

# CHANGING LIVES

“You really *can* change the world if you care enough.”

– Marian Wright Edelman





### **In Support of Our Mission**

#### **Advocacy**

ACA advocates for the rights of people with limb loss or a limb difference. This includes access to, and delivery of, information, quality care, appropriate devices, reimbursement and the services required to lead empowered lives.

ACA promotes full implementation of the Americans with Disabilities Act and other legislation that guarantees full participation in society for all people, regardless of disability.

ACA sensitizes professionals, the general public and policymakers to the issues, needs and concerns of amputees.

#### **Support**

ACA's National Peer Network certifies people with limb loss to provide support and information for others who are just beginning the road to recovery.

ACA's toll-free call center provides answers and resources for people who have limb loss or a limb difference and those involved with their lives.

#### **Education**

ACA publishes *inMotion*, *First Step* and other magazines that comprehensively address areas of interest and concern to amputees and those who care for and about them.

ACA develops and distributes educational resources, booklets, videotapes and fact sheets to enhance the knowledge and coping skills of people affected by amputation or congenital limb differences.

ACA's National Limb Loss Information Center (NLLIC) is a comprehensive source of information about amputation and rehabilitation.

ACA provides technical help, resources and training for local amputee educational and support organizations.

ACA conducts programs for its members, professionals and the general public to educate them about the physical, emotional, technological and other issues of amputees.

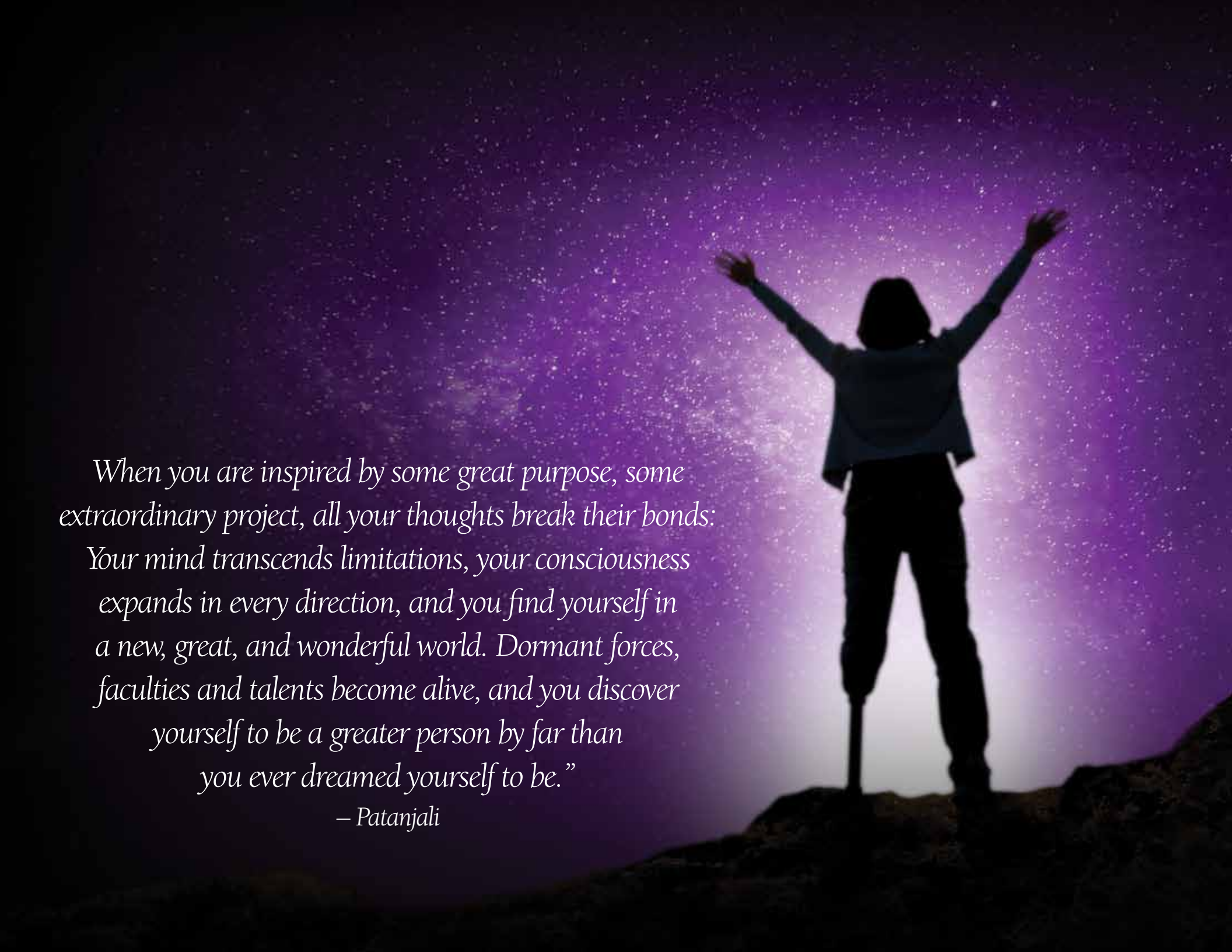


#### **Credits**

Written/Compiled by Amputee Coalition of America Staff  
Edited by ACA Communications & Public Relations Department  
Designed by Patrick Alley

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*When you are inspired by some great purpose, some extraordinary project, all your thoughts break their bonds: Your mind transcends limitations, your consciousness expands in every direction, and you find yourself in a new, great, and wonderful world. Dormant forces, faculties and talents become alive, and you discover yourself to be a greater person by far than you ever dreamed yourself to be.”*

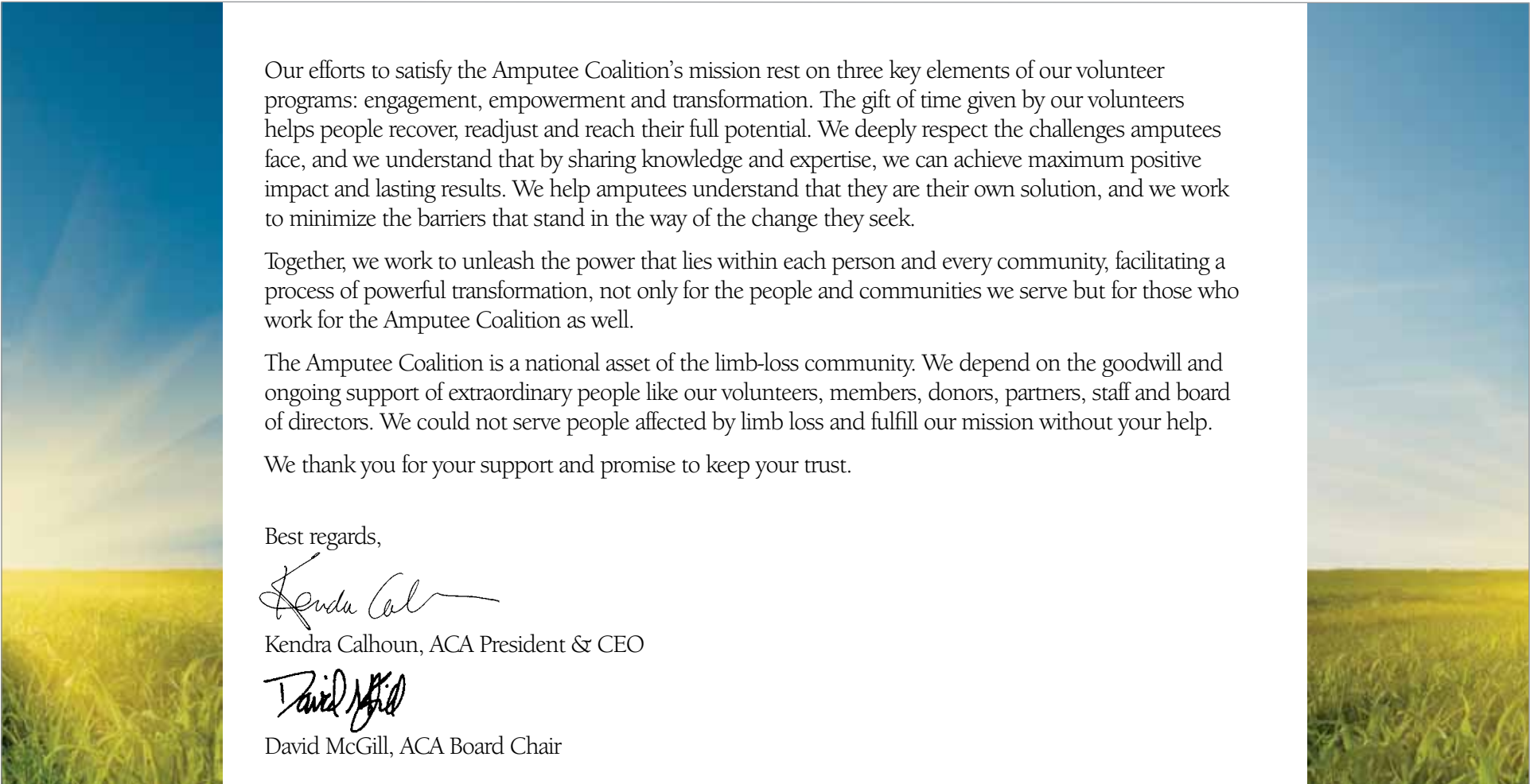
*– Patanjali*



Extraordinary people impacting and enhancing others' lives – that is the focus of our 2008 Annual Report.

One of the greatest difficulties we encountered after selecting our “Changing Lives” theme was choosing which wonderful stories to share in the limited number of pages we have available. Although we couldn't include every story, please accept our salute to those individuals we included in this report as an acknowledgment of everyone who has committed himself or herself to the Amputee Coalition of America's mission.

