Creating Systemic Change for Voters with Disabilities

By Rebecca Williford, Esq., President & CEO, Disability Rights Advocates (DRA)

November may seem like a long way off, but election season is in full swing. We, at DRA, are working tirelessly to ensure that people with disabilities have equal opportunities to cast their ballots. In fact, for almost 15 years, DRA has been doing voting advocacy across the country, working to enforce disability rights laws through impact litigation to make various aspects of the voting experience more accessible. But what exactly are the different kinds of barriers to voting that people with disabilities face? And how does DRA break them down?

As many of you know all too well, people with disabilities face just about every imaginable barrier to casting their votes on election days: physically inaccessible polling stations, broken accessible voting machines, poll workers who aren’t trained to use accessible voting equipment, inaccessible absentee voting systems, and, unfortunately, the list goes on and on.

While the barriers are rampant, we’re beginning to turn the tide. DRA’s voting work began in New York City in 2010, in response to widespread physical barriers throughout the City’s polling places that kept many people with mobility disabilities from being able to get inside a polling place to cast their ballot. In July of 2010, DRA filed a case against the New York City Board of Elections to address these barriers, and in October of 2012, the court ordered the Board of Elections to ensure that physical access barriers did not get in the way of people being able to vote throughout the City. The City was required to adopt a plan designating one poll-site worker at every polling place to be trained in poll-site accessibility by CID-NY. It also required the Board of Elections to work with a voting access specialist to develop a plan to transition its polling sites to accessible facilities.

Then, in July of 2013, DRA turned our attention to the County of Alameda in California, where we filed a lawsuit challenging discrimination that blind voters faced during the November 2012 General Election. In that election, problems with the audio and tactile features of voting machines kept many blind voters from being able to vote privately. In May of 2015, DRA secured a settlement to ensure that these technical issues were resolved so that voters who are blind could cast a ballot privately and independently.

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USDOL Awards Grant to Support Employment of Young People with Disabilities

By Emily Ladau

In April, the U.S. Department of Labor (USDOL) awarded an Equitable Transition Model Demonstration grant to the New York Department of Labor (NYDOL). The funding is aimed at developing strategies to assist youth and young adults with disabilities — particularly in underserved communities — in successfully transitioning into the workforce.

USDOL’s Office of Disability Employment Policy and the Employment and Training Administration are administering the grant for this cooperative agreement, which will support efforts to identify evidence-based solutions that enhance the training and employment prospects of disabled youth and young adults.

Assistant Secretary for Disability Employment Policy Taryn M. Williams emphasized the importance of this effort in a press release from the USDOL: “These cooperative agreements will help us identify the most effective strategies for dismantling these barriers, ensuring all young people with disabilities facing multiple challenges to employment, including intersecting issues raised by disability, race, ethnicity, socioeconomic status, homelessness, and justice involvement.”

Looking ahead to implementing the grant, NYDOL shared that the agency “will work with other State agencies and community partners to eliminate obstacles preventing New Yorkers with disabilities from participating in our economy by finding careers they love.”

Diversity enriches and strengthens New York State’s robust economy. The grant addresses the needs of youth and young adults with disabilities facing multiple challenges to employment, including intersecting issues raised by disability, race, ethnicity, socioeconomic status, homelessness, and justice involvement.”
Accessible Communication Devices Being Tested at JFK

By Emily Ladau

The Transportation Security Administration (TSA) has initiated field testing of new hand-held language translation-interpretation devices at John F. Kennedy International Airport. In addition to the capability to translate 83 languages, these devices, smaller than a cell phone, can help make the process of going through the security checkpoint more accessible for people with hearing disabilities.

TSA agents or travelers can speak into the device, and the words will appear on the screen for people who are deaf or hard of hearing to read. Dr. Chris Rosa, President and CEO of The Viscardi Center, emphasized that this device testing is a positive development. “Communication struggles can be awkward, result in holding up already long lines of travelers awaiting screening, and create suspicion among TSA agents when deaf and hard-of-hearing passengers appear not to be responding confidently,” he shared. “By improving communication, we hope that these assistive technologies will improve the quality of air travel for deaf and hard-of-hearing passengers.”

Statewide Disabilities Invention Competition

By Christopher Alvarez

College sophomore Pranaav Venkatasubramanian found it particularly notable that the assistive technology he created alongside his New York Institute of Technology (NYIT) colleagues for Spectrum Designs came in first place at the Cultivating Resources for Employment with Assistive Technology (CREATE) Symposium’s tenth annual statewide invention competition during the height of Autism Awareness and Acceptance Month.

Sponsored by New York State Industries for the Disabled (NYSID), the CREATE Symposium showcases technologies designed by college engineering students from around the state who team up with rehabilitative support organizations to help those with disabilities succeed in their jobs.

“Because individuals with disabilities make up only 10% of the population in NY, improvements for seamless access to work are sorely needed,” said NYSID President and CEO Maureen O’Brien. “NYSID tries to fill that void by incentivizing inventions and improvements that the commercial sector would not.”

At this year’s event, four teams, by way of a third-place tie with first-time high school winners, won prize funds of $5,000, $10,000, and $15,000.

NYIT’s first-place invention, Gamified Silk Screen Cleaner, allows Spectrum Designs Foundation employees to clean custom apparel tools in a more sanitary and speedy manner. Before, the messy ink would get all over the employees and damage other clothing products when manually cleaning the ink application equipment using a chemical and a rag.

“As an engineer, we solve problems,” said Venkatasubramanian. “And when you see a problem out there and you solve it, it’s the most rewarding feeling in the world.”

Currently, Spectrum Designs is printing 3,600 towels and 10,000 shirts in a day. According to the head of the screen printing department, Nicholas Groepker, NYIT’s winning invention will boost promotion opportunities and increase productivity by 10-20%, which he says “is going to be like a lifesaver for us.”

“I’m less concerned about increasing productivity and I’m more concerned about increasing accessibility,” said Spectrum Designs Chief Operating Officer Tim Howe. “I want more people to be able to clean screens who aren’t, I want everyone to be able to do it and kind of democratize that process [because] it’s that hand up, not hand out mentality.”

In second place, in partnership with AHRC Nassau, another group of students from NYIT created the SafeChef Cutlery System, a user-controlled cutting system that limits the risks of cutting oneself during food preparation for the company’s catering services for government events in New York State.

Tied for third place were The Cooper Union’s “Be a Companion” Automatic Wheelchair Locking Device, created in partnership with CP Unlimited and Otsego Northern Catskills BOCES’ Automated Crimper, created in partnership with The Arc Otsego.

For Michelle Meinor, part of the Cooper Union team, engineering assistive technology for people with disabilities has always been her passion. Her team developed an attachable spring-loaded automatic locking device for CP Unlimited’s newest employee, Angel, to feel comfort and security in his new job.

“No one should be limited by their abilities,” said Meinor. “I think every engineer in this moment needs to be thinking about improving the quality of life for everyone in the world and has a special capacity to deliver certain products that are going to be priceless to that individual.”

