



# The Disability Analyst

Volumes 32-33 Issue 1 Official Newsletter of the American Board and College of Disability Analysts and Affiliated Organizations Spring 2022-23

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## UPGRADING YOUR REGISTERED BOARD CERTIFICATION CREDENTIAL

Those practitioners currently board certified by ABDA as Disability Analyst and Fellow who have now completed at least nine years of professional experience in rehabilitation or healthcare are eligible to apply for Senior Diplomate status. If you wish to receive information on how to apply, please fax (615) 327-9235 or e-mail: [americanbd@aol.com](mailto:americanbd@aol.com)



an expression of interest to Ms. Lela Boggs. For current ABDA members in good standing, no examination will be required at this time.

We are pleased to announce that qualified

members with 20 years or more of professional experience as a Senior Disability Analyst and Diplomate and who have been board certified for no less than eight years are eligible to apply to upgrade their credential to Emeritus status. This designation may be used on all correspondence, business cards, letterhead, etc., as appropriate. If interested,

please forward a request in writing, current vita and \$284 US processing fee issued to ABDA. Please send items to ABDA Credentialing and Certification Committee, Second Floor, 4525 Harding Pike, Nashville, TN 37205.

## NEW INITIATIVES

We are so pleased to have had so many members use this newsletter as a launching pad for achieving a publication. We enthusiastically invite any current member to submit a brief article to Central Office for inclusion in a future newsletter.

Please submit a brief article of up to 1200 words on disk and hard copy to (ABDA, Central Office, 4525 Harding Pike, Nashville, TN 37205). Decisions by reviewers are made promptly within three to four weeks of receipt. We are especially interested in first time authors and it will afford an opportunity to enhance credentials by showing that you have published. Of course, experienced writers are also welcome to contribute.

# ★ PASSAGES AND MILESTONES ★

**Congratulations** to our newest Lifetime members:

- Cadidra R. Isaac** . . . . . (GA)
- Tarrance J. Langston** . . . . . (GA)
- Emily Mance** . . . . . (NY)
- Oghoteru Richardson Tachere** . . . . . (CN)

. . .

**Lifetime Member** status is by far our largest membership category. We appreciate the economies of scale afforded by our Lifetime Members. And Lifetime Members are the first to be invited to enjoy special benefits. Please consider making the change. See details on page 3.



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We are pleased to announce the following person who has attained Emeritus status:

**Maureen Larson (WA)**

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**ABDA MEMBERS RECENTLY APPROVED FOR SENIOR DISABILITY ANALYST AND DIPLOMATE: CONGRATULATIONS**

- Ankush Bansal . . . . . FL
- Michael Collins . . . . . CA
- Valerie Duffeck . . . . . FL
- Elaine Mendelssohn . . . . . WI
- Maro Morohoshi . . . . . CA
- Andrew Pittington . . . . . FL
- Anthony Sebastian . . . . . CN
- Joan-Alice Taylor . . . . . CT
- Dante A. Banta . . . . . CA

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We want to sincerely thank members who have gone above and beyond in responding to our Emergency Pandemic Assessment during 2020. Their contributions to this fund have been used in wide ranging ways to help members whose income was either eliminated or substantially reduced.

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The 2022 edition of **The ABDA National Directory** will be available (on disk) Feb 1, 2022. Cost to members is \$236 (includes S&H) issued to The American Board (4525 Harding Pike, Nashville, TN 37205). The Directory is widely distributed to state and federal agencies, insurance carriers, hospital and healthcare systems, libraries, courts, law firms, rehabilitation facilities, clinics and professionals. It is revised annually.

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Back issues of The Disability Analyst e-Newsletter are always available at no cost online at our website: [www.americandisability.org](http://www.americandisability.org).

Many of our members are **Vocational Experts (VE)**, for various government agencies such as Social Security Administration and U.S. Railroad Retirement Board. Those who performed in that capacity for 25 years on average report participating in over 17,000 administrative hearings. For those who are Medical Advisors (MA), the average for a 25-year period is almost 2,000 reviews. In recent years, due to a shortage of such professionals, advanced technology has allowed such professionals to perform their duties at hearings outside their local region too. This trend will continue to expand.

**SIGNIFICANT HONORS:**

**Stover H. Snook** spearheaded the establishment of industrial ergonomics with an essential body of research used by two generations of Disability Analysts. He used psychophysics in developing exacting tables of pain tolerance, lifting, lowering, pushing/pulling and carrying tasks. The “Snook Tables” are accepted by insurance companies, courts at every level and research institutions. ABDA is pleased to recognize the innovation and quality of this body of work by a former Harvard faculty member.