Every day, our volunteers and staff support and enhance the lives of people living with limb loss and their families. In this report, you will read about the Amputee Coalition's peer visitor program, which touches more than 3,000 people annually. You will also read about efforts to educate young children and teens about limb loss in local schools and at our Amputee Coalition Youth Camp. And you will also meet some of our extraordinary volunteers who are participating in these and other important activities. Perhaps they will even inspire you to become a volunteer and change lives yourself.



Our efforts to satisfy the Amputee Coalition's mission rest on three key elements of our volunteer programs: engagement, empowerment and transformation. The gift of time given by our volunteers helps people recover, readjust and reach their full potential. We deeply respect the challenges amputees face, and we understand that by sharing knowledge and expertise, we can achieve maximum positive impact and lasting results. We help amputees understand that they are their own solution, and we work to minimize the barriers that stand in the way of the change they seek.

Together, we work to unleash the power that lies within each person and every community, facilitating a process of powerful transformation, not only for the people and communities we serve but for those who work for the Amputee Coalition as well.

The Amputee Coalition is a national asset of the limb-loss community. We depend on the goodwill and ongoing support of extraordinary people like our volunteers, members, donors, partners, staff and board of directors. We could not serve people affected by limb loss and fulfill our mission without your help.

We thank you for your support and promise to keep your trust.

Best regards,



Kendra Calhoun, ACA President & CEO



David McGill, ACA Board Chair

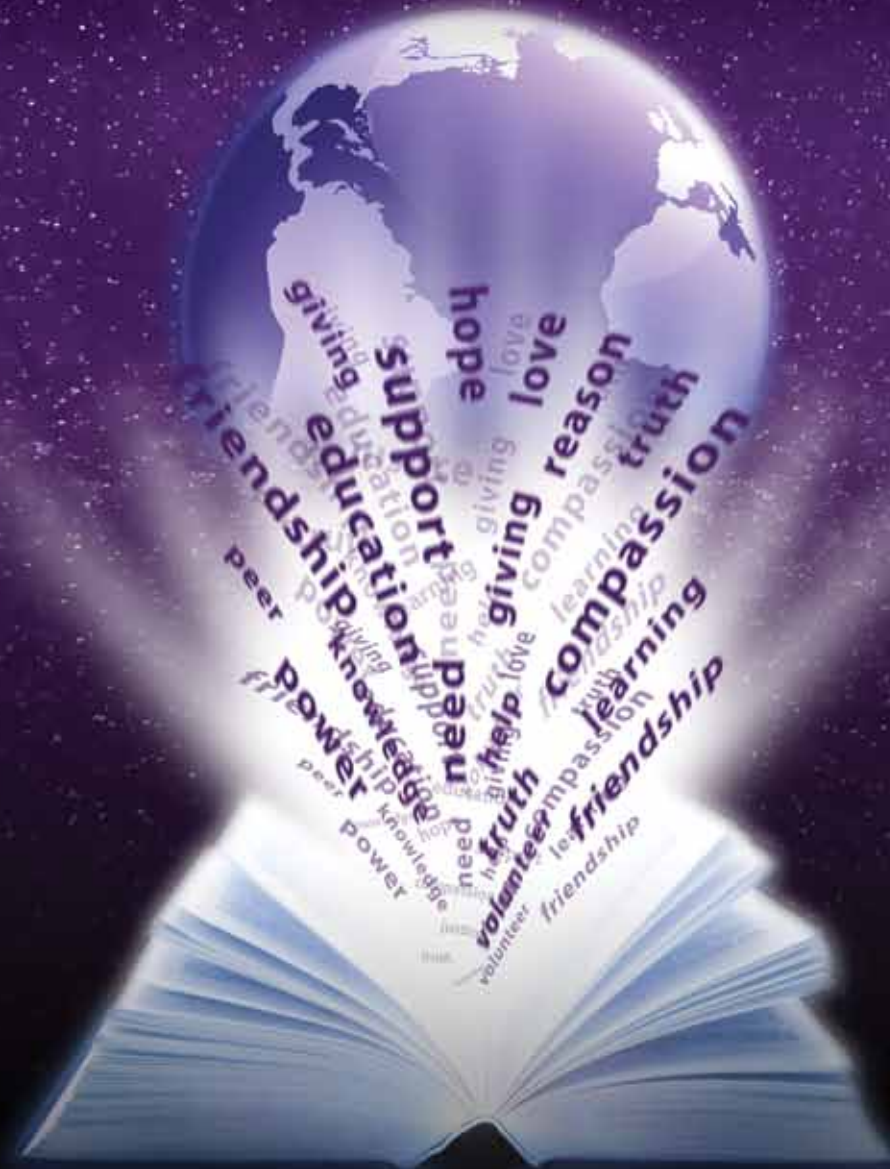




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CHANGING LIVES *Through Information and Education*



*“Education is the most powerful weapon which you can use to change the world.”*

*– Nelson Mandela*



*“I know that there are many around the area who do not know where to turn for help. I hope that when they see me, it will show them that there is still life after limb loss.” – Wayne Buckner*



Courtesy of Kathy Hemsworth/The Newport Plain Talk

## Sharing the Simple Gift of Knowledge

One day in 2007, Wayne Buckner of Bybee, Tennessee, was digging a ditch with the help of a trencher when something went terribly wrong. In a matter of seconds, he had fallen into the ditch, and the machine had severed his left leg above the knee and part of his left ring finger. Buckner was airlifted to the nearest hospital, where he began the long journey to recovery.

When the kindergarten class at Centerview School in Bybee heard about the accident that almost cost Buckner his life, the kids made him get-well cards and drew him pictures to cheer him up while he was in the hospital. Buckner spent 35 days in the hospital recovering from his accident, and he was grateful for the children’s support. He knew he wanted to repay their kindness, and thought the perfect way to say “thanks” would be to pay a visit instead of simply sending the class a thank-you card.

When Buckner was recovered enough from his trauma to leave the hospital, he called the Amputee Coalition of America’s library to ask for recommendations for children’s books about amputees and people with disabilities. His plan was to read the books to the kids

*“I immediately got many stares, and the kids didn’t know what to say,” recalls Buckner. “Then the kids surrounded me. They wanted to touch my leg and wanted to see if I had a foot.”*



and donate them to their school library. On the second day that Buckner could walk with his new computerized prosthetic leg, he visited the school and took along the following books: *My Brand New Leg*, *The Making of My Special Hand: Madison's Story*, and *Different Is Not Bad, Different Is the World: A Book About Disabilities*.

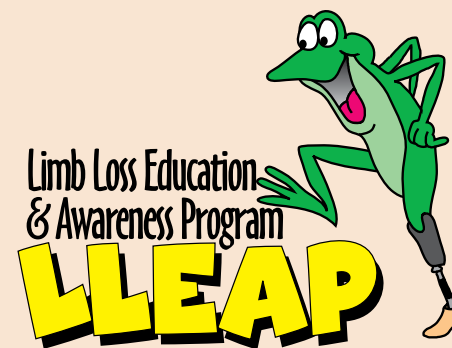
"I immediately got many stares, and the kids didn't know what to say," recalls Buckner. "Then the kids surrounded me. They wanted to touch my leg and wanted to see if I had a foot."

Buckner lives in a rural community, so many of the children live on farms or have been around a farm most of their life. An important part of his visit included a discussion about farm safety and how to stay away from farm equipment when it is being used.

"They were much more interested in my prosthetic leg," muses Buckner.

After that positive experience, Buckner decided that he would donate a book each year to the school library. In May 2009, he donated *Molly the Pony: A True Story*. Once again, he contacted the ACA library for suggestions about which book he should donate.

Buckner's contributions of time and books have helped raise public awareness about limb loss. "I want to raise awareness to help other amputees in my home area," he says. "I know that there are many around the area who do not know where to turn for help. I hope that when they see me, it will show them that there is still life after limb loss."



## ACA Offers Limb Loss Curriculum Free Via the Web

The Amputee Coalition of America offers its Limb Loss Education & Awareness Program (LLEAP) curriculum for free download at [amputee-coalition.org/publications\\_leap.html](http://amputee-coalition.org/publications_leap.html).

LLEAP addresses the social stigma of children with disabilities, particularly those with a limb difference. The curriculum is based on the premise that children can be taught to recognize and appreciate differences in themselves and others.

Through a sequence of multisensory activities, children will:

- Realize that individuals are more alike than different
- Identify their own strengths and attributes
- Develop an appreciation for the strengths and accomplishments of other people
- Explore interdependence and the nature of the helping relationship
- Become aware of how limb loss or limb difference might affect daily activities
- Appreciate the strengths and accomplishments of individuals with limb loss or limb differences
- Understand the types, functions, and limitations of prostheses.

With more than 20 classroom activities, the curriculum can be adapted for use with children from preschool through sixth grade.

*“Our programs and services are making a difference in the lives of amputees around the country, but we must strive to reach even more of the nearly 2 million people with limb loss in the United States.” – Kendra Calhoun*

# ACA’s National Limb Loss Information Center Strives to Reach Out to More Amputees

*People with limb loss face unique challenges in securing the information, support and services they need to participate fully within their home, school, workplace and community. With funding from the Centers for Disease Control and Prevention (CDC), the ACA maintains the nation’s most comprehensive source of information for people living with limb loss or limb difference – the National Limb Loss Information Center (NLLIC). The NLLIC collects, develops and disseminates information that is timely, comprehensive and available in a variety of formats. The NLLIC has developed programs and strategies that have proven effective and efficient and that have served as a model to other organizations.*

Among the most successful of the NLLIC’s programs and publications are:

- A toll-free call center that responds to requests for research and information with customized information packets
- Award-winning print publications
- Targeted outreach activities
- Peer support
- Collaboration with individuals and organizations that disseminate these resources to their colleagues and constituents.



## NLLIC 2008 Achievements

*inMotion*, a multiple-award-winning magazine, has a current readership of more than 160,000 each issue. Normally published six times per year, a special issue on aging with limb loss, printed with a larger font, was added in 2008. Other electronic and print publications are targeted to specific audiences, such as older adults, multicultural groups, children and at-risk individuals.