The Automated Crimper is a technology designed to address the “shocking” low inventory of products that are sleeved and ready to be put in dispensing machines in restrooms by automatically crimping plastic sleeves around tampons sold to customers in New York State.

“Being the first high school class to ever compete and win in this competition felt amazing,” said 17-year-old high school senior, Nicholas Troiano. “Having the opportunity to design and build this project felt awesome, but knowing this project will allow individuals with disabilities the chance to work felt even better.”

All four teams appreciate the CREATE Symposium for making a difference in their lives and for empowering them to build “revolutionary” products that leave positive impacts on others.

Dylan Valic, head of Spectrum Designs marketing, says it best: “If you can just take a minute to look past those preconceived notions, and see [people with disabilities] for who they are, miracles are happening here every day.”
New Rule Mandates Digital Accessibility from State and Local Governments

By Emily Ladau

On April 8, Attorney General Merrick B. Garland signed a final rule under Title II of the Americans with Disabilities Act clarifying the obligations of state and local governments to make their websites and mobile applications accessible to people with disabilities.

Inaccessible websites and apps often create barriers for people with disabilities seeking to engage with government services, programs, and activities, such as ordering mail-in ballots or obtaining tax information. Under this new rule, government entities must ensure their digital presence complies with the Web Content Accessibility Guidelines (“WCAG”) 2.1 guidelines within two to three years, depending on population size.

In a statement, the American Association of People with Disabilities (AAPD) celebrated the U.S. Department of Justice’s commitment to make progress toward accessibility for all. Said AAPD President and CEO Maria Town, “This rule is a long-awaited recognition that to achieve equal participation in society, as promised by the Americans with Disabilities Act, we must address digital discrimination and inaccessibility.”

Marilyn Tucci, who is blind and serves as the Advocacy Director for the Long Island-based organization Self-Initiated Living Options, Inc. (SILO), echoed this sentiment. “We have been advocating for many years to make websites and apps more accessible for blind people,” she told Able News. “I am hoping companies will do what they must to comply with the law.”

National Council on Disability Announces New Chair

By Emily Ladau

The National Council on Disability (NCD) — an independent, nonpartisan federal agency that advises the President, Congress, and other federal agencies on disability policy — recently announced Claudia L. Gordon, Esq. as its new Chair.

Gordon served as Acting Chair following the untimely passing of previous Chairman Andrés J. Gallegos, Esq. in December 2023. She is a dedicated advocate for people with disabilities and has an impressive list of professional achievements. Notably, Gordon is the first deaf Black female attorney in the United States and the first deaf graduate of American University’s law school. Currently, she serves as the Senior Accessibility Strategist with T-Mobile US, Inc.

Reflecting on her new role, Gordon shared, “I am honored to have the opportunity to serve the country in this capacity as Chair and look forward to continuing our journey of increasing accessibility and inclusion in all walks of life.”
Jenna Bainbridge is Dancing Disabled People Into American History in Broadway’s ‘Suffs’

By Esme Mazzeo

For Jenna Bainbridge, performing in the ensemble of Shauna Taub’s historical musical “Suffs” as an ambulatory wheelchair user came with a few unexpected hurdles — the costumes.

Some of the wardrobe challenges were understandable, like making sure that the gloves she wore onstage were reminiscent of the style that a woman marching in the Women Suffrage Parade in 1913 would wear — and also leather so Bainbridge could maintain a strong grip on her wheels. Or, putting her in form-fitting skirts with less fabric so that nothing rubs against her wheels.

Making these accommodations for Bainbridge was easy with the help of the costuming team — but as they searched for examples of how wheelchair users dressed, they instead uncovered the erasure of disabled people from that time period.

“Suffs” tells the story of the Women’s Suffrage Movement from 1913 until the 19th Amendment was ratified in 1920, giving women the right to vote.

Bainbridge’s presence on stage as a member of the ensemble does something history books cannot — it puts disabled people in the fight.

“I know that disabled women marched as part of the 1913 march on Washington. I know it in my heart, but we don’t have evidence,” Bainbridge said. “We don’t have proof, because we’re missing from that history. We were not in the photographs.”

So, for the actress and singer, becoming the second wheelchair user to perform in a Broadway musical has a more powerful meaning than it would if she were in any other show.

While performing, Bainbridge is telling others with disabilities, “Just because you don’t see yourself in history doesn’t mean you weren’t there.”

One of her roles in “Suffs” is playing former Tennessee Congressman Harry T. Burn, who cast the deciding vote in favor of ratifying the 19th Amendment of the Constitution.

Historically, Burn changed his vote in favor of women’s suffrage after receiving a note from his mother Phoebe Burn imploring him to vote “Aye!” and empower women.

Bainbridge gave Phoebe all the glory for persuading her son, but also reflected that there was something powerful about being a visibly disabled person “running out of stage left” and making such an impactful vote.

Although Burn wasn’t visibly disabled, through playing him in her body, Bainbridge said, “I think there is something really beautiful in that showing, ‘Yes, I am disabled, and I am intelligent, and I think for myself, and I’m strong, and I am strong-willed.’”

She said she hoped that the audience could watch her in that scene and connect the idea that strong people can be disabled, and “these two things do not cancel each other out.”

Stepping into the spotlight on Broadway, Bainbridge can show aspiring disabled performers that they can get there one day too, and her advice to them is simple: “be tenacious.”

In an industry full of rejection for everyone, Bainbridge said, “and I think for myself, and I’m disabled, and I am intelligent, and I feel hot, and I’m taking the streets in my wheelchair.”

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Historic School Paved the Way for Students with Disabilities

By Warren Shaw

On a quiet block of Henry Street on the Lower East Side stands an apartment building that you’d never guess was once home to the nation’s first school for children with disabilities.

The East Side Free School for Crippled Children was founded in 1900. Over its nearly 40-year existence, the Free School grew into a comprehensive provider of education and human services in a neighborhood infamous for deep poverty and deathly disease.

Like so much early disability work in New York City, the campaign to educate disabled children owes its start to the pioneering and long-forgotten activist, May Darrach. Born in 1869, at the age of thirty, Darrach’s disability put her into the hospital. From this hospital stay she emerged forever altered, charged with a mission to do something for who she (and everyone else) then referred to as “crippled children.”

Darrach eventually catalyzed a whole movement, ran her own settlement house, became a physician, and practiced medicine. It all began in 1899, when Darrach supposedly wagered Charles Loring Brace, the Secretary of the Children’s Aid Society, that there were hundreds of disabled children hidden away in the tenements, unachieved by school, church, or any other outside influence. She knew they were there — she’d shared hospital wards with them. Darrach trudged up and down the Lower East Side and documented them. It was the first survey of disability in the general population.

