My second period of disability followed an injury suffered while playing volleyball; I broke both ankles, my right foot and my left leg (Lee 36). This time, the impact was much more apparent. First, my wife had to drive me to the hospital and help me reach the emergency entrance. When I was released, she had to help get me into the car, then struggle to load the wheelchair into the trunk. From that moment, for as long as I wore any casts, she was my chauffeur. If I went anywhere, she drove me. Her life suddenly became much more complicated.

When we returned home from the hospital, my wife again had to struggle to get me from the car and into the wheelchair. We then encountered another obstacle—the two front steps leading into our home suddenly looked like a mountain. My wife was unable to push or pull me up the steps in the wheelchair, and no one else was

By DAVID D. LEE
available to help. So, I maneuvered myself from the wheelchair into a sitting position on the first step, then used my arms to lift and push myself up and back to the second step, up it, then into the house, all the while dragging my feet.

The next challenge was getting back into the wheelchair. First, I tried to hoist myself from the floor, but found that I could not reach the wheelchair from the floor. Fortunately, my son arrived and was able to lift me into the chair. Over the next few days, I had to rely on my son or a neighbor to enter or leave the house. Finally, several co-workers constructed a plywood ramp that eliminated this problem.

**DAILY ACTIVITIES BECOME A CHALLENGE**

It quickly became obvious that my house was not designed for disabled access. Several doorways are not wide enough for a wheelchair—including the bathroom doors. To address this problem, we placed a folding chair just outside the bathroom door. With my wife’s help, I transferred from the wheelchair to the folding chair, folded up the wheelchair, pushed it into the bathroom and unfolded it. I then transferred back to the wheelchair, rolled it to the toilet and transferred myself to that. The process was reversed to leave the bathroom—six transfers in all each time I needed to use the bathroom.

Taking a shower was another challenge. First, the showerhead had to be replaced with a handheld unit. And, because the wheelchair could not be rolled into the shower, I could not shower unassisted.

To help, we placed a portable stool inside the shower to which I would transfer from the wheelchair. Once seated on the stool, my boot casts had to be removed, and my wife then helped me swing my legs into the shower. Next came the ordeal of trying to reposition the stool so I had enough room to wash. To accomplish this, I grasped the stool with both hands and bounced around 90 degrees to face the shower controls. Then, I had to move the stool back from the wall so there was room enough to rest my feet. Once finished, my wife had to help dry my legs and put the boot casts back on. I then transferred out of the shower and back into the wheelchair.

During my recuperation, my cooking was limited to reheating food in the microwave. I couldn’t even safely boil soup on the stove because I could not see or comfortably reach the stovetop from the wheelchair. Fortunately, my wife was able to cook larger meals so I would have food to reheat for midday meals.

Many other “little things” changed as well. For example, since most of the snack food in our house is stored in cupboards that cannot be reached from a wheelchair, I either did without or asked someone else to retrieve them. And, although I could make hot tea in the microwave, transporting it to another location was risky at best.

Once I had undergone surgery and was able to return to work, my wife had to modify her daily schedule. She had to get up earlier, prepare breakfast and fix a bag lunch for me (I normally fixed my own lunch), then help me into the car, load the wheelchair and drive me to work. Once there, she helped open doors and carried whatever I could not balance on my lap. This process was repeated at day’s end. Fortunately, her workhours complemented mine, but chauffeuring me around made her day much longer.

I also needed assistance when visiting the doctor. The surgeon’s office was located in a modified residential structure. Like my house, it was not originally designed for wheelchair access. Interior hallways were narrow, and only one exam room was wheelchair-accessible. In addition, the only disabled access was located at the back door, where a ramp had been installed. However, the door was located several feet above the parking lot, and the ramp was quite steep and narrow.

**LOSS OF INDEPENDENCE**

One of the worst outcomes of being disabled is a loss of independence. I take great pride in doing things for myself and consider myself to be handy around the house. I paint and do repairs; I even installed new windows and doors. When suddenly confined to the wheelchair, I was uncomfortable having to depend on my wife to help me with everyday activities and drive me everywhere. I also disliked having to ask family members to do things I had always done myself.

I hate to imagine how this situation would have turned out had my disability been permanent. Would my wife have had to change jobs? Take family sick leave? Would I have been forced to use more of my sick leave? Just how accommodating would our employers have been with a permanent disability?

Without question, had my disability been permanent, we would have been forced to move or remodel our home. A permanent ramp would need to be installed, doorways widened and the shower reconfigured. The kitchen would require modifications so I could become more self-sufficient. A modified vehicle would have been necessary so I could drive without use of my legs. Many of these items are not covered by our insurance policies and would have forced us to use money set aside for education or retirement.

**LESSONS LEARNED**

One lesson that disability teaches is patience. When you cannot do something for yourself, you must wait until someone else can (or will) do it for you. For example, some days I had to wait for my wife to pick me up after work so she could run errands or attend activities with the children.

One thing is certain: A disabling injury affects the injured person’s family. The severity of that impact is directly related to the severity of the disability. It changes daily habits and routines, and may require modifications to the home—some minor, some extensive.

Fortunately, my disability was only temporary. As a result of this experience, however, I have a renewed understanding of the importance of the safety and industrial hygiene professions. We must prevent others from having to experience fates similar to mine. We owe them that much.

**REFERENCES**


David D. Lee, CSP, CIH, M.I.S., is manager of industrial hygiene and occupational safety at the University of Nevada, Reno. He holds a Master’s in Industrial Safety from the University of Minnesota, Duluth. He is a professional member of ASSE’s Sierra Nevada Chapter and recently completed a two-year term as the Society’s Region II Vice President.

**READER FEEDBACK**

Did you find this article interesting and useful? Circle the corresponding number on the reader service card.

- **Yes** 31
- **Somewhat** 32
- **No** 33