The NLLIC's National Peer Network includes nearly 300 registered support groups and more than 900 civilian and military certified peer visitors. The ACA annual conference, which began in 1994 with fewer than 100 attendees, drew more than 850 attendees in 2008, its largest attendance ever.

The ACA/NLLIC Web site had more than 400,000 unique visitors in 2008, a 13 percent increase over 2007. As more and more people made this Web site their source for information about limb loss, a redesign was scheduled to accommodate the growing traffic. The redesign was launched in 2008 and will continue into 2010. Additional

achievements and activities of the NLLIC in 2008 include:

- Specific inquiries grew from 6,906 in 2007 to 8,255 in 2008 – a 15 percent increase.
- The two most popular information packets disseminated to NLLIC users in 2008 were the publication *First Step – A Guide for Adapting to Limb Loss* and the general information packet for new amputees.

Methods that the NLLIC uses to disseminate limb-loss information include the publication of

fact sheets, the revision of articles into an Easy Read format (an eighth-grade reading level or lower), and the translation of articles into Spanish.

- Fact sheets accessed through the Web in 2008 numbered 49,041 – a 14 percent increase over 41,885 in 2007.
- Easy Read articles accessed through the Web in 2008 totaled 43,548 – a 12 percent increase over 38,066 such Web hits in 2007.
- The total number of Spanish translation pages disseminated in 2008 was 106,937.
- To encourage our professional members to take advantage of the interlibrary loan program and make more efficient use of the library's collection, in 2008, the NLLIC began highlighting the journals that it subscribes to in monthly PubMed abstracts.
- More than 70 limb-loss-related books and videos were added to the library, with special focus on children's books, healthful living and gait training.



Information



### NLLIC 2007-2011 Priorities

- Disseminating and evaluating limb-loss educational materials
- Conducting national outreach through the development and dissemination of materials, support, programs and services
- Disseminating and evaluating materials and programs targeting social and emotional needs
- Developing and disseminating prevention messages through collaboration with other organizations
- Developing and maintaining organizational partnerships to support these initiatives
- Monitoring and evaluating programs, services and activities

“Our programs and services are making a difference in the lives of amputees around the country, but we must strive to reach even more of the nearly 2 million people with limb loss in the United States,” says Kendra Calhoun, who became the ACA’s president & CEO in September 2008. “Unfortunately, as the incidence of diabetes and peripheral vascular disease continues to escalate, the number of amputees will also rise.” It is estimated that perhaps 3.6 million people will be living with limb loss by 2050 – almost double the current number.

“We are fortunate to have funding from the CDC to support some our basic services, but not all,” says Calhoun. “These are not easy times for organizations like the ACA. Like everyone else, we are battling rising costs and a struggling economy. That’s why we depend heavily on the kindness of those who care about the ACA and who understand the importance of having a national organization to meet the needs of the amputee community.”

## ACA’s National Conference Boasts Record Attendance



The ACA’s 2008 National Conference had another highly successful year in 2008, with nearly a 10 percent increase in attendance from 2007. A record 874 attendees – 297 of them first-timers – convened for a full, fun, informative 4 days, with family and friends galore.

New for 2008 was a parent/child track, giving families of children with limb loss or difference a chance to learn, network, share and play. All parents rated the program very highly and wanted to see all of the sessions repeated and even expanded.





Other firsts at the conference included a successful upper-extremity track and the First Swim™ and First Volley™ sessions hosted by the Orthotic and Prosthetic Assistance Fund (OPAF).

Once again the conference received exceedingly high marks, with more than 95 percent of evaluation respondents reporting that they were satisfied or very satisfied.



One of the many highlights of the conference is the technology and service exposition. In fact, the opportunity to interact with exhibitors is one of the most highly rated reasons people give for attending the conference. In 2008, 67 exhibit booths displayed products and information representing the latest in assistive devices and prosthetic technology. Ten of the leading manufacturers in the prosthetic industry offered technology seminars focused on specific components.

Participants also spent time at the nonprofit booths learning more about local and national services to enhance their lives and assist in their reintegration into their community.









*Crawford learned to do many things, but more than anything wanted to be able to wear gym shoes with laces – even though she wasn't allowed to participate in gym class.*

# Small Things Make a Big Difference

*As a child, Donna Crawford lost the use of her right arm when she was 6 years old. During a rescue from a car fire after an accident, she was yanked by the arm, which severed the main functioning nerve from her spine. Her arm was paralyzed, and for years afterward she went to physical therapy sessions 3 days a week.*

Crawford learned to do many things, but more than anything, she wanted to be able to wear gym shoes with laces – even though she wasn't allowed to participate in gym class – instead of the less stylish Velcro shoes. So, her father set the challenge: He would buy her gym shoes when she could prove she could tie them. When her physical therapist got frustrated with her inability to tie a shoe, Crawford asked her if she could tie a shoe one-handed. When the therapist admitted she couldn't, Crawford left physical therapy telling her parents that she would figure things out on her own.

*“When I finally learned how to tie shoes, my dad still wouldn't get me regular gym shoes because he said they had to be tight,” Crawford says.*

*“I had to perfect the tying technique until the laces were tied to fit.”*



It took 11-year-old Crawford a few months before she could tie her shoes. “When I finally learned how to tie shoes, my dad still wouldn’t get me regular gym shoes because he said they had to be tight,” she says. “I had to perfect the tying technique until the laces were tied to fit.”

During those formative years, Crawford showed determination despite the fact that adults were sometimes dismissive and peers were often cruel. “I was called ‘one-armed bandit’ or ‘one-armed freak,’” she remembers. It was only as a young adult, when her paralyzed arm began to turn purple from loss of circulation, that she became an amputee, and, as a result, felt the freedom that not having her arm would bring. “I can honestly say that the surgery should have happened years before it actually did,” she says.

Crawford’s optimism is relentless, but she knows she would have benefited greatly from a peer support system when she was younger, which is why when she heard about the Amputee Coalition Youth Camp, she jumped at the

opportunity to volunteer. She describes the whole experience as not only the highlight of her year, but one of the great highlights of her life.

Sometimes it’s the smallest interactions that can have a profound impact on someone else. The event that made such a big impression on her was one that took Crawford back to the days when she struggled with tying her shoes. Someone introduced Crawford to a young camper named Daniel who had also lost his right arm in a car accident. He’d been an amputee for a couple of years and was still trying to tie his shoes. Like Crawford’s therapist, his occupational therapist was not sure if he would ever be able to tie his shoes one-handed. Then Crawford came along and with a simple demonstration helped make his life a lot easier – and gave him a good dose of encouragement too. “When I showed him how to tie his shoes, he learned in about 5 minutes,” she says. “He just gave me the biggest smile.”

Sometimes the smallest things make the biggest difference.

*“When I showed him how to tie his shoes, he learned in about 5 minutes,” Crawford says.*

*“He just gave me the biggest smile.”*

*Sometimes the smallest things make the biggest difference.*



*“Now, I know I can do anything!” – Bryanna*

# Amputee Coalition Youth Camp Hosts Record Number of Campers



The Amputee Coalition Youth Camp's ninth year (2008) saw a record 63 campers joining staff and volunteer counselors for the challenging 5-day program. The camp was held for the first time at the Joy Outdoor Education Center in Clarksville, Ohio, which was selected to enable the ACA to accommodate more campers without turning any youths away.

Since its beginning, the camp has hosted more than 450 campers with limb loss or limb difference from 42 states and three countries and has worked with more than 100 volunteers to mentor youth campers. Leadership training is provided for 17-year-old campers to prepare them to be future camp counselors and leaders in their schools and communities.



The youth camp experience is filled with a variety of activities designed for fun, learning and building self-esteem. One example is the fully accessible ropes course, where every child can set his or her own personal level of challenge. Though campers are sometimes hesitant to participate in such events at first, they often overcome their hesitation and learn that they can do more than they ever expected.



Bryanna, a bilateral above-knee amputee, was one of these. At first, she was afraid of not being able to reach the zip line because she would have to climb the last few feet up a pole. With encouragement from staff and volunteers, however, she made it! As she rode down the zip line, her smile

lit up the camp. “Now, I know I can do anything!” she exclaimed.

Young campers like Bryanna also participate in peer discussion groups facilitated by older campers and amputee mentors who help them realize that they are not alone. Emphasizing this point, the camp hosts social events each night that offer campers the opportunity to enjoy dancing, performing, role-playing and other activities without the fear of feeling different.

Other daily activities at camp include:

- Fishing
- Canoeing
- Archery
- Team field sports
- Tennis
- Swimming
- Basketball
- Educational programs.

In addition to feeling better about themselves because of the camp experience, evaluations indicate that the majority of campers plan to exercise more, eat healthier foods and be more engaged in sports.



Deborah, who was born with a bilateral above-elbow limb difference, had been attending camp since 2004 and was originally hesitant to try several camp activities, including tennis. After the 2008 camp, she wrote, “I have been taking up tennis, and I am joining the tennis team at school because I tried it at camp my first time and loved it! The ACA youth camp is my year’s highlight. Thanks so much!”

Without her experience of trying new activities in the safe camp environment, Deborah might have never attempted to try out for her school tennis team.

*“Any ordinary favor we do for someone or any compassionate reaching out may seem to be going nowhere at first, but may be planting a seed we can’t see right now. Sometimes we need to just do the best we can and then trust in an unfolding we can’t design or ordain.”*

— Sharon Salzberg



## ACA Trains 2008 Volunteer Outreach Team to Spread the Word

In October 2008, the Amputee Coalition of America graduated its second class of Volunteer Outreach Team (VOT) members to help reach into more local communities to raise awareness of the ACA’s mission and available resources. This brought the total number of these dedicated and enthusiastic volunteers around the country to 31 members.