Darrach presented her findings to Children’s Aid and made her pitch. By the time the year was out, she had begun the nation’s first educational program specifically for children with disabilities at the Henrietta Industrial School on West 69th Street. Soon one of Darrach’s allies at Children’s Aid, Mabel Irving Jones, began a disabled kids’ class of her own, and founded what later became known as the Association for the Aid of Crippled Children (AACC).

In 1900, a group of elite socially conscious women set up a recreation program in a Lower East Side flat. Kids were brought by horse drawn carriage then carried upstairs to play and hear stories. For many, it was their first opportunity to socialize with other disabled kids. By 1902, the new group had taken a space at 29 Montgomery Street and renamed itself the East Side Free School for Crippled Children. With classes in reading and handicrafts like sewing, the school was soon providing services and transportation to 80 children a day, with no restrictions by race or religion.

In 1906, the Board of Education began the first public school class for disabled children at P.S. 67 on West 46th Street. Since the Board’s research showed that more than half the poor children too disabled for regular school lived below 14th Street, it floated the idea of building a school for disabled kids on the Lower East Side.

The standalone public school never happened. Instead, the Board partnered with the East Side Free School to create a hybrid settlement house/elementary school/medical clinic especially for disabled children in the most notorious slum in the United States.

Thanks to a gift from Emanuel Lehman (the uncle of future Governor and Senator Herbert Lehman), in 1908 the East Side Free School moved into its handsome new headquarters at 157 Henry Street. The location was in the Lower East Side’s downtown, two blocks from the Henry Street Settlement and around the corner from Rutgers Square, the political and social hub of the then mostly Jewish immigrant community.

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Historic School Paved the Way for Students with Disabilities

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The new building was brick with stone trim, five stories tall, with a rooftop playground and even an elevator — a long way from the walk-up tenement where the school had begun. The building’s external symmetry concealed its internal complexity. It housed four units.

First, there was a public school, funded, staffed, and equipped by the Board of Education. Second was a privately funded social work component, providing transportation, afterschool and Saturday playtimes, meals, and physical hygiene, which was important in a neighborhood where adequate bathrooms were a novelty. Third, older kids were trained in marketable skills, and there was a workroom where people earned regular wages, consistent with the Free School’s mission: “to improve the children’s physical condition, to train them to become self-supporting, and to provide them with work.” Finally, there was a privately funded health clinic with physicians and nurses, offering medical care and even some outpatient surgery. It was a complete facility for physical, intellectual, and social development.

May Darrach’s education campaign had really taken off. As The New York Times exulted in 1908, the city led the nation when it came to schooling for children with disabilities.

By 1913, the East Side Free School was flourishing. It opened a summer camp in Oakhurst, New Jersey, which is now known as Rising Treetops. But the isolation of disabled children that was documented in Darrach’s survey went on unabated. That year, the AACC conducted another survey, this time on a single block of Cherry Street between 50th and 51st Streets, between Brooklyn and Manhattan Bridges. Home to more than 1,100 families, the survey found large numbers of disabled children. Three quarters of them had no medical care.

Given so great a need, the movement to support children with disabilities continued to grow. In 1922, an organization called the Visiting Guild for Crippled Children transformed into Blythedale Children’s Hospital. The AACC held a blockbuster fundraising street fair on Park Avenue from 46th to 50th Street, headlined by Fanny Brice and Eddie Cantor. But by 1938, the Free School had run out of time. The world had changed and enrollment was declining.

Medical infrastructure and access expanded enormously after the Polio Epidemic of 1915 and the 1917-18 Flu Pandemic, so there was less need for the Free School’s clinic. Its educational function was being duplicated at public schools across New York City. And because of the building boom of the 1920s, the beginnings of Urban Renewal, and amendments to the Multiple Dwelling Law, the Lower East Side’s bathroom shortage was diminishing, so the personal hygiene function was losing its importance.

The era of the neighborhood settlement house was over. On June 22, 1938, the Free School was shuttered. A few years later the building reopened as an apartment house. It continues in that role today.

I recently asked a few of the tenants whether they knew that the building once housed a school for disabled children. None of them had any idea. This building ought to have an historical plaque or marker, something to remind the world of what used to be for kids with disabilities. Today the neighborhood is largely wealthy, nearly unrecognizable in many ways. But children with disabilities are still experiencing poverty, and they deserve to know and to visit this unique supportive point of beginning.

For more of Warren Shaw’s work in disability history, please visit disabilityhistorynyc.com.
May 16
1:30 pm
Caregiver Community Event

On the third Thursday of every month through June 20, 2024, join the Rubin’s community of caregivers for a free, in-person program of art and connection. Participants are joined each month by Meredith Wong, the director of connect2culture® at CaringKind, New York City’s leading experts on Alzheimer’s and dementia caregiving. Register for free: https://rubinmuseum.org/events/event/empowering-caregivers-05-16-2024/

May 19
1:30 pm
Dancing Dreams Performance

Join Dancing Dreams, a nonprofit dance program for children with physical and medical challenges, for their dance performance, “Dancing Back In Time,” at the Queens College Colden Auditorium. Admission is free. Call 516-659-8704, email info@dancingdreams.org, or visit dancingdreams.org for more information.

May 20
5:00 pm
CIDNY’s 2024 Annual Mental Health Fundraiser

Join CIDNY for its annual fundraiser at the Perelman Performing Arts Center to support greater accessibility throughout New York City. The event will feature raffles, cocktails, light bites, vendors, performances from Broadway artists, and a keynote address from NYC Public Advocate Jumaane Williams. For more information, tickets, or sponsorship information, visit https://www.cidny.org/2024-mental-health-fundraiser or call 212-674-2300.

August 7-10
Ampuete Coalition National Conference 2024

Registration is now open for the Amputee Coalition’s annual conference, which will be held at the Hyatt Regency Atlanta. As the premier event for the limb loss and limb difference community, the gathering creates the opportunity for people living with limb loss and limb difference to connect with each other, interact with a breadth of vendors serving the community as well as learn, play, and celebrate together. During the conference attendees can engage directly with vendors, touch and feel the latest prostheses on the market, and leverage that experience to make informed decisions about their care and needed support. Learn more and register: https://bit.ly/3JdUW7p
2024 NBCUniversal Tony Coelho Media Scholarship
The NBCUniversal Tony Coelho Media Scholarship will offer eight scholarships to be used in the fall semester of 2024. High school seniors, undergraduate, and graduate students with disabilities who are pursuing careers in media, communications, or entertainment industries that will be enrolled in college or a university during Fall 2024 are eligible. Each recipient will receive $5,625 to help cover the cost of education at their college or university. Applications are due by May 8 at 5:00pm ET. Learn more and apply: https://www.surveymonkey.com/r/2024NBCUAAPD

Disability Inclusion Fund Grants Opportunities
The Disability Inclusion Fund (DIF) at Borealis Philanthropy is currently accepting applications for two grant opportunities: Disability Inclusion Fund grants and the DIF x Tech Fund. The application is available now through May 29 at 11:59 pm ET. Learn more about how to apply: https://borealisphilanthropy.org/news-and-updates/