**Gunnar B.J. Andersson** is a pioneer researcher studying epidemiological factors affecting the spine in the workplace and a world renowned spine surgeon. His extensive body of research on biomechanics is a rich source of data for Disability Analysts.



**Susan J. Isernhagen, PT** has contributed through her writing and training to our under-standing of work injury management. Her background in physical therapy provided a framework for helping disability analysts to understand injury prevention and impact on work and earnings. She was among the first to conduct serious research on work hardening.

**University of Wisconsin - Stout**, Vocational Rehabilitation Institute, Materials Development Center has been an extraordinarily valuable and accessible resource for vocational assessment and training manuals for decades. Disability Analysts frequently use their extensive publications to enhance their work. Kudos to the past and present faculty and administrators.

**\* \* \* 2022 ABDA Board Certification Renewal Notice \* \* \***

**Optional Gold seal can be obtained by sending a self-addressed stamped envelope.**

**Please respond immediately to help us avoid the unnecessary time and expense of reminder mailings.**

- Your listing (alphabetical and geographical) in the ABDA Directory . . . . .No Cost
- Newsletter, The Disability Analyst . . . . .No Cost
- Renewal Fee (**one year**) . . . . . \$115 (U.S. Funds)  
(\$130 after January 10, 2022)
- Renewal Fee (**three years**) . . . . . \$300 (U.S. Funds)  
(\$325 after January 10, 2022)
- Renewal Fee (**five years**) . . . . . \$450 (U.S. Funds)  
(\$475 after January 10, 2022)
- Lifetime Fee . . . . . \$1400 (U.S. Funds)  
**(Lifetime members receive 25% discount to all ABDA and ABMPP events)**

Please issue payment to ABDA by no later than **January 10, 2022** to avoid a late charge. The national examination is required of persons seeking board certification for the first time and is required of those who allow their certification to lapse. **By maintaining your current status you are exempt from the written examination.**

**Please remit your 2022 renewal fee and information below. This is the only notice you will receive.** Remittance by Visa or MasterCard is acceptable. **Please type or legibly print information below** as you wish it to appear in the next Directory. If renewing with a credit card (Visa and M/C only), please provide necessary information. **Post Office Box addresses are not acceptable.**

Check box if information has changed.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

\*E-mail: **required** \_\_\_\_\_ *(Extremely important for future timely communication)*

Check One: Visa:  Mastercard:  Check:

Credit Card # \_\_\_\_\_ 3 digit V-code: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Amount: \_\_\_\_\_

Check One: 1 year  3 years  5 years  Lifetime

**For 2021 due to Coronavirus it is optional to list continuing education experiences** (from workshops, conferences, etc.) and/or self-study you have completed since January 1, 2021 (minimum 8 hours to fulfill annual requirement) but only if you wish to do so.

\_\_\_\_\_  
\_\_\_\_\_

Optional: Have you performed 8 hours pro bono work (charitable professional efforts not compensated) during the past year? Yes  No

**Return to ABDA Central Office, Second Floor, 4525 Harding Pike, Nashville TN 37205  
website: [www.americandisability.org](http://www.americandisability.org)**

# ★ DISABILITY HEADLINES ★

**The pandemic is upending education for children with disabilities.** As COVID 19 has raged and schools have turned to remote learning, countless parents have seen their children regress. Many children with disabilities need the structure that the school offers and others need interventions that are difficult to provide remotely, such as hands on instruction, occupational therapy and aides who guide them in lessons and help them stay on task. For those children, remote learning can mean no learning – as too many parents have learned this year. In Florida, children with disabilities represent 14% of students. Under the Individuals with Disabilities Education Act (IDEA), children with disabilities have a right to an education that is individualized to their unique needs and that affords them the chance to make meaningful progress. (Source: *NYT*)

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PBS Kids has celebrated **Autism Awareness Month** by introducing characters who have autism. The Emmy-Winning “Daniel Tiger’s Neighborhood” and new super heroes series, “Hero Elementary” also shines spotlight on characters with autism. On Daniel Tiger’s Neighborhood viewers are introduced to Max, who avoids loud sounds and is comforted by a heavy blanket. He likes buses and bugs and plays to his own rhythm. His specialness is featured in a positive way.

• • •

**Michigan residents** with autism or hearing loss can get a special designation on licenses or identification cards that advocates say will help keep them safe during encounters with police. People with autism, deafness or hearing loss voluntarily can sign up for the designation which won’t be visible on licenses or ID cards but police will be able to see them when they run plate numbers through the law enforcement information network. People with autism can be sensitive to loud noises, bright lights and being touched according to the Xavier DeGrot Autism Foundation. Blaring sirens, loud vocal commands and a fast approach from an officer could make people with autism anxious and cause them to behave in ways officers might find strange and threatening.