VOT members represent the ACA at local events such as health fairs and may make presentations to groups such as civic clubs, hospital staff, support groups or even healthcare providers. Others work with their local media to raise awareness and work to reach more of the nearly 2 million amputees who could benefit from accessing the ACA’s programs and services.

These and the numerous other volunteers who help the ACA reach out to amputees and others around the country are essential to helping us accomplish our mission.

### Volunteer Outreach Team 2008 Graduates

Rose Bissonnette  
Bill Brannan  
Chris Casteel  
Paula Golladay  
Tammie Higginbotham  
Rose Maloney  
Stormy McDonald  
Terri Ross  
Lisa Speckman



CHANGING LIVES *Through support*



*“At times our own light goes out and is rekindled by a spark from another person.  
Each of us has cause to think with deep gratitude of those who have lighted the flame within us.”*

*– Albert Schweitzer*



*“As a nurse, I was the first one in line to tell others that being an amputee doesn’t mean you have to settle for less.”*  
– Carolyn McKinzie

# The Most Difficult Kind of Lesson



Carolyn McKinzie is a 41-year-old nurse and a below-knee amputee. Despite her many years of nursing experience, she was ill-prepared for the physical and emotional challenges she would face when she broke both of her legs in an automobile accident in 1998. Over the next 2½ years, she had nearly a dozen surgeries in attempts to salvage her right leg. She finally lost the leg below the knee in April 2001. As both a nurse and a patient, she knows that the area most lacking in information and support for impending or new amputees is that of emotional support.

The period from when she was told that she would have her amputation until she actually had the surgery was the most difficult month she would ever face. She was angry and scared, and wondered what would become of her. She tried to be strong for her family – they had all been so helpful and supportive along the way – but, sadly, she suffered in silence.

In 2004, she began writing a book about her experience with limb loss. She was surprised at how little she knew about the whole process, considering that she was a 10-year hospital nurse. She was also surprised at the lack of information that was available at the time of her amputation. Since then, she discovered the Amputee Coalition of America on her own and has acquired some valuable information from the ACA that has helped her along the way.

The weeks, days and hours before her amputation was an overwhelming and sad time for her, and she wondered if she would ever get through it. She *did* get through it, however, and 6 months after her amputation, she danced in a crowd. “Nobody knew how or why I was different,” she recalls.

She would, however, face many more hurdles after that. “In fact, I recently ended a 2½ year relationship that was, in hindsight, bad from the beginning,” she says. “Afterward, I spent a lot of time trying to figure out why I haven’t had one successful relationship since losing my leg. I finally realized that I ‘settle’ for men who aren’t the type I am really looking for.”

McKinzie now says that her problem all along has been that she didn’t think the type of man she wanted to be with would also want to be with her because of her leg.

The ironic part, as she sees it, is that as a nurse, much of her job has involved patient education. She teaches patients about accepting their bodies after amputation and that losing a body part doesn’t change who they are or what they want in life – that they don’t have to settle for anything less than what they wanted in life before their amputation.

“As a nurse, I was the first one in line to tell others that being an amputee doesn’t mean you have to settle for less,” she says “Still, since my amputation, that’s what I have been doing. I guess understanding all of this is half the battle.”

She notes that one of the tough lessons from her experience was that being a nurse didn’t make her a better patient. On the other hand, she knows that being a patient has definitely made her a better nurse.

*“As both a nurse and a patient, I know that the area most lacking in information and support for impending or new amputees is that of emotional support.”*



*“If the ACA had a Shari in every community, we would not leave any amputee behind.” – Charlie Steele*



# Paying It Forward

Three years and 15 operations after a traumatic accident led to her below-knee amputation, Shari Caradonna was still not able to return to the work she loved as a physical therapist, a career she had held for 26 years.

She remembers a peer visit that brightened her whole outlook about the process she was about to go through. “It was incredibly frightening,” she says. “I asked her to walk back and forth in the room, to take her leg off, just so I could see what it looked like.” The peer visitor offered her encouragement through words, but all Caradonna cared about was that the woman was walking. “It changed everything for me, decreasing my anxiety and fear,” she says.



As the shock of amputation wore off, and with time to heal, Caradonna eventually learned more about the ACA and its mission. She heard about the peer training program and decided to give it a whirl since she was brimming with desire to get back to helping others one-on-one. With her enthusiasm bubbling over, she attended the first training she could, driving from her home in Long Island, New York, to Allentown, Pennsylvania, because she didn't want to wait several more months to attend one closer to her.

There, Caradonna was inspired by her trainer, Charlie Steele, who is also a member of the Amputee Coalition of America Board of Directors and its Medical Advisory Committee. Steele always urges his trainees not to sit around and wait for the phone to ring with referrals for peer visits. He suggests that they begin by approaching the hospital where they were treated and branch out from there. Within days of the training, Caradonna called asking for more ideas. Caradonna was frustrated that she couldn't return to her work as a physical therapist,

but when she became a certified peer visitor, she realized that she could still connect with others and help them realize their full potential.

With Steele's guidance, Caradonna reached 10 of the 12 hospitals on Long Island within 6 months of her peer training. She's conducted 27 peer visits to date, even going far out of her way to establish contact with amputees she hears about in her community. Steele notes that Caradonna stands out because of the number of volunteer hours she puts in. "If the ACA had a Shari in every community, we would not leave any amputee behind," he says.

Testament to this is a recent peer visit that took a long time to arrange. After two friends contacted her about a brush with a woman named Laura who had lost her leg above the knee in a motorcycle accident, Caradonna decided to try to track her down. She contacted the owner of the salon where Laura had previously worked and received a curt response: "I don't think she wants to talk to anyone right now."

*Shari Caradonna remembers a peer visit that brightened her whole outlook about the process she was about to go through. "It was incredibly frightening," she says. "I asked her to walk back and forth in the room, to take her leg off, just so I could see what it looked like."*

Caradonna pleaded with the owner to pass along her number to Laura, to no avail. After a third person told her about Laura, Shari decided it was just too much of a coincidence and decided to show up in person to the salon. Again she pleaded with the owner, explaining how important the peer visit would be, but she received the same response.

Finally, the receptionist, who overheard the conversation, decided to call Laura directly and find out if she would like to speak with Caradonna. “She came back out and told me that Laura would love to be contacted,” says Caradonna. “Tears started streaming down my face.”

The peer visit was an important breakthrough for Laura, who was unable to move forward with therapy because her insurance refused to foot the bill. Caradonna made a few phone calls and set Laura up with her prosthetist and then a physical therapist, both of whom agreed to treat Laura *pro bono*. When Caradonna saw her walk for the first time in 4 months, she shed even more tears of joy. “It’s just amazing to be able to help people like that,” she says.

*Caradonna was frustrated that she couldn't return to her work as a physical therapist, but when she became a certified peer visitor, she realized that she could still connect with others and help them realize their full potential.*



*A strong support system is an essential element to a complete recovery from a traumatic experience, such as limb loss.*

# The Power of Peer Support



## **ACA's Peer Visitor Program Has Trained and Certified More Than 1,000 Volunteers**

By the end of 2008, the ACA had trained and certified nearly 1,100 volunteers to provide personalized peer support, including military peer visitors and family peer visitors. For the first time, a training was hosted in the state of Alaska, in Anchorage. Though professionals cannot be certified unless they themselves are amputees, they frequently attend the trainings to learn more about the program.

In August 2008, the ACA began providing online recertification training to update peer visitors on program changes and to reemphasize important aspects of effective communication, the heartbeat of a successful peer visit. The training is flexible enough to accommodate peer visitors who do not have ready computer and Internet access.

## **ACA's Parent Support Network Offers "Lifeline" to Parents**

What parents wouldn't take on all of their child's pain and suffering if only they could? Living with this impossibility, parents repeatedly tell the ACA, is an integral part of the deep anguish that confronts them in the wake of their child's birth with a limb difference or their child's limb loss due to amputation. Parents facing such an initial trauma are overwhelmed with a mixture of very intense feelings and have numerous questions.

In describing their needs through in-depth interviews the ACA conducted in 2007, parents spoke of well-intentioned family and professionals who tried to comfort them, saying "Everything will be OK." Parents report that such efforts often only made them feel even more alone. They think: "How do you know?"

This is where connection with another parent who has been through the same experience can make a pivotal difference. Learning about the successes of another child with the same limb loss or difference instills parents with much-needed hope.

At the beginning of 2008, the ACA conducted two pilot parent peer support trainings to evaluate and test the new training program. By the end of the year, the ACA had certified 30 parents for the Parent Support Network through our full-day trainings in Minneapolis, Minnesota; Dallas, Texas; Atlanta, Georgia; and Long Island, New York. The dedicated parents who volunteer to participate in these trainings passionately believe in the monumental importance of peer support for parents. In fact, it is often described as a "lifeline" by parents who were fortunate enough to be connected with a peer in their hour of greatest need.



## ACA Helps Seed New Support Groups at Every Opportunity

A strong support system is an essential element to a complete recovery from a traumatic experience, such as limb loss. Support groups can be an invaluable resource, offering opportunities to connect with others who have been through a similar experience and who are “further down the road” toward an ideal adjustment. They provide a safe, supportive environment for discussing and practicing new coping strategies to help members get there.

While not every community is fortunate enough to have an amputee support group, the ACA strives

to help seed new groups at every opportunity. In 2008, 112 support group startup packets were sent out and the ACA Support Group Manual



was updated. The ACA also provided consultations with support group leaders by phone and held a Support Group Leaders Workshop in June at the ACA National Conference.

New in 2008 was the creation of an online, 24-hour peer support forum exclusively for people with limb loss – the Amputee Communicator Forum. This forum helps meet the support needs of amputees who do not have a support group in their area or who are physically or emotionally unable to attend one. Forum members can simply log on and read others’ posts, post replies, or create their own topics and start new threads of conversation.

