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Photo courtesy of DVIDS

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Now in its 78th year and the official publication of Paralyzed Veterans of America, *PN* is a national, monthly magazine that covers news, health, research, lifestyle and issues of interest and concern to veterans and others with spinal-cord injury and disease. Anyone interested in submitting an article to *PN* should consult the Contributors Guidelines found on our website at pnonline.com. *PN* neither endorses nor guarantees any of the products or services advertised in the magazine. Readers should thoroughly investigate any product or service before making a purchase.

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MAY

Editor's DESK

It takes a lot of talented and dedicated people to run PVA Publications and create *PN* and *SPORTS 'N SPOKES* magazines. Not all of those people get enough recognition, but we want to try and change that a little this month since two of them have decided to call it a career.

Art and Production Director Ann Garvey has been with PVA Publications since 1987. Think about that. Spending 37 years working with the same organization is almost unheard of these days. Ann started in circulation and customer service and eventually moved to graphic design. The Utah native has had a profound impact on the layout, look and readability of both magazines. Ann's last day with us is May 31.

Another longtime and key staffer who is leaving us is Circulation Coordinator Suzi Hubbard. The person behind the voice you most likely hear when calling our office, Suzi has been with us since 1997. For 27 years, she's provided top-notch customer service, handled subscriptions and ensured that the magazines get to your mailbox on time. Suzi will step away from her position in mid-June.

A few short paragraphs hardly does justice to almost 65 years of combined service, but we wanted to make the effort to tell you about them and tell them thanks for their dedication, hard work and for making our office a nice place to work. Their replacements will certainly have some big shoes to fill. We wish Ann and Suzi a relaxing retirement and hope you enjoy their last issue of *PN*.



Andy Nemann

Andy Nemann, Managing Editor

contributing to this issue...



Suzi Hubbard



Ann Garvey

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PVA from the TOP

ROBERT L. THOMAS JR.
NATIONAL PRESIDENT

Annual Testimony

This past March, Paralyzed Veterans of America (PVA) National President and Chair of the Board Robert L. Thomas Jr., had the opportunity to speak before a joint hearing of the House and Senate Committees on Veterans' Affairs.

This testimony is an invaluable opportunity to instill in Congress the importance of veterans' health care, benefits, civil rights and caregiver support.

Th mas provided his testimony March 6, and it's the tradition of *PN* to publish president's oral testimony from this hearing. This is his:

"Chairman [Jon] Tester, Chairman [Mike] Bost and members of the committees, thank you for the opportunity to speak

with you today on behalf of the tens of thousands of veterans with spinal-cord injuries and disorders [SCI/D] who heavily rely on the benefits and health care available through the VA [Department of Veterans Affairs].

"The VA is the best health care provider for veterans with catastrophic disabilities. The department's SCI/D system of care provides a coordinated, lifelong continuum of services. Th re is no comparable private system of care in the community. Thus, preserving and strengthening VA's specialty care systems remains the highest priority for PVA, as it should be for you.

"Despite the Veterans Health Administration's [VHA] hiring successes last fiscal year and the flexibility gained by workforce provisions approved by the previous Congress, staffing levels within the SCI/D system of care are not improving.

"We continue to see the same staffing deficiencies at the SCI/D centers year after year, which affects everything from the qual-

ity of the care received to employee safety and well-being at these facilities.

"We are extremely concerned with VHA's decision to severely limit hiring in 2024. I urge you to monitor their hiring practices closely so veterans are not adversely affected.

"Another pressing need for PVA members is increased access to VA's Home and Community-Based Services [HCBS]. As eloquently discussed by Senator Elizabeth Dole, passing her namesake legislation, the Elizabeth Dole

COURTESY OF PARALYZED VETERANS OF AMERICA



Paralyzed Veterans of America National President and Chair of the Board Robert L. Thomas Jr., speaks March 6 before a joint hearing of the House and Senate Committees on Veterans' Affairs.

Home Care Act, would make critically needed improvements to VA HCBS, such as lifting the department's cap on the amount they can pay for home care, increasing access to the Veteran Directed Care [VDC] program and improving support to caregivers of veterans.

"The story of Andrew, an Air Force veteran who has ALS [amyotrophic lateral scler-

Preserving and strengthening VA's specialty care systems remains the highest priority for PVA, as it should be for you.

rosis], and his wife, Lisa, illustrates why this legislation must pass now. Andrew is currently bed-bound, paralyzed, vent-dependent and non-verbal. Lisa has had to work hard to secure the equipment and services needed to keep her husband alive and comfortable at home.

“Recently, they had to give up VDC in lieu of the Family Caregiver Program because expenses related to Andrew’s care were projected to exceed the cap later this year. This unnecessary disruption in the continuity of his care highlights the urgent need to eliminate the cap.

“I understand the provisions of the Elizabeth Dole Home Care Act are included in a larger package of legislation that is currently being considered by Congress. I cannot stress enough how important it is to get these provisions enacted into law now. Andrew and his family can’t wait any longer for the care he needs.

“Other veterans with SCI/D need to receive care at a specialized VA long-term care facility. Despite the grave need, the department’s capacity to provide such care is extremely limited. There are currently only six VA SCI/D long-term care facilities. Thus, veterans sometimes remain in the acute setting for months or years at a significantly greater cost because other placements, including in the community, are simply not available.

“We call on Congress to mitigate this shortage of long-term care beds by funding the six construction projects identified in my written statement and ensure existing facilities are fully staffed.

“Finally, neurogenic bladder and bowel dysfunction are common conditions among veterans with SCI/D, and they can lead to complications, re-hospitalizations and even death. Therefore, managing them requires ongoing, specialized attention.

“The VA can train and reimburse designated caregivers to provide this critical care, but the department’s current bowel and bladder program is fraught with problems like reimbursement delays. It lacks due process for the veteran. And unlike virtually all other VA payments, it imposes tax burdens on family caregivers.

“Harry Robinson, caregiver for his wife, PVA National Vice President Anne Robinson, pays about \$3,500 a year in self-employment taxes out of his reimbursement for providing her with this life-sustaining care.

“Allowing family members to provide bowel and bladder care leads to better outcomes for the veteran and saves the VA money, but Congress must reduce the burden of providing care on veterans’ caregivers. Codifying the bowel and bladder program would allow Congress to address the tax burden and make other needed improvements.

“In closing, I would like to note that these are just a few of the many issues affecting catastrophically disabled veterans. Others include the need for improved travel support to help veterans receive needed medical care, increased HISA [Home Improvements and Structural Alterations] grant rates to provide critical housing modifications and better access to inpatient mental health care and substance use disorder treatment for veterans with SCI/D. Information about these and other issues of importance to paralyzed veterans are included in my written statement.

“Thank you again for this opportunity to share our views and your commitment to paralyzed veterans and their caregivers. I would be happy to answer any questions you may have.” ■

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Free Daily Awe

Everyone says they have a morning routine, and mine includes watching the sunrise. However, much to my wife’s chagrin, this routine applies to the weekends, as well.

Sure, we have two kids who need to be at school on time, but my reason for getting up so early isn’t just to be punctual. Before the daily chaos begins, I enjoy sharing some quiet time with a fellow early-riser, my 3-year-old daughter, seated on my lap and my fresh cup of coffee nearby.

Yet, there’s something about watching the sun appear over the Laguna Mountains just beyond the San Diego skyline that makes this daily routine even more enjoyable, inspirational and, apparently, good for my health.

Cue the 5th Dimension’s classic hit *Let the Sunshine In*.

My morning routine also includes jumping on the computer to check the daily headlines the moment the kids leave for school. However, one morning I Googled, “Why do I feel better when watching a sunrise?” and discovered there was actually scientific justification for my solar-inspired good mood.

A team of researchers led by Alex Smalley, a PhD fellow at the University of Exeter in England,

has given scientific evidence to watching sunrises (and sunsets) as a method of making ourselves feel better.

Published in the *Journal of Environmental Psychology* in January 2023, Smalley’s team reported that viewing a sunrise or a sunset triggered a rise in sensations of awe.

The team of researchers also

believes these sensations of awe can lead a person to experience improvements in mood, social behavior and overall emotional well-being. The method used to make the connection between the position of the sun and the state of well-being was quite simple.

Researchers displayed images of urban and natural environments to more than 2,500 participants. By the time they reached the end of a pretty elaborate slideshow, it was apparent that images containing sunrises and sunsets triggered increases in feelings of awe, presumably due to an increase in the participants’ perceptions of natural beauty.

Ultimately, knowing that we can have some control over the production of these feel-good sensations should be motivation for all of us to go ahead and experience more sunrises and sunsets. Matter of fact, as the author of the report, Smalley says in a January University of Exeter release: “We’re all familiar with the urge to take a photo of a brilliant sunset or unexpected rainbow. The term ‘sunset’ has over 300 million tags on Instagram, and people told us they’d be willing to pay a premium to experience these phenomena, but of course, we can experience them for free.”

Clearly, this research indicates that getting up before the sun rises or taking the time to watch the sun set can be well worth the effort. The sensation of awe associated with these encounters triggers a small, but significant increase in mental well-being.

The best news about this study is that watching a sunrise or sunset has the same outcome, so if you’re not an early bird and can’t wake up in time to prepare coffee before the sun appears on the horizon, perhaps making a margarita and witnessing the natural beauty of the sunset will suffice.

I’m a consummate practitioner of this, as well, and from personal experience, sharing these moments with significant others increases the positive impact. Therefore, the next time my wife complains about me and our daughter getting out of bed to watch the sunrise on a Saturday morning, I can blame it on Smalley.

Please let me know your thoughts at al@pvamag.com. ■

Clearly, this research indicates that getting up before the sun rises or taking the time to watch the sunset can be well worth the effort.



COURTESY OF AL KOVACH JR.

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Dig In

People are now able to put some top quality meat on the dinner table while supporting Paralyzed Veterans of America (PVA).