2024 Ann Marie Brown Scholarship
College students who are residents of Nassau and Suffolk Counties and meet the eligibility criteria can apply for the $2,000 Ann Marie Brown Scholarship Award. The award honors the memory of the late Vice President for Government and Public Relations of the Nassau-Suffolk Hospital Council, a professional organization that represents Long Island’s not-for-profit and public hospitals. The application deadline is June 14. Learn more and apply: https://suburbanhospitalalliance.org/nshc/programs/ann_marie_brown_memorial_scholarship/

Dinah F.B. Cohen DREAM Fellowship Program
The National Disability Mentoring Coalition (NDMC) created the Dinah F. B. Cohen DREAM Fellowship Program to provide college students and recent graduates with disabilities with professional skills and leadership opportunities. Selected Fellows will complete approximately 65 hours of a paid fellowship from September through December 2024. Applications are due by July 15. Learn more and apply: https://ndmc.pyd.org/fellowship/

Project Flaunt Hub
Don’t Hide It, Flaunt It is a nonprofit with the mission of advancing acceptance, understanding, tolerance and mutual respect for a person’s visible or invisible differences. The organization recently launched the Project Flaunt Hub, an online, interactive program designed for elementary and/or middle-grade students and military/veteran communities, their families, and caregivers to share and celebrate who they are. Visit the hub: https://donthideitflauntit.org/project-flaunt-hub/

Competitive Integrated Employment Transformation Hub
The U.S. Department of Labor’s Office of Disability Employment Policy recently introduced the Competitive Integrated Employment Transformation Hub, which brings together resources from across the federal government to provide practical guidance, policy information and evidence-based best practices for people with disabilities, their families, employers, employment service providers and state agencies. Visit the hub: https://www.dol.gov/agencies/odep/program-areas/cie/hub

QUIT JUST ISN’T A PART OF HIS VOCABULARY

Anthony Robles will be the keynote speaker at Family & Children’s Association 2024 Scholarship Breakfast on Tuesday, June 25th at Nassau Community College in Garden City, New York.

*Interpreting services will be onsite during the event.
NYC Bill Puts Home Care Access at Risk
By Kieran O’Brien Kern

Running errands, preparing meals, and providing transportation are some of the key tasks that the New York State Office for the Aging ascribes to the 4.1 million New Yorkers who will assume the role of caregiver over the course of their lifetimes. Whether you’re a parent like me, or taking care of a spouse, relative, or friend, caregiving is a full-contact experience. But the role can also be a skilled, critically important career built on mutual trust, respect and — in the best cases — friendship. Home care aides support self-managed, independent community-based living for disabled people and the ability for aging New Yorkers to age in place with comfort and dignity.

However, a bill has recently been reintroduced to the New York City Council that could potentially upset the delicate balance between home care aide and client, threaten aides’ livelihoods, leave clients scrambling to get coverage, and put agencies at odds with either the city or Albany.

Originally brought before the City Council as Intro 0175-2022, Intro 0615-2024 is a reimagining with few changes, also known as Maximum Working Hours for Home Care Aides. It is being sponsored by 14 City Council members. The bill aims to set the maximum number of daily and weekly working hours an employer may set for a home care aide. The city or Albany.

Hernandez testified in front of the City Council about how an end to the 24-hour live-in care that was cited in Intro 0175-2022 could lead to disabled people being placed in nursing homes. At 15-years-old, Hernandez experienced a level C-5 spinal cord injury. For the first year after his release from the hospital, he received care through two 12-hour split shifts, ensuring continuous care day and night. When Hernandez was 16, a representative from the New York City Human Resources Administration (HRA) came into his home with an unthinkable ultimatum: “Sign paperwork to convert my case to a 24 hour live-in case or go into a nursing home. As a scared teenager, I signed the form and had a live-in case for the next 16 years.”

Hernandez stated that while the bill is meant to be supportive, intentions don’t determine outcomes. “We know our freedom is tied directly to our [home care] workers, Hernandez said. But, while I, and most people with disabilities, believe in the intentions behind the bill, it returns me to the trauma caused by that HRA caseworker 26 years ago. People with disabilities have struggled for many years to justify their existence in society and their desire to live in the community.”

The end of 24-hour live-in care would render disabled and older New Yorkers who have been authorized 24-hour live-in services without access to that much needed care. “The law would force the abandonment of people with disabilities and older adults, who will have no choice but to be placed into a nursing home,” Hernandez explained.

Much like Intro 0175-2022, Intro 0615-2024 wouldn’t change New York State Medicaid rules. Medicaid wouldn’t cease authorizing 24-hour live-in services for disabled and older people. But if the City Council passes Intro 0615-2024, Hernandez shared that 24-hour care authorization could instead likely result in being institutionalized in a nursing home.

According to Hernandez, the irony of the time limits meant to support home care aides is that many workers could potentially lose money if they can’t earn overtime. Consider this math: Hernandez has his support set up in 12-hour split shifts of five and two days. By the time one of his home care aides have completed four days, they will be earning time-and-a-half for the subsequent hours of work. If each of Hernandez’s workers are limited to only 56 hours of work per week, he would either have to hire an additional worker for one day or request that some of his workers rearrange their whole lives around his schedule (which would be unfair to them).

The disabled community is as invested in the comfort and happiness of home care aides as they are in ours. They see us at our most vulnerable and support us in having an independent life on our own terms. But if Intro 0615-2024 becomes law, many disabled people are at risk of being removed from their homes and communities, losing their independence, and having their choices taken away to fulfill the type of care they were authorized for and need to survive.
Judge Approves California’s Assisted Suicide Law — United Spinal to Appeal

By James Weisman, Esq., General Counsel, United Spinal Association

A Federal District Court judge in California has dismissed a Complaint filed by United Spinal Association and several other disability groups, as well as individuals with disabilities, against the State of California alleging that the state’s physician-assisted suicide law is administered in a discriminatory manner.

Physician-assisted suicide in California is available only to those who are terminally ill. Two doctors must confirm that the choice is voluntary and not coerced, and that the patient is terminal. However, the traditional hospice definition of “terminal illness” is that the patient will die within six months. Many hospice patients live longer than six months, but the fuzzy definition works for hospice.

California recently amended its physician-assisted suicide law to reduce the waiting period between the patient’s request and the first-available date the lethal prescription can be filled from 15 days to two days. Well-meaning legislators pictured terminal patients writhing in agony when they passed this amendment. The reality is that the hospice definition of terminal is inapplicable when you examine who is using the statute.

For example, people with anorexia, quadriplegics who refuse treatment, and diabetics who refuse insulin are considered terminal and eligible for physician-assisted suicide. A doctor who believes that life as a quadriplegic is not worth living can write a prescription that can kill a depressed quadriplegic instead of diverting that patient to suicide prevention programs. If a patient without quadriplegia asked for a lethal prescription, they wouldn’t get it, but a quadriplegic could—even though their life expectancy is not shortened by their disability unless they refuse medical supports.

