



Evergreen Spina Bifida Association Newsletter

ESBA has many reasons to thank its members

by Ed Kennedy, ESBA President

Hi Everyone. As summer is turning to fall, I'd like us to take a look around and see how much we've accomplished!!! Both personally and as an organization, I see signs of change throughout Evergreen Spina Bifida Association (ESBA) and our "mother" organization the Spina Bifida Association. Even in both our names there is change happening. In national's name the "of America" has been dropped to show a more worldwide focus and locally we now know that we will no longer be known as "Evergreen Spina Bifida Association." Our new name is narrowed down to two possibilities and as our Treasurer, Jon Tutt, has stated in his

newsletter article, we (meaning the Executive Committee and Board of Directors) do not want to make this decision without giving our members every opportunity to speak up on this issue. We know it is a decision that will likely affect our work both positively and negatively in the future, so we once again want your input. (See Jon's article for how you can take part in this huge decision). I would also like to thank our Vice President, Joe Nugent, for his continued work on this issue and spearheading this movement toward compliance with the national SBA. On a more personal note I can say that I feel change within ESBA in each and

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New address!

**EVERGREEN SPINA
BIFIDA ASSOCIATION
SERVING WASHINGTON,
OREGON, IDAHO,
MONTANA & ALASKA**

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evergreensba@yahoo.com

Newsletter Editor
Celeste McCormick

Association name change: Make your vote count!

By Jonathan A Tutt, ESBA Treasurer

It has become obvious, painfully so to some, that we must change our name, if we are to remain affiliated with the national SBA to comply with their concept of "branding." We are the only chapter nationwide that has not yet changed its name. Therefore it is no longer a matter of *if* we change, but *to what* do we change it?

Over the last several months the Board, mostly through our Vice President Joe Nugent, has solicited ideas from all the members about their thoughts on the new name. Many were suggested and many votes were taken. From the many ideas and thoughts and votes the two most popular ones are: **SBA of the Northwest** and **SBA of the Great Northwest**.

It is now time to decide between them. Which one do you like the best? Please vote one more time. Send an email to the association Secretary at evergreensba@yahoo.com or drop a line in the US Mail to our new regular mailing address: Evergreen Spina Bifida Association, c/o Jonathan A. Tutt, 2128 N Pines Rd, Ste 17-2, Spokane, WA 99206. Ballots will also be distributed via US mail and email.

Please note that our PO Box in Sumner will be closed in the near future, so do not send it there. The name receiving the highest number of votes between now and the next board meeting on November 9 2006 (when the vote total will be tallied) will be selected as our new name. So even if you have voted on this before, please take the time to vote one more time to **MAKE YOUR VOTE COUNT!!**

Do you have a story to share about an ESBA member? You can write it yourself or give the idea to the newsletter editor. Contact ESBA to get started!

GETTING TO KNOW YOU: SUSAN CURALLI

Meet Susan Curalli, a 42-year-old woman and mom of Alex, her 17-year-old daughter. Susan met Ed Kennedy (ESBA President) way back about 1984 where she helped Ed “hit the slopes” on Mt. Spokane in the adaptive down hill ski program. Susan lives independently with the help of an in-home caregiver and enjoys ceramics, movies, music, reading and doing volunteer work when her health permits. Susan was instrumental in assisting Ed in starting the Spokane Cluster of ESBA.



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VOLUNTEER NEEDED! ESBA SEEKS A LIBRARIAN.

Contact ESBA if you are interested in contributing your talents to this important organization.

ESBA BOARD MEETING MINUTES are available upon request from Secretary Nancy Nugent at MTgrandmabear@yahoo.com

Send all ESBA financial paperwork to Evergreen Spina Bifida Association c/o Jonathan A. Tutt 2128 N Pines Road Suite 17-2 Spokane WA 99206

ESBA NEWS

Brian Knowles was elected Chairperson of the ESBA Board of Directors.

*

ESBA applied for and received a \$1000 Awareness Campaign Grant from the national Spina Bifida Association. This grant provides a significant opportunity for ESBA to increase awareness of both the Association and its mission.