Good Ranchers and PVA announced the Bring Veterans To The Table partnership in March. An online provider of American-raised meat, Good Ranchers is donating a portion of its proceeds from every meat subscription box directly to PVA.

The partnership will also see Good Ranchers sponsoring PVA events, offering veterans a discount on its products and launching exclusive co-branded meat boxes for both Veterans Day and Memorial Day that will contribute extra donations to PVA.

“We are thrilled to partner with PVA to support our nation’s heroes,” says Good Ranchers Chief Executive Officer Ben Spell in a March press release. “At Good Ranchers, we want to bring everyone to the table to share in the best of what makes life good, and no one deserves the spot of honor at the table more than our veterans. Through this partnership, we will positively impact the lives of paralyzed veterans and their families to create moments around great food that they’ll hopefully never forget.”

Both part of the Penske family, Good Ranchers and



Good Ranchers Chief Executive Officer (CEO) Ben Spell, left, and Paralyzed Veterans of America (PVA) CEO Carl Blake announced the new partnership between Good Ranchers and PVA in March.

PVA kicked off their partnership at the March 10 IndyCar Series’ Firestone Grand Prix of St. Petersburg in Florida.

“PVA is honored to partner with Good Ranchers and broaden awareness of the needs of today’s paralyzed veterans and their families,” says PVA Chief Executive Officer Carl Blake in the press release. “It’s partners like Good Ranchers who make what we do possible. With this cause marketing campaign, PVA will be able

to continue our important work of providing vital services to even more veterans across the country.”

For more information, visit goodranchers.com/pva.

VA Expands Care For IVF

Calling it a “tremendous step forward,” Paralyzed Veterans of America (PVA) is supporting the Department of Veterans

Affairs (VA) decision to expand in vitro fertilization (IVF) for veterans.

The VA announced March 11 it will provide IVF to eligible unmarried veterans and eligible veterans in same-sex marriages. The VA said it would also provide IVF to veterans using donated sperm or eggs.

PVA Chief Executive Officer Carl Blake says the organization has “long supported” access to this type of treatment, and the VA’s

decision has been needed for some time.

“VA’s announcement that IVF will be available to veterans who have disabilities as a result of their military service, regardless of their marital status, and without the need to be able to produce their own genetic materials, is long overdue,” Blake says in a March press release. “These veterans should be

able to fulfill their dreams of having a family and not be forced to go into debt to address a medical condition that results from their military service.”

Blake adds that while the decision is important, there’s more work to do.

“While VA’s announcement is a tremendous step forward, more advancements are still needed,” Blake says in the release.



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Clarification

A clarification is needed for the cover article in the March issue of *PN*, Straightaway Speed. The article states that the 1950 Studebaker Champion Starliner was “donated” to the Paralyzed Veterans of America Cal-Diego Chapter by Tom Loftin. However, the chapter actually purchased the car from Loftin for \$8,000. We apologize for any confusion.

“We support efforts to include access to assisted reproductive technologies in VA’s medical benefits package, which will finally recognize that infertility

is a medical condition and should be treated as such.”

For information, visit pva.org/policypriorities or va.gov/reproductivehealth.



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How to Get Qualified

Contact us to find out if you may be eligible. An evaluation by your provider at a SCI/D center is required to determine eligibility for use of an Ekso Indego Personal device.

*For full indications for use, visit: www.eksobionics.com/indications-for-use/



Voting Accessibility

This Nov. 5, we'll elect the next president of the United States, as well as candidates for other elected offices and various ballot initiatives.

Unfortunately, voters with disabilities often encounter accessibility barriers throughout the entire voting process. It's important for voters with disabilities to be knowledgeable about their voting accessibility rights and to report violations when they occur.

Common Barriers

When the Government Accountability Office visited 167 polling places during the 2016 general election, only 17% were fully accessible for people with disabilities who wanted to vote in person.

The most common barriers were steep ramps, lack of signs for accessible paths to the building, gravel parking lots and a lack of parking options. According to an analysis completed by the Election Assistance Commission on the 2020 election, about one in nine voters with disabilities encountered difficulties voting — double the rate of people without disabilities.

Unfortunately, evidence is showing that issues of accessibility aren't decreasing with each election cycle. A contributing factor is that many voters with disabilities are unaware of their rights and how to properly spot and report violations.

When voting at the polls, a person with a disability has the right to vote privately and independently and have an accessible polling place with an accessible voting machine.

To ensure these accommodations are met, voters with disabilities may seek assistance from poll workers who have been trained to use the accessible voting machine, or bring someone to help them vote. Voters with disabilities may also ask local election officials about any

available voting aids, voter assistance and absentee ballot procedures.

Voting in person is the way most Americans cast their ballot. However, many voters with disabilities who use wheelchairs or other mobility devices have had difficulties getting inside polling places to vote because of architectural barriers.



Parking

The Americans with Disabilities Act (ADA) requires a minimum 36-inch-wide route in and through the voting area. This accessible route should connect each area, from parking to the voting area and back again, and should be the same route all voters take.

Floor surfaces must be stable, firm and slip-resistant. There also must be enough clear floor space, at minimum 30-by-48 inches, in at least one voting station or booth to allow a voter using a wheelchair to approach, maneuver and leave the voting station.

Many polling places provide parking for voters, but the provision of

accessible parking is often overlooked. Parking areas may lack accessible parking spaces with adequate access aisles and signs, or parking may be on a sloped surface.

If there are multiple building entrances, permanent accessible parking may not be close to the entrance of the voting area. The ADA requires parking to meet specific minimum width requirements for spaces and access aisles, so voters with disabilities can get in and out of their vehicles.

A sign with the international symbol of accessibility must mark each accessible parking space. Van-accessible spaces must be designated as such on the sign at these spaces. If only one accessible space is provided, it must be a van-accessible space.

Accessible parking spaces must be in a level area with no steep slopes and on the shortest accessible route from parking to the accessible entrance to the polling place. If parking is provided at a polling place but there are no accessible parking spaces, election administrators can create temporary accessible parking by using traffic cones and portable signs to mark off the accessible spaces and access aisles.

Other Voting Methods

Curbside voting is another method of in-person voting that allows voters with disabilities to request that a ballot be brought outside of the polling place to an accessible location, such as a vehicle. Typically, election workers bring the voter a poll book to sign, a ballot and any other voting materials needed to cast a ballot privately and independently.

Not every state allows curbside voting. Check with the jurisdiction to see whether curbside voting is allowed and, if so, what provisions exist. If a polling location isn't accessible, a voter with a disability

can request curbside voting as an accommodation. Remind the election worker that all states are required to provide accessible methods of voting even if curbside voting isn't generally allowed.

Mailing in a ballot is an alternative option to voting in person. Voters with disabilities, particularly those with mobility impairments and those needing help with activities of daily living, are the most likely to vote by mail.

Both early voting and voting by mail are designed to make voting easier. All states, the District of Columbia and Puerto Rico permit voters with disabilities who know ahead of time that they won't be able to make it to the polls to vote by another method.

States have different laws and deadlines pertaining to absentee voting. To find state absentee ballot application deadlines, visit vote.org/absentee-ballot-deadlines. To learn more about voting methods in Puerto Rico, visit usvotefoundation.org/puerto-rico-voting-method.

People with disabilities who encounter problems in exercising their right to vote should file complaints to ensure their concerns are addressed. Complaints about voting access can be filed online with the U.S. Department of Justice (civilrights.justice.gov/report). Voters can also contact their state's disability protection and advocacy agency for assistance (ndrn.org/en/ndrn-member-agencies.html).

It's important for voters with disabilities to plan ahead and review the voting options in their state and the deadlines associated with each choice. It's also crucial to report violations to ensure this data is being collected and the violations can be addressed.

With a little planning, voters with disabilities should be able to cast their ballot in an accessible manner. For more information, visit eac.gov/voting-accessibility.

Anthonya James is an advocacy attorney with Paralyzed Veterans of America in Washington, D.C. ■

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WOMEN

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Happy Mother's Day

Mother's Day is the one day of the year dedicated to the person who gave you life, dried your tears, put on the Band-Aids and prepared you to face the challenges of the world.

Women with spinal-cord injuries or diseases (SCI/D) have probably faced some challenges that their moms could have never prepared them for, especially being a mom with a severe disability or disease.

Happy Mother's Day to all of those moms who have faced those challenges head-on, overcome them and are blessed with the most prestigious title you can own.

In celebration, here are several anecdotes from mothers with SCI/D.

Anne Robinson

Paralyzed Veterans of America (PVA) Texas Chapter

I was injured at 29 years old. My children were 6 and 8 years old, just learning how to read and were playing soccer and involved in everything that I could get them in.

Then, everything just stopped. My injury left me paralyzed from the chest down, and initially I had a tracheotomy, so I could not speak. The first thoughts were, "Will I be able to even see them grow up?" And then, "What will they think of me? How am I going to hug them? Will I embarrass them?"

Fortunately, I got my voice back. My husband, Harry, got very creative at making things adaptive, and my



Anne Robinson, center

kids were very resilient. All of my self-doubts slowly disappeared. My wheelchair became part of the fun.

Whether we were racing around, pulling them on roller skates or skateboards or just sitting in the movie theater, we were together. Besides being resilient, my children became more aware, more giving and forgiving — beautiful traits that they still exemplify today.

For me, Mother's Day is not about receiving material things. For me, it's a celebration for conquering one of the biggest challenges anyone can face: wearing the title of "Mom." Today, I give much thanks to God, because I am truly blessed to not only celebrate the title of "Mom,"

but that of "Gigi" also to two beautiful grandchildren, a role that is much easier than mom but just as rewarding.

Kate Bush

PVA Gateway Chapter

The kids were a senior in high school, a sophomore in high school and an eighth-grader. I had been the one to do driving lessons and school functions like concerts, plays and Junior Reserve Officers' Training Corps events until my injury happened. I wound up being in too much pain to attend them for a couple of years.