The law protects doctors from being sued for wrongfully prescribing the drug. No inquiry is possible that will result in liability for any medical professional prescribing lethal medication pursuant to the statute.

The judge in the United Spinal case would not look behind the language of the law to see how it was being implemented. The judge felt that since patients must be terminal, confirmed by two doctors (neither of whom need to have treated the patient before the request), and the choice must be voluntary (although there is no formal process established to confirm there was no coercion), people with disabilities should have the unfettered choice of physician-assisted suicide.

Now California is considering a new amendment to its law, which will remove the “requirement” that patients must be terminal and will allow people suffering from physical or mental pain to request a lethal prescription.

People suffering from mental pain will undoubtedly include people with disabilities experiencing depression. Instead of killing them, even if that is their request, doctors should be treating their pain and providing mental health services. It’s clear, though, that since the waiting period between request and prescription is two days, restoration of mental health was not an objective of the drafters of the law.

United Spinal will appeal this dismissal. The Ninth Circuit Court of Appeals, we hope, will realize that just because the law prescribes standards that, without strict scrutiny, a few “Kevorkians” can kill non-terminal, depressed people with disabilities. Unfortunately, there is a shortage of home-care workers in our country that is forcing relatively healthy young people with severe disabilities into nursing homes populated by senior citizens, many in the last stages of life. Faced with life in a nursing home, young people are apt to despair. A doctor who believes in ultimate self-determination might help this person to kill themselves instead.

I have known people with disabilities to commit suicide and attempt suicide because they are overwhelmed by the extent of their loss, financial need, personal care needs, the lack of affordable and accessible housing and transportation, isolation, and dependence. They do not want to be a burden to their loved ones. None of these considerations enter the equation for lethal prescriptions, but the court was unwilling to look behind the plain language of the statute to see how it was being implemented.

United Spinal Association and the American Medical Association oppose physician-assisted suicide for the same reasons. The nature of medicine is changed when caregivers become killers, albeit upon request.

New Disability Training for Therapists

by Sharon McLennon Wier, Ph.D., MSED, CRC, LMHC, Executive Director for Center for Independence of the Disabled, New York (CIDNY)

The incidence of psychological disorders in the United States keeps rising each year—a notable statistic in light of the fact that May is Mental Health Awareness Month. According to the National Institute of Mental Health, anxiety disorders are the most common mental illness in the U.S., affecting approximately 40 million adults aged 18 and over, accounting for about 18.1% of the U.S. population every year.

Research shows individuals with disabilities are at a higher risk of experiencing depression compared to people without disabilities. Factors such as chronic health conditions, social isolation, limited access to healthcare, and barriers to employment and educational services can contribute to this increased risk.

Unfortunately, people with disabilities often face additional challenges in accessing mental health services for treatment for inaccessibility, ableism, and a lack of provider knowledge of multicultural disability competency (MDC) training. These barriers result in over half (56%) of adults with a mental illness condition receiving no treatment, as reported by Mental Health America. This is compounded by discrimination related identities such as gender, age, socioeconomic status, race/ethnicity, and sexual orientation.

As we uplift mental health throughout this month, it’s crucial to remember that there is a
In a recent conversation with a friend, who is a fulltime power chair user, she said, “Anytime there are two or more of us together, it doesn’t take long before we get to swapping nightmare stories about repairs.” Why is it so hard to get a “medically necessary”—not to mention functionally essential—piece of equipment repaired in a reasonable time frame?

To give you an idea of how complicated wheelchair repairs have become, look no further than the final report produced by our neighboring state of Connecticut, which recently completed a multi-month effort to bring stakeholders together as The Wheelchair Repair Task Force. You can read the full report at bit.ly/WheelchairRepairTaskForce. While there are 12 recommendations outlined in the report, there was very little consensus on the implementation of any of the recommendations.

To get a clearer picture of why things are so complex, it is important to understand the “third party payment” system, by which most wheelchairs are both purchased and repaired. Unlike many other consumer goods, in the wheelchair market, most wheelchair riders are not the payer and therefore not treated as the customer. The device is purchased (and repaired) by insurance – Medicare, Medicaid and private insurance. Each insurer, then, has their own “rules” that need to be followed when you want to get your chair fixed.

What is most important is for wheelchair users to consider how they can keep rolling, especially if their chair is not working properly. First, if you have a prescription stating “Wheelchair Repairs” dated within a year of your current need, it should be honored as evidence of continued medical need. Here’s a tip: pick a date (perhaps Valentine’s Day, because you love your chair, or your birthday, because you want to give yourself a gift that lasts all year) and call and get the prescription and have it sent to you and your supplier, on the same day, to “be on file.”

Second, if possible, keep your old chair—it’s like having your own personal loaner. If you rely on a power chair or scooter, keep the old one charged up. Charge your primary chair at night and your back-up chair during the day. A back-up is only useful if it works when you need it.

Finally, make noise. Complain to your payer if your supplier is telling you it will take two weeks for an evaluation of the problem or another month for the part to be ordered and installed. Tell your representatives at the state and national level, especially if you have Medicare and/or Medicaid that you are not getting the services you need to keep rolling.

In fact, you now have a chance to tell Medicare your repair story. The Centers for Medicare and Medicaid Services (CMS) has asked two disability advocacy groups, Colorado Cross Disability Coalition and Disability Rights Education and Defense Fund, to conduct a national call for repair stories. To share your story, visit forms.gle/i52UYvVLeAjRjp469. The CMS Ombudsperson wants to hear directly from persons with the lived experience about the challenges in getting a wheelchair fixed. CMS needs to hear from you. Without your voice, there will be no change!

**In a Roll**

**Be a lifeline:**

Donate to keep wheels rolling!

On A Roll comprehensive wheelchair program helps people with disabilities maintain independence and freedom of movement. Our program is in need of an urgent wheelchair-accessible cargo van replacement to help transport 6 power or 8-10 manual wheelchairs at a time to and from repair facilities and members’ homes.

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- Allow them to thrive and be active in their communities

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Home Care Eligibility Criteria Proposal is Restriction on Freedom

By Kathleen Downes, LMSW

I am just one of thousands of New Yorkers who rely on Medicaid to cover the cost of personal care services in my home. As a woman with cerebral palsy, I require these services to dress, shower, and use the bathroom, among other tasks frequently taken for granted. Especially as my parents age and become less able to provide physical care, I am keenly aware that the Medicaid personal care program is quite literally my ticket to freedom—without it, I would have few long-term options except a costly, isolated nursing home.

I want others with disabilities, including the many New Yorkers who may become disabled in the future, to enjoy the promise of the same ticket to freedom.

But a draconian proposal to create new and greatly restricted home care eligibility criteria threatens to topple that promise.

At present, a New Yorker must require any type of assistance with just 1 of 22 tasks ranging from toileting and transfers to cooking and cleaning to qualify for home care.

