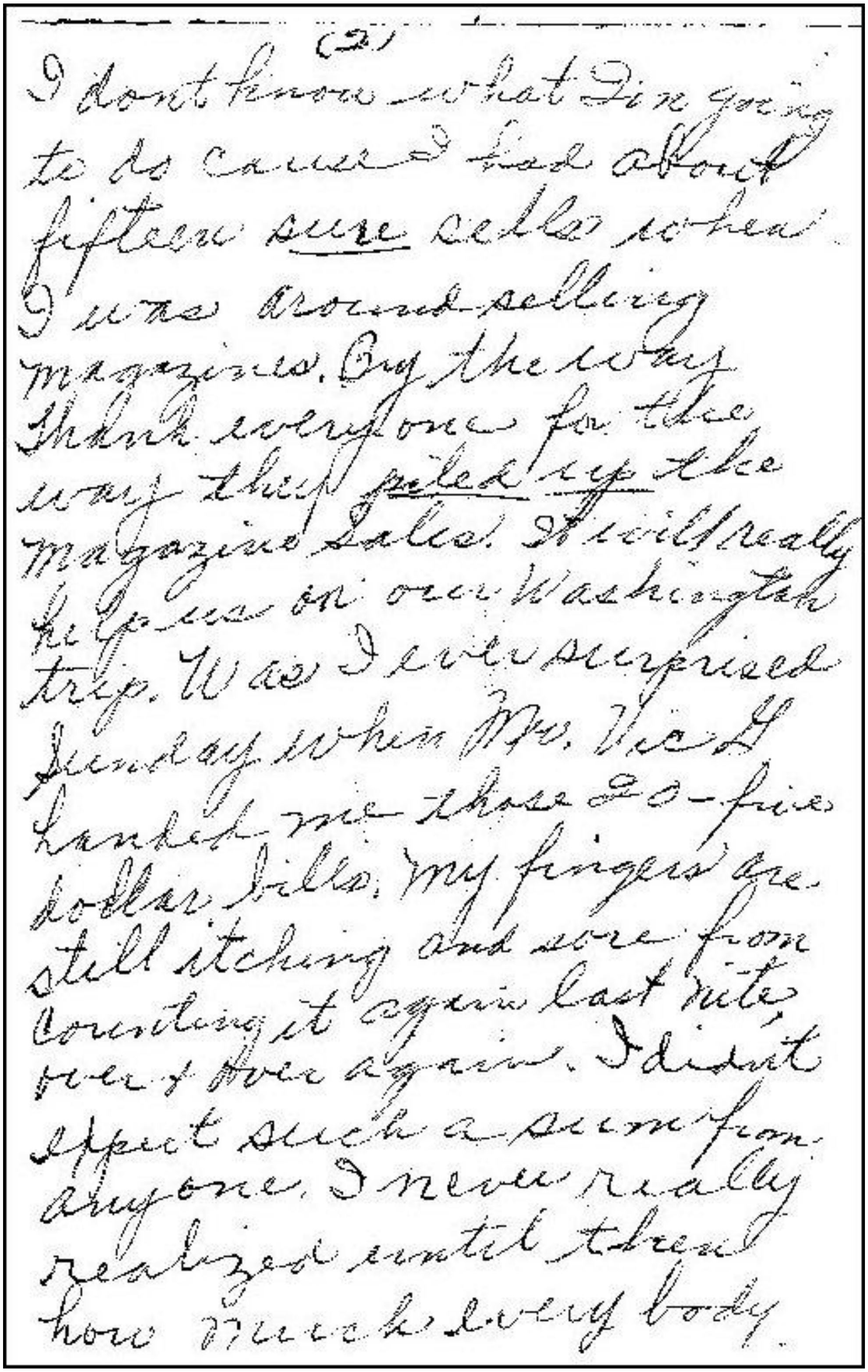
I am finally getting around to sending you a letter. Mom is writing for me of course. It won't be a long one though as Mom just informed me that I only have two pages left till she gets more. She is getting paper with lines as she hates plain paper she said. So I will write more later maybe next week. I really appreciate your letters but I dont see how you can stand to write me so <u>often</u>. Because you know me. but of course this dictating is great fun. I just got Rosary

Letter 1, page 2



done drinking a bottle of
grape pop. Immediately following
I burped so hard I nearly
flew off this bed. It is the
first (burp) I've had finally
since I've been on my back.
I've been having quite a time
with my mail. Saturday I
only got 1 card and boy, was
I disappointed. I didn't realize
till yesterday that it was
because of Armistice day Thursday.
But today I received 25 cards
and letters and two Kane papers.
It took me two hours to
read with my mothers help
of course. I sure do enjoy
reading them though. I
hope you do well in
selling play tickets.