My oldest daughter turned 16 within three days of my injury, and because of it, she did not get her

sweet 16 party. My initial thoughts were that I was never going to see them get married or have kids. I've gotten to see all of that, just differently from how I pictured it.

I think I am more grateful now on every Mother's Day because I know I wasn't supposed to be here to see them. I was supposed to die before my 38th birthday, but the surgery saved me so that I'm able to be here. Even though I can't use my arms to hold my grandchildren, they have never seen me

any way other than in a wheelchair. My granddaughter loves to go for wheelchair rides with me and climbs in my wheelchair when I'm not in it. Because



Kate Bush, left

COURTESY OF ANNE ROBINSON

COURTESY OF KATE BUSH

of this, she is more accepting of other people in wheelchairs.

Cheryl Lewis

PVA Bayou Gulf States Chapter

When my wife, Julie, and I committed to be in a permanent relationship, my disability was a very long conversation. Actually, many conversations. I didn't

PHOTOS BELOW AND RIGHT COURTESY OF CHERYL LEWIS



Cheryl Lewis, above

want to add to her duties of caretaker, mom and daughter.

On the day we made our final decision, we celebrated with a date. We refer to the date as the "OK, let's do this date!" Well, off to the races we went. No longer in my mind was the question of what was expected of me.

Our children, Jess, 8, and Justin, 7, had an instant disabled mom, and I became an instant "Nan" at age 30.

Being a mom in stages of a disability is quite unique. Quickly, the new role presented unique challenges and obstacles, but it also offered a different perspective on parenting.

This created opportunities for growth and resilience for all of us. It required additional support and accommodations, such as specialized equipment and sheer determination in assistance with daily tasks for all of us. It took great determination and resourcefulness. But we learned each other's strengths and weaknesses. I knew as a disabled mom that I could provide, love, care and guidance to our children. It involved a lot of acceptance for all of us. So, with my domestic partner, Julie, and lots of prayers to God, we navigated societal attitudes and stereotypes about disability and being gay.

I would not change a lesson or a thing about our life, our children and two sets of grandchildren. It is a fulfilling and rewarding experience that showcases strength, adaptability and a deep bond with one's children and partner. I thank God every day for my family. Julie and I have made

it through 36 years. Sadly, we lost our Justin in 2023 to cancer. We are now assisting our daughter-in-law in guiding his 16- and 17-year-old kids, our last set of grands.

Except for a few major bumps along the way, life is a gift, and a family is the cherry on top! Enjoy your life! Never quit! Hooah!

Teresa Gaspar

PVA California Chapter

I am a mother of four grown children. At the time of my injury in 2016, my youngest was 16 and the only one left in the



COURTESY OF TERESA GASPAR

Teresa Gaspar

house. As a single mother, coming home newly injured, an incomplete quad, starting at the ceiling was scary, not knowing how I was going to get my high school freshman through his high school years.

Mother's Day used to be such an enjoyment with the cards and my youngest, Antonio, making the biggest and most of the holidays for us during my recovery and rehabilitation. I look forward to the day of Mother's Day when I can make a dinner for my son and his family. Now, Mother's Day reminds me of how proud I am to be a mother.

Compiled by Anne Robinson. ■

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Beautiful outdoor spaces, great city vibes and plenty of work await as the PVA Annual Convention returns to Minnesota.

Camaraderie, catching up with old friends, elections, financial matters, wonderful attractions and amazing natural beauty are all on tap this month, as the Paralyzed Veterans of America (PVA) Annual Convention returns to Minneapolis.

PVA's 78th Annual Convention visits the Hyatt Regency Minneapolis May 14-17. It's the second time in six years the convention has convened in the Twin Cities area and the fourth time overall its been held in Minnesota.

As always, the PVA Board of Directors will have a full slate of business to attend to, including electing the PVA Executive Committee (candidate statements were featured in the

by Andy Nemann



GOOGLE MAPS

Hyatt Regency Minneapolis



Minutes

ILLUSTRATION BY KERRY RANDOLPH © GETTY IMAGES/AERIAL_VIEWS

April issue of *PN*), approving a national budget, hearing from guest speakers, handing out awards and considering various resolutions.

It's easy to see there's a busy and important agenda to cover, but that doesn't mean there isn't time to have some fun and explore the area. Located in the downtown area, the Hyatt Regency Minneapolis is close to more things to see and do than any one article could cover. However, these are a few ideas to help get you started.

Meander The Mall

One of the best places to start exploring the area is right out the front door of the Hyatt Regency Minneapolis.

Situated on the road Nicollet Mall, the hotel is only about a 10-minute roll to the shopping and dining district called Nicollet. The 12-block-long, pedestrian-friendly area is lined with shops, bars and restaurants with sidewalk seating surrounded by art and greenery.

The area underwent a \$50 million, 28-month renovation in 2018 that added more greenery, sculptures, other artwork and pedes-

trian amenities. The area's most recognized sculpture is the Mary Tyler Moore statue from the TV show located at the corner of Nicollet Mall and 7th Street.

Nicollet Mall
in downtown
Minneapolis features
bars, restaurants,
shops and art.



© GETTY IMAGES/BARRY WINIKER

A nice place along Nicollet Mall to relax outside is Peavey Plaza, just about a block from the hotel. The outdoor space between South 11th and 12th streets features seating around a shallow pool and fountains with plenty of trees to provide shade.

For more information, visit minneapolis.org.

Explore Green Space

More great outdoor space can be found just two blocks east of the Hyatt Regency Minneapolis at Loring Park and the Minneapolis Sculpture Garden.

Covering almost 34 acres, Loring Park is the largest park in the downtown area and is home to multiple events and celebrations throughout the year. Centered around Loring Pond, the park features miles of walking and biking paths, a garden, athletic courts and a dog park at the north end.

Amazing art and a beautiful garden come together

Covering almost 34 acres, Loring Park is the largest park in Minneapolis' downtown area.

just across the street from Loring Park. A pedestrian bridge takes you from the park to the 11-acre Minneapolis Sculpture Garden that's part of the Walker Art Center just south of the garden.

The Minneapolis Sculpture Garden is free and features more than 60 sculptures. The



© GETTY IMAGES/DALLAS JACULAK

Across the street from Loring Park, the 11-acre Minneapolis Sculpture Garden features more than 60 sculptures.



© GETTY IMAGES/AMB-MD

largest urban sculpture garden in the country, the artwork is located along multiple accessible pathways amid a lush green space.

If you'd like to check out some art indoors, head to the Walker Art Center, which is one of the most visited modern and contemporary art museums in the country. Focused on visual art, stage, cinema, publishing and digital media, it features 65,000 square feet of exhibition space that includes more than 15,500 pieces, the McGuire Theater and Walker Cinema.

It's closed Monday and Tuesday, and the center's admission ranges from \$18 for adults to \$9 for active military and their families. Admission is free from 5 to 9 p.m. every Thursday.

For more information on the Minneapolis Sculpture Garden or the Walker Art Center, visit walkerart.org.



Mississippi River Views

Besides being close to shopping, dining and outdoor spaces, the Hyatt Regency Minneapolis is near a unique blend of urban and natural beauty along the mighty Mississippi River.

About 1½ miles northeast of the hotel, you'll find one of the most iconic places in Minneapolis: Mill Ruins Park. The Stone Arch pedestrian and bicycle bridge provides dramatic sights and sounds of the 49-foot St. Anthony Falls, Mississippi River and Minneap-

olis skyline. Originally built as a railroad passage in the 1880s, the bridge has easy access between Mill Ruins Park and Father Hennepin Bluff Park on the east side.

The river lock on the west side of the falls is no longer in operation, but free guided tours are offered three times a day from the St. Anthony Falls Visitor Center located on the west side of the river in Mill Ruins Park.

For more information, visit minneapolisparcs.org.

The 49-foot St. Anthony Falls can be viewed from the Stone Arch Bridge.



Mill Ruins Park features the Stone Arch pedestrian and bicycle bridge.



The more than 160-acre Minnehaha Regional Park is one of the area's most popular parks.

Follow The Falls

If you'd like to see more of the Mississippi River away from the city core, then Minnehaha Regional Park is only a 15-minute drive southeast of the hotel.

One of the area's oldest and most popular parks, it features more than 160 acres along the banks of the Mississippi River with limestone bluffs, river overlooks and the iconic 53-foot tall Minnehaha Falls.

Watch the water from the falls crash into the pool below, then move past paths through trees and flowers to see the Minnehaha Creek take the water to the Mississippi River. Minnehaha Regional Park also has a seasonal restaurant and ice cream stand.

Target Field is home to baseball's defending American League Central Division champion Minnesota Twins.

Additionally, the Minnesota Veterans Home-Minneapolis is on a 53-acre wooded campus overlooking the Mississippi River toward the southern end of the park (mn.gov/mdva/homes/minneapolis).

For more information, visit minneapolisparcs.org.

Catch A Game

America's national pastime is in full swing this month, and you can catch a baseball game with a championship contender during the convention.

The defending American League Central Division champion Minnesota Twins are hosting the New York Yankees May 14-16 at Target Field. The Twins won the division title for the third time in five years last season and are expected to battle for it again.

Located less than a mile from the hotel, Target Field is an open-air ballpark with views of the Minneapolis skyline. It features almost 800 accessible seats, and each row has a power outlet to charge electric wheelchairs. Accessibility is also kept in mind at the concession stand, where all counters are 8 inches lower than usual to help customers who use wheelchairs.

For more information, call 612-659-3654 or visit twinsbaseball.com.



© GETTY IMAGES/ADAM BETTCHER

Enjoy Retail Therapy

It's tough to have an article of things to do in the Minneapolis area without talking about Mall of America.