Under the new criteria, originally born of former Governor Cuomo’s 2020 Medicaid Redesign Team II, a New Yorker must require “at least limited assistance with physical maneuvering” for three or more tasks on a list of just seven items. An exception is made for consumers with Alzheimer’s and dementia, who must meet the same threshold for at least two, rather than three of the listed tasks.

The new eligibility standard, which was delayed by the onset of the COVID-19 pandemic, is now set to take effect this summer. With it will come devastating consequences.

Many critical forms of assistance such as supervision, cueing, and set up, will no longer be considered. Further, so-called “nutritional and environmental support functions” including cooking and cleaning, are completely eliminated from the eligibility assessment.

Perhaps most stunningly, the new criteria appear to jeopardize billions in federal matching funds under the Community First Choice Option (CFCO), which forbids the creation of different criteria for services based on diagnosis type.

While my personal support needs would likely still qualify me for care, I fear for my disabled peers, present and future, whose lives and liberty will be upended by this narrow-minded approach.

The new criteria for home care are more restrictive than that of a nursing home, a dangerous move in direct defiance of the Olmstead principle, which holds that disabled people have a right to community living. Those denied home care will be forced into a facility or left to languish in the community without adequate assistance, increasing the risk of injuries and hospitalizations.

Ironically, this purported attempt to control long-term care costs will only drive them upward, given that the average nursing home cost in my home region of Long Island is, according to the New York State Partnership for Long Term Care, $176,016 per

Continued on page 15
Global Accessibility Awareness Day is Good – But It’s Not Enough

By Peter Slatin

Here it comes again: Global Accessibility Awareness Day (GAAD), celebrated on the third Thursday of each May. GAAD was created by Joe Devon and Jennison Asuncion, two tech pioneers insisting on digital accessibility as the standard structural principle and prerequisite undergirding every website, app, virtual reality product, video game, etc. Its start a dozen years ago was in response to the ubiquity of inaccessible content are as high as 96% globally.

These numbers show us the status quo a quarter-century after the first publication of the Web Content Accessibility Guidelines (WCAG), which, for context in internet time, arrived one year after the public launch of Google in September 1998.

This glacial pace of progress in the basic incorporation of accessible precepts and processes into any digital product design reflects that society remains at best uncertain and at worst terrified of disability.

The willful ignorance siloing accessible design from the rest of the digital world tells us that, from schools and universities to corporations and government, creating space of any kind to fully welcome disabled people often remains a thought too far. Reluctance to provide digital accommodations that would open doors for many also doesn’t actually have anything to do with the oft-cited excuse of the negative impact that investing in them would have on profit.

Think about it: when we want to adopt and deploy technology to our advantage, we don’t really drag our heels or look the other way. Consider the velocity with which artificial intelligence has become a part of the advancing world, how quickly it is becoming indispensable to everything from education to commerce. Capital pours into it, regardless of risk to either money or time. Yet devoting a fraction of that energy to fulfilling digital accessibility would yield enormous rewards by enabling millions of disenfranchised humans to harness digital technology to learn, work, shop, or play in the ordinary, everyday way of the mainstream. As has been said by many, think of how curb cuts have made life better for anyone pushing a stroller, pulling luggage, or walking with even a minor mobility challenge.

The challenge that must be overcome is getting society to ascribe equal value to the lives of people with disabilities. It is imperative to jettison historical fear and superstition surrounding disability.

The fight to unleash digital accessibility embodied by GAAD and its celebration of all things being digitally accessible is a primary building block of global disability inclusion. Another, somewhat more accepted foundation of inclusion is the mandate for physical accommodations in the built environment that is visible target of the Americans with Disabilities Act of 1990. But even together, these two building blocks of accessibility are not enough to drive us past the pushback against inclusion.

There is a third, more foundational element of this movement, without which neither of the other two can be fully realized: social accessibility. Simply put, it’s the way people behave toward other people. Unlike digital or environmental access, social access cannot be achieved through either legislation or published standards. It will instead come as stories of people with disabilities living our lives — whether that involves great achievements or simply going through each day without the encumbering weights of low expectations and even lower value — dissolve the long-accepted boundaries that enable exclusion.

Opinions expressed are solely those of the writer(s) and do not necessarily reflect the opinions of Able News at The Viscardi Center and/or The Viscardi Center. Submissions should be on topics affecting the disability community, maximum 600 words, and must include the writer’s name and phone number for verification. Able News reserves the right to edit for grammar, length, and factual accuracy. Able News cannot respond to all submissions and publication of submissions is not guaranteed. To submit an op-ed for consideration, please email a full draft to ablenews@viscardicenter.org.

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Creating Systemic Change for Voters with Disabilities
(Continued from page 1)

In 2020, with the onset of the COVID-19 pandemic, access to absentee voting became (and remains) more critical than ever for the disability community. DRA filed a case in North Carolina in 2020 seeking the option for people with vision disabilities to have an electronic means for requesting, receiving, marking, and returning absentee ballots. The court ordered this relief in time for the November 2020 election and the next year ordered that this method of voting be made available on a permanent basis going forward.

DRA and its partners filed a similar case in New York and secured a settlement agreement in April 2022 requiring the state to implement an accessible, electronic method by which voters with a print disability across New York State may request, receive, mark, and cast their absentee ballots privately and independently.

Fast forward to March of this year: DRA, along with a coalition of disability organizations and California voters with disabilities, filed a lawsuit aiming to ensure that the state’s vote-by-mail program is fully accessible for Californians with print disabilities in time for the November elections. California’s vote-by-mail program still relies on a paper-based ballot return mechanism that excludes and discriminates against people with print disabilities. This case has just begun but we are hopeful that the court will act swiftly.

No matter what barriers pop up for voters with disabilities, DRA is committed to making sure that our clients and the millions of the rest of us with disabilities can cast our votes this November and in elections beyond. With every voting access victory in every state, DRA, together with our clients and partner organizations, sets an important legal precedent and moves us closer to full participation in society.

Home Care Eligibility Criteria Proposal is Restriction on Freedom
(Continued from page 13)

The Medicaid home care program has in recent years been treated as a drain on our tax dollars. I implore you to instead treat it as a long-term investment with rich returns—healthy, interdependent lives in the community for people like me, and yes, maybe one day, people like you.

Tell your representatives to restore home care access—because disabled New Yorkers are neither numbers nor political bargaining chips. We are people, whose full and worthy lives hang in the balance. Don’t let elected officials gamble with our futures.

New Disability Training for Therapists
(Continued from page 11)

Finding a therapist trained in MDC can be arduous. This is why CIDNY recently launched a comprehensive continuing education course in MDC for licensed mental health counselors and social workers practicing in New York State. CIDNY wants to provide essential information about the knowledge, skills, and attitudes needed for clinicians to be better equipped to work with the disability community. Additionally, clinicians who take the course will have an opportunity to join CIDNY’s subscription service to receive referrals for consumers with disabilities who request treatment from a therapist trained in MDC.