*

Vice President Joe Nugent, who is already a member of the national Spina Bifida Association’s Awareness Committee, was recently accepted to its committee for Group Member Awards.

Vietnam Veterans urged to seek disability claims under new law

Released by the House Veterans' Affairs Committee Ranking Member Evans and distributed by the Leaders Online community of SBA

WASHINGTON, D.C., Sept. 6, 2006 – Rep. Lane Evans (D-IL), ranking Democratic member of the House Veterans' Affairs Committee and senior Member of the House Armed Services Committee, urges veterans and their survivors who may have been exposed to Agent Orange in the territorial waters of Vietnam to file claims for disability compensation with the Department of Veterans Affairs (VA) in light of a recent decision of the United States Court of Appeals for Veterans Claims. VA has 60 days to decide whether or not to appeal the decision.

In *Haas v. Nicholson*, the Court held that veterans who served in the waters offshore of Vietnam and who contracted a disease related to exposure to Agent Orange type herbicides did not have to prove that they stepped on the land of Vietnam in order to qualify for compensation.

"I want to make veterans and military families aware of their potential eligibility for service-connected compensation as the result of this court decision. It is important for veterans and survivors to apply for benefits now, so that their eligibility can be evaluated under the court ruling," said Evans. "Under earlier VA Agent Orange regulations, which were later invalidated, some veterans lost benefits because they never applied for them. I do not want to see that happen again," continued Evans.

Evans recommends that veterans who received the Vietnam Service Medal or who served in the territorial waters off Vietnam file a claim for service-connection of disabilities that have been associated with exposure to Agent Orange. Examples of these disabilities include: Chloracne, Type 2 Diabetes, Hodgkin's Disease, Chronic lymphocytic leukemia, Multiple myeloma, Non-Hodgkin's lymphoma, Porphyria cutanea tarda, Prostate cancer, Respiratory cancers and Soft tissue sarcomas. Survivors of veterans who died from such disabilities may be eligible for VA-provided Dependency and Indemnity Compensation, as well.

"I hope this information will be useful to veterans and their survivors. I also encourage the VA to work with veterans seeking assistance in filing service-connection claims for bene-

If you have any comments or suggestions about the newsletter, please send them to Evergreensba@yahoo.com.

Additional information concerning the case may be found on the Web site of the National Veterans Legal Services Program:

www.nvlsp.org/Information/ArticleLibrary/AgentOrange/AO-hassvnicholson.htm

ESBA President appreciates members' contributions

(Continued from page 1)

every Board of Directors meeting that we have every other month. There is lively discussion on almost every issue that is brought to the Board and thoughtful decisions being made by what I hope is a better representation of you – our members. In our most recent Board Meeting, Brian Knowles, a long-time active member of ESBA was elected to the office of Board Chair. We congratulate Brian on this and look forward to good things happening under his leadership. I also want you to remember that you as a member can take

part in our Board of Directors meetings by notifying me or another board member of your desire to do so and then you will be given the information about how to participate in the telephone conference call. If you have something you would like to share with the board then you might want to get in touch with the Board of Directors Chair Brian Knowles or myself so your topic can be added to the agenda. As the old adage goes – let's just keep on keeping on – all we need to do is stay the course and I believe good things are in store for ESBA in the future.

TRANSITION/SEPARATION ISSUES FOR THE PERSON WITH SPINA BIFIDA

This is the first of several articles excerpted from the soon-to-be published work of David B. Shurtleff, MD, Carole Sobkowiak, FCSP, SRP, Society for Research into Hydrocephalus and Spina Bifida, and William Walker, MD, University of Washington. A complete bibliography is available upon request.

We recommend that caretakers actively encourage the child with a disability to explore their environment; allow the infant or young toddler to fetch their own toys or desired articles.

This "retreat" [to a wheelchair] must be a depressing event for children brought up to believe ambulation is an important goal to achieve and keep.

...The transition from childhood to adulthood requires an infant or child to progress through stages of development, and to learn age-appropriate skills of independence, self care and social interactions to achieve autonomy. Families teach some of these skills and children learn some without being formally taught. Anyone caring for a child, including those with a disability, should consider reviewing and understanding each developmental "touchpoint."