Located about 11 miles south of the hotel in Bloomington, Minn., near the Minneapolis-St. Paul International Airport, the mall is one of the biggest in the world. It covers as much ground as nine Yankee Stadiums and features

best shark exhibit on the planet" by TV's Animal Planet channel.

If that's not enough to keep you busy, take a step back to your childhood drawing days at Crayola Experience + Store. The experience features 25 hands-on activities dedicated to one of the world's favorite drawing instruments.

For more information on the mall or its attractions, visit mallofamerica.com.



© GETTY IMAGES/MARK ERICKSON

Mall of America features about 500 stores and 50 restaurants.

up to 500 stores and roughly 50 restaurants. As if being a shopping mecca wasn't enough, Mall of America also has some unique attractions.

Kids and probably many adults will love Nickelodeon Universe, located in the center of the mall. The nation's largest indoor theme park has 7 acres of entertainment and more than 25 rides, including a roller coaster.

For something a bit more subdued and maybe even educational, check out SEA LIFE Minnesota Aquarium. The aquarium features roughly 10,000 sea creatures and a 300-foot glass underwater tunnel that was named "the

More Minnesota

Obviously, the Twin Cities area is a big place, and there's plenty more it has to offer. But that is best left for you to discover.

If you're looking for more things to do, places to see or just want a good place to eat, be sure to check with members of the PVA Minnesota Chapter. They should have plenty of ideas.

For more general information on Minneapolis and the Twin Cities area, visit minneapolis.org or visit-twincities.com. ■



Making A

May is when we honor fallen veterans, but planning a military funeral is a challenging task.

by Lisa Abelar

When Leticia Jackson's husband, U.S. Army veteran Anthony Aaron Jackson, died on Feb. 10, 2022, she had to manage not only her grief, but the details of his burial.

He had expressed his wish to be buried at Arlington National Cemetery, a storied, prestigious and iconic Army-maintained cemetery in Virginia where nearly 400,000 people are buried. Arlington, however, is located nearly 2,000 miles from the Jacksons' home in El Paso, Texas.

"Upon his passing, it was a matter of where do I start and who do I contact?" Leticia says.

That bewilderment is likely relatable for surviving family members and spouses of military veterans. A military funeral involves detailed planning and coordination, and many times it requires the people planning it to navigate a path they've never been down.



COURTESY OF LETICIA JACKSON





ILLUSTRATION BY KERRY RANDOLPH PHOTOS COURTESY OF DVIDS

Memorial

While some veterans are eligible for or have a desire to be buried at Arlington National Cemetery, others may choose a local veterans cemetery or a veterans section at

a local cemetery. Each option is a distinctly individual experience.

That landscape is the foundation for the importance of people like Jason McDonald, a Paralyzed Veterans of America (PVA) national service officer (NSO). As an NSO, McDonald acts as a guide for people like Leticia, helping them organize needed documentation, coordinate services and understand terminology.

Navigating The Process

Put simply, when McDonald is working with surviving spouses or family members of a veteran, he's focused on supporting them through the burial process.

There are times that the relationship becomes so bonded that the family extends an invitation to McDonald to attend or act as a pallbearer at the funeral. Prior to that, though,

Army veteran Anthony Aaron Jackson, pictured left in uniform, died Feb. 10, 2022, and requested to be buried at Arlington National Cemetery in Virginia.



COURTESY OF LETICIA JACKSON



COURTESY OF LETICIA JACKSON



Anthony Aaron Jackson's family members held a local service with military honors in El Paso, Texas, prior to his burial at Arlington National Cemetery, below.

COURTESY OF LETICIA JACKSON



COURTESY OF LETICIA JACKSON



he makes sure they understand the details of the situation they are wading through.

"We help them navigate the process and answer questions," McDonald says. "A lot of times, a majority of spouses don't have a military background to know the acronyms the government loves to use."

One of the most important acronyms is the DD214, which identifies a Department of Defense form known as 214. Anyone who serves receives the form at the end of active duty, and it includes any awards or medals the individual has earned over the course of his or her career.

For Leticia, Anthony's DD214 confirmed that he retired from the Army after 25 years of service, and he was a Legion of Merit awardee. With that information in hand, Leticia contacted Arlington and began the process of arranging a ceremony.

"Four weeks later, they [Arlington] called back and gave me a concierge," Leticia says.

During that waiting period, which is typical when planning a burial at Arlington, Leticia arranged for a local service with military honors in El Paso. Regulations allow for veterans who die to receive one service with military honors, and family members just need to choose where those honors take place. For Leticia, the choice was pretty obvious.

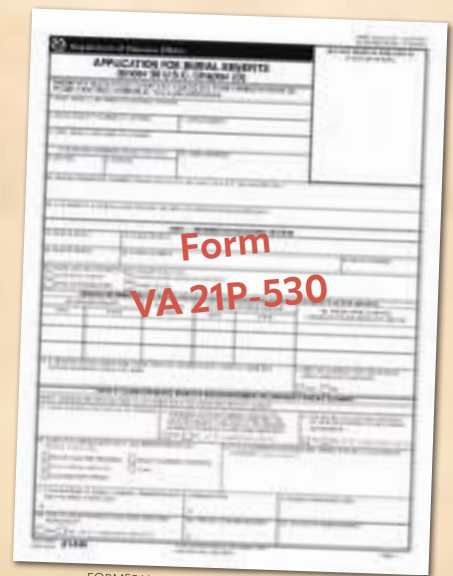
"He [Anthony] has his church community and his friends here, so I chose to have it done here," she says of their hometown.

In the weeks that followed, Leticia arranged for Anthony's body to be flown to Arlington, where it would await burial.

Burial Benefit

The Department of Veterans Affairs (VA) provides \$2,000 toward burial expenses for veterans. It's called a burial benefit, and accessing it requires a surviving family member to complete a VA 21P-530 form.

If additional transportation costs come into play for a deceased veteran, such as it does for transporting a body to Arlington or another cemetery, family members submit the same form again to seek reimbursement for those costs. And some-



Form
VA 21P-530

FORMSPAL.COM/PDF-FORMS/OTHER/VA-FORM-21-530/



COURTESY OF DVIDS

times, depending on the airline, a ceremony takes place during transport.

“The airlines, when they know they are transporting the remains of a fallen veteran, they do honors when they are loading and unloading the casket from the plane,” McDonald says.

During that time period of waiting, which typically spans several months, Leticia worked with her assigned concierge on details that ranged from scripture specifications for Anthony’s headstone to plot availability. She also connected with a chaplain from Arlington, who took the time to learn about her, Anthony and their family.

“It was all preparation and getting everything ready, so when the time came everything would be ready,” Leticia says.

Even if a veteran isn’t being buried at Arlington, McDonald says extended wait times for burial are to be expected. Local veterans cemeteries or state veterans cemeteries can be booked out several months in advance.

Planning & Coordination

The National Cemetery Administration (NCA) within the VA maintains and administers national cemeteries.

The NCA estimates that nearly 5.3 million people have been honored with a burial at a national veterans cemetery. In 2022, about 22% of the 582,000 veterans who died that year were buried in a national, state or tribal cemetery, according to NCA data.

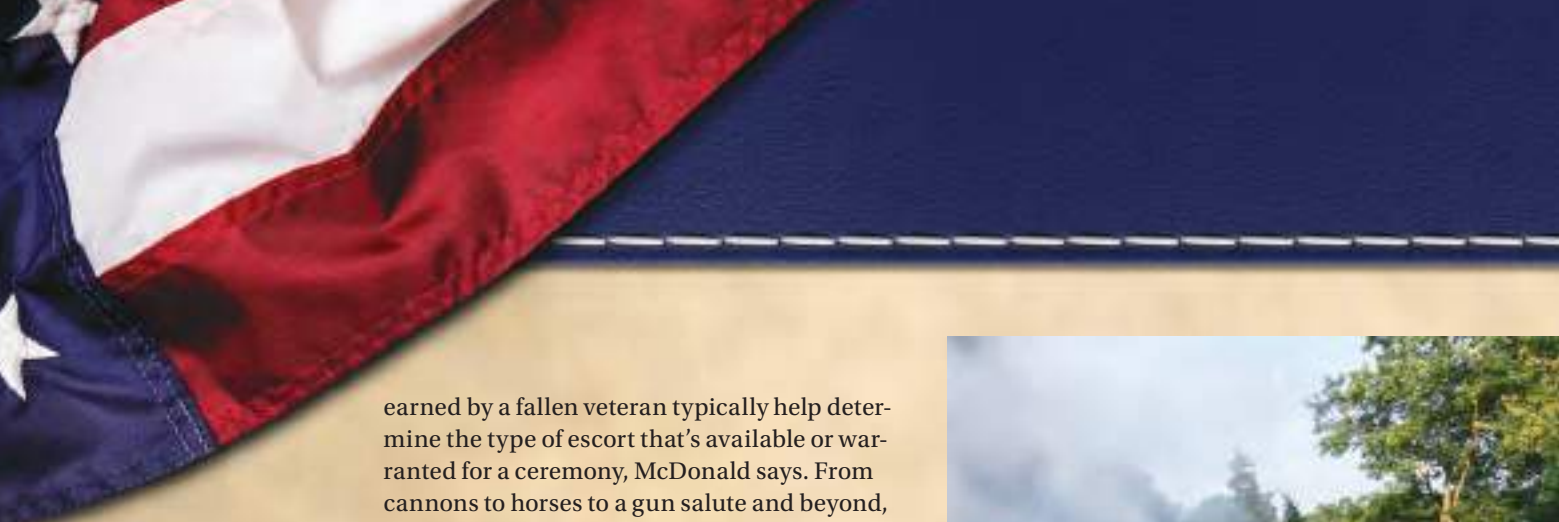
Influencing the wait time for burial, beyond the demand for military burials, is the type of burial that will take place. Honors

Expect extended wait times for military burials.

Depending on the airline, a ceremony takes place when a veteran’s remains are transported.