# Amputee Coalition of America’s National Peer Network Receives Three Grant Awards

*Funding from the Department of Veterans Affairs, the Langeloth Foundation and the Wounded Warrior Project helps the ACA expand its peer support initiatives*

In 2008, the Amputee Coalition of America (ACA) received three grant awards to expand the activities of the National Peer Network. In announcing the funding awards, Paddy Rossbach, RN, ACA president & CEO, said, “Each of these new projects builds

on the success we have had in developing materials and implementing peer support for civilians, military personnel and veterans. Peer support is a critical element in recovery from trauma – for the injured and their caregivers.”

## Department of Veterans Affairs Train-the-Trainer Project

The primary goal of the project will be to incorporate a Peer Visitation (PV) program for people with limb loss into each of the 21 Veterans Integrated Service Networks (VISNs).



### Langeloth Foundation Caregiver Project

The Langeloth Foundation's purpose is to promote and support effective and creative programs, practices and policies related to healing from illness, accident, physical, social or emotional trauma and to extend the availability of programs that promote healing to underserved populations. A current priority for the foundation is to provide support for programs that address the needs of caregivers.

The goals of this project are to:

- Establish a caregiver peer visitor program for caregivers of service men and women with new combat-related polytrauma or blast-related injuries
- Evaluate the effectiveness of the training materials and the training program
- Evaluate the effectiveness of the caregiver peer visits.

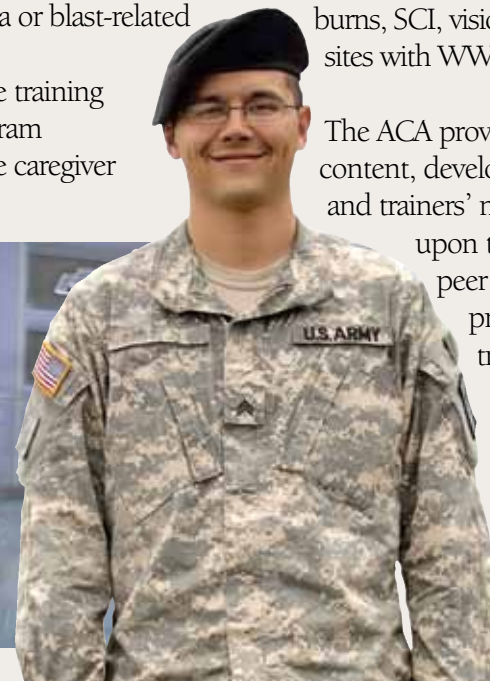


### Wounded Warrior Project Peer Mentoring Project

The purpose of the Wounded Warrior Project (WWP) is to raise awareness of and enlist aid for the needs of severely injured service men and women; help severely injured service members aid and assist each other; and provide unique, direct programs and services to meet their needs.

This project provided a framework for incorporating a peer mentoring program for people with a range of injuries resulting from combat (e.g., PTSD, BRI, burns, SCI, vision loss and impairment) into sites with WWP presence.

The ACA provided technical assistance and content, developed a peer mentoring manual and trainers' manual for the WWP based upon the ACA's existing standardized peer visitor materials and training protocol, and certified seven trainers.



CHANGING LIVES *Through Advocacy*



*“Alone we can do so little; together we can do so much.”*

*– Helen Keller*



*Her story is special because, through it, many amputees see their own convoluted struggles.*



## Cancer Survivor Teams With ACA to Fight for Fair Prosthetic Coverage

Eileen Casey, a single mother of three college students, found out she had osteosarcoma one day in 2006 and was told her life depended on having an amputation. The next week she was a transtibial (below-knee) amputee. However, the stress of learning she had cancer and then becoming an amputee was only the tip of the iceberg. While Casey went through 42 weeks of chemotherapy, she discovered that her medical insurance had a cap of \$10,000 for prosthetic care. The problem was, her temporary prosthesis had already reached this limit.

Casey had a stroke of good fortune amid all this negative news. She had sought financial assistance from Vermont Vocational Rehabilitation (VVR) and was moving toward taking out a bank loan when VVR offered to provide the finances she needed to purchase a prosthetic limb.

However, Casey didn't forget that feeling of desperation, and she knew that there were thousands of others like her with different stories to tell about how their insurance company wouldn't pay for an arm or leg that they needed to get back on track to living and working.

Using her courage and conviction, she approached her state senator, Doug Racine (D-VT), who was the chair of the Health and Human Services Committee in the

Vermont state legislature. She first educated herself on the issues by reading the ACA Web site, and then asked Senator Racine to sponsor a parity bill. To her delight, and the delight of advocates for amputees throughout the state of Vermont, he introduced the legislation on January 1, 2008.

Casey used logic to appeal to the legislators at the senate hearings. She said that it made no sense that while she and her employer paid insurance premiums, she received no coverage, but that if she had stopped working and gone on Medicare or Medicaid, she'd have 80 percent covered. She still had many working years left in her, after all, and she desired to be a productive, tax-paying member of society.

While this logic was persuasive, the senators were even more compelled by the actual prosthetic leg that she brought for them to look at. Most had never seen one, let alone held one up close, and it gave them a better understanding of how important it is for amputees to receive a prosthetic limb to enable them to return to work. Through Casey's powerful testimony and dedication to the cause, on April 23, 2008, Vermont became the 10th state to pass parity legislation.

Ironically, the bill that Casey helped pass would help many people, but since her company was self-insured, she still wasn't going to see any coverage.



Now, Casey is taking her story to the next level and appealing for federal insurance parity. Her story is special because, through it, many amputees see their own convoluted struggles. Yet she has refused to give in or give up. As a result, Casey's courage continues to inspire others to get involved in this important struggle as well.

*Note: No funding from the Centers for Disease Control and Prevention (CDC) is used to support ACA advocacy efforts.*

*Eileen Casey didn't forget that feeling of desperation, and she knew that there were thousands of others like her with different stories to tell about how their insurance company wouldn't pay for an arm or leg that they needed to get back on track to living and working.*

The ACA will continue to fight for access to care for amputees of every age at both the state and federal level.



# Full Speed Ahead in the Fight for Parity

*The past couple of years have been a roller coaster ride for the Amputee Coalition of America's (ACA's) Advocacy Department. The department has had many successes and also faced its share of challenges. The staff, with the help of many others, has built a national campaign from the ground up and has helped build campaign committees, lobby lawmakers, create resources and provide day-to-day technical assistance for each of the state bills.*

## **Connecticut**

In February 2008, nearly 100 amputees flooded the state capitol in Connecticut to lobby for the state parity bill. Working with the local campaign committee and local Hanger offices, the Amputee Coalition of America organized a series of events in support of access to care. The day kicked off with a press conference on the Capitol steps, and the event was covered by three television stations, two radio stations and the daily newspaper.

After the media event, a group of prosthetists and local amputees set up an educational presentation in the legislative office building. They staffed tables throughout the day to provide information, answer questions and encourage support for the bill.

Participants also attended lobby meetings with members of the Insurance & Real Estate Committee and the legislative leadership. Each participant also made sure to stop by and talk with staff from their own representative's office.

Events like this one were held all over the country to build momentum behind this important legislation.

**Fifteen parity bills were considered by state legislatures during the 2008 legislative session. The hard work of our local activists combined with our expertise and guidance resulted in the enactment of four new laws, bringing the total to 11 states with statutes protecting access to prosthetic devices. Furthermore, five of the laws also provide protections for orthotic benefits.**



*We have made great strides in a fairly short period of time.  
We could not have done any of this without the hard  
work of activists all over the country.*



### **New Jersey**

At 8:45 pm on the last legislative day of the 2008 session, the New Jersey legislature passed a bill ensuring access to comprehensive coverage for orthotic and prosthetic care. It was a long and difficult road. The ACA and our allies pushed hard for several years to keep the bill alive through countless calls, e-mails, letters and lobby meetings. New Jersey enacted the parity bill with an amendment that would also extend and ensure coverage for government employees covered by the New Jersey State Health Benefits Program (SHBP).

### **Vermont**

Sponsored by senators Doug Racine (D-VT) and Ginny Lyons (D-VT), Senate Bill 280 was introduced in the Vermont General Assembly in January 2008. The Vermont Senate went on to pass the bill unanimously. The sponsor recognized the lead activist, Eileen Casey, and shared her story with the Senate (*see page 30-31*). The House went on to pass the bill on Tuesday, April 1. It was later signed in a bill ceremony by Governor Jim Douglas.

### **Indiana**

Indiana prosthetists Allen Dolberry and Kevin Hagemeyer approached the ACA to help them build an Indiana parity campaign in 2007. Along with the help of local activist Marifran Mattson, they formed the Indiana Amputee Insurance Protection Coalition. We worked with them to hold a series of coalition and organizing meetings in July to help kick start the coalition's efforts.

They were invited to testify before the Health Finance Commission in September, which helped them to secure allies to sponsor the bill. In January 2008, Senate Bill 269 was introduced by Senator Gary Dillon (R-IN). House Bill 1140 was introduced by Representative Mike Murphy (R-IN). The bill flew through committees and through both chambers. Because two different versions passed, it had to go through a conference committee to decide which version would move forward. We worked hard to ensure that the bill remained strong. After several weeks of discussion and many meetings, the conference committee sent the bill out. It was then passed on Friday, March 14, and signed into law by Governor Mitch Daniels.

### **Louisiana**

2008 was the first year for a parity effort in Louisiana, but the extreme dedication of the local group resulted in passage. The bill passed overwhelmingly out of the House (69 to 32), and, with two administrative amendments in the Senate, it soared through (26 to 7). The governor told the press he was anxious to sign the bill into law, but we ran into some very creative and determined opposition. An attempt was made to send the bill to conference committee to kill it, but the committee was able to get it through and signed into law by Governor Bobby Jindal.