Erickson (1950) and Piaget (1929) described the need for appropriate early infancy and childhood

learning within a social context in order to develop an intact, functional personality later in life. To become a competent adult, they state a child must understand society's emphasis on attainable goals. ... This series of articles will discuss the skills that infants and children should master for them to develop into competent teenagers and adults. Each subsection will suggest, in our opinion, how rearing a child with impairment can be modified, facilitating acquisition of these requisite skills at approximately the same age as children without disabilities.

INITIAL CONTACT AND COUNSELING

When counseling parents of a patient with Spina Bifida, we believe it is important to provide them with as accurate information as possible. Prognosis varies with the type of Spina Bifida and the extent of nervous, musculoskeletal, genitourinary, and gastrointestinal systems involvement. The type of Spina Bifida, the degree of impairment and possible malformations of other organ systems can be determined by prenatal testing or intrauterine, newborn or post natal examination. Children can be assessed at birth or later; more

specific information can be provided to parents The prognosis may change, becoming more specific and accurate as the child with disabilities develops. This evolution allows the current health professional to explain the differences in the predictions by prior providers due to the current assessment. Parents are particularly interested in their child's potential to grow up into a socially functional adult. Professionals should remind parents that raised properly, the majority of children born with any [variety] of Spina Bifida can become socially well-adjusted adults.

TRANSITION/SEPARATION FOR INFANTS & TODDLERS WITHOUT DISABILITIES

T. Berry Brazelton describes the emotional and behavioral development of children without disabilities in his book, "Touchpoints: the Emotional and Behavioral Development of Children". Readers are encouraged to review this text, adapting Dr. Brazelton's recommendations to their patients with disabilities. Transition and the development of autonomy begin as an infant with the ability to move away from the mother.

The infant crawls out of sight but returns quickly for assurance that mom is still there. If the primary caretaker tries to leave, vocalizations are utilized to resist it. The duration of these child-initiated periods of exploration gradually grow longer, particularly when the child begins to walk. ... Separating from a parent and substituting other care providers also occurs naturally for longer periods of time and distances. These child-initiated separations help build the child's concept of autonomy.

TRANSITION/SEPARATION FOR THE INFANT OR TODDLER WITH SPINA BIFIDA

Lower extremity paralysis impairs mobility and interferes with the developmental process of separation/transition. Less well recognized, however, is the poor general tone and decreased motor abilities in the body and upper extremities of children with myelomeningocele and its effect on these same processes, regardless of their level of paralysis. Professionals and parents of small children with spina bifida should consider introducing their affected child to multiple methods of alternative mobility, such as wheeled toys, for two reasons. First, children with higher level myelomeningocele generally do not maintain

biped ambulation beyond mid or late childhood. With a large proportion of [these children] becoming wheelchair dependent, it would seem at least partially appropriate to consider teaching methods of wheeled mobility early in life and to avoid the concept of "retreating to a wheelchair." Secondly, with these mobility devices, children can be as mobile as they desire and explore their environment. They can participate in floor level activities and [later] actively participate in wheelchair activities inaccessible to children solely dependent on crutch and braces ... Infants and toddlers should be allowed on the floor and encouraged to move about by rolling,

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TRANSITION/SEPARATION ISSUES FOR THE PERSON WITH SPINA BIFIDA

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Children as young as 18 months can learn to manipulate a motorized wheelchair ... [and] we have learned that cumbersome devices designed to aid walking may actually impair the small child's mobility.

Other options for early mobility include hand-propelled devices into which the infant or child can crawl. Handles allow the child to move forward, backward and pivot.