For tickets and information, visit viscardicenter.org/celebritynight

Announcing Two of Our Headliners!
Join us for a memorable night that celebrates and supports children and adults with disabilities.

Tino Martinez
Four-time World Series champion with the NY Yankees

Kathy Najimy
Actress known for Hocus Pocus & Sister Act
The Katz Institute for Women’s Health (KIWH), the only network of experts devoted to every aspect of women’s care, is putting women first. KIWH will be partnering with Able News to provide health and wellness updates. The below content was originally published in its entirety on the Katz Institute for Women’s Health’s website and exemplifies its commitment to raise health for all women.

When you take charge of your health, you have a better understanding of what your body is going through at all stages and can be better empowered to advocate for yourself.

**In your 20s & 30s:**
- **Know your family history.** Let your doctor know if you have relatives who died young or from diseases that can run in families, including heart disease and breast or colon cancers. This will help determine if you need preventive screenings earlier than your peers.
- **Keep tabs on your mental health.** Mental illness can emerge in your 20s and 30s, especially with stressors such as transitioning to adulthood or becoming a parent. Ask your doctor about mental health screenings (especially if you’re postpartum).
- **Prioritize your annual check-up.** Routine bloodwork, check-ins about your overall well-being, and plans for preventive screenings are all critical for mitigating the risk of chronic conditions.
- **Get in the habit of keeping your medical records.** You have a right to all of your medical records and keeping them in one easy-to-access place will make it easier for you to spot patterns and answer questions about your health down the line.
- **Don’t be afraid to push back when you’re not taken seriously.** If you find yourself in a situation where your pain feels dismissed, ask questions like, “You don’t seem concerned about this symptom. Why is that?” If you think that your problems still aren’t taken seriously, seek care elsewhere.
- **Get enough calcium and vitamin D.** These nutrients are crucial for keeping your bones strong and preventing osteoporosis.

**In your 40s:**
- **Start your screenings.** Many cancer screenings start around 40 or 45, though this can change based on your family history and other conditions. Talk with your physician about preventive measures like colonoscopies, mammograms, and screenings for diabetes, high cholesterol, and blood pressure.
- **Recognize your stressors.** Every decade has its stressors, but your 40s can feel like a pile-on with more intense career demands, parenting getting more complex, and potentially having to care for aging loved ones. Ask your physician about screenings for depression and anxiety and do your best to take time for yourself and ask for help when possible.
- **Incorporate more healthy habits.** If you’re not already following a heart-healthy diet and getting adequate exercise it’s a good time to experiment with the meals and exercise routines that can work for you in the long run.

**In your 50s:**
- **Learn what to expect from menopause.** Menopause is a big adjustment, and you may find yourself needing to change your diet or lifestyle to manage some symptoms. You may also have changes in cholesterol or blood pressure. Talk to your physician about all the differences you notice in your body at this time, even seemingly small ones.
- **Take care of your heart.** Heart disease is the top killer of women, and its symptoms aren’t always easy to spot. Ask your physician about a heart-disease evaluation and warning signs to know.
- **Prepare for the future.** This is a great age to start talking about an advanced directive, or how you envision care at the end of your life. Your wishes can change over time, but starting the tough conversations now gives you time to consider all options.

**In your 60s and beyond:**
- **Don’t be offended by new questions from your doctor.** At this age, providers start to look for subtle, early warning signs of cognitive decline, since early intervention can be key to correcting it.
- **Don’t compare yourself to your peers.** There will start to be bigger health disparities between you and other people your age. It’s important to focus on your body—what you can do with it, what choices help you feel your best, and what your doctor recommends for you to stay healthy.

**Evaluate your need for screenings.** As you age, preventive screenings become more dependent on your overall health. Talk with your physician about what screenings you should keep up with.
- **Build your support system.** The isolation that can come with aging can lead to depression and worsening physical health. Talk to your physician if you find your network isn’t giving you what you need. We can point you toward resources such as community centers where you can connect with people who understand your challenges.

When you take steps to keep your mind and body healthy at every stage of your life, you’ll be able to enjoy all the exciting, new things that come your way through every chapter.
Finding the Funny in Disability

By Anna Pakman

Is disability a laughing matter? Three New York area comedians are finding the humor in the predicaments that people with disabilities face in everyday life and sharing it with audiences worldwide.

At what she calls “weird kid boarding school,” Pamela Rae Schuller was constantly getting in trouble for being snarky and inappropriate, so she turned to comedy to channel her rambunctious energy. That spark ignited a career in stand-up and public speaking that has criss-crossed the country. A little person with Tourette Syndrome and OCD, Schuller’s jokes were first a coping mechanism but now just represent authentic lived experiences. “Finding humor in hard stuff can be universal!”

You can find Schuller going from stage to screen in her first leading role across from fellow comedian Jessie Chin in “Wheelchair Money,” one of more than 115 films putting a disability spin on the Buddy Comedy genre in this year’s edition of the Easterseals Disability Film Challenge (EDFC). The EDFC, launched in 2013 by actor-comedian Nic Novicki, challenges teams of filmmakers to create 5-minute short films in just five days to raise awareness of disability issues and to create more opportunities for disabled talent in front of and behind the camera. At least one member of each filmmaking team has to have a disability. This requirement ensures that EDFC films are enriched by authentic lived experiences.

For her part, Pavar Snipe, an Emmy-nominated producer, comedian, writer, professor, and disability advocate, couldn’t agree more about how essential authenticity is to finding humor even in the most mundane places. “Truth is what makes things really funny,” Snipe pointed out. “Once I made the decision to talk about my specific experience with people, my own relationship with my disability to myself, my comedy really started to expand.”

She continued “What makes disability funny is that people with disabilities are the best hackers with my disability to myself, my own relationship with people, my own relationship with disabilities are the best hackers of life. We know how to take the most challenging circumstances and come through them shining and laughing at the same time.”

As for what is next, Snipe is teaching newcomers to the art form how to use their lives, experiences, and relationships to find their own unique voices. She’ll be performing a solo piece and a sketch with her team WOCA (Women of Color Anonymous) at the Austin Comedy Festival in May. Starting in June, you can catch her back in NYC live at the PIT Theater performing with her Boogiemanja team “Typecast.” And if that’s not enough, keep your ears perked for Snipe’s new comedy podcast “It’s not even like that.”

A well-timed podcast or social media video can quickly put a comedian on the map. Maysoon Zayid, whose stand-up routines have had audiences worldwide in stitches, burst onto the scene with a viral TED Talk that has been viewed more than 6.5 million times. In her talk, Zayid, who lives with cerebral palsy (CP), makes light that though, like the great Jay-Z, she has 99 problems, her CP is only one of many—after all, she lives in New Jersey.

To inspire the next generation of youth growing up with disabilities, Zayid wrote “Shiny Misfits,” a graphic novel about a young disabled girl with big dreams. “There are so few disabled characters in the tween space and the ones you see are quite plainly pathetic,” Zayid said when asked about what inspired her work. “I wanted to reflect the Disco (disability community). I know we are diverse and we are complicated.”