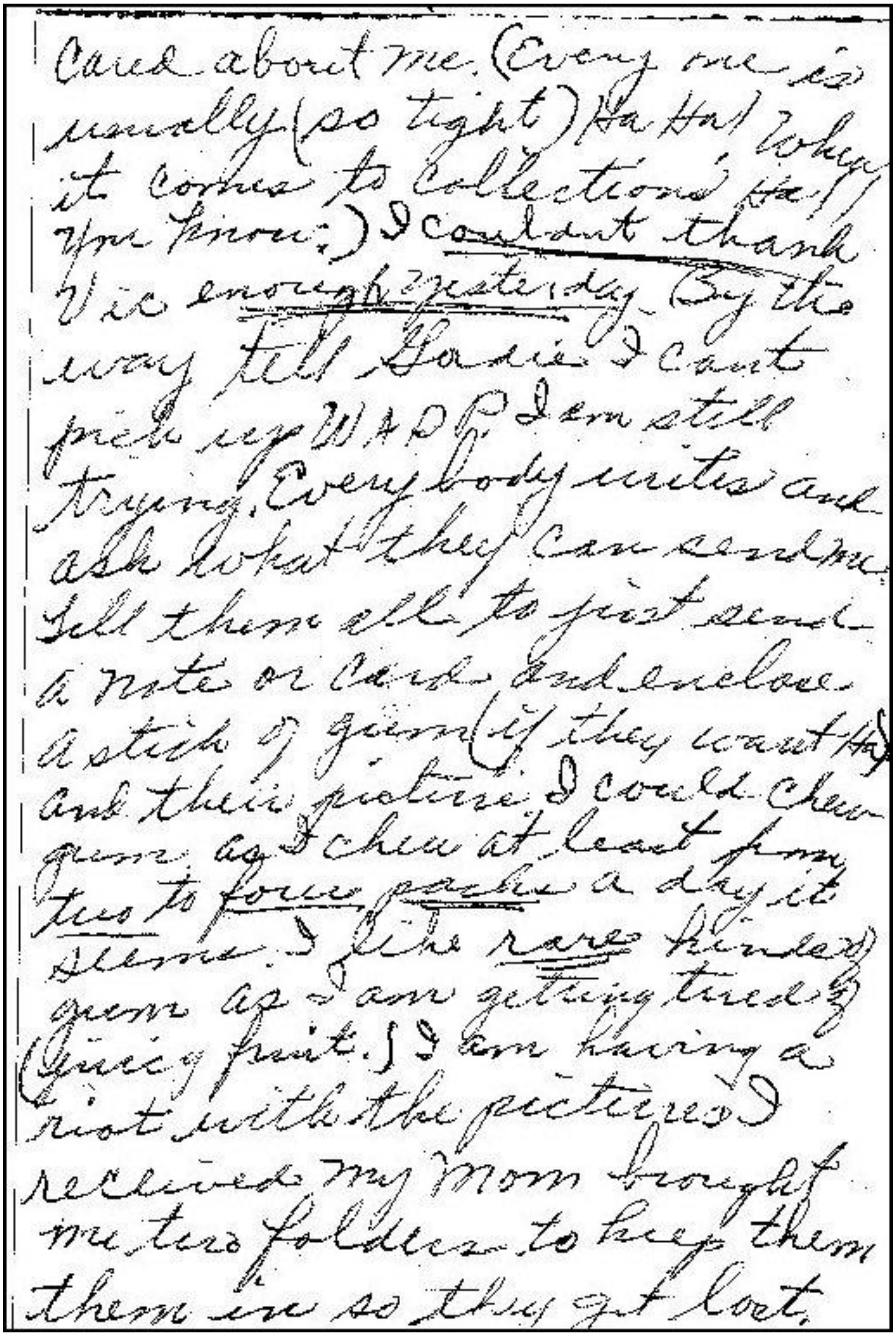
Letter 1, page 3



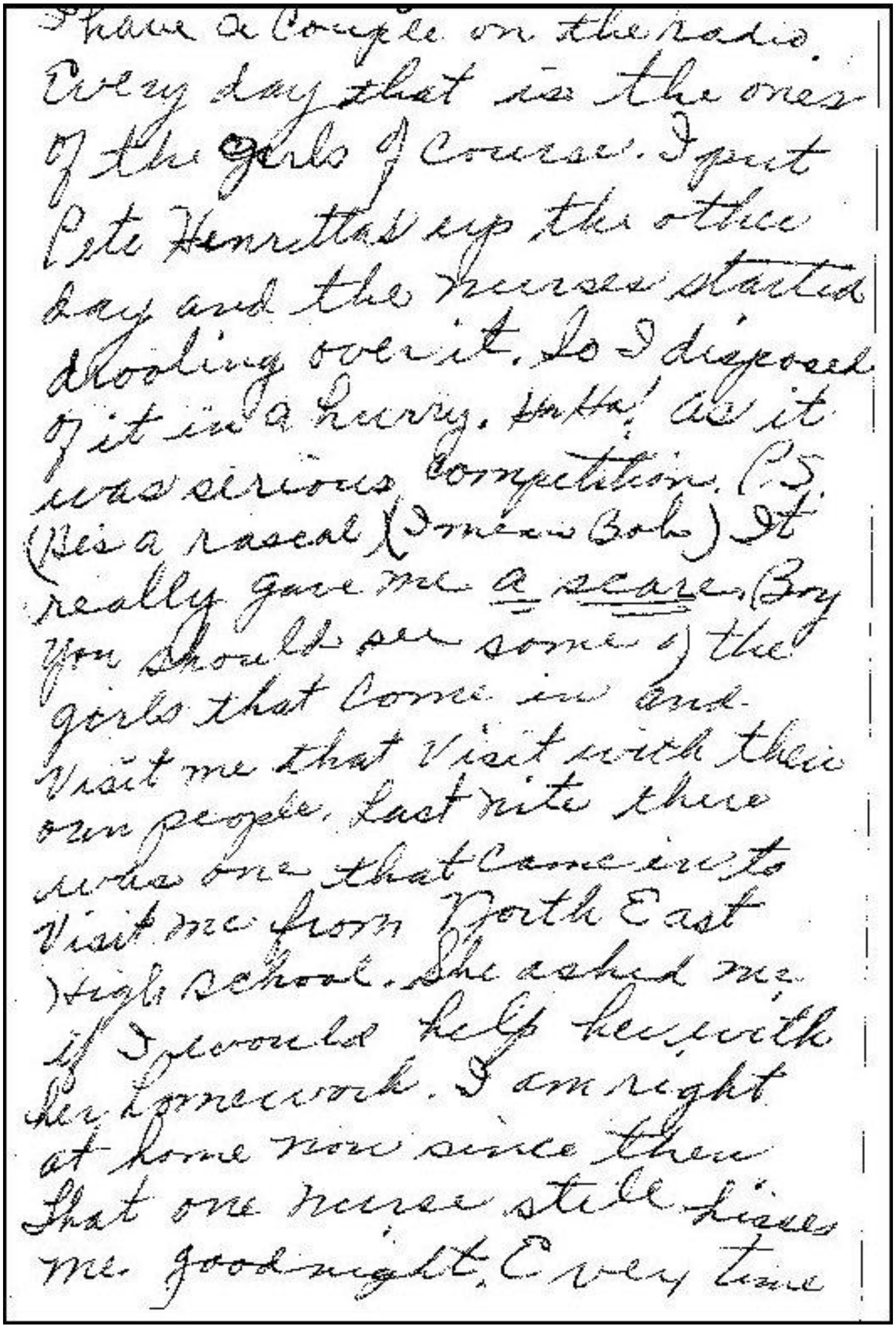
(2)