• • •

Government agencies are increasingly including American Speech Language Interpreters (ASLI) for news briefings. About 11.5 million Americans have some degree of **hearing loss**, according to the US Census Bureau.

More and more businesses are getting behind “**banning the box**”, the policy where employers consider a job candidate’s qualifications first without the stigma of a conviction or an arrest record when hiring. These changes are extremely helpful to all parties because research shows that ex-offenders who are employed are less likely to commit crimes and find themselves back in a correctional facility. (Source: *WSJ*)

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**A strong economy** helps boost consumer spending but also makes it harder to attract workers. More than 7.5 million restaurant and hotel workers quit last year, the most since the Bureau of Labor Statistics began releasing that metric.

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The share of the **workforce** projected to be 55 or older in 2029 is 25.2% up from 12% in 1999, according to the Department of Labor.

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The following **eight occupations are expected to add** the most jobs in the next decade: Home Health Aids, fast food workers, restaurant cooks, software developers, registered

nurses, general and operations manager, medical assistants and medical/health services manager. (Source: *Department of Labor*)

• • •

The following **eight occupations are expected to grow at the fastest rate** in the next decade: wind turbine technicians, nurse practitioners, solar installers, occupational therapy assistants, statisticians, home health aides, physical therapy assistants and medical/health services managers. (Source: *The Department of Labor*)

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As **robotic technology** improves, the Department of Labor projects the economy to shed 420,000 production jobs. The E-commerce boom which increased during the pandemic will also shrink sales jobs. Cashiers will see their numbers fall by 270%.

**Robot dogs** to help patrol air force base. Tyndall Air Force Base is integrating state of the art, four legged robots for security use, a first in the Department of Defense. Ghost Robotics are almost a hundred pounds and look somewhat like dogs, can be controlled with a remote but will operate autonomously around the

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# DISABILITY HEADLINES continued

base as security. The thinking behind using robotic dogs for security measures is to keep humans out of harm's way. The robots can run for an extended period of time with a wireless charging doghouse. The robots are designed for tasks such as remote inspection, intelligence, surveillance, reconnaissance, mapping, distributed communications and persistent security. The technology along with other innovations will replace and exceed the capabilities of static defense equipment.

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Reportedly, **raising the federal minimum wage to \$15 an hour** would make it harder for many teens to get or keep jobs, adding to the employment challenges they have faced during the pandemic, according to many economists. The non-partisan Congressional Budget Office has said in studies that about 1.4 million workers would lose their jobs over the next four years if that increase was put into effect. The unemployment rate for those between 16-19 hit almost 32% in April 2020, more than double a pandemic peak for an overall unemployment rate of 14.8%.

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**The Labor Force Participation rate**, the proportion of the population working or seeking work, for Americans aged 55 and older has fallen from 40.3% in February 2020 to 38.3%, February 2021 representing a loss of 1.45 million people from the labor force. Among those who contract the virus, the death rate for those ages 50-64 is nearly nine times that of those aged 30-39. (Source: CDC)

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Before the start of pandemic lock downs, some 10% or less of the US Labor Force **worked remotely from**



**home.** While forecasts differ, with the end of the pandemic approaching, as much as a quarter of the 160 million strong labor force is expected to stay fully remote in the long term and many more are likely to work remotely a significant part of the time. Remote work severs the age old connection between where people work and where they live. (Source: WSJ)



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There were 8.4 million individuals receiving **disability benefits** from the Social Security Disability Insurance Trust Fund at the end of 2019. That number has been relatively stable throughout the last decade, varying between 8.2 million and 8.9 million. Each year some disabled individuals lose their benefits because of death or medical improvement in their condition. The number of **disability cessations** has varied from 646,000 to 888,000 during the last decade. (Source: *Social Security Administration*)

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The number of **disability applications** to SSA varies from year to year. During the last decade, the number of initial disability filings has ranged from 2.0 million to 2.9 million. Determinations are performed by one of the 50 state based Disability Determination Services (DDS) under contract with SSA the DDS determinations resulted in annual approvals of 724,000 to 1.0 million disability awards during that last decade. Disability worker beneficiaries are roughly equal in number with respect to gender. More than 70% of the disabled are aged 50 or older; only 9% are 39 or younger. Mental disorders account for about one quarter of the beneficiaries who are found disabled, and intellectual disabilities account for another 4% of disabled workers. (Source: *Social Security Administration*)



# RECOGNITION OF PAST AND PRESENT COLLEAGUES SUPPORTIVE OF OUR HISTORICAL MISSION OF MULTIDISCIPLINARY CREDENTIALING AND CONTINUING EDUCATION

In honor of the memory of Founding Member and courageous, dynamic conceptual leader, **Dr. Karen Gold**, who championed mental health and rehabilitation services for overlooked and disenfranchised individuals, she is remembered through one of our continuing professional education programs generously supported by members, their friends, patients and colleagues.