Empowering Individuals with Disabilities

Are you facing discrimination in the workplace due to your disability? Are public places inaccessible, hindering your mobility and rights? Have you suffered a personal injury and need legal support? Look no further than Bell Law Group, PLLC. With over 20 years of dedicated service, we’ve been the beacon of justice for individuals with disabilities. Our team of experienced lawyers is committed to fighting for your rights.

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Meet Triathlete and Advocate Minda Dentler

By Emily Ladau

Minda Dentler competes on a handcycle. Photo by Kevin Charboneau.

Congratulations on your beautiful new children's book! What can readers expect?

The Girl Who Figured It Out is about my journey from being a paralyzed orphan from India to becoming an Ironman World Champion. In the story, I share different challenges that I experienced growing up, like learning how to walk with leg braces and crutches, to figuring out how to ride the school bus with my sister, to becoming an athlete as an adult, to learning how to swim, bike, and run as a wheelchair athlete. And through all of those challenges, I fall, I struggle, I fail. But through it all, I figure out a way to get myself back up and achieve whatever goal that I set for myself. I'm hoping that some of these lessons of hard work, believing in yourself, and never giving up can resonate with all kinds of readers.

What advice would you share with young people with disabilities who are just trying to figure it out?

Know that you have what you need inside of you to figure things out. The title of my book is based on my dad's words. He never told me I couldn't do something. Every time I'd come up to him and say, "I want to do X, Y, and Z," he'd say, "okay, figure it out." You have to just start. And it's okay to mess up. But keep doing it. Remember, we all have to adapt to our own circumstances, but you don't have to do it alone.

What disability rights issue is your biggest advocacy priority right now?

Accessibility is top of mind for me. I used braces and crutches for a lot of my life, and it wasn't until I turned 30 that I started shifting to becoming more of a wheelchair user. And that's because I wanted to save my arms, and also since becoming a parent, it was just a lot easier to be a mom in a wheelchair versus crutch around because I can't carry anything. And becoming a wheelchair user while living in New York City was tough because it's a very difficult city to navigate. I encountered accessibility issues on a regular basis, from navigating Access-A-Ride to the lack of curb cuts. And the elevator at my daughter's daycare was not working for a while even though I asked them to fix it so I could pick up my own kid at this daycare that I'm paying for. We shouldn't be experiencing these issues so long after the passage of the Americans with Disabilities Act.

Looking ahead, what's next on your exciting journey?

Right now, I'm really thrilled about the reception of the book, I'm going to continue to try to be a good mom and focus on work and my family. I did sign up for another triathlon this year because I like having a physical goal to work towards. And I am also focusing on some advocacy with the global immunization groups that I'm a part of. I'm one of the very few individuals who are living with polio today in the United States. Polio still exists in other parts of the world but there is a real possibility that we can eradicate it. I'm so glad I get to use my platform for good to raise awareness.
**A percentage of units is set aside for:**
- Municipal employees (5%)
- Vision/Hearing-disabled applicants (2%)
- Applicants living in Queens Community Board 14 (50%)
- Municipal employees (5%)
- Applicants living in New York City receive a general preference for apartments.

**Who Should Apply?** Individuals or households who meet the income and household size requirements listed in the table below may apply. Qualified applicants will be required to meet additional selection criteria. Applicants who live in New York City receive a general preference for apartments.

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### AVAILABLE UNITS AND INCOME REQUIREMENTS

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<th>Units Available</th>
<th>Annual Household Income1</th>
<th>Annual Household Income3</th>
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### How Do You Apply?

Apply online or by mail. To apply online, please go to [https://www.progressivemgmt.net](https://www.progressivemgmt.net).

### When is the Deadline?

Applications must be postmarked or submitted online no later than **JUNE 10, 2024**.

### Late Applications

**Late applications will not be considered.**

### What Happens After You Submit an Application?

After you submit an application, you will be asked to submit documents verifying your household size, identity of members of your household, and your household income.
LICM Welcomes All
By Beth Ann Balalaos, Access and Inclusion Program Director, Long Island Children’s Museum

Good cultural organizations should be spaces that welcome all. Long Island Children’s Museum (LICM) wants to be sure that individuals with disabilities feel that their space is made for them. The Museum’s LICM4all program was created to ensure that accessibility goes beyond compliance with the Americans with Disabilities Act and creates an environment as inclusive as possible to best fit the needs of a multitude of families.

One of the most successful components of LICM4all is the Friendly Hours program. Once a month, during Friendly Hours, the Museum is opened after-hours for a free night of play for children and adults with disabilities and their families. Friendly Hours was designed to provide a judgment-free zone where families can have positive experiences and meet some new friends in the disability community. Accommodations are made to create a welcoming environment: lowering lights and sounds throughout the Museum, limiting attendance, and having specially trained staff on hand to welcome guests.

Throughout the year, Friendly Hours programs replicate popular Museum events, including our New Year’s Eve and Halloween celebrations, to give visitors with disabilities the opportunity to experience these celebrations in a more manageable environment. Additionally, the LICM Theater offers sensory-friendly performance during each of its production throughout the season, which are timed as a bonus offering during Friendly Hours. Our hope is that these offerings allow visitors with disabilities and their families to feel supported and seen in a world where they are often forgotten or ignored. We see this come to fruition when visitors express their positive experiences during LICM4all events: “There are not a lot of places my kids are excited to go and feel welcome to be their totally unique selves,” shared one attendee. “They absolutely love being there, and being in community with other kids like them. This is truly a special experience, and for us too, to be among other families like ours! We feel grateful this exists.”

In addition to these successful programs, there are other elements of the LICM4all program to assist families during regular hours at LICM. These include:
- Dedicated Sensory Room - provides visitors who may be feeling overwhelmed or anxious with a place of respite.
- Sensory Backpacks – filled with a weighted lap pad, noise-reducing headphones, and other fidget items for use during a Museum visit.
- LICM4all App – enables visitors to travel through the Museum before their visit to feel prepared and ready for play.
- School Resources – Teachers booking trips to LICM or bringing LICM to their school through our Outreach program can speak with me to ensure we are best fitting the needs of their students who are a part of the Special Education Department.
- Social Guides to assist children and their adults with preparing for their trip to LICM.

I grew up as a student within the Special Education department. I made the decision in my senior year to be fully “mainstreamed” to get a feel for what college would be like. I’ve always known what it felt like to be seen or labeled as “other.” When I began my career at LICM overseeing the LICM4all program, the objective I gave myself was to create a space where kiddos like me could feel that sense of “otherness” slip away. I feel strongly based on the feedback we’ve received from families that this goal of removing stigma is working. In the future, as the LICM4all program grows, I look forward to the ways we can continue to achieve safety, belonging, and acceptance and for the disability community.

To check us out and experience LICM4all for yourself, visit licm.org/licm4all.