I dont know what I'm going to do cause I had about fifteen _sure_ sells when I was around selling magazines. By the way Thank everyone for the way they _piled up_ the magazine Sales. It will really help us on our Washington trip. Was I ever surprised Sunday when Mr. Vic G handed me those 20-five dollar bills. My fingers are still itching and sore from counting it again last nite, over & over again. I didnt expect such a sum from anyone. I never really realized until then how much every body

Letter 1, page 4

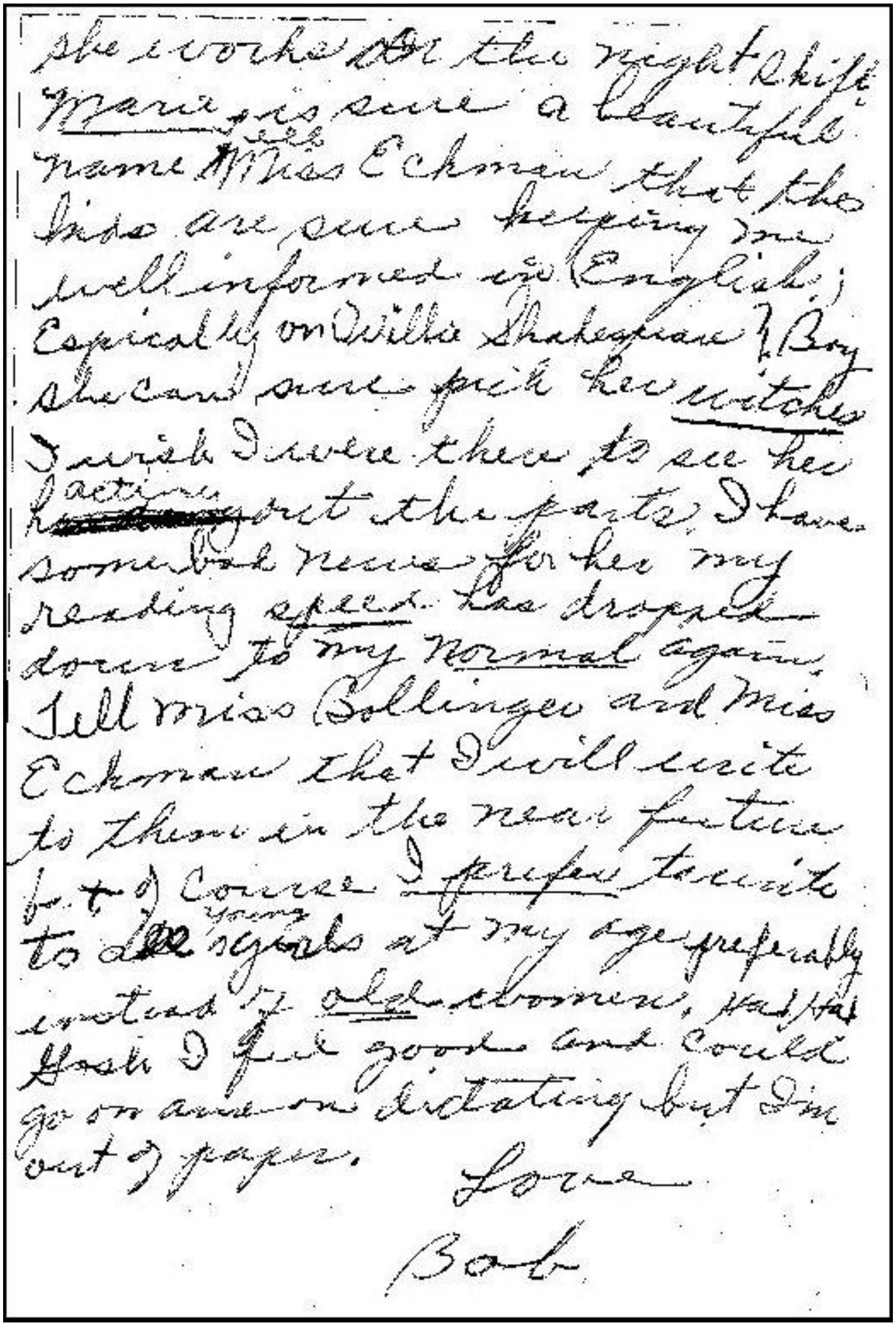


Cared about me. (Every one is usually (so tight) Ha Ha! when it comes to collections Ha!! you know;) I <u>couldnt</u> thank Vic <u>enough</u> yesterday. By the way tell Gassie I cant pick up WADP. I am still trying. Everybody writes and ask what they can send me. tell them all to first send a note or card and enclose a stick of gum (if they want to) and their picture. I could chew gum as I chew at least from <u>two</u> to <u>four</u> <u>packs</u> a day it seems. I like <u>rare</u> kinds of gum as I am getting tired of (Juicy fruit.) I am having a riot with the pictures I received. My Mom brought me two folders to keep them them in so they get lost.