A great many other distinguished health, mental health and rehabilitation professionals, past and present, concurred with our organization's vital commitment to having all relevant healthcare and rehabilitation disciplines pool their resources and share them freely to promote constructive multidisciplinary dialogue and learning for the first time. Benefiting humanity for five decades, we recognize and appreciate their support of our primary mission to reduce territoriality and enhance collaborative multidisciplinary channels of inquiry, research and practice.

Among them are conference faculty and presenters, consultants, associates, emeriti, conceptual leaders, theoretical pioneers, volunteers, staff, interns, residents, technical support, graduate faculty, administrators, government contractors, assessment specialists, applied clinicians, case managers, life care planners, rehabilitation counselors, front line care providers, orthopedic innovators, industrial/vocational consultants, forensic/economic consultants, biomedical engineers, hospital administrators, semanticists, orthotic/prosthetic designers, alternative medicine workers, holistic medicine and nutritional trainers, behavioral and neuroscience research investigators, publishers, science historians, organizational managers/planners, ABDA award recipients, contributors to our books and newsletters and generous donors to our various programs who have supported the goal of creating our innovative roster of membership driven multidisciplinary credentialing and continuing education platforms. In various ways, directly or indirectly, each has contributed meaningfully to the creation and sustenance of our membership driven organization. Please notify Central Office if any names were inadvertently overlooked.

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**Dr. Earl Davis\***

**Dr. Sanford Dean\***

**Dr. Patrick DeLeon**

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# RECOGNITION continued

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# RECOGNITION continued

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Dr. Louis Wynne\*  
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Dr. Aline Zoldbrod  
Dr. Vic Zucarello

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The American Board of Professional Disability Consultants, (ABPDC)  
The American Board of Medical Psychotherapists and Psychodiagnosticians, (ABMPP)

\*Founding ABDA/ABMPP Consultants or Members

Center for Disability Studies  
ABDA/ABMPP Press  
Lela Boggs  
Jennifer Bennett Web Services  
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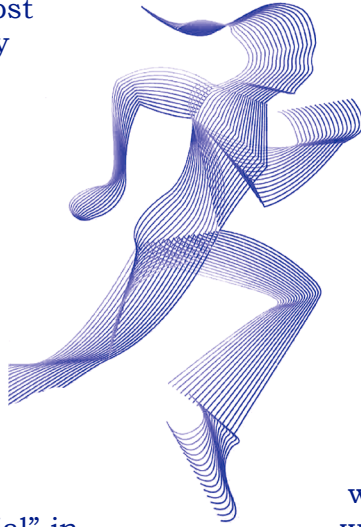
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**Your extraordinary generosity is duly recognized and gratefully acknowledged.**

## ENDING WOMEN'S WORK

Unlike “equal pay” the concept most often used to address gender pay disparity in the U.S., the concept of “pay equity” doesn't just demand equal pay for women doing the same work as men, in the same positions. Jobs that have traditionally been women's work, caring, cleaning, the provision of food can no longer be taken for granted since the pandemic. It is our supermarket workers, our cleaners, our nurses and mostly they are women. Generally, these jobs are poorly compensated. Over half of workers designated “essential” in the United States are women: their jobs are typically paid well below the median hourly wage of a little over \$19 an hour. Median hourly



pay for cashiers is just \$11.37; for childcare workers its \$11.65; health support workers such as home health aides and orderlies make \$12.68. Instead of equal pay for equal work, supporters of pay equity called for equal pay for work of equal value or comparable work. In the real world, most people recognize that wages encapsulate a host of factors that transcend the supply curve and the demand curve. Social beliefs inevitably intersect with biases like racism and sexism, which then manifest themselves in the job market in ways both formal and informal. (Source: Bureau of Labor Statistics)

## 🏆 INDUSTRIES THAT HAVE ADDED JOBS 🏆

The US economy lost 22 million jobs between February and April 2020 and had recovered only 42% of them by July. But not all industries contracted. Some added thousands of employees to meet surging demands for groceries, gardening supplies, hand sanitizer, sewing machines and ventilators and video game console, Plexiglas sneeze guards and mortgage refinancing among other goods and services.

# ★ MALPRACTICE SUITS BY STATE ★

The rate of malpractice suits varies widely by state, according to a study based on data from the National Practitioner Data Bank.