In another study, patients with spina bifida enrolled in a program of early upright ambulation were found to have better independent skills of daily living compared to those involved in a program that emphasized multiple methods of alternative mobility devices (Mazur et al, 1989).

scooting, ... crawling and propelling themselves on a wheeled device. ... Using multiple methods of mobility will facilitate the typical stages of physical separation of toddlers from their primary caretakers. We recommend that these devices be close to the floor, allowing the infant or early toddler to crawl or scoot onto and off them. ... We recommend braces that might encumber mobility be used only during walking exercises and during nap or bedtime to maintain joints free of contracture. When out of their braces, they should be dressed in pants and footwear made of material that will slide easily over rugs and rough surfaces in order to make mobility convenient and to protect their skin from friction burns. From the very first, it is necessary to encourage self-accomplishment by the infant and young

child. A study of our patient population revealed that a maternal belief in independence was a common psychosocial contributor to independence in self-care skills, achievement in school and high self esteem. During this early developmental period, play activity with same age peers should be encouraged at the floor level. Adults should also consider engaging the infant in interactive floor level play. The child's toys can be kept [within reach of] the floor or a wheeled device. ... Caretakers should discourage others from automatically responding to the child's request to have ... objects brought to them. Carefully encourage the child's drive for self-achievement while minimizing frustration. Allowing the child to use only verbal commands to demand action by others may lead to learned helplessness and a poorly adjusted child.

INITIAL AMBULATION FOR THE INFANT OR TODDLER WITH SPINA BIFIDA

The natural development of upright posture in infants without a disability occurs at 8 to 18 months of age, starting with a crouched knee position. When their balance fails they drop softly onto their buttocks. We have learned from our children and adults with spina bifida that in braces, they double their height in relationship to sitting. As they attempt to stand with rigidly constrained ankles, knees and sometimes hips, they will fall to the ground much as a felled tree. ... Thirty-seven years ago we published advice derived from an incomplete study, recommending upright posture and simulation of "normal" ambulation (Shurtleff, 1966). [Reports of] a standing frame, the Verlo, which could be used for standing and ambulation much as the Parapodium of today (Taylor and Pemberton, 1972). This intervention proved to be of no benefit and, indeed, caused decubiti and fractures for the patients and frustration for their caregivers. I (DBS) suggest to our skeptical physical therapists that they build a pair of stilts that will double their height above the ground... prop themselves against a wall and take off walking with or without appropriate supportive devices such as a parallel bar, walker or crutches. It can be done ... [but the] difficulty is amplified by the considerable impairment of motor coordination and ... visual perception exhibited by most infants born with myelomeningocele.

Whether these suggestions and modifications to promote a child's mobility will enable one to de-

velop appropriate autonomy is currently unknown. There are nine reported [but unproven] benefits of an upright standing or walking program: improved urinary tract, bowel, and cardiopulmonary function, decreased osteoporosis and lower extremity fractures, decreased lower extremity joint contractures, obesity, skin breakdown, degenerative joint disease, and improved hand-eye-motor coordination. ... A study by Lip-tak et al (1992) suggested that age and disability matched pairs in a parapodium program were more obese, watched more television and were less mobile ... than children with myelomeningocele brought up to utilize multiple methods of alternative mobility. ... The patients in the biped ambulatory program used an A frame and had daily physiotherapy throughout their enrollment in residential schools; the patients in the multiple methods of alternative mobility program did not. Few of the patients in the multiple methods of alternative mobility group used standing or biped ambulatory devices

Since long term ambulation is not a realistic goal for most high level lesion patients, its effect on development is the remaining indication for expensive and time consuming ambulation programs in childhood. Whether a child's intensive drive toward upright ambulation and autonomy is best served by intensive biped ambulatory training or being able to explore their environment with the least restrictive bracing and multiple methods of alternative mobility or a combination of these two approaches has yet to be determined by accepted evidence-based criteria.

To get involved or get more information, contact Pat Brown University of Washington Center for Technology & Disability Studies 206-616-3714 pabrown@u.washington.edu *Transportation costs will be reimbursed.*

UW launches new study about development disabilities & family support

by Pat Brown, University of Washington

We are looking for families that have a member with developmental disabilities. We want to learn more about the kinds of support people with developmental disabilities and their families need to be independent in the community. We want to know about available support from friends, other family members and the community. Also, we want to know the real costs of supporting a family member with a developmental disability.