COURTESY OF DVIDS



earned by a fallen veteran typically help determine the type of escort that's available or warranted for a ceremony, McDonald says. From cannons to horses to a gun salute and beyond, those ceremonies take additional planning and coordination.

PHOTOS THIS PAGE COURTESY OF DVIDS



Every family of a fallen veteran is entitled to a burial flag.

McDonald has found that families planning a military burial at a smaller veterans cemetery or in a more rural area have had luck securing traditional graveside memorial services through local veterans groups, such as the Veterans of Foreign Wars of the U.S. or a nearby base.

And every family of a fallen veteran, regardless of where that veteran is buried, is entitled to a burial flag. They're available at local post offices, through funeral directors or through regional VA offices.

"And they're free," McDonald says.

With an understanding that the military burial process can be challenging to navigate at a time of general distress, McDonald advises the PVA members he works with to prepare their families ahead of time by clearly communicating their wishes and offering advice on obtaining important documentation or connections once the time comes to make arrangements.

And, most importantly, he tells his clients to connect him with their family, especially if they're living with a terminal condition.

"In my experience, a lot of spouses are not rightfully in their 100% state of mind. Twenty million things are going through their heads all at once. A veteran will know more than their spouse.



Escorts and ceremonies such as cannons, horses and gun salutes take additional planning.





PHOTOS: THIS PAGE COURTESY OF DVIDS



Local veterans groups may provide traditional graveside memorial services at smaller veterans cemeteries or in rural areas.

The more you can lay out, the better and easier it is for them to go through that process,” McDonald says. “Knowing I’m helping my fellow veterans and their families get through a tough time in their life is satisfying. Just the fact that knowing I’m helping them get through that time is what keeps me going.”

A Beautiful Ceremony

For Leticia, the support of PVA and the concierge at Arlington was invaluable and comforting.

When she and her daughter arrived for the ceremony at Arlington, which took place April 22, 2022, the women were running a bit behind schedule. It meant their vehicle was at the back of the procession.

The concierge insisted that her car ride directly behind the vehicle carrying Anthony. Leticia says she initially brushed off the offer, but she soon realized it was non-negotiable. The ceremony called for her to be behind Anthony, supporting him as he was escorted to his final resting place.

“It was such a beautiful little ceremony,” she says. “The color guard was there, funeral detail personnel and pallbearers. My nephew and his wife were stationed there, so he was on the funeral detail. It was an honor.”

For McDonald, an Army veteran himself, the honor is his.

“When a veteran meets a veteran, it’s immediate brother or sisterhood. We all chewed the same dirt, and we all know what we’ve been through to get where we’re at,” he says. “In the Army, you talk about honor and integrity and courage and duty, so for me it’s an honor to assist families through that process. To a certain degree, with some families, you almost become part of the family.”

For more information or help with burial details for a veteran, contact a PVA NSO from the roster on page 43.

A freelance writer, adventurer and urban farmer living in Gilbert, Ariz., Lisa Abelar is a frequent contributor to PN. ■

Clear communication and preparation can help families after the loss of their loved one.





IMPACTFUL

by Cheryl Vines

photos courtesy of
Paralyzed Veterans
of America

PVA is providing
more than
\$1 million for
studies that could
help secondary
conditions of SCI.

After a spinal-cord

injury (SCI), secondary conditions such as respiratory distress, pressure injuries, pain, and bowel, bladder and sexual dysfunctions may have the greatest impact on quality of life.

The study titled Cause of Death Trends Among Persons With Spinal Cord Injury in the United States: 1960-2017, published in the Nov. 17, 2021, edition of the *Archives of Physical Medicine and Rehabilitation*, found the two leading causes of death after SCI are pneumonia and septicemia.

With the help of the Paralyzed Veterans of America (PVA) chapters and generous donors, the PVA

Research Foundation has awarded more than \$1 million to six grants for 2024 in the categories of basic science, clinical research, fellowship and design and development.

This year's grant recipients all address secondary health effects after SCI, pre-clinically (in nonhumans) or clinically (in humans). The impact of their studies may one day save lives and improve function and quality of life in those individuals living with SCI.

Basic Science

Brendan Dougherty, PhD
Regents of the University of Minnesota
Minneapolis

Testosterone supplementation to improve respiratory recovery after cervical spinal-cord injury

\$200,000



Brendan Dougherty, PhD, standing

RESEARCH

ILLUSTRATION BY KERRY RANDOLPH © GETTY IMAGES/ LUISMMOLINA/ URFINGUSS/ MOHAMMED HANEEFA NIZAMUDEEN/ SCIENCE PHOTO LIBRARY

Nearly all men with SCI experience low circulating testosterone levels in the first year post-injury, and men with SCI will experience a 50% greater age-related decline in testosterone than uninjured men.

Persistent reductions in circulating testosterone may limit rehabilitation advances beyond the sub-acute period and hamper functional improvements in motor recovery. The fundamental hypothesis of this project is that testosterone supplementation will be sufficient to improve breathing function following cervical SCI in male rats.

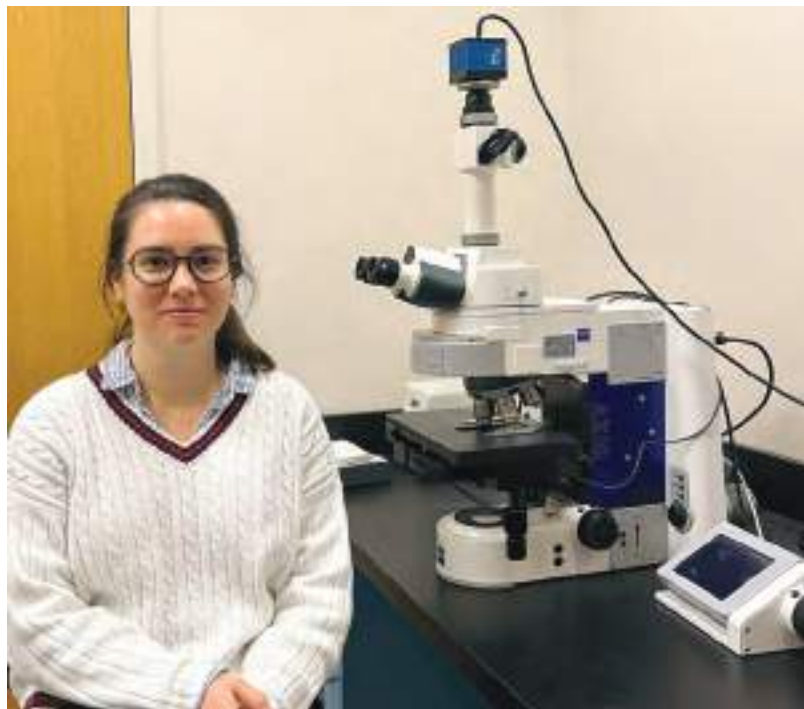
The two primary aims of this grant proposal are to: 1) Determine if testosterone supplementation is sufficient to improve breathing function in male rats with sub-acute (two-week) cervical SCI, and 2) Create a chronic cervical SCI model that recapitulates the persistent reductions in circulating testosterone experienced in men in order to test if testosterone will improve breathing function in chronic (six-week) cervical SCI.

Pauline Michel-Flutot, PhD
Thomas Jefferson University
Philadelphia

Reconnection of respiratory neural circuitry after chronic spinal-cord injury using transplantation of a synaptogenic astrocyte subpopulation

\$150,000

High SCI results in persistent respiratory dysfunction and greatly reduced quality of life due



Pauline Michel-Flutot, PhD

to disruption of circuitry controlling the diaphragm, the main inspiratory muscle.

This project tests a highly innovative strategy of synaptogenic astrocyte subpopulation transplantation aimed at promoting reconnection of this disrupted respiratory circuitry in a preclinical model of chronic cervical SCI, which is critical given that the vast majority of affected individuals are chronically injured.



Michelle Trbovich, MD

By examining whether synapto-genic astrocyte trans-plantation enhances rVRG-PhMN synaptic reactivity, this research can have an impact on breathing and consequently lead to robust restoration of dia-phragm function.

Clinical Research

Michelle Trbovich, MD
Audie L. Murphy Memorial Veterans' Hospital
San Antonio

A Proof-of-Concept Study of Cutaneous Pressure-Induced Vasodilation Alteration in Persons with Spinal Cord Injury; Implication for Pressure Ulcers
\$199,605

A pressure ulcer is an injury to the skin result- ing from long-term pressure.

In persons without SCI, there is a protec- tive reflex response of the blood vessels open- ing up to prevent loss of blood supply to skin during prolonged pressure. This is called pres- sure-induced vasodilation (PIV). It is unknown if PIV is still intact after SCI. Evidence suggests PIV may be impaired after SCI due to higher levels of inflammation, impaired blood vessel structure and the lack of skin sensation.

This project compares PIV response between persons with SCI and non-injured individuals. It will also assess markers of inflammation and blood vessel function to better understand the mechanisms behind the findings. This project is a starting point in identifying a cream that can potentially restore PIV after SCI and ultimately contribute to preventing pressure ulcers.

Yen-Sheng Lin, PhD
University of Texas
Austin, Texas
Novel Shear Wave Elastography Based Radiomics for Early Detection and



Yen-Sheng Lin, PhD

Monitoring of Spinal-Cord Injury-Induced Heterotopic Ossification
\$200,000

About 16% to 53% of individuals with SCI develop heterotopic ossification (HO) around contracted joints, resulting in decreased inde- pendence and quality of life.

HO is often misdiagnosed as a bone tumor, creating the need not only to detect but also to diagnose HO. This study will develop a novel and easily deployable shear wave elastography- based radiomics system to characterize the pre-HO soft tissue properties and longitudinal changes around the joints following SCI.

Successful completion of the study will provide proof of concept for early detection of HO. In addition, this study will enable fur- ther research on advancing a multi-modality radiomic-based platform to aid timely diagno- sis and management of HO.