Using data from 2015, the study found Louisiana to be the most medically litigious state with 44.1 malpractice suits per 100,000 residents. Hawaii was at the other extreme, with only 4.9 suits per 100,000 residents.

**The most litigious states:**

1	Louisiana	44.1
2	Oklahoma	36.3
3	Delaware	35.2
4	Wyoming	34
5	Tennessee	33
6	Arkansas	32.2
7	New Jersey	30.4
8	Maine	30.2
9	West Virginia	29.6
10	Alabama	29.5

**The least litigious states:**

41	Iowa	15.2
42	Utah	15
43	Montana	14.8
44	Illinois	14.3
45	Idaho	13.6
46	New Hampshire	13.4
47	South Dakota	2.1
48	Georgia	11.3
49	North Carolina	10
50	Hawaii	4.9

Various experts offer advice and guidelines for sound practice.

**THE DON'TS**

**Don't Panic:** Being sued is becoming increasingly common and the odds are in your favor. A 2012 study published in the [Archives of Internal Medicine](#) found that about 55 percent of claims resulted in a lawsuit. Of those litigated claims, more than half were dismissed by the court. Of the rest, most were settled before a verdict; less than 5 percent were decided by a trial verdict. And the verdict was in favor of the practitioner about 80 percent of the time.

**Avoid speaking:** The most difficult rules to follow, but also one of the most important, says one expert. It's natural to want to discuss the case with colleagues, friends and others, but those conversations can come back to hurt the defense because they're not privileged. Conversations with other providers,

including employees, partners, colleagues, hospital administrators and consultants, are generally subject to discovery and may create an adverse inference that the witnesses were somehow colluding to get their story straight and thereby avoid liability.

**Avoid Modifying Records:** It's tempting to go back and complete or correct the relevant medical records, but doing so is a big mistake. Plaintiff attorneys will seize upon any alterations and make them look like a doctor's attempt to conceal or destroy evidence, says another expert.

Any change made to records should be dated, initialed and accompanied by an entry noting who made the change and why. Some experts recommend segregating the relevant original paper records and severely limiting access to them.

Physicians with electronic health records should exercise similar care, discussants agree. Changes to electronic entries should not be made without a clear notation that it is an addendum or a late entry—those should be made only on rare occasions, should be objective and not self-serving and should never attempt to falsely contradict prior entries.”



**Don't Investigate:** The natural impulse upon being sued is to go back and review the case, looking for errors, incomplete records, the involvement or liability of other providers, etc. This could involve talking to colleagues, staff and others involved in the case, which can be seen as an effort to block the investigation or cover up wrongdoing.

**Don't Talk to The Plaintiff's Attorney:** It is not uncommon for a plaintiff's attorney to call or email the office of the defendant practitioner with a request for records or other information. Do not respond to such requests or talk to anyone on the plaintiff's side, because the conversation can be used against you he says. Let your attorney handle all records requests. And, of course, don't offer a settlement.

*continued on page 12*

# MALPRACTICE SUITS BY STATE continued

**Don't Use Your Personal Attorney:** Unless a clinician has been sued so often that his or her personal attorney is a malpractice specialist, it's safer to be represented by an attorney appointed by the insurer or employer. They are experts in malpractice law and are familiar with the tactics used by plaintiff's attorneys. "Using your own attorney is like going to a podiatrist to treat your heart disease," offers one discussant.

**Don't Take A Settlement Personally:** Most malpractice cases are settled out of court, often with no admission of wrongdoing. These settlements usually are driven by the insurer's decision that it's easier and less expensive to settle than to go to trial, says another knowledgeable source.

"For anyone to have to settle something when they've done nothing wrong is hard," she says. "A lot of it is really about money. It's a business decision and not about whether the practitioner is good or bad."

## THE DO'S

**Notify Your Insurer As Soon As You're Served:** Not only does that get your insurer working on your behalf as soon as possible, it also means you'll have legal representation faster, and that provides a protective shield for some conversations. If doctors learn of a likely lawsuit before it's filed, they should alert the insurer. Employed practitioners should notify their employers immediately as well.

**Learn About Attorney Client Privilege:** This protects conversations between legal counsel and their clients from disclosure in lawsuits. However, it only applies once a client has retained or had counsel appointed, and only in conversations regarding the case. Defendants should talk about the case only when their attorney is present and only with those people who are relevant to the case who adds, "Everything you say can be used against you."

**Study Your Insurance Policy:** Clinicians should review their malpractice policy to know exactly what is covered, the amount of coverage and what rights and responsibilities they have. Employed practitioners should examine their contracts to determine their own and their employer's responsibilities. While many policies give the practitioners final say in whether a suit is settled, many employment contracts give the employer that discretion.