Participation in this study is voluntary. If you want to work with us, we would set a time to talk with you. This meeting will take about 2 hours. We may need to contact you after the interview if we have additional questions...and may need to meet with you 2 to 3 additional times ... these meetings, if necessary, will take about 1 hour.

During our interview, we [first] will ask

you some questions from a survey called the Support Intensity Scale ... about how much support your family member needs in home activities, getting around in the community, lifelong learning activities, employment, health and safety, social activities and protection and advocacy.

We will also ask some general ... open-ended questions. We will ask you to describe your everyday life experiences and those of your family member with a developmental disability.

We will ask you to talk about the types of support that your family needs to in order to help your family member with a developmental disability to live in the community. We will also ask you about how you provide this support. We will meet with you at the Univ of Washington or another private office space of your choice (for example, a meeting room at the public library).

Parenting Series Facilitated by Linda Sisson of Full Circle Parenting

Take time to discover your parenting essence.

We will explore our experiences of parenting through a variety of lenses:

Parenting strengths, styles, goals and beliefs

Behavior & obedience

Children's needs & emotions

Decision making

Intimacy, trust & respect

This dynamic series is designed to help you as you grapple with the realities of parenting. Based on discussion, explorations and thoughtful quest we will come to recognize ourselves as the competent parents we are. As we seek to feel the pulse of ourselves as parents we will delve into our strengths using the group to support our pursuit. Whether your children are two or seventeen whether they have special needs or you are still pregnant this series is about you and your relationship with your child.

Contact Linda Sisson, Full Circle Parenting, Counseling, Parenting Support, Disability Consulting, Lactation Support, 360-867-1631 lindasisson@juno.com

Linda is a counselor in private practice, providing individual and couple counseling as well as working with children. She specializes in supporting parents during their parenting journey from pregnancy, birthing, and breastfeeding through the teen years, from daily wear and tear through challenges and disabilities. She is also the mother of five (three she birthed and two in a blended family) ranging in ages from eleven to 19.

Thursday evenings
6:15-8:15 pm
Eight weeks
Sept 14-Nov 2
\$150 for one parent or
\$175 for both
On-site childcare can
be arranged for an
additional fee
Contact Linda Sisson,
Full Circle Parenting,
Counseling,
Parenting Support,
Disability Consulting,
Lactation Support,
360-867-1631
lindasisson@juno.com

Disability Nation is produced in the Valley of the Sun, otherwise known as Phoenix Arizona. The show is produced by Larry Wagner ... As a person with a life-long disability, Larry is very familiar with some of the stereotypes and beliefs that some have about persons with disabilities. He believes that having a disability is simply part of his life and something that isn't the end of the world.

Internet-based audio magazine "DisabilityNation" launched

Press release from www.DisabilityNation.net

Phoenix Arizona persons with disabilities, their family members, friends and the general public now have another resource for information, news and feature-rich content about disability and the people affected by it. With the official launch of www.DisabilityNation.net and the DisabilityNation Podcast, people in the United States and others around the world now have a unique opportunity to learn more about life and disability. The Podcast is an Internet-based audio magazine published on a bi-weekly basis.

Larry Wagner, creator and producer of DisabilityNation and the DisabilityNation Podcast, said, "The goal of the site and Podcast is to promote people with disabilities living life to the fullest and to dispel many of the stereotypes and beliefs that are widely held by people today. The focus of DisabilityNation is to educate and inform the listener about disability and that it is simply a natural part of the human experience." Since its premier in June of 2006, Disability Nation has featured stories and interviews highlighting important issues in the disability community. These have included interviews with the founder of Mouth Magazine, discussions about new and innovative uses for service animals and issues to be considered, an interview with Scott Hogsett of the movie Murder Ball and member of the 2006 US Quad Rugby team and others.

The content of the site and Podcast is designed to be cross-disability related and meant to be both educational and encouraging to anyone with a disability. Content is geared toward multiple audiences including persons with disabilities, their family members, friends and the general public. The show features new episodes approximately every two weeks and is now available via popular channels including the iTunes Music Store and Podcasts. Interested persons can directly download the Podcast from <http://www.DisabilityNation.net> and subscribe directly to the show by visiting <http://feeds.feedburner.com/disabilitynation> and choosing the appropriate feed.