Fellowship

Martín Calderón-Juárez, MD, PhD
The University of British Columbia
Vancouver, British Columbia
Preventing autonomic dysreflexia via heart rate variability prediction and spinal-cord stimulation
\$149,920

Autonomic dysreflexia (AD) is a sudden and life-threatening increase in blood pressure, mainly triggered by bladder overdistension.

AD is a major concern for people living with SCI, as it increases the risk for cardiovascular complications and mortality. Current treatments for AD have inherent limitations, including



Martín Calderón-Juárez, MD, PhD, left

hypotension and delayed onset of action when immediate response to treatment is needed.

This proposal aims to predict the occurrence of AD by developing an algorithm based on heart rate variability. This detection algorithm will be used in conjunction with targeted transcutaneous spinal-cord stimulation to prevent dangerous increases in blood pressure during urological procedures, natural bladder filling after fluid intake and routine urinary catheterization.

The broader SCI community will benefit from the outcomes of the project, which will improve quality of life and advance health care for individuals with SCI.

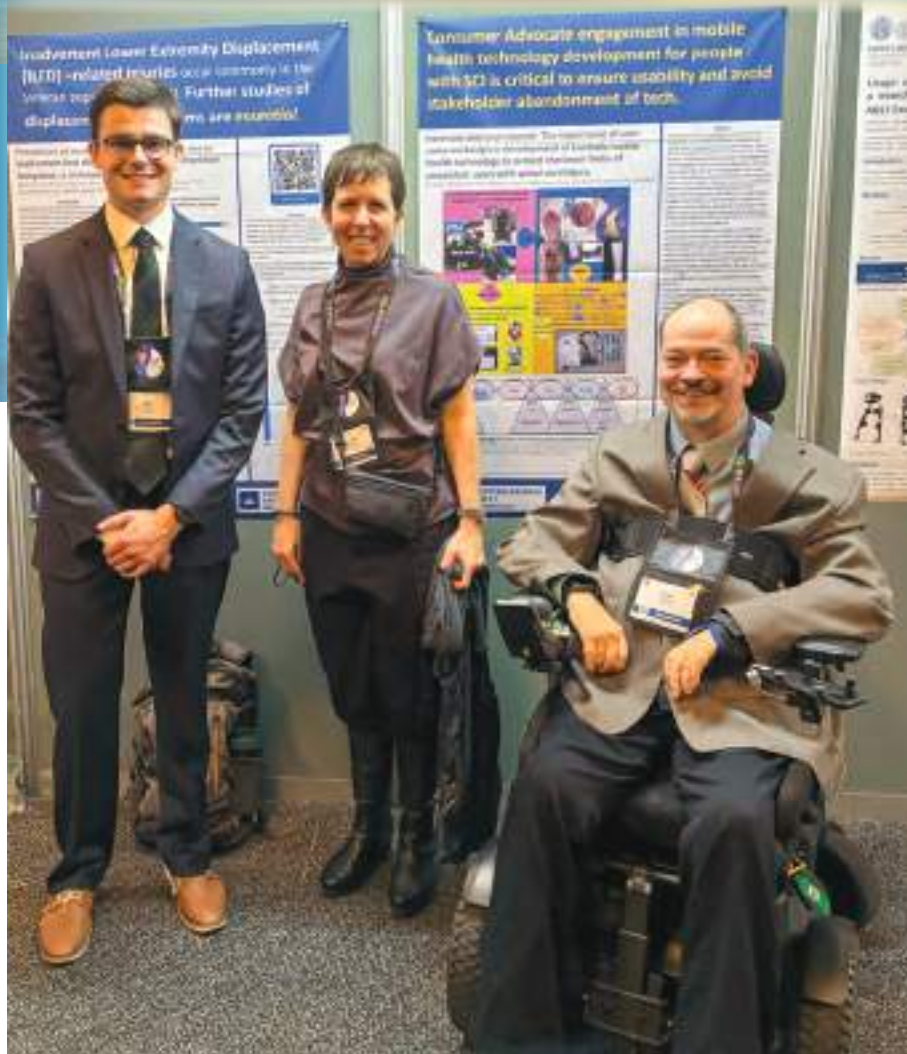
Design & Development

Mary Kristi Henzel, MD, PhD
Louis Stokes Cleveland Department of Veterans Affairs Medical Center Cleveland

Insensate and Unprotected: Development & testing of FootSafe technology for prevention of injuries caused by inadvertent lower extremity displacements from wheelchair footplates in Veterans with SCI/D

\$199,861

Wheelchairs give veterans with paralysis due to SCI freedom to move and better quality of life.



Mary Kristi Henzel, MD, PhD, center

While wheelchairs help such veterans get around, they can cause injury for veterans who cannot feel or move if one of their legs or feet falls off the wheelchair footplate or sits incorrectly on the wheelchair foot rest. Injuries have included broken legs, pressure ulcers and such bad scrapes that the veteran's leg had to be amputated.

The FootSafe foot pressure and position warning system will be studied to improve the ability to sense foot and wheelchair motion and improve veterans' ability to alert to foot displacements while driving. The project will target veterans with SCI and seating therapists to determine how a smartphone app for Foot-Safe can make it usable and helpful.

The 2025 PVA Research Foundation grant cycle opened April 1. Grant applications address SCI, multiple sclerosis or amyotrophic lateral sclerosis in basic science, clinical research, design and development and fellowships. For more information, visit pva.org/research-resources/research-foundation. ■



IMPACTING LIVES THROUGH SCIENCE: Funding Research to Improve Life After SCI/D

2025 GRANT CYCLE OPENS APRIL 1

Paralyzed Veterans of America Spinal Cord Injury Research Foundation funds grants to promote innovative research to find treatments and cures for paralysis, support efforts to improve lives of individuals living with SCI/D, and fund SCI/D Fellowships to encourage young researchers to specialize in the area of spinal cord research.

Awards will be made in November 2024 for the funding period beginning on **January 1, 2025**.

Research Grants: Up to \$200,000 (2-3 years)

Fellowship Grants: Up to \$150,000 (1-3 years)

PROPOSALS ARE ACCEPTED IN THE FOLLOWING AREAS:

- Basic Science
- Clinical Applications
- Design & Development/
Assistive Technology
- Post-Doctoral Fellowships

Grant application period opens **April 1, 2024**.
All applications must be submitted online by **July 1, 2024**.

Apply at: <https://pva.aibs-scores.org>

Late applications will not be accepted.

For additional information, contact:
Lindsay Perlman | 202.416.7611 • LindsayP@pva.org



in depth

SCI Needs Survey

There's a lot of information out there for people with spinal-cord injuries (SCI). Some is helpful. Some is actionable. Some is garbage.

Good information can take you down the path for healthy living, while bad information can result in hardship. How do you know how to decipher the difference?

Purpose

In this day of information overload, finding the most accurate and updated information is not easy.

The North American Spinal Cord Injury Consortium (NASCIC) and its principal members, including Paralyzed Veterans of America (PVA), are trying to understand and then overcome the information gap experienced by people living with SCI in the community. But the team needs to hear from you first.

Nearly 20 representatives from the SCI community have developed a survey to help in this endeavor.

This survey is an effort to better understand the health information sources people use and value, as

well as the health information needs and gaps among the SCI community. The team is seeking input from people with SCI lived experiences, including those living with SCI, family members, caregivers and spouses and partners.

In this project, NASCIC and its principal members are trying to understand how people with SCI

access and evaluate SCI health information across different spectrums of the community.

This survey was developed by people living with SCI for people living with

In this project, NASCIC and its principal members are trying to understand how people with SCI access and evaluate SCI health information across different spectrums of the community.



COURTESY OF NORTH AMERICAN SPINAL CORD INJURY CONSORTIUM

SCI. The results will be shared throughout the community and will be used to help people living with SCI. The survey takes about 20 minutes to complete. You can then sign up for a chance to win a gift card for your participation.

Your Input

The heart of the project is the active working group consisting of repre-

sentatives from many key nonprofit and advocacy organizations.

In addition to PVA, those organizations include United Spinal Association, Christopher & Dana Reeve Foundation, Praxis Spinal Cord Institute, Spinal Cord Injury Research Evidence, SCI Health Coaches, Back-Bones, Unite 2 Fight Paralysis, Cody Unser Foundation, Canadian Spinal Research Organization, SCI-British Columbia, SCI-Ontario, Back to Independence Rehab, SCI-Saskatchewan, Facing Disability and the Kessler Foundation.

NASCIC was established to be a community-driven organization governed by people with lived experience of SCI. All members of the executive council and NASCIC officers are individuals living with SCI.

Since its founding in 2018, the organization has grown to over 500 members consisting mainly of nonprofit organizations directly representing people living with SCI and individuals with SCI.

NASCIC serves the SCI community across North America by identifying gaps, communicating resources and being a conduit of collaboration.

Your input and support are invaluable in improving SCI health resources. To complete the survey, visit [surveymonkey.com/r/scineedsinfosurvey](https://www.surveymonkey.com/r/scineedsinfosurvey).

Contributor: *North American Spinal Cord Injury Consortium* ■

VA Health Care Expansion

The Department of Veterans Affairs (VA) announced in late February that all veterans who were exposed to toxins and other hazards while serving in the military — at home or abroad — are now eligible to enroll directly in VA health care.

This means all veterans who served in the Vietnam War, the Gulf War, Iraq, Afghanistan, the Global War on Terror or any other combat zone after 9/11 will be eligible to enroll directly in VA health care without first applying for VA benefits.

In addition, veterans who never deployed but were exposed to toxins or hazards while training or on active duty in the United States will be eligible to enroll.