**Ask Questions:** It's natural upon being sued for practitioners to have multiple questions for their

attorneys. Practitioners should ask their attorney about how long the process will take, the steps involved, and any other questions they have.

**Talk To A Mental Health Professional, If Necessary:** Being sued for malpractice is a mental and emotional blow, and not being able to talk to friends and colleagues about it can place enormous stress on the clinician. "To have an adverse event is bad enough; when it results in a lawsuit that's even worse." Conversations with mental health professionals are, of course, privileged.

## WHO GETS SUED?

According to the American Medical Association 2016 Benchmark Survey, 34 percent of practitioners have a claim filed against them at some point in their careers and 16.8 percent have been sued twice or more.

Internists and family physicians were right at the national average in lawsuit frequency. General surgeons and OB/GYNs had the highest rate of claims, while psychiatrists and pediatricians had the lowest.

The good news is that the frequency of malpractice lawsuits is declining. According to a 2019 study from medical insurer CRICO, the frequency of malpractice claims and suits per clinician fell 27 percent over the past decade. However, the same study found that the volume of high-indemnity payments (\$3 million to \$11 million) resulting from those suits increased by 7 percent annually.

**Be Careful About Treating The Plaintiff:** Experts estimate that about 10 percent of defendants continue to treat the patients who are suing them. In those cases, they should treat them only for conditions unrelated to the lawsuit. Dropping the patient can be seen as an admission of guilt, he warns.

**Follow Through:** Malpractice settlements and adverse judgments are reported to the National Practitioner Data Bank (NPDB) and state licensing boards. This information follows physicians throughout their Careers. Many agree that when negotiating employment contracts with hospitals, to give practitioners the right of approval for the language in the NPDB clinicians can appeal notification wording to the NPDB if they feel its unfair or inaccurate.



# ★ WHAT HAPPENED TO ABLEDATA.COM? ★

AbleData.com was a website sponsored by the National Institute on Disability, Independent Living, and Rehabilitation Research. AbleData described itself as the “premier source for information on assistive technology.” It achieved this goal by providing information on over 40,000 assistive technology products and rehabilitation –related equipment.

Today, attempting to find AbleData.com consistently show the message, This site can't be reached. What could have happened to the site that contained a database that included over 5,000 manufacturers, 3,000 organizations, and 11,000 research abstracts?

This is what happened to AbleData.com. Consider the organization's history, look at the products it featured, the awards it won and some of the content it delivered to its visitors.

## **The History of AbleData.com**

The idea that would later become AbleData.com was first pitched to the National Rehabilitation Information Center (NARIC) and the National Institute of Health Research (NIHR), by Marian Hall, in 1980. Hall, an occupational therapist, supported her idea by collecting thousands of documents and company product catalogs related to assisted technologies and disability products.

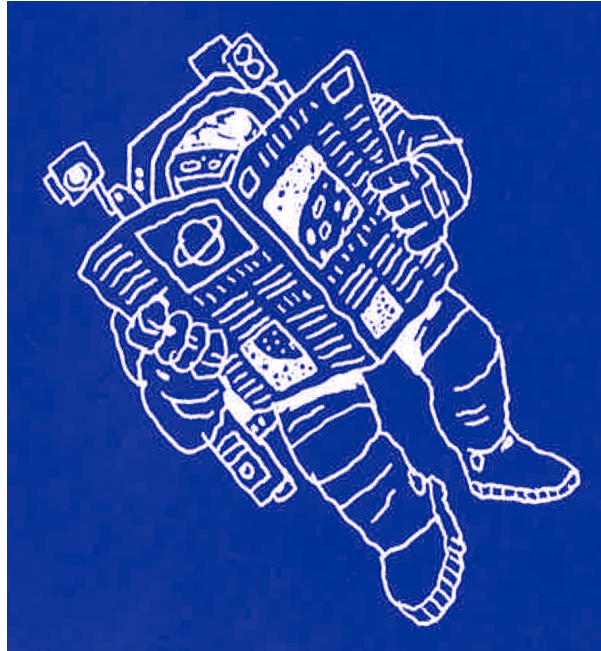
Hall's pitch was eventually successful. In 1982, the grant to start the project was officially approved, and AbleData started getting funds under the NARIC grant. The funds came from the NIHR. The NIHR changed its name to the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR) in 1984.

## **Giving People with Disabilities Access to Technology and Services**

AbleData.com was best known as a free service dedicated to assisting people living with disabilities worldwide, giving access to assistive technology products and rehabilitation equipment. The organization achieved this through “providing objective

information about assistive technology products and rehabilitation equipment available from domestic and international sources.”