About DisabilityNation

DisabilityNation Is a Podcast by and for persons with disabilities. Too often we hear about the legal, physical or attitudinal barriers facing persons with disabilities in our society today. Unfortunately, not enough attention is focused on those with disabilities just living life. The goal of DisabilityNation is to be different than normal and to give you, the listener, the opportunity to learn and grow from the experience of hearing the program.

DisabilityNation highlights people working, participating in sport or recreation of their choice, married couples, singles, children and adults, politicians and couch potatoes who happen to be people with disabilities. You will hear conversations about life, not necessarily about the disability.

About podcasting

Don't be fooled by the pod in Podcast; you don't need an iPod. Any MP3 player that you normally use will play Podcasts & you can listen on your computer using software such as WinAmp, Windows Media Player, RealPlayer, and iTunes.

A Podcast is an audio file in MP3 format that can be subscribed to and is automatically delivered to your computer. With Podcasts you can choose to listen on your computer or on an audio player such as the iPod. Often podcasters offer different options - you can either stream the file or listen to it from the web site directly or you can download the show.

If you want to listen to or subscribe to Podcasts, the first thing is to get a media aggregator. This is a small piece of software that downloads any Podcast feeds that you subscribe to. Many programs are available for subscribing to Podcasts. Visit <http://www.DisabilityNation.net> and click on the Podcast FAQs link for more details. After downloading the software just add the XML file address for the Podcast you want to listen to then click the appropriate button to download the current show. When you want to download new shows, click the button in your chosen aggregator and the software checks to see if any new shows have been added and the shows are automatically downloaded to your computer. Often the software knows to check for downloads and you never need to manually tell it.

Washington cluster agendas were full of events this summer

The Olympia Cluster had 11 people at a pizza feed on July 26 in commemoration of the 16th anniversary of the signing of the American Disabilities Act. The cluster met again for lunch on September 16 at Izzy's Pizza and Buffet in Olympia.

The Madigan Young Adults Cluster had a strong showing on August 11 when 10 members gathered to share pizza and pop. Heather Logan brought her prize-winning "Creature with Sunglasses" and her red ribbon from the Thurston County Fair to share with the group. The group shared summer experiences and plans for the fall schedule. "We welcomed a new person named Magon Lance into the Young Adults at Madigan and she is now a new member of Evergreen Spina Bifida Association. She has a young daughter named Faith who is 18 months old," explained Heather. "At the meeting, we catch up on what everyone is doing."

The Kitsap Peninsula's Spina Bifida - Hydrocephalus Support Group hosted its autumn social meeting for friends and family on Saturday, September 30 at the Kitsap Regional Library in Poulsbo. The event was coordinated by Rebekah Uhtoff and Dave Lewallen.

A dozen members of the Spokane Cluster gathered for a picnic on August 12 at Audubon Park. The group enjoyed chicken, a potluck of side dishes, and a very rich cake. While the children were leaping off the swings and tangling themselves in the jungle gym, the adults talked about a wide range of local, national and personal disability issues.

Northwest Adaptive Sports (formerly Northwest Wheelchair Sports), a non-profit group that supports social and recreational pursuits for youth with physical disabilities, held its annual golf tournament September 30 in the Olympia area. It is the organization's only significant fundraiser for the year and 100% of the funds raised go to the organization.

To get involved with a cluster group or to find out about any upcoming events, please contact the cluster leader in your area. Cluster leader phone numbers are provided on page 9 of this newsletter.

WELLNESS FOR LIFE:

Before, Between & Beyond Pregnancy

9am to 4pm Friday November 3 2006

Capitol Campus Columbia Room, Olympia WA

For more info or to register visit

[Http://www.marchofdimes.com/washington/7391_20993.asp](http://www.marchofdimes.com/washington/7391_20993.asp)

THE REALITY OF TRANSITION

Saturday November 4 1-3pm at Parent to Parent

Therese Vafaezadeh, Nurse Practitioner at the University of Washington, is a parent of a child with special needs. She will speak on the challenges of transitioning to adult services, what to know and prepare for.