I have a Couple on the radio
Every day that is the ones
of the girls of course. I put
Pete Henrittas up the other
day and the nurses started
drooling over it. So I disposed
of it in a hurry. haha! as it
was serious competition. P.S.
(He's a rascal (I mean Bob) It
really gave me a scare. Boy
you should see some of the
girls that come in and
visit me that visit with their
own people. Last nite there
was one that Came in to
Visit me from North East
High school. She asked me
if I would help her with
her homework. I am right
at home now since then
That one nurse still kisses
me goodnight. Every time

Letter 1, page 6



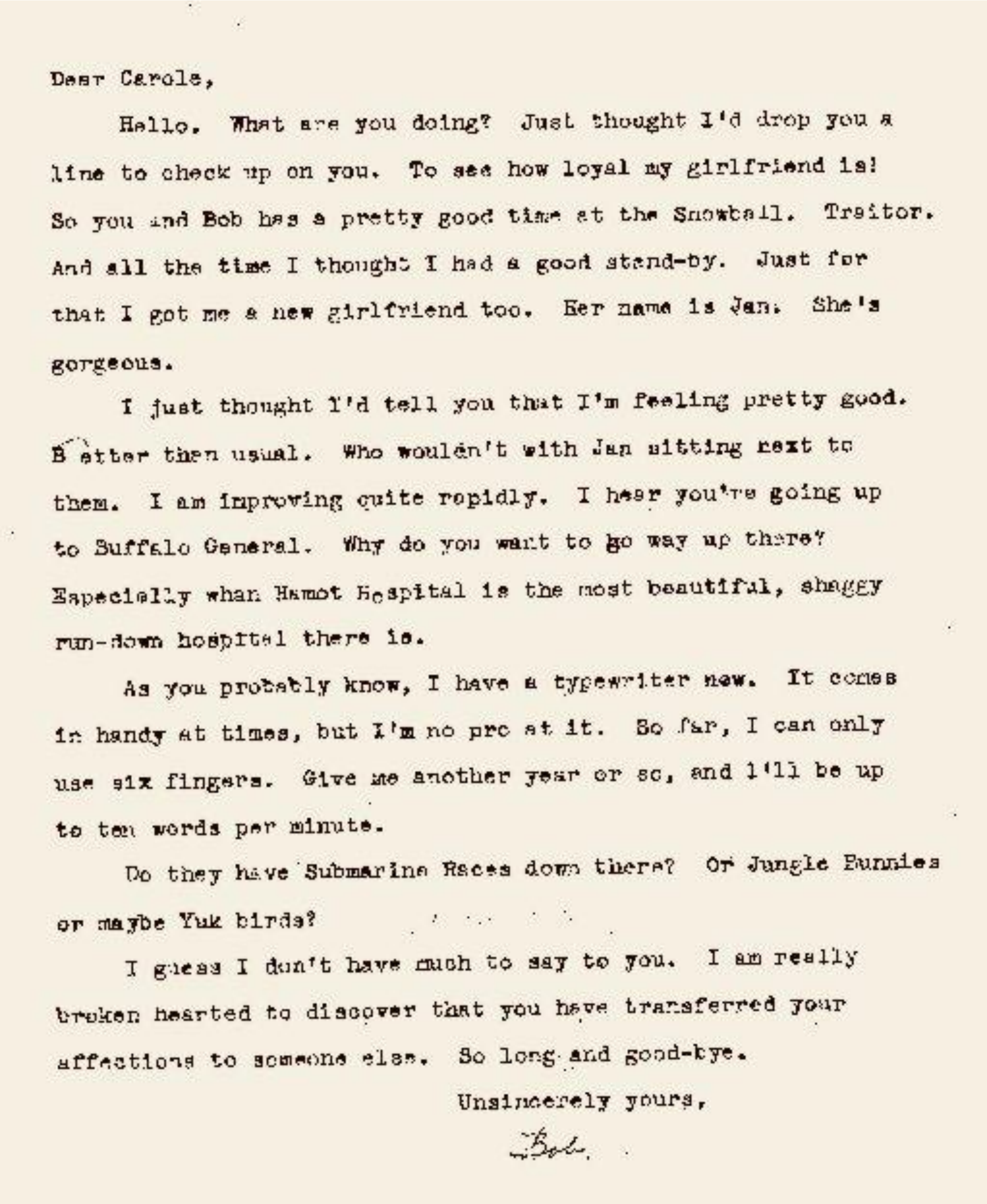
she works ~~on~~ the night shift
Marie is sure a beautifull
name tell ~~M~~ Miss Eckman that the
kids are sure keeping me
well informed in English;
Espically on Willie Shakespeare ! Boy
she can sure pick her witches
I wish I were there to see her
acting out the parts, I have
some bad news for her my
reading speed has dropped
down to my Normal again,
Tell miss Bollinger and Miss
Eckman that I will write
to them in the near future
but of Course I prefer to write
to ~~all~~ young girls at my age preferably
instead of old women, Ha, Ha
Gosh I feel good and could
go on and on dictating but I'm
out of paper.

Love

Bob.

Letter 2 (mailed February 18, 1955 from Hamot Hospital)

The letter reflects the anger and depression that I was feeling after hope of recovery had evaporated. I was striking out at Carole and everyone else. I was actually feeling very bad and typing by clutching some kind of handle the nurses found between my two hands.and pounding the keys The girlfriend was pure fiction. The old manual typewriter was a gift from another patient's husband who had befriended me.



Dear Carole,

Hello. What are you doing? Just thought I'd drop you a line to check up on you. To see how loyal my girlfriend is! So you and Bob has a pretty good time at the Snowball. Traitor. And all the time I thought I had a good stand-by. Just for that I got me a new girlfriend too. Her name is Jan. She's gorgeous.

I just thought I'd tell you that I'm feeling pretty good. B etter then usual. Who wouldn't with Jan sitting next to them. I am improving quite rapidly. I hear you're going up to Buffalo General. Why do you want to go way up there? Especially when Hamot Hospital is the most beautiful, shaggy run-down hospital there is.