### **Maryland, Utah, Nebraska, Virginia and Other States**

As the weather heated up later in the year, so did the fight for prosthetic parity. Throughout the summer, the state campaign committees worked hard to get ready to launch successful campaigns in the upcoming legislative session. Maryland, Utah, Nebraska and Virginia worked on collecting data and statistics related to parity in order to strengthen their push in the next legislative session. Many states also coordinated

community meetings to raise awareness and build support among local prosthetists, amputees, and their friends and families.

### Missouri

The Missouri campaign committee, known as the Missouri Coalition for People with Limb Loss, held a summer barbecue and washer toss on August 9 in Des Peres Park. While it is tempting for people to simply lounge on the beach in the summer, the ACA is thankful that our activists continued to work hard.

### On the Federal Level

The passage of four new laws in 2008, along with many local initiatives to introduce bills in the coming year, helped us begin the much-needed fight for legislation at the congressional level. Thus, 2008 saw our first concentrated congressional effort to extend protections to plans that are regulated by the federal government and ensure access to care in every state.

On March 13, the U.S. Congress introduced the “Prosthetic Parity Act of 2008” (HR 5615). HR 5615 provides insurance parity under employer-paid and group health insurance coverage for prosthetic devices and components.



It was introduced by Representative Rob Andrews (D-NJ), along with Representatives George Miller (D-CA), Todd Platts (R-PA), Mario Diaz-Balart (R-FL), and Lincoln Diaz-Balart (R-FL) signing on as original cosponsors.

To build support, the ACA organized a national week of action from April 26-May 2. Local supporters planned house parties, gathered postcards, and held meetings in the district offices of local members of Congress. There were over 98 events in 89 different cities in 35 states. Over 10,000 postcards were collected by supporters.

The postcards that were collected were bundled and dropped off by volunteers from the Washington,

D.C., area in May. Local activists joined the ACA advocacy staff on the Hill as thousands of postcards were hand-delivered to the offices of each member of Congress.

On June 11, activists from all over the country converged on Capitol Hill for the Amputee Coalition of America’s first annual lobby day. The participants met with their House members and senators to urge them to support the federal parity bill. Members continued to hold meetings back at home with members of Congress in their district offices during the summer recesses.

After the strong organizing efforts throughout the summer months, the ACA was pleased to see a federal parity bill introduced in the United States Senate with bipartisan support in September. S. 3517, the “Prosthetic Parity Act of 2008,” was cosponsored by Senators Olympia Snowe (R-ME), Tom Harkin (D-IA), Daniel Inouye (D-HI), and Russell Feingold (D-WI).

### Volunteers Helped Make It Possible

The ACA has made great strides in a fairly short period of time. We could not have done any of this without the hard work of activists all over the country.

## Amputee Activist Joins Country Legend in Pushing for Prosthetic Parity

Albertha Jackson-Smith is one of those tireless volunteers. She is part of the small but hardy group of volunteers who have been working with us to push for a bill in the Maryland legislature. Jackson-Smith was inspired to take on this cause for her son, Lorenzo.

Lorenzo Smith lost his leg when a speeding car driving on the wrong side of the road veered onto the sidewalk and struck him on his way home from middle school. Because of restrictions on his health insurance coverage, doctors estimated that his parents will spend an average of \$15,000 or more per year for the next 7 to 10 years to provide him with prosthetic care.

He is just one example of the thousands of young amputees across the United States whose health and quality of life are being impacted by archaic insurance regulations that have restricted or even eliminated coverage for prostheses. Bills like the one in Maryland will ensure that prostheses are covered on par with other basic medical services.

We have already seen the difference that parity bills can make in the lives of families like Lorenzo's. The ACA will continue to fight for access to care for amputees of every age at both the state and federal level.

*Note: No funding from the Centers for Disease Control and Prevention (CDC) is used to support ACA advocacy efforts.*

Michelle Gilligan-Prichard moved to Nashville to pursue her dream of becoming a successful country singer. Having worn a prosthetic limb since she was 18 months old, she was shocked to find out that her insurance company in Tennessee would not cover the cost of her leg. She decided to do something about it not only for herself but for all amputees.

She organized the first annual parity benefit concert for the Amputee Coalition of America and the Mending Limbs Organization in Franklin, Tennessee. The event was headlined by Kix Brooks of the award-winning country duo Brooks and Dunn.

Brooks, Jennifer Hanson, Baillie and the Boys, *Nashville Star* contestant Joshua Stevens, Sutton Parks, and Todd Sansom all performed along with Michelle Gilligan-Prichard.

The concert was aimed at raising awareness about the need for prosthetic parity legislation in Tennessee and across the country, and the proceeds helped support the ACA's advocacy program.

The funding and media coverage from the first annual benefit surely helped to build and enhance

support for prosthetic parity as the ACA prepared to advance legislation in the 2009 legislative session. The state law would ensure that amputees with health insurance have access to prosthetic care by creating a consistent standard for benefits and financial requirements in private insurance coverage.



The concert also provided support for the Mending Limbs Organization, a new foundation established to provide funding for prosthetic care for amputees in Tennessee whose health insurers severely limit coverage for prosthetic limbs. Dozens of charitable foundations are started every year to meet the needs of amputees whose insurance companies are denying the care they need to lead full and independent lives. That is why it is imperative for the ACA to continue our efforts to pass parity legislation. With the passion and commitment of advocates like Michelle Gilligan-Prichard, we will continue to succeed.

*Note: No funding from the Centers for Disease Control and Prevention (CDC) is used to support ACA advocacy efforts.*



A close-up of a person's eye, where the iris is replaced by a vibrant, multi-colored galaxy. The background is a dark, starry night sky with a purple and blue nebula on the right side. The overall mood is contemplative and cosmic.

CHANGING LIVES: *The Numbers Behind the Faces*

*“Statistics are human beings with the tears wiped off.”*

*– Paul Brodeur*



# Mission Impact – A Statistical Overview

The Amputee Coalition of America (ACA) is a nonprofit organization and the national leader in developing and disseminating limb loss information, including information on best practices in clinical improvement and care management. In 2008, the ACA analyzed the effect of our various outreach initiatives and documented the following impact:

## Lives Benefited

Number of ACA-Certified Peer Visitors .....	1,057
Number of Peer Visits Reported .....	3,632
Fact Sheets Distributed .....	49,041
Web Site Visits .....	2,263,203
Unique Web Site Visitors .....	409,393
National Conference Attendance .....	874
Support Groups .....	300
Youth Campers .....	86

## Community Outreach

Every year, the ACA conducts and participates in educational outreach and educational activities.

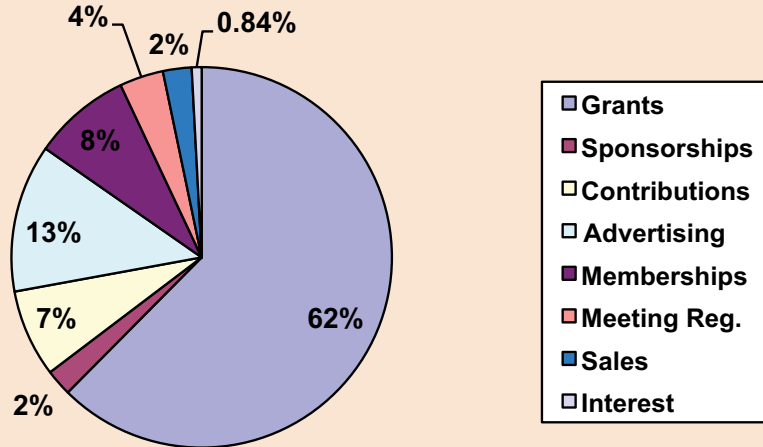
National, Regional and Local Exhibits .....	53
National/Regional Presentations.....	63

## The People of the Amputee Coalition of America

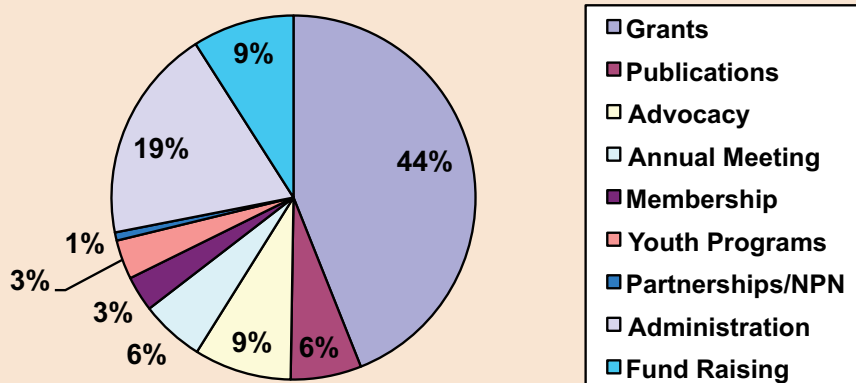
Board Members .....	10
Total Employees .....	26
Medical Advisory Committee Members.....	13

# FINANCIAL SUMMARY

**REVENUES - 2008**



**EXPENSES - 2008**



Revenue		2008
Grants	62%	\$1,869,041
Sponsorships	2%	\$67,342
Contributions	7%	\$222,698
Advertising	13%	\$376,172
Memberships	8%	\$248,940
Meeting Reg.	4%	\$111,543
Sales	2%	\$72,892
Interest	0.84%	\$25,166
		\$2,993,794

Expense		
Grants	44%	\$1,366,455
Publications	6%	\$195,375
Advocacy	9%	\$268,835
Annual Meeting	6%	\$175,699
Membership	3%	\$97,800
Youth Programs	3%	\$108,555
Partnerships/NPN	1%	\$22,672
Administration	19%	\$591,892
Fund Raising	9%	\$280,719
		\$3,108,002

Net Income	-\$114,208
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## FINANCIAL REPORT

The Amputee Coalition of America (ACA) is a nonprofit organization established as an educational resource to promote amputee awareness and understanding throughout the United States. The ACA's primary funding sources are federal grants, memberships, publication advertising, sponsorships, an annual conference and donor contributions.