The idea of assistive technology (AT) is described by the Assistive Technology Industry Association (ATiA) as “any item, piece of equipment, software program, or product system that is used to increase, maintain, or improve the functional capabilities of persons with disabilities.”



AtiA adds that assistive technology assists “people who have difficulty speaking, typing, writing, remembering, pointing, seeing, hearing, learning, walking, and many other things.” The organization adds that “different disabilities require different assistive technologies.”

AbleData did not sell any products or services. It provided its services by connecting companies with assistive products to people who needed them. The site indicated that it had more than 40,000 products in its database.

The organization listed an array of groups and organizations that benefited from its services:

**Consumers:** Living with disabilities, and other entities like caregivers, therapists, counselors and family members of people living with disabilities and their friends.

**The education community:** Including researchers, teachers and students.

**Professional communities:** Including librarians, employers, engineers, federal and local government employees, medical professionals and rehabilitation specialists.

**Industry players:** Like construction firms and architects, assistive technology manufacturers and distributors, and durable medical equipment distributors.

*continued on page 14*



# ABLEDATA.COM continued

Added to commercial products, the database showed “do-it-yourself products, custom adaptations to commercially available products and prototypes.”

## A Rich Source of Information

When it comes to information, AbleData.com could be described as a treasure trove. The site provided a service detailing product descriptions and features, prices and full contact details of the supplier or manufacturer of AT products and rehabilitation equipment. It also had a section for reviews.

The AbleData website was equipped with a keyword search function. Browsing was simplified because it offered 20 major categories, each containing information on AT products and disability equipment. Visitors to the website could customize their experience by “saving products, searches, and preferences.”

AbleData.com also provided access to alphabetically-listed information about internet resources and other issues related to disabilities. It also had information about “conferences, calls for papers, workshops and educational opportunities that relate to assistive technology and other disability-related issues.”

To make life easier for visitors to the site, AbleData.com listed companies by state. Added to this was the International Resources section.

Visitors to the website had to register a free My AbleData account to which they could save resources and products. Through this feature, visitors could easily find recent site searches and also save their preferences. However, registration was optional as visitors could access the website’s information without the need to register.

## MACRO International Takes AbleData To the World

In 1992, Macro International was awarded a \$3.9 million, 5-year contract to manage the operations of AbleData. Macro International described itself as a service that “delivers research-based solutions to complex problems, combining a high level of expertise and state-of-the-art tools and techniques to provide

answers that are on time and on target.”

Macro took AbleData internationally, turning it into a service that assisted over 5 million people annually. Katherine Belknap was at that time the project director of AbleData. She is quoted in a 2008 interview saying, “Under Macro’s stewardship, AbleData has grown to be a one-stop resource for information on assistive products and disability issues, providing people in need with information they can use to improve their quality of life.”

It looks like the running of the website went back to the NIDRR when the Macro contract came to an end in 1997.

## AbleData Wins APEX 2016 Award

As a sign of the vital work it was doing, AbleData won the APEX 2016 Award. The awards are the brainchild of a company called Communication Concepts. The company describes itself as the organization that helps “communicators write, edit and manage more effective business publications.”



According to the organizers, “APEX Awards are based on excellence in graphic design, editorial content and the ability to achieve overall communications excellence.” They continue, “APEX Grand Awards honor the outstanding works in each main category, while APEX Awards of Excellence recognize exceptional entries in each of the individual categories.”

## What Then Happened to AbleData.com?

In the second half of 2020, AbleData.com posted an announcement: “Important Notice!! Due to a realignment of the National Institute on Disability, Independent Living and Rehabilitation Research (NIDILRR) priorities, AbleData will be discontinued on September 27th, 2020. We will post additional information as it becomes available.”

The website provides no further information regarding why it was shuttered.



## ★ ACTRESS APOLOGIZES FOR FILM'S DEPICTIONS OF DISABILITIES ★

Anne Hathaway apologized for the pain caused to the Limb Difference Community after “The Witches” received backlash for its depiction of disabilities. Hathaway plays Grand High Witch, the main character in the new adaptation of Roald Dahl's, The Witches who has three

fingert hands that resemble **the congenital disorder ectrodactyly**. “I am sorry,” Hathaway wrote on Instagram after Warner Brothers issued an apology for the depiction. (Source: *Miami Herald*)

## NFL DISABILITY PROGRAM UNDER SCRUTINY

The NFL Disability Program is being reviewed again. **Former ABDA/ABMPP Executive Director Jeffrey Barth (VA)** has contributed to significant innovative brain injury research programs. While players say it has gotten much more efficient, it remains one of the more contentious programs in the NFL. The process for obtaining benefits is immensely complicated. Essentially players are eligible to receive disability payments up to \$138,000 a year from the league if they are deemed unable to work due to injuries sustained while playing in the NFL. Considerable litigation has occurred.