As you probably know, I have a typewriter now. It comes in handy at times, but I'm no pro at it. So far, I can only use six fingers. Give me another year or so, and I'll be up to ten words per minute.

Do they have Submarine Races down there? Or Jungle Bunnies or maybe Yuk birds?

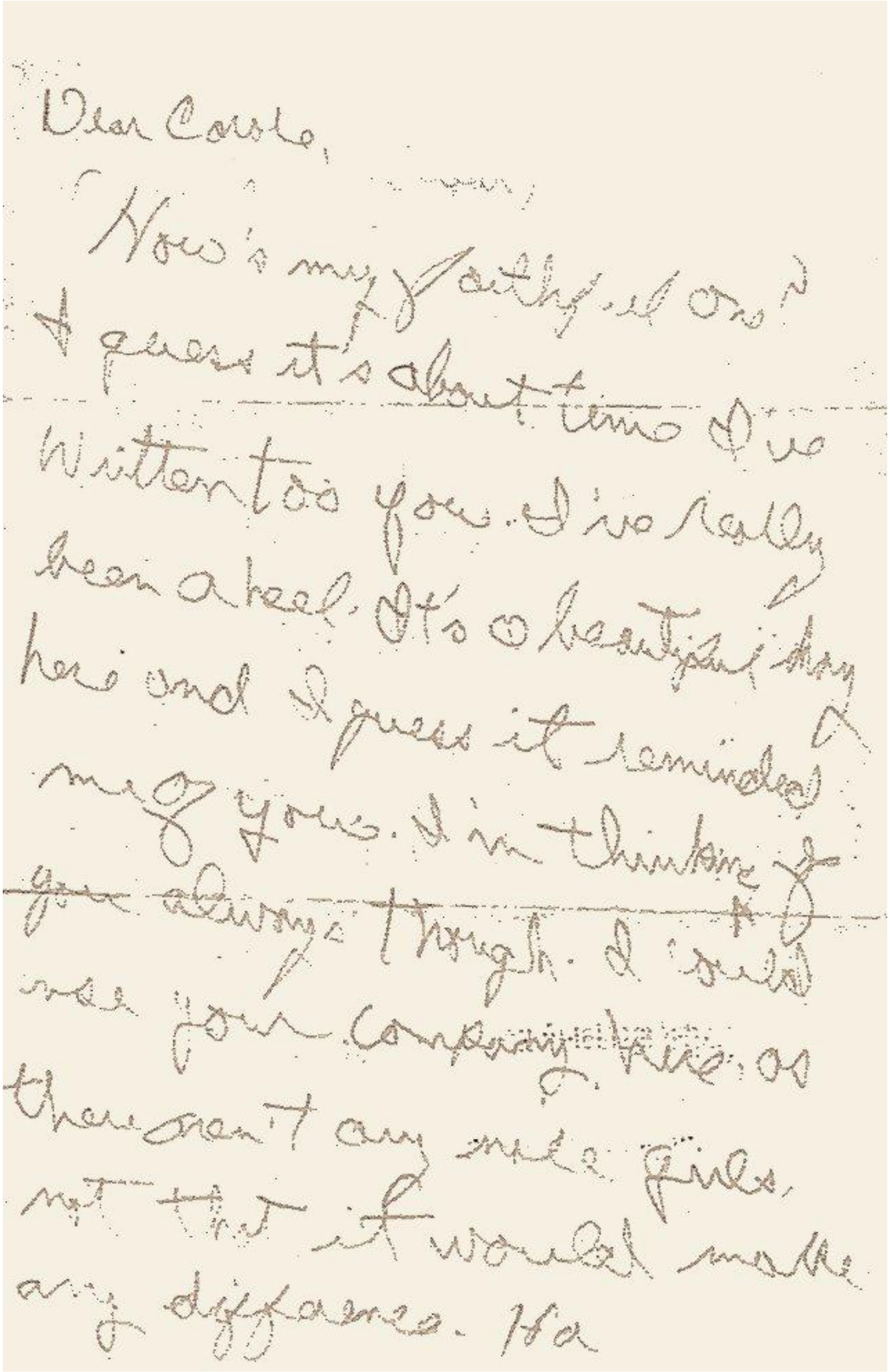
I guess I don't have much to say to you. I am really broken hearted to discover that you have transferred your affections to someone else. So long and good-bye.

Unsincerely yours,

Bob

Letter 3, page 1 (mailed from Kessler March 12, 1956)