The financial statements of ACA have been audited by the independent audit firm of Coulter & Justus, P.C., and are prepared in accordance with accounting principles generally accepted in the United States of America using the accrual basis of accounting.

# STATEMENT OF FINANCIAL POSITION

	December 31	
	2008	2007
<b>Assets</b>		
Current assets:		
Cash and cash equivalents	\$ 754,188	\$ 769,885
Accounts receivable, net of allowance for doubtful accounts of \$2,750 in 2008 and 2007	20,365	33,320
Contributions receivable	33,051	104,051
Grants receivable	216,590	168,228
Total current assets	1,024,194	1,075,484
Equipment and furniture	347,625	347,625
Leasehold improvements	11,937	11,937
Less accumulated depreciation	(323,404)	(314,116)
Net property and equipment	36,158	45,446
Other assets	3,332	3,332
Total assets	\$ 1,063,684	\$ 1,124,262
<b>Liabilities and net assets</b>		
Current liabilities:		
Accounts payable	\$ 78,559	\$ 49,596
Accrued expenses	82,613	91,582
Current portion of deferred membership revenues	126,181	115,807
Total current liabilities	287,353	256,985
Deferred membership revenues, net of current portion	21,800	14,604
Deferred rent	40,409	24,344
Total liabilities	349,562	295,933
Net assets:		
Unrestricted	606,490	724,278
Temporarily restricted	107,632	104,051
Total net assets	714,122	828,329
Total liabilities and net assets	\$ 1,063,684	\$ 1,124,262

# STATEMENT OF ACTIVITIES

	Year ended December 31, 2008			Year ended December 31, 2007		
	Unrestricted	Temporarily Restricted	Total	Unrestricted	Temporarily Restricted	Total
Support and revenues:						
Grants	\$ 1,869,041		\$ 1,869,041	\$ 1,777,903		\$ 1,777,903
Sponsorship contributions	67,342		67,342	126,489	\$ 104,051	230,540
Contributions	148,117	\$ 74,581	222,698	321,771		321,771
Publication advertising	376,172		376,172	355,289		355,289
Memberships	248,940		248,940	209,743		209,743
Educational material sales	72,892		72,892	75,189		75,189
Annual meeting	111,543		111,543	106,694		106,694
Interest income	25,166		25,166	43,443		43,443
Net assets released from restrictions	71,000	(71,000)	-			
<b>Total support and revenues</b>	<b>2,990,213</b>	<b>3,581</b>	<b>2,993,794</b>	<b>3,016,521</b>	<b>104,051</b>	<b>3,120,572</b>
Expenses:						
Program services	2,230,314		2,230,314	2,252,904		2,252,904
Supporting services	877,687		877,687	954,203		954,203
<b>Total expenses</b>	<b>3,108,001</b>		<b>3,108,001</b>	<b>3,207,107</b>		<b>3,207,107</b>
Change in net assets	(117,788)	3,581	(114,207)	(190,586)	104,051	(86,535)
Net assets at beginning of year	724,278	104,051	828,329	914,864		914,864
<b>Net assets at end of year</b>	<b>\$ 606,490</b>	<b>\$ 107,632</b>	<b>\$ 714,122</b>	<b>\$ 724,278</b>	<b>\$ 104,051</b>	<b>\$ 828,329</b>



# STATEMENT OF FUNCTIONAL EXPENSES

**For the Year Ended December 31, 2008**  
**(With Summarized Financial Information as of December 31, 2007)**

	Program Services							Supporting Services			2008 Totals	2007 Totals
	National		Annual		Youth	Other	Total	Management				
	Limblimb	Loss	Conference	Membership				Program	Program	and General		
Info Center	Advocacy	Publications	Conference	Membership	Programs	Services	Services	and General	Fundraising	2008 Totals	2007 Totals	
Salaries	\$ 610,039	\$ 150,811	\$ 31,739	\$ 16,648	\$ 55,784	\$ 17,899	\$ 49,052	\$ 931,971	\$ 57,273	\$ 121,443	\$ 1,110,688	\$ 1,034,300
Fringe benefits	230,622	57,013	11,999	6,293	21,089	6,767	18,544	352,326	21,652	45,911	419,889	416,080
Commissions	-	-	505	-	-	-	-	505	-	-	505	3,000
Communications	12,335	3,691	1,011	630	4,271	245	179	22,364	8,145	3,181	33,689	35,397
Contractual costs	141,496	5,992	22,798	28,066	1,755	3,315	61,334	264,756	244,566	70,731	580,053	512,588
Depreciation	-	-	-	-	-	-	-	-	9,289	-	9,289	7,205
Educational resources	17,705	-	-	-	-	-	-	17,705	-	-	17,705	20,970
Insurance	-	-	-	-	-	-	-	-	12,305	-	12,305	10,466
Minor capital costs	9,638	-	-	-	-	-	-	9,638	6,426	-	16,064	16,584
Postage	51,914	2,050	60,626	1,074	7,416	674	48	123,803	1,870	5,258	130,931	143,842
Printing	35,151	5,076	66,006	11,725	3,400	864	2,745	124,967	-	8,523	133,490	186,052
Rent	-	25,144	-	-	-	-	-	25,144	167,867	4,562	197,573	169,441
Repairs and maintenance	-	-	-	-	-	-	-	-	7,656	-	7,656	11,377
Supplies	43,843	4,426	692	1,164	2,549	1,441	922	55,038	4,926	8,077	68,040	165,024
Travel	94,949	14,607	-	106,733	1,536	77,348	3,128	298,301	24,987	7,955	331,244	398,705
Utilities	-	-	-	-	-	-	-	-	20,926	-	20,926	17,516
Other	5,481	25	-	3,366	-	-	-	8,873	4,004	5,078	17,955	58,560
<b>TOTALS</b>	<b>\$ 1,253,175</b>	<b>\$ 268,835</b>	<b>\$ 195,375</b>	<b>\$ 175,699</b>	<b>\$ 97,800</b>	<b>\$ 108,555</b>	<b>\$ 135,952</b>	<b>\$ 2,235,390</b>	<b>\$ 591,892</b>	<b>\$ 280,719</b>	<b>\$ 3,108,001</b>	<b>\$ 3,207,107</b>

SPECIAL FRIENDS OF THE AMPUTEE COALITION OF AMERICA - 2008

**\$25,000 - \$100,000**

Otto Bock HealthCare, Inc.

**\$10,000 - \$24,999**

Ossur  
Marilyn Simpson  
Charitable Trust Fund

**\$1,000 - \$9,999**

ASPIRE  
Drew Shoe Corporation  
IBM Corporation  
NAAOP  
The Frances & Benjamin  
Benson Foundation, Inc.  
The Portmann Family  
Charitable Fund  
Wal-Mart Foundation  
Wilkerson M. Howard Trust  
Arthur Bassin  
Marshall Cohen, Cohen  
& Perfetto LLP  
Iris Detter, The Detter Family  
Foundation  
Meghan Eilbeck, Freedom  
Innovations, Inc.  
Dorothy Forry, Walters  
Foundation of  
Morristown, TN  
Joseph Klest, Law Offices  
of Joseph G. Klest  
Keith Krakower, Storage  
Deluxe Management  
Company

Karl Kuddes, Spring Amputee/  
Allied Healthcare  
Eve Rachel Markewich,  
Markewich and Rosenstock  
LLP  
James Orphanides  
Redd Owen  
Brett Robenhorst

**\$500 - \$999**

Advanced Prosthetics  
Center, LLC  
Jeffrey Cain  
Greg Canavero  
Joanne Casteel  
George Counts, C.H. Martin  
Company  
Carisa De Anda  
Calvin Erb  
Terry Feeney, Millennium  
Partners, LP  
Karen Feinstein  
Fredric Gould, Gould  
Investors, LP  
Jeff Lewis  
D.R.B. Liddell  
Jean Lynch  
Richard Myers  
Jill Parr  
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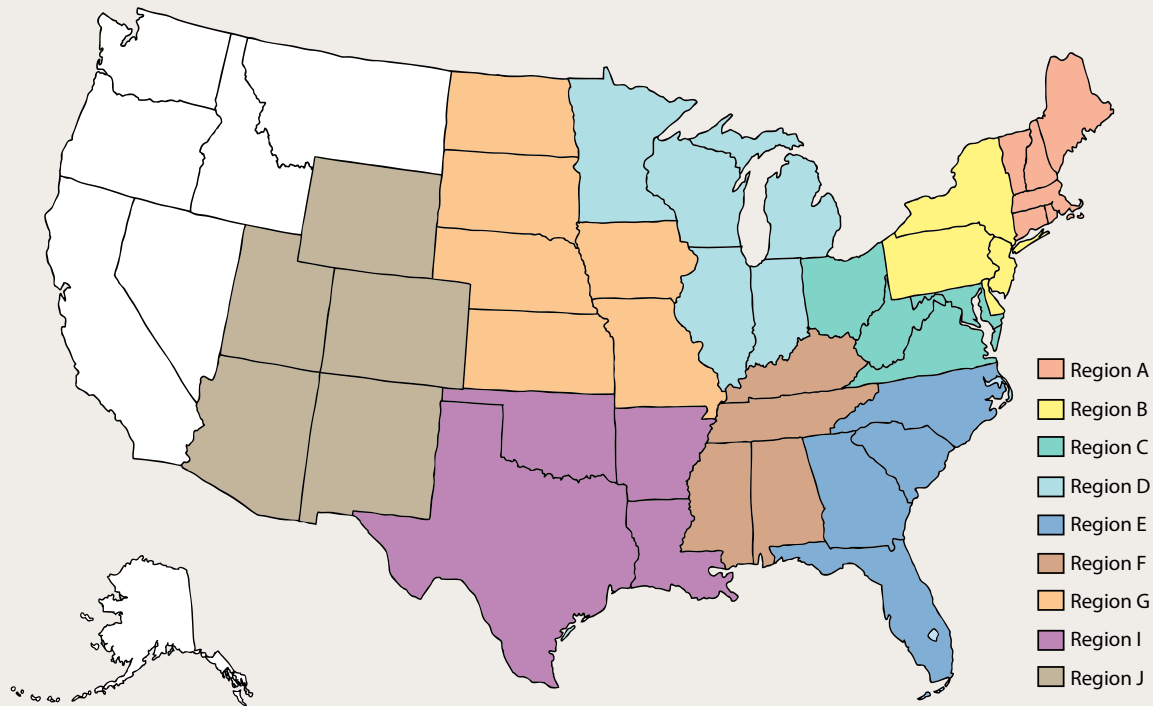
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CHANGING LIVES *Through Passion*



