

# Pushing beyond a disability

By Anne Stein  
Special to the Tribune

*In view of the U.S. Paralympics taking place March 7-16 in Salt Lake City, this is the first in a two-part series focusing on the fitness needs of people with disabilities.*

At first glance, the 4,000-square foot facility with a partial view of Lake Michigan looks and sounds like any other fitness facility. A radio blares, bike and treadmills line the walls, the free weight face a set of mirrors and television set is tuned to a game show.

But things are different here. The strength training machines have seats that swing out to make way for wheel chairs. The huge guy doing flies on a bench has a wheelchair parked nearby, and the isles are wide for easy maneuvering.

The Center of Health and Fitness at the Rehabilitation Institute of Chicago is one of the few fitness centers in the nation exclusively serving people with serious disabilities. All services are free, critical benefit for those who have suffered a life-altering event that has made employment difficult or impossible.

According to the Chicago-based National Center on Physical Activity and Disability, People with disabilities receive little consideration when it comes to

health and fitness.

Although health clubs or park districts may have wheelchair ramps at the entrance, the equipment is rarely adaptable for people with disabilities.

Mitch Carr, fitness coordinator at the Center at the Rehab Institute said: "The reason someone with a physical disability needs activity is to improve their quality of life. They're reducing the chances of heart disease and exercising to lower blood pressure-the same reasons those without disabilities exercise."

The social aspects of working out with others who have disabilities is important too. The athletes can share advise on coping, and they won't be discouraged by able-bodied athletes. Those who have recently suffered a disability often suffer from depression an can get encouragement from those with more experience.

Like any other health club, new members at the center get an orientation and discuss short and long-term goals with a staff member. The staff develops an exercise "prescription" then members, most of whom have been referred after physical therapy, start their program.

**Mildred Burnett, a 44-year-old quadriplegic from Chicago, affectionately calls this place "the East Bank Club" of the Rehab Institute. When Burnett first strapped her hands and feet into the pedals of a MOTOMed exercise machine, she nearly cried with joy as her usually still legs moved in circles.**

**Burnett, who had two vertebrae fractured in a domestic violence incident 16 years ago, sleeps better, and her self-esteem has soared since she started working out.**

**"Passive machines" such as the MOTOMed-which are rarely found at other clubs, said sports coordinator Tom Richey. "You feel that you're moving your entire body..."**

**that your bottom half isn't dead."**

**"It was very emotional for me to get on that machine and watch my legs move backward and forward," said Burnett, who spends 30 minutes to an hour pedaling. "Even when I could walk I wouldn't spend that much time on a bike."**

About 40 percent of the 2,000 members at the center have spinal cord injuries: 12 percent have had a stroke: 8 percent to 9 percent have multiple sclerosis or cerebral palsy; another 5 percent have visual impairment: and the final 5 percent are amputees.

There is a high prevalence of inactivity among people with disabilities, said Amy Farkas, NCPAD's information specialist, yet it's critical to have fitness routine. People with spinal cord injuries need simple weight training to keep the upper body strong enough to push around a wheelchair. Machines that move the legs are good for dealing with poor blood flow to the lower body. Different types of training have different beneficial effects.

Aerobic exercise can decrease blood pressure in stroke patients, which decreases the possibility of a second stroke. Strength training can eventually eliminate the need for a cane, "which will cause them to use their partially paralyzed side and get stronger," Carr said Amputee exercise prescription

tends to be similar to able-bodied exercisers because both groups can maintain similar heart rates. Willi Williams, 41, has been coming to the center three times a week for the last 18 months, since he suffered a spinal cord injury in a car accident.

"I've built myself here." The Bellwood resident said. "At first I wasn't able to do anything for myself: I had help getting dressed and eating. But here I got a lot of strength and now I'm able to do things on my own."