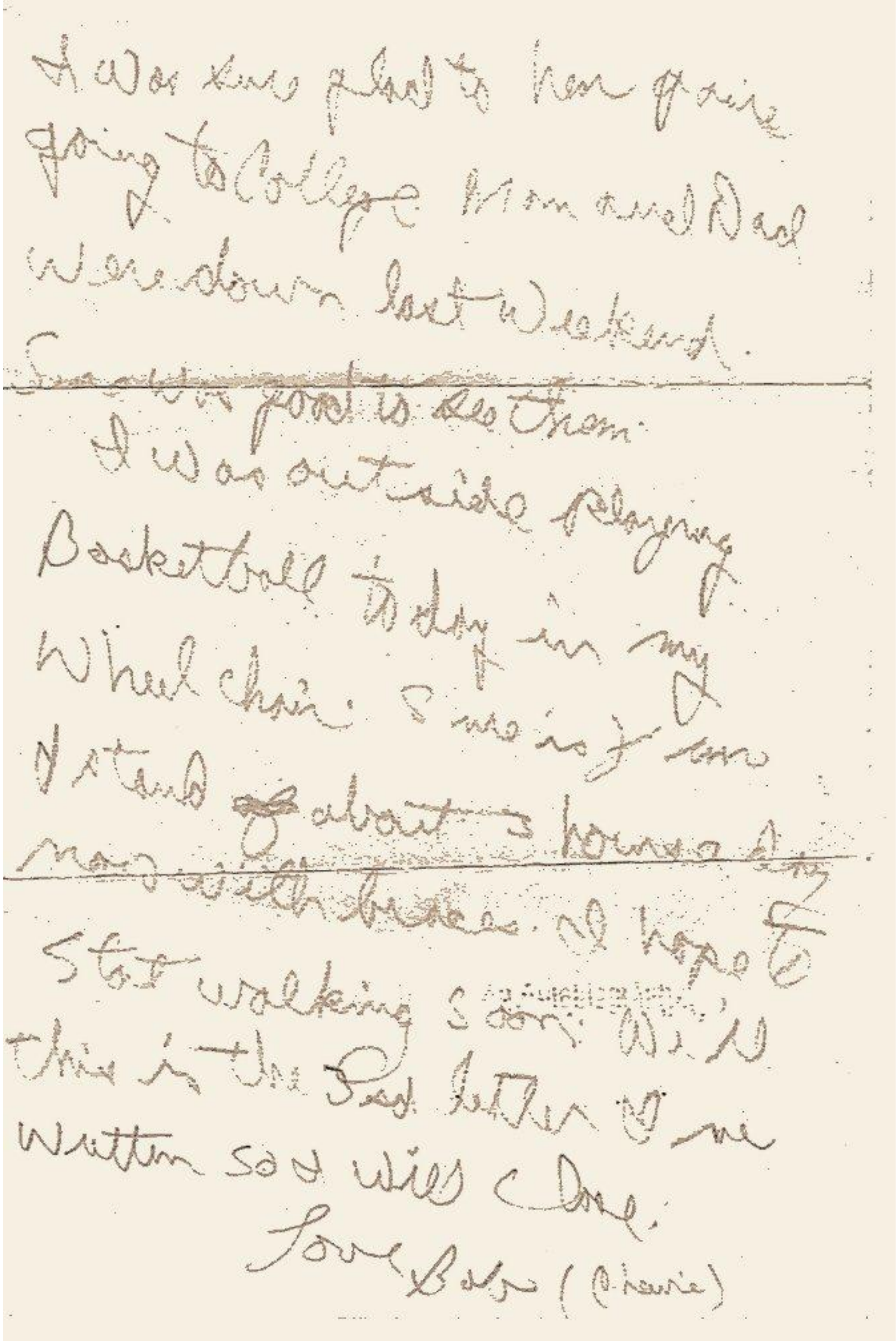
Although I was doing quite well in terms of my functioning, I was feeling the loneliness that my injury brought. Three months earlier had scrapped the idea of walking but was continuing to present a rosy façade.



Dear Carole,

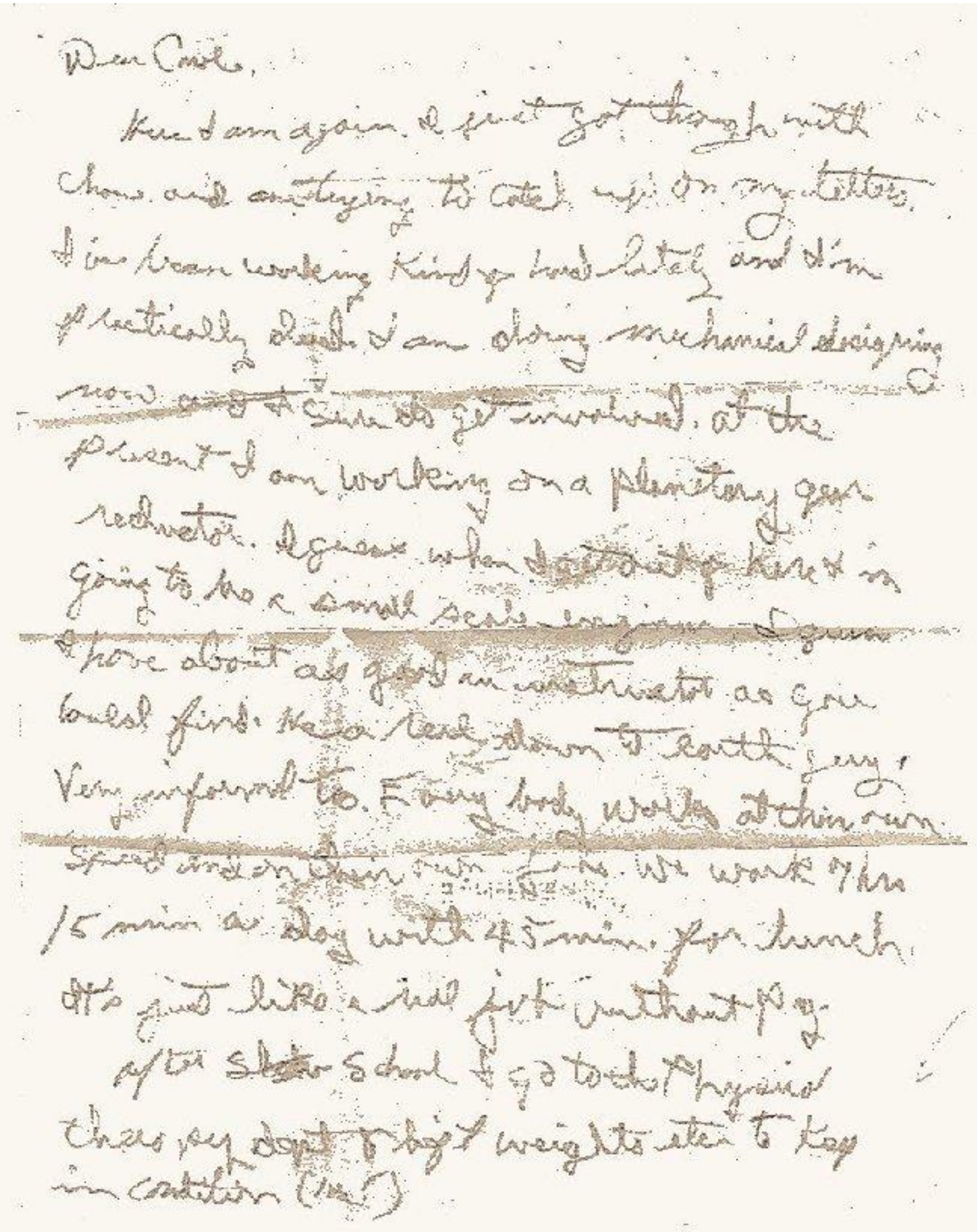
How's my Kathy doll? I guess it's about time I've written too you. I've really been a heel. It's a beautiful day here and I guess it reminded me of you. I'm thinking of you always though. I could use your company here as there aren't any nice girls, not that it would make any difference. Ha