*“Nothing great in the world has been accomplished without passion.”*

*– Georg Wilhelm Friedrich Hegel*

*“Paddy contributed significantly to the growth, success and recognition that have the ACA considered the premier and authoritative support organization for people with limb loss in the U.S. and the world.” – Charlie Steele*

# Enduring Legacy: Paddy Rossbach, ACA President & CEO, 2002-2008



*“What a great find and huge asset Paddy has been to the ACA. Her legacy and the mark she left will never be erased or forgotten.”  
– Charlie Steele, ACA Board of Directors*

Born in England in the days leading up to World War II, Patricia “Paddy” Rossbach lost her lower left leg when she was 6 after being struck by a military truck. But setbacks seem to be what Rossbach was born to overcome. She learned to take care of herself, went off to private school, became a registered nurse, began counseling young amputees on her own, began skiing in her 20s, scuba-diving in her 30s, running marathons in her 40s, and riding in dressage competitions in her 50s. In the 1990s, at a time in life when most people would be looking forward to a well-deserved retirement, Rossbach encountered the Amputee Coalition of America – and soon brought her formidable energy and indomitable spirit to serve it.



She served on the organization's board of directors and as its chair in the late '90s, accepted the position of interim CEO in 2001, and was named president & CEO in 2002. She retired in September 2008.

When speaking of achievements during her tenure, Rossbach embodies the spirit of "team first" that is so essential to the work the Amputee Coalition does.

"I must preface this by saying that none of things that happened during my tenure would have been possible without the admirable staff we had," she says. "No one can do it alone. It wouldn't be right to say 'I did this' or 'I did that' – We did it."

Just a few of the things we did with Rossbach's assistance or leadership include:

- Beginning and promoting the prosthetic insurance parity campaign, which has spread both nationwide and up to the federal lawmaking level
- Establishing and growing the annual Amputee Coalition Youth Camp
- Standardizing peer visitor training and expanding the National Peer Network
- Forging ties with the Department of Defense and assisting the DoD in developing its own peer training
- Fostering and enhancing communication and cooperation among professional organizations that serve the limb-loss community.

Of this last point, Rossbach says it was "something that pleased me very much during my tenure, bringing together more closely the professional organizations that also work with people with limb loss and bringing them closer to the ACA so that now AOPA and all those organizations are working together much more closely with the ACA. I think, because of that, it gives everyone greater strength, especially with parity."

"To try to pick just the highlights of Paddy's achievements at the ACA is an impossible task," said Pat Isenberg, who became the ACA's chief operating officer during Rossbach's tenure as president & CEO. "Her 'people-person' personality, her drive for excellence, and her enthusiasm for helping people with limb loss inspired all of us who worked with her to make each facet of the ACA organization the best it could possibly be. Although she may have retired from her positions with the ACA, she is never far from our hearts, and her passion for helping continues to inspire us."

Enthusiasm, people skills, drive, spirit, determination – many terms have been used to describe the most singular quality that Rossbach brought to the Amputee Coalition. For board member Marshall Cohen, the word to describe what Rossbach brought to the ACA is "passion."

*"Her vision, passion, knowledge, personal experience and professional training brought a huge stamp of credibility to the ACA and those who chose to work with us and fund our initiatives."*

*– Charlie Steele*



“The defining characteristic of Paddy Rossbach is her passion for whatever she touches, be it programming for children with limb loss and difference, peer visitation or horses,” says Cohen. “Her passion was and is infectious, inspiring her children, her peers and others to give their best effort to whatever program is at hand. I personally experienced her impact when she reached out to me in a peer visit before my amputation to explore this difficult choice. She was sensitive, clear-headed and inspiring, guiding me to make the right decision for myself.”

Another aspect of Rossbach’s tenure is the expansion of the ACA’s core services and strengthening of ties to the Centers for Disease Control and Prevention, which helps fund services such as the ACA’s National Limb Loss Information Center, which saw its usage more than double from 2002 to 2008. With the expansion of its services, the ACA’s recognition has grown as well, and part of

that is due to Rossbach’s association with the ACA. Rossbach has also been honored by numerous other organizations, including the American Orthotic & Prosthetic Association (AOPA) and Hanger, for her efforts on behalf of people with limb loss.

“Paddy contributed significantly to the growth, success and recognition that have the ACA considered the premier and authoritative support organization for people with limb loss in the U.S. and the world,” says ACA board member Charlie Steele. “Her vision, passion, knowledge, personal experience and professional training brought a huge stamp of credibility to the ACA and those who chose to work with us and fund our initiatives.”

“The ACA owes Paddy Rossbach a tremendous debt of gratitude for her leadership and years of service,” says Kendra Calhoun, who took over from Rossbach as ACA president & CEO in September 2008.

*Note: No funding from the Centers for Disease Control and Prevention (CDC) is used to support ACA advocacy efforts.*

*“Paddy helped establish a solid foundation of core strengths from which we can grow as an organization to develop more areas of expertise to serve the limb loss community in ever-expanding ways. Paddy positioned the ACA well to move forward, and I am proud that the ACA can move into the future working from the solid base that she helped us achieve.”*

*– Kendra Calhoun, ACA President & CEO*



## Amputee Coalition of America's Paddy Rossbach Youth Camp



In 2009, the Amputee Coalition Youth Camp was renamed in Paddy's honor to the Amputee Coalition of America's Paddy Rossbach Youth Camp.

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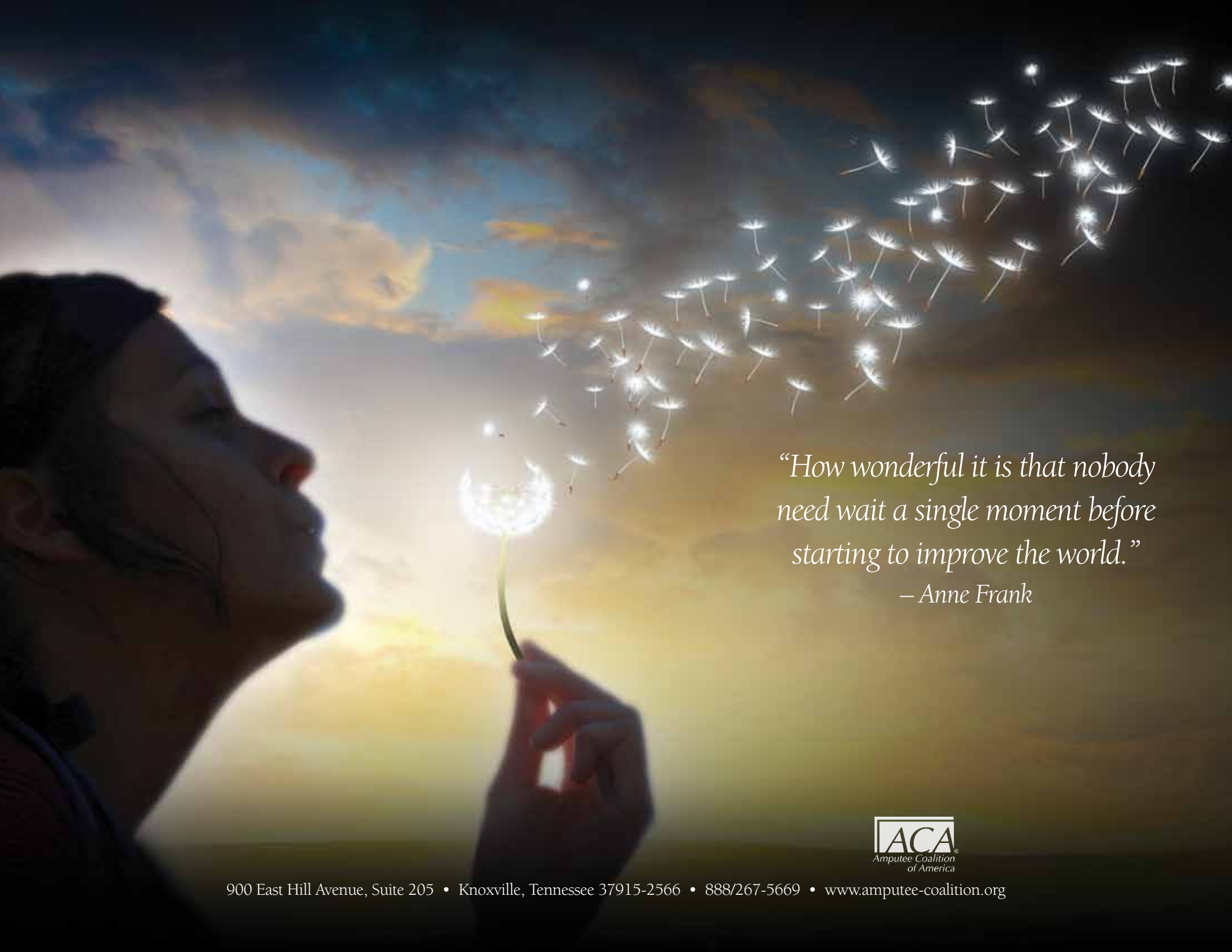
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*“How wonderful it is that nobody  
need wait a single moment before  
starting to improve the world.”*

*– Anne Frank*