Specifically, any veteran who participated in a toxic exposure risk activity (TERA) — at home or abroad — is eligible for VA health care. The VA has determined that veterans who were exposed to one or more of the following hazards or conditions during active duty, active duty for training or inactive duty training participated in a TERA: air pollutants (burn pits, sand, dust, particulates, oil well fires and sulfur fires); chemicals (pesticides, herbicides, depleted uranium with embedded shrapnel and contaminated water); occupational hazards (asbestos, industrial solvents, lead, paints includ-

ing chemical agent resistant coating and firefighting foams); radiation (nuclear weapons handling, maintenance and detonation, radioactive material, calibration and measurement sources, X-rays or radiation from military occupational exposure); warfare agents (nerve agents, chemical and biological weapons); and more.

The VA will use all available information to determine if veterans participated in a TERA, including military records and service connection.

This expansion of VA health care eliminates the phased-in approach called for by the Sergeant First Class Heath Robinson Honoring our Promise to Address Comprehensive Toxics Act of 2022 (PACT Act) — meaning that millions of veterans are eligible for VA health care up to eight years earlier than written into law.

The VA encourages all eligible veterans to visit va.gov/pact or call 1-800-MYVA411 to learn more and apply for VA health care.

Aging With MS

Physician scientists at The Ohio State University Wexner Medical Center and College of Medicine are studying why multiple sclerosis (MS) worsens as patients grow older.

“What we’re finding is that ‘biological age’ is the key to driving the evolution from



Yanin Zhang, MD, examines a patient with multiple sclerosis (MS) at The Ohio State University Wexner Medical Center. Zhang leads research examining how aging changes the course of MS. He also established the Aging with MS Clinic, which helps patients manage symptoms and slow decline through a wide range of specialized care.

relapsing to progressive forms of MS,” says Benjamin Segal, MD, professor and chair of Ohio State’s Department of Neurology, in a February Ohio State Wexner Medical Center release. “The rate of biological aging can be influenced by a person’s genetic background, as well as environmental exposures and lifestyle.”

Biological age — as opposed to chronological age — measures lifelong damage to cells and organs.

“The goal of our research is to determine if biological aging plays a role in certain people having more severe disease in MS compared to

others,” says Yanin Zhang, MD, a neurologist specializing in MS and related neuro-immunological disorders of the central nervous system, in the release. “By understanding more about the aging processes, we can then find the exact ways aging contributes to disease progression in MS.”

Current drugs for MS make it less likely that patients will have future MS attacks or develop new lesions during the relapsing stage of disease. In some cases, these drugs may slow neurological decline, but they are less likely to do



Benjamin Segal, MD, right, collaborates on research into biological aging and how it affects the progression of multiple sclerosis (MS). Findings help provide customized care in the Aging with MS Clinic at The Ohio State Wexner Medical Center to help patients manage symptoms and slow decline.

so the longer someone has progressive MS.

Trying to improve outcomes for patients, Segal and Zhang conduct research at Ohio State's Multiple Sclerosis Center. It's one of the largest and most comprehensive MS programs in the country.

They've identified new biomarkers that give insight into biological aging and its impact on MS disease progression and continue to discover new therapeutic targets through a grant from the National Institutes of Health.

Zhang also leads the Aging with MS Clinic that provides complete care for older adults with MS who are affected by overlapping symptoms of normal aging and MS.

The team of neuropsychologists, social workers, pharmacists, physical therapists and more manages issues related to functional capacity, gait and balance, bladder function, nutrition, cognition, mood, social support and medications.

“Our goal is to improve quality of life and prevent disability in older adults



Karen Kostelac was diagnosed with multiple sclerosis (MS) more than 40 years ago, but managing symptoms has become more complicated as she gets older. She visited the Aging with MS Clinic at The Ohio State University Wexner Medical Center to learn how to better manage her chronic disease from social workers, pharmacists, physical therapists, neuropsychologists and more.

with MS through team-based care,” says Zhang. “Patients can take home a couple of strategies to apply to their day-to-day lives, whether it’s a new set of exercises or activities to improve cognition or even tips for diet and things like that.”

What’s learned from the patients in the clinic is just as valuable in the lab as the scientists work toward new treatments, Segal says.

“This whole community at Ohio State really is joined together in a collective

mission — to better understand MS, to improve the lives of people with MS and, ultimately, hopefully to cure and prevent MS,” Segal says. “Our Aging with MS Clinic is a model that can be adopted by other MS centers across the country to help more patients live their best lives.”

Genetic Therapy for ALS

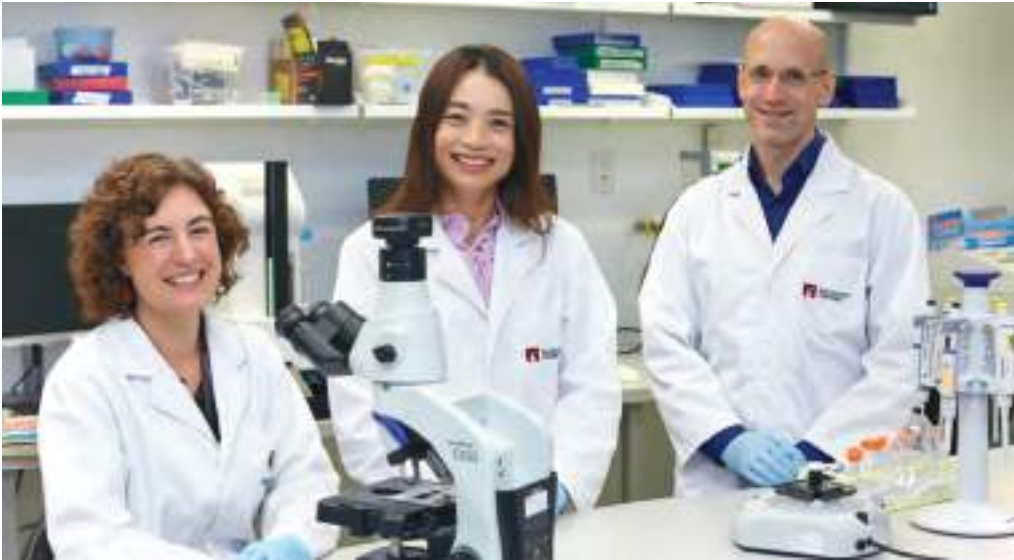
Neuroscientists at Macquarie University in Australia have developed a single-dose genetic medicine that halts the progression of both amyotrophic lateral sclerosis (ALS) and frontotemporal dementia (FTD) in mice — and may even offer the potential to reverse some effects of the fatal diseases.

It may also hold opportunities for treating more common forms of dementia, such as Alzheimer’s disease.

The new treatment, called CTx1000, targets pathological build-ups of the protein TDP-43, which has been associated with ALS, FTD and other forms of dementia, in brain and spinal cord cells.

The Macquarie University research team in Sydney, led by neuroscientist Lars Ittner, MD, hopes to see CTx1000 begin human clinical trials in as little as two years.

For the past 15 years, Ittner and his team have been researching pathological TDP-43 build-up.



From left, Annika van Hummel, PhD, Yazi Ke, PhD, and Lars Ittner, MD, are researchers from Macquarie University in Australia.

In their latest findings, the team discovered for the first time that where there is pathological TDP-43, there is also an increase in a second protein, 14-3-3.

“The two proteins interact, resulting in these build-ups in the cells,” Ittner says in a February Macquarie University release. “From this, we were able to

isolate a short peptide that controls this interaction, and that’s what we used to create CTx1000. When we administered it in the lab, it dissolved the build-ups,

tagging TDP-43 proteins for recycling by the body, and prevented new ones from forming. Importantly, CTx1000 targets only pathological TDP-43, allowing the healthy version of the protein to be produced and go about its work unhindered.”

Ittner says this makes CTx1000 incredibly safe, and the team has seen no adverse effects in their studies.

Lead author of the paper, Yazi Ke, PhD, says in lab conditions, CTx1000 stopped ALS and FTD from progressing, even at very advanced stages, and resolved the



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behavioral symptoms associated with FTD.

“We have great hopes that when this progresses to human trials, it will not only stop people from dying from both ALS and FTD, but even allow patients to regain some of the lost function through rehabilitation,” she says.

CTx1000 is one of the key discoveries being championed by Celosia Therapeutics, a Macquarie University spin-out company formed in 2022 to help bring the groundbreaking work of the university’s neuroscientists from the lab to patients.

Celosia Therapeutics is actively seeking investment to facilitate CTx1000 to progress to clinical trial stage.

Disability Initiatives

Successful employer-driven disability initiatives share certain characteristics, even when the companies and programs differ in other ways.

According to research published in January in the *Journal of Vocational Rehabilitation*, companies whose leadership teams are committed to inclusion for people with disabilities and are guided by complementary values deeply embedded in their organizations experienced improved performance, positive employee perceptions and a cohesive, unified culture. The fidelity and prominence of the

disability-inclusive actions and practices moderated their relative outcomes.

Disability is commonplace in society but not in the U.S. labor market. According to the Centers for Disease Control and Prevention and the U.S. Department of Labor, the participation rate of people with disabilities in the workplace in 2023 is nearly half that experienced by people without disabilities.

“Employer-driven disability initiatives can indeed have a positive impact on both company performance and organizational climate. Our study identified the motivations and best practices that led to successful outcomes: improved business and financial results, better morale and unity within the company,” says lead investigator Brian N. Phillips, PhD, CRC, Department of Special Education and Rehabilitation Counseling at Utah State University, in a February IOS press release.

“These best practices should serve as a beacon to other organizations to actively recognize disability as a valued part of company diversity.”

The findings suggest that employers can gain a great deal from seeing people with disabilities as a valuable and largely untapped part of the workforce. The study combined findings from case studies conducted across seven companies of varying size and industry. Recognizing the limited amount of research on the topic, the investigators sought increased understanding of employer-driven disability initiatives, what motivated them and what impact they had on the company’s productivity and overall success. The greatest success seemed to come to companies that took the most decisive action in implementing their initiatives.