Letter 3, page 2



I was sure glad to hear you're
going to College. Mom and Dad
were down last weekend.
Sure was good to see them.
I was outside playing
Basketball today in my
Wheelchair. Since I can
stand about 3 hours a day
now with braces. I hope to
start walking soon. Well
this is the best letter I've
written so I will close.
Love Bobo (Charlie)

Letter 4, page 1 (mailed from Woodrow Wilson, March 12, 1957)



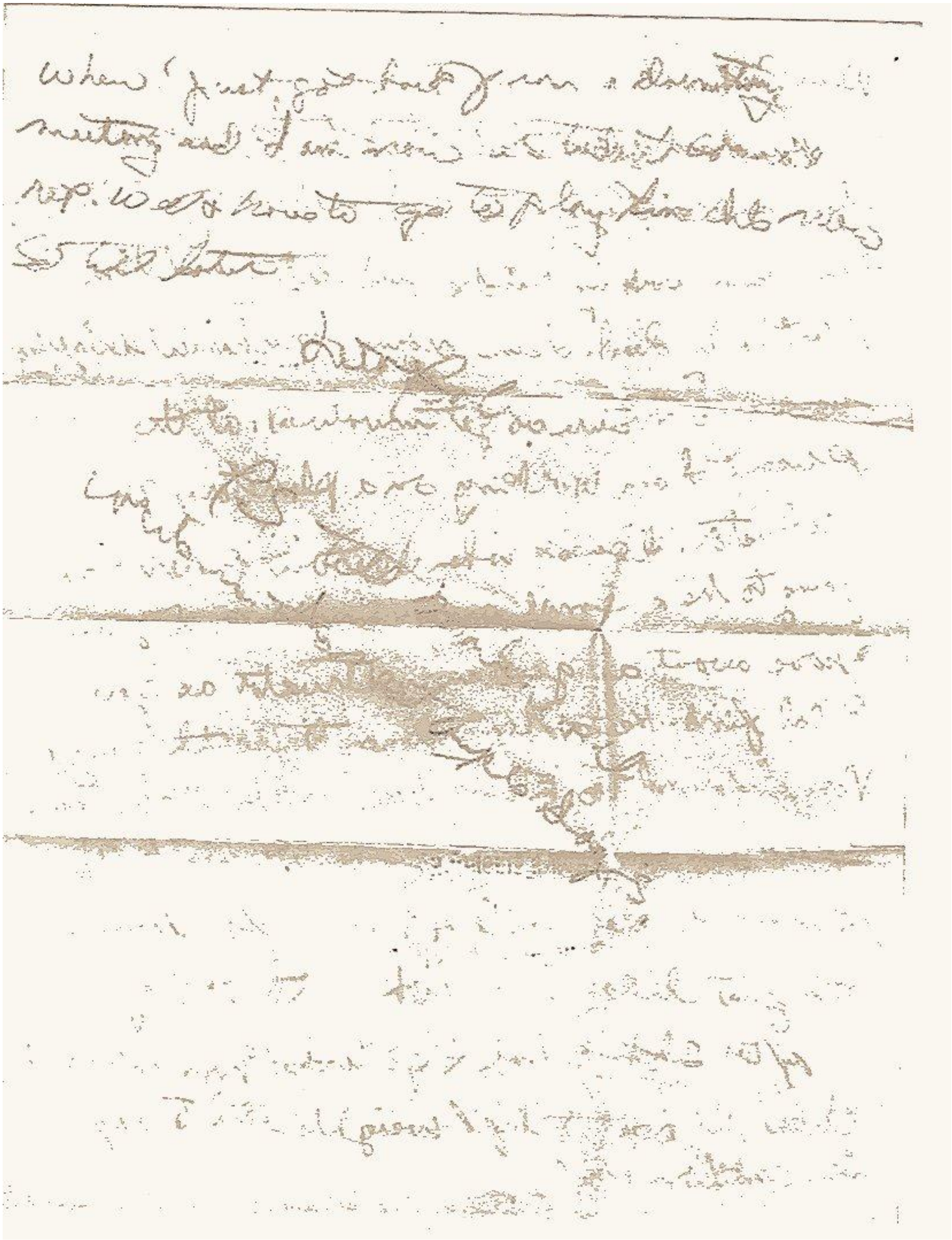
Dear Carole,

Here I am again. I just got through with chow and am trying to catch up on my letters. I've been working kind of hard lately and I'm practically dead. I am doing mechanical designing now ~~and I~~ I sure do get involved. At the present I am working on a planetary gear reductor. I guess when I get out of here I'm going to be a small scale engineer. I guess I have about as good an instructor as you could find. He's a real down to earth guy. Very informal too. Everybody works at their own speed and on their own jobs. We work 7 hrs 15 min a day with 45 min. for lunch. It's just like a real job without pay.

After ~~State~~ School I go to the Physical therapy dept. & lift weights etc. to keep in condition (ha!)