Payments to disabled players are scheduled to be reduced by the value of any Social Security benefits they receive including at least \$2,000 a month. The NBA is the first professional sports league to offer health insurance to retired players. After three years of service, players have access to health insurance and after 10 years they also can receive healthcare coverage for their spouse and children. More change across sports is anticipated in recognition of the impact of disability on players during and after their careers. (Source: *WSJ*)

## 🌿 ABANDONING CAREERS IN HOSPITALITY 🌿

Workers at hotels, restaurants, bars and convention centers have been among the hardest hit during the pandemic. The leisure and hospitality sector has shed nearly four million people roughly a quarter of its workforce during the past 18 months. As of January 2021, 15.9% of the industry's workers remain unemployed, more than any other industry according to the Bureau of Labor Statistics. Below are the unemployment rates for various job categories: Leisure and hospitality 16%, mining/oil and gas extraction 14%; agriculture 10%; construction 9%; transportation and utilities 9%; information 7%; full sale and retail trade 6.5%; professional/business services 6%;

self-employed workers 5.5%; manufacturing 5%; education/health services 5.2%; financial activities 3.8% and government workers 3.7%. Millions of hospitality workers a group that includes front desk clerks, travel managers are trying to launch new careers. Some major retailers, including Wal-Mart, Amazon, Target and others have reached out to the restaurant and hospitality industry to alert them of large scale hiring programs to help ameliorate the setback. (Source: *WSJ*)



## VALUABLE DISTRIBUTION

ABDA continues to contribute books and journals to disadvantaged countries and their professional library systems. We have sent since inception of our organization many thousands of volumes, which are used for training purposes in underfunded countries needing such materials. We want to extend a special thank you and recognition for these individuals for supporting such worthwhile programs on behalf of our member driven organization. Others interested in establishing such programs, please contact Central Office at [americanbd@aol.com](mailto:americanbd@aol.com).



## URGENT!

If you received this issue of The Disability Analyst e-newsletter in hard copy, it is because we do not yet have your e-mail address. As our organization strives to become increasingly green, we have sent out the great majority of this volume via e-mail. In the future we hope to closely approach 100% of our mailings using e-mails. Your help is greatly needed. If you have not yet provided your e-mail to Central Office, please do so at your earliest convenience by contacting us at [americanbd@aol.com](mailto:americanbd@aol.com) or by fax 615-327-9235. Recent issues of our newsletter and other valuable information and research links can always be accessed at no cost by members at our website: [www.americandisability.org](http://www.americandisability.org).

## LEGACY GIFTS

In recent years there have been an increasing number of inquiries regarding the establishment of funding various programs to honor members including some who have passed away. Several have already been established and the organization stands ready to establish more for interested persons. Proceeds may be designated for training programs, research, conferences, organizational needs, technology, traineeships, etc. Please direct inquiries to Central Office at [americanbd@aol.com](mailto:americanbd@aol.com).

## ATTENTION:

Help us to recognize more "unsung heroes" worthy of praise and recognition in future issues by forwarding your nominations to Central Office.

## REMEMBER!

This is your newsletter please feel free to submit items regarding your career and any research, case study, book or media reviews, polemical pieces or other articles that may be of interest to our multidisciplinary readership. You may submit by email to Central Office at: [americanbd@aol.com](mailto:americanbd@aol.com).

## CHANGE OF ADDRESS

Please keep the ABDA Central Office advised of **any change in your postal address** so there will be no interruption in your receiving important and timely items from Central Office. All special correspondence will be by e-mail unless you notify us otherwise. Feel free to fax (615) 327-9235 or e-mail: [americanbd@aol.com](mailto:americanbd@aol.com) your contact information.

## E-MAIL ADDRESS

So far we have received e-mail addresses from most of the membership. The sooner we receive the remaining e-mail addresses, the more efficient we will be in alerting members to information they need to have before the publication of forthcoming issues of the newsletter and other information. E-mail addresses may be sent to our e-mail address at [americanbd@aol.com](mailto:americanbd@aol.com) or faxed to us at 615-327-9235.

## BREAKING NEW GROUND

ABDA is seeking donors to help establish **The National Registry for Professional Continuing Education Units**. We are eager to embark on a significant new undertaking to catalog all appropriate CEU's/CME experiences completed by our members. The major donors will have their names attached to this important component to our Central Office. Suggested amount is \$314 issued to the American Board (4525 Harding Pike, Nashville, TN 37205). Persons interested should contact Central Office at [americanbd@aol.com](mailto:americanbd@aol.com). Donor names will appear in future newsletters and on our website.





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