Sponsored by ESBA. Snacks provided.

Coffee Talk with a Cluster Group Leader

It has come to my attention that some potential members (and maybe members of ESBA too) would like to have a one on one chat with someone in a cluster group. I have decided to have intimate gatherings and keep meetings throughout the year when able. If I cannot answer your question(s) I am sure I can find someone who can! I hope to have no questions unanswered. Keep in contact with me or others within the group. If you would like to join me for coffee email at michele.hopkins@comast.net or 206-909-4186.

On August 19 seven-year old ESBA member Michael Hoyt was chosen to throw the opening pitch at the Spokane Indians baseball game.

Connect with a cluster group

Region	Leader Name	Contact Phone
Portland OR	Gina Schuermyer	503-761-8193
Helena MT	Joe Nugent	406-458-9549
Madigan Army Med. Ctr.	Dr. Ellen Davis	253-589-3700
Vancouver WA	James Haxby	(503) 414-9220
Spokane WA	Ed Kennedy Susan Curalli	509-465-0676 509-892-6756
South King CO WA	Brian Knowles	253-887-0888
Eastside Seattle	Michele Hopkins	425-844-1262
Kitsap WA	Dave Lewellan Rebekah Uhtoff	360-871-5139 360-782-0467
Olympia WA	Patti Logan	360-888-7701
Walla Walla WA	Garrison Redd	509-301-0243
Eugene OR	Anne Moon-Glen	541-689-2125
Butte MT	Paula Christenson	406-683-4793
Alaska	Honnen McLeod	907-688-8456
Center for Independence	Cliff Schulman	253-582-1253
Spanish	Anthony Williams	253-588-4411
Bend OR	Diane Cole	541-318-7075
Idaho Falls ID	Pam Hoppmann	208-522-6206
Leavenworth WA	Ed Baroch	509-548-5697
NEW Seattle	TBA	TBA

EVERGREEN SPINA BIFIDA ASSOCIATION
SERVING WASHINGTON, OREGON, IDAHO,
MONTANA & ALASKA

New address!

2128 N Pines Rd Ste 17-2 Spokane WA 99206
Phone: 253-589-3700/Fax: 775-766-1654
Email: evergreensba@yahoo.com

Members of the Evergreen Spina Bifida Association are adults or children with Spina Bifida and parents, friends, relatives, and professionals with an interest in this spinal tube birth defect.

We're on the web!
www.evergreen-spinabifida.org

NEWS CORNER

REGIONAL PEDIATRIC HOSPITAL WILL BE BUILT IN BILLINGS

A July 21 Associated Press article in the Billings Gazette details a planned \$12 million overhaul to turn St Vincent Healthcare's pediatric ward into a regional children's hospital. The hospital will provide services to the large state of Montana's population who otherwise would have to travel to Denver, Minneapolis, Salt Lake City or Seattle.

GRADUATE THANKS UM'S DISABILITY SERVICES

An article in the Fall 2006 issue of the *Montanan*, The University of Montana's alumni magazine, was written by recent UM graduate Crystal Stipe who has cerebral palsy. The article describes how her college experience was enhanced by the University's active and responsive department of Disability Services. The current director started 18 years ago as the only employee; the department has grown to a staff of 10 who serve over 900 students. They have already met many students' needs by installing a lift in the Music Building and working with the Alliance for Disability & Students to prevent the parking of bicycles in front of ramps & electric doors. Stipe says her most important lesson at UM is that "challenges are never completely impossible to surmount."

ISU OUTDOOR ADVENTURE PROGRAM PLANS WINTER EVENTS

Idaho State University's Cooperative Wilderness Handicapped Outdoor Camp (CW HOG) does not slow down in the winter. Visit its website <http://www.isu.edu/cwhog/> to learn about the program and its upcoming activities. The program's goals including providing challenging outdoor activities, fostering a social network, and educating the community to accept & value those with disabilities.


Evergreen Spina Bifida
Association