Letter 4, page 2

Translation: Whew! I just got back from a dormitory meeting and I am now a student council rep. Well I have to go to play pinochle. (angle) P.S. Tell Marlene [Carole's roommate] that I will write to her in a couple days.

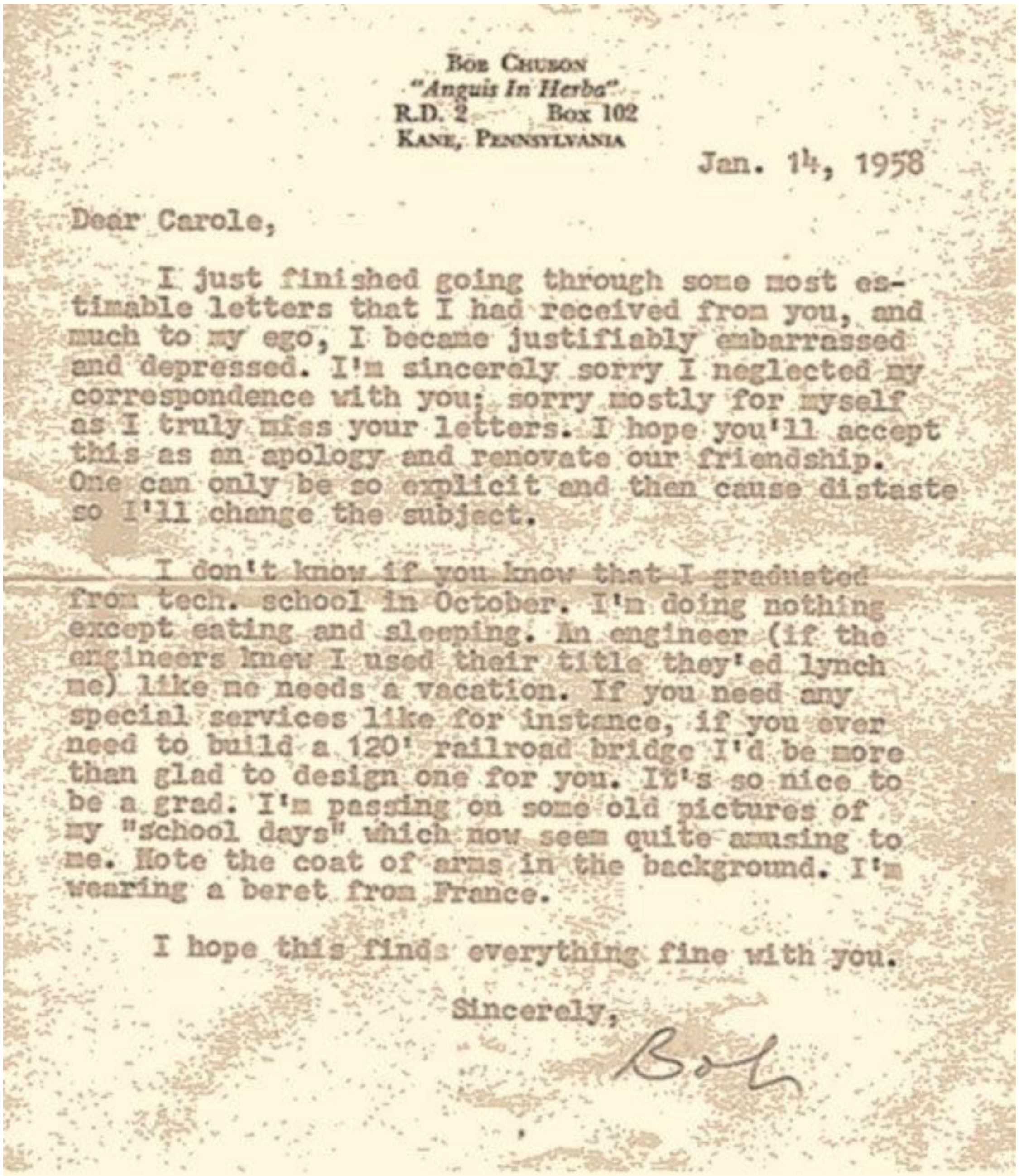


Whew! just got back from a dormitory
meeting and I am now a student council
rep. Well I have to go to play pinochle. Will
[illegible] later

[illegible]

Letter 5

This was written about four months after I graduated from tech school. The loneliness I was feeling when again isolated on the farm probably prompted me to write. The second paragraph is pure sarcasm, stemming from the realization that employment and independence were not in my future. I was now able to press the manual typewriter keys with the eraser end of a pencil wedged between some of my fingers. Note the classy novelty stationary that I got as a “free gift” with something I purchased through a mail order. Latin phrase, “*snake in the grass*.



BOB CHUSON
"Anguis In Herba"
R.D. 2 Box 102
KANE, PENNSYLVANIA

Jan. 14, 1958

Dear Carole,

I just finished going through some most estimable letters that I had received from you, and much to my ego, I became justifiably embarrassed and depressed. I'm sincerely sorry I neglected my correspondence with you; sorry mostly for myself as I truly miss your letters. I hope you'll accept this as an apology and renovate our friendship. One can only be so explicit and then cause distaste so I'll change the subject.

I don't know if you know that I graduated from tech. school in October. I'm doing nothing except eating and sleeping. An engineer (if the engineers knew I used their title they'ed lynch me) like me needs a vacation. If you need any special services like for instance, if you ever need to build a 120' railroad bridge I'd be more than glad to design one for you. It's so nice to be a grad. I'm passing on some old pictures of my "school days" which now seem quite amusing to me. Note the coat of arms in the background. I'm wearing a beret from France.

I hope this finds everything fine with you.

Sincerely,

Bob

The Chubons

Back row (left to right) My wife Sandy, my sister Joyce, and Dick's wife Donna. Front Row: Me, my brother Dick, and my sister Sandy.