“It is powerful to appreciate how much inclusion in the workplace can be a competitive advantage. At

the same time, it’s important to point out that companies adopting a disability initiative on more of a trial basis or with more skepticism generated less favorable results,” says co-investigator Timothy N. Tansey, PhD, University of Wisconsin-Madison. “Many employers prioritize diversity but underinvest in providing support for people with disabilities.”

Co-investigator Paul Wehman, PhD, Virginia Commonwealth University and editor-in-chief of the *Journal of Vocational Rehabilitation*, says, “The literature suggested we would find a relationship between employer disability initiatives and company performance, and that commitment from leadership would be influential. However, we were surprised to learn that the disability initiatives had such a positive impact on non-disabled co-workers. Many employees with whom we spoke reported feeling a new sense of pride in the company and a greater closeness to their co-workers.”



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Nanomedicine SCI Treatment

In a study published in *Advanced Materials* in November 2023, researchers from Istituto di Ricerche Farmacologiche Mario Negri IRCCS, in collaboration with Filippo Rossi of the Politecnico di Milano, both in Milan, Italy, have demonstrated that an innovative nanovector

(nanogel) they developed can deliver anti-inflammatory drugs in a targeted manner into glial cells actively involved in the evolution of spinal-cord injury (SCI).

Treatments currently available to modulate the inflammatory response mediated by the component that controls the brain's internal environment after acute SCI show limited efficacy. This is also due to the lack of a therapeutic approach that can selectively act on microglial and astrocytic cells.

The nanovectors developed by Politecnico di

Milano, called nanogels, consist of polymers that can bind to specific target molecules. In this case, the nanogels were designed to bind to glial cells, which are crucial in the inflammatory response following acute SCI. The collaboration between Istituto di Ricerche Farmacologiche Mario Negri IRCCS and Politecnico di Milano showed that nanogels, loaded with a drug with anti-inflammatory action (rolipram), converted glial cells from a damaging to a protective state, actively

contributing to the recovery of injured tissue.

"The key to the research was understanding the functional groups that can selectively target nanogels within specific cell populations," says Filippo Rossi, professor at the Department of Chemistry, Materials and Chemical Engineering "Giulio Natta" at Politecnico di Milano, in a February Politecnico di Milano release. "This makes it possible to optimize drug treatments by reducing unwanted effects."

The researchers say these results open the way

to new therapeutic possibilities and may also be beneficial for treating neurodegenerative diseases such as Alzheimer's, in which inflammation and glial cells play a significant role.

"The results of the study show that nanogels reduced inflammation and improved recovery capacity in animal models with spinal-cord injury, partially restoring motor function," says Pietro Veglianesi, head of the Acute Spinal Trauma and Regeneration Unit, Department of Neuroscience, at Istituto Mario Negri. ■

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9-Ball Championship

Kray Mims defended his title, repeating as the Main Event Division champion at the eighth annual Paralyzed Veterans of America Mid-Atlantic Chapter's Charles "Chuck" Willis Memorial Wheelchair 9-Ball Championship March 15–17 in Richmond, Va.

Mims (Fayetteville, N.C.) won the Main Event

Division over runner-up Daniel Henson (Greenfield, Ind.) and third-place finisher Jeff Dolezal (Fairfax, Va.).

Mark Jones (Marietta, Ga.) won the Second Flight Division over runner-up Eddie Rowe (Madison, N.C.) and third-place finisher Lee Sexton (Coeburn, Va.), while Yoshi Fordham (Louisa, Va.) took the Novice Division over runner-up Aaron



COURTESY OF PARALYZED VETERANS OF AMERICA MID-ATLANTIC CHAPTER

Paralyzed Veterans of America (PVA) Mid-Atlantic Chapter Vice President Jessie Oliff, left, placed third in the Novice Division at the March 15–17 PVA Mid-Atlantic Chapter's Charles "Chuck" Willis Memorial Wheelchair 9-Ball Championship in Richmond, Va.

Ruffin (Bunn, N.C.) and third-place finisher Jessie Oliff (Manquin, Va.).

Boccia In The Bayou

COURTESY OF PARALYZED VETERANS OF AMERICA



Wheelchair athletes competed in the Feb. 3–4 Paralyzed Veterans of America (PVA) Bayou Boccia Tournament in Gulfport, Miss. Charles Campbell won the tournament, while Carlos Watson placed second and Tony Torres finished third. PVA's year-end boccia tournament will be held later this month, May 23–24, in San Juan, Puerto Rico.

Pan-American Masters

Looking for a little extra competition before the National Veterans Wheelchair Games? Para athletes ages 30 and older can compete in the 2024 Pan-American Masters Games July 12-21 in Cleveland.

More than 7,500 athletes from over 50 countries are expected to compete in nearly 30 medal events, including 11 para sports. The adaptive sports program includes archery, road race cycling, road race 10K, rowing, stand



up paddle, swimming, table tennis, time trial cycling, track and field and triathlon.

Athlete registration fees are \$225, plus a processing fee, and interested

athletes are eligible to compete in up to three sports and five disciplines. Sports will be offered at different locations. Individual registration closes June 12.

For more information or to register, visit clevelandmasters2024.com.



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VHA-Uber Health

One of the issues within the Department of Veterans Affairs (VA) health care system is a lack of veteran access to transportation.

As many are aware, transportation has been an ongoing issue for veterans. In September 2016, the VA established a transportation program to increase rural veterans' access to health care.

Veterans who reside in rural communities face several challenges, such as a lack of providers, geographic barriers, longer travel distances and lack of supplemental transportation. To help rural veterans access care, the VA expanded its Veterans Transportation Services to more than 80 rural communities nationwide.

The expanded transportation program features mobility managers at VA medical centers who coordinate free transportation to and from VA-authorized medical care. Veterans who need a ride should contact the manager at their local VA medical center.

More information on that program is available at va.gov/healthbenefits/vtp/map.asp.

A New Initiative

Even with the establishment of that program, some veterans still have issues finding dependable transportation to make it to and from their VA health care appointments.

A 2017 study conducted by the MITRE Corporation found around 1.8 million appointments are missed every year due to transportation



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barriers. Missed appointments alone reduce a veteran's ability to receive proper health care and cost nearly \$4.4 billion annually.

To address this issue, the Veterans Health Administration (VHA) Innovation Ecosystem partnered with the Veteran Transportation Program (VTP) and Uber Health to establish the VHA-Uber Health Connect (VUHC) Initiative. This program offers Uber Health rideshare as a supplemental transportation option for veterans



[HTTPS://WWW.VETRIE.DVA.GOV/APP/HOME](https://www.vetride.va.gov/app/home)

and their caregivers to get to and from approved medical appointments using the Uber rideshare platform.

The new program is being implemented to ensure veterans have the ability to make it to all their VA health care appointments.

The VUHC Initiative's main goals are to reduce no-shows and missed appointments, improve veterans' health care transportation experience and achieve cost savings for VA medical centers.

The program's benefits include simple, quick, no-cost rides for veterans to improve their access to VHA health care and quality of life.

Eligibility

To be eligible for the program, veterans must be beneficiary travel (BT) eligible to receive Uber Health rides.

BT eligibility criteria requires a service-connected rating of 30% or more, traveling to/from treatment of a service-connected condition, be in receipt of a VA pension or have income that doesn't exceed the applicable VA maximum annual pension rate.

A veteran must also be ambulatory, be able to get in/out of a vehicle unassisted and be traveling for a VA-scheduled appointment. An approved VA common carrier consult must be in the veteran's medical record identifying that the veteran has a valid need for common carrier transportation or lacks a privately owned vehicle.

A VA employee should enter the Uber Health ride request for tracking and monitoring purposes.

For more information on this program or help with other benefit issues, contact a Paralyzed Veterans of America (PVA) national service officer from the roster on page 43.

John Allen has served PVA for more than 25 years and is a senior benefits advocate in Houston. ■

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April 5-7, 2024
Kissimmee, FL
- **Bluegrass Bass Bash Bass Tournament**
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April 19-21, 2024
Kuttawa, KY
- **Capital Clash Bass Tournament**
Hosted by PVA National
June 7-9, 2024
LaPlata, MD

Billiards

- **Mid-Atlantic Billiards Tournament**
March 15-17, 2024
Midlothian, VA
- **Mid-America Billiards Tournament**
May 23-24, 2024
Oklahoma City, OK

Bowling

- **Nevada Bowling Tournament**
November 30 - December 3, 2023
Las Vegas, NV
- **Florida Gulf Coast Bowling Tournament**
January 31-February 2, 2024
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May, 8 2024
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Boccia

- **Bayou Boccia Tournament**
February 2-3, 2024
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- **PVA Racing High Performance Racing Camp**
January 28-February 4, 2024
Brooksville, Florida
- **Swamp Classic****
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Gainesville, FL
- **Valley of the Sun Stage Race****
February 17-18, 2024
Phoenix, AZ
- **PVA Pocahontas Off-Road Spring Camp**
April 10-14, 2024
Chesterfield, VA
- **PVA Off-Road Classic (PVA Off-Road Race)**
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Chesterfield, VA
- **PVA Paracycling Learn to Race Camp**
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Milwaukee, WI
- **US Paracycling Road National Championships**
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TBD 2024
Location TBD

Trapshooting

- **Cal-Diego Trapshoot**
March 22-24, 2024
Redlands, CA
- **Vaughan Trapshoot**
May 24-26, 2024
Elburn, IL
- **Wisconsin Trapshoot**
June 7-9, 2024
Green Bay, WI
- **Iowa Trapshoot (Year End)**
June 21-23, 2024
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A Fond Farewell

PVA Publications Art and Production Director Ann Garvey and Circulation Coordinator Suzi Hubbard are both retiring this month after nearly 65 combined years of service to Paralyzed Veterans of America. Take a look back at some photos of them at work and at play as we wish them well on their next chapter.

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