

Finalist, Non-Fiction

On Falling and Getting Back Up
By Mel Finefrock

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It was June 10, 2014. I was on my way home from my college town, having just interviewed my friend John Bramblitt, a blind painter, for what was soon to be my next guest post with the Disability Blog on Disability.gov. Denton and Plano aren't too far apart — maybe 45 minutes — but as I am someone who relies on transportation, the commute can take me a couple of hours since I end up crossing transit regions. So, I started off in Denton, having taken Access to the central train station. From there, I'd catch the train and ride to the end of that line at Carrollton, then catch Paratransit to my house on the edge of Plano where there is no access to fixed route transportation.

When I got to the train station, though, no one seemed to be there. It was midday, so traffic tended to be slower at that time; however, in all my years of using this system, I'd never seen the place quite so deserted. This was a problem, because I tended to listen for and follow the footsteps of other passengers as they boarded the train, since the doors weren't automatic and ideally I wouldn't want to get too close to the train itself.

There were 15 or 20 minutes until the train would depart. I sat on a bench and fretted. If no one showed up so that I could follow their footsteps into that train, I was at risk of missing it and therefore missing my inflexible Paratransit connection at the other end of the line, which was conceivably my only way home. After a few minutes had passed, I resolved to call upon prior travel training in order to hopefully locate a door. Right then and there, I gave myself three chances, because I knew by my fourth attempt I'd be too shaken to operate safely and would

need to return to the bench. If that happened... well, I'd have to get creative and find another ride home.

Slowly I navigated toward the rows of bumps lining the edge of the tracks, then placed the train at my right side, my white cane in my left hand, and gingerly stepped forward. My right hand, now free, trailed the metal siding in search of a textural difference which might indicate a door. My cane hand swung in a careful arc: ground at vicinity of left shoulder, bumps at vicinity of right shoulder, siding of train. Ground, bumps, train. After the first try was unsuccessful, I stopped, backed off, and took a few cleansing breaths, then backtracked and tried again. And again. The third time wasn't a charm, so I resolved to go and sit back down as I'd planned. But despite knowing exactly where I was, as I turned away, I was so shaken (as I'd predicted) that I lost my balance and just fell into the tracks, right in front of the train.

I didn't hear or feel my leg break. All I knew was there was a giant, roaring monstrosity sitting just feet away from me with maybe five minutes left until takeoff. If I screamed, would anyone hear me? Was it standard procedure for transit officials to check the tracks before departure? A chill racked my frame as I remembered the shock and grief I felt when, during my junior year of college, I heard that another UNT student had been struck and killed while walking in the train corridor near the end of the line in Carrollton. I was going to die if I didn't at least try to do something, but even then I knew that nothing was guaranteed. There was a lot going on in my life that wasn't exactly ideal, but I wanted to live. I hadn't even gotten to say "hello" or "I love you" to most of my friends and family yet that day.

I stood up as best I could on the rocky ballast and braced against the wall, which was about two and a half feet high. My left leg twinged and gave, and I knew it was broken. I bent to pick up my cane, made sure it hadn't busted too, and threw it over the ledge and back up onto the

platform because I was pretty sure I'd need it. Then I checked to ascertain that my backpack and the things in my pockets were intact.

And then... I faced the wall, with the train at my left, still mere feet away. I couldn't bring myself to step to the right — what if there were an even deeper drop-off there? — so I first hoisted myself up against the wall with my arms, much the way kids do when they're too lazy to use a ladder to climb out of the swimming pool. The rest of that venture was punctuated by a heaving little flip which, because the train was on my left side, left me with no choice but to land on my left leg, which I'd already broken. I curled up in the fetal position and reached for my cane, hugging it to me like it was the only comfort I had... and then, when I found my breath, I began screaming, unfortunately none too powerfully, for help.

Apparently, there'd been a conductor on site after all, but he'd been at the complete opposite end of the platform, so neither of us had been aware of the other. He and a woman with an English accent came running. They thought I had merely slipped on the pavement and sprained an ankle. When I told them what had actually happened, I could practically hear their jaws dropping to the concrete. So, while holding my hand, the conductor called an ambulance, and I went through a series of X-rays at Denton Regional before being transferred to Plano Medical for surgery under Dr. Michael Devish.

My left leg now sports a knee-to-ankle rod, a four-inch plate in my fibula and 16 large screws, 10 of which reside in my ankle. I fractured my tibia, my fibula (in several places), essentially shattered my ankle, and broke part of my foot. I hadn't a mark on the rest of my body, save for some internal bruising in my upper/outer left leg, which may have been due to surgery more than anything else. Because of the fact that being blind actually changes a lot about walking due to balance and such, my orthopedic doctor had me essentially off my leg for 12

weeks, which is longer than the usual four to six weeks or our expected eight to 10. Although this precaution was entirely necessary, it also unfortunately led to muscular atrophy and osteopenic condition, so learning to walk was nothing short of a challenge.

My physical therapist Jessica Costakes and I were up for that challenge, though, of course. Once I was cleared for partial weight-bearing, we worked that much harder to rebuild my strength and stability. In the interim, I used a crutch or walker at home and a wheelchair in public for several more months until we felt I was ready for the next transition. Throughout my recovery — particularly in the earlier months — I was under the TLC of several close friends and family members, as well as my attendant, Lisa Henry. If you've provided or received long-term health care, you know how crucial it can be for the patient-provider relationship to be in good standing; but it's that much more special when a friendship and sense of mutual respect are formed. Between the kindness of Jessica and Lisa and the steadfast support from my loved ones, I was able to maintain a sense of motivation throughout my recovery process.

Only in early January did I finally begin ambulating independently in public after about a month and a half of relying on a crutch as an additional point of contact with the ground. My balance is still somewhat impaired, and I'm not sure my leg will be quite the same, seeing as it's taken so long to heal to begin with, but I am thankful to have regained my freedom. I walk to the store and post office, go on light jogs to the park with my cane swinging before me, and I'm even re-acclimating myself to train travel, however slowly. I also now proudly identify as a person with multiple disabilities. I'm glad not to have sustained a more serious injury or even to have lost my life, because on that day, I knew that if my rescue maneuver hadn't worked, or if I'd passed out from pain and shock in the process of trying to escape, either of those outcomes was highly probable. So overall, I feel very grateful, lucky and blessed. It's true — what

happened to me was terrible — but because my life has been enriched in so many ways as a result of this experience, I can say with a hundred percent honesty that I'm actually glad it came to pass.

There's been a lot of emotional healing involved in this journey, too, of course, and I admit I'm still traversing that road to recovery, occasional flashbacks and all. But one thing I can say is that although that fall broke my spirits and what relative confidence I had built up over the years, the fact that I was able to rescue myself — the fact that I required assistance from no one until I'd gotten myself to general safety — has helped me to accept what happened and even to be proud of my survival instincts.

In sharing my story, my hopes are to encourage anyone who may be going through something similar, whether that's the acceptance of a newly acquired disability or just the grief and acceptance process in general. My best points of advice to you are the following:

- Answer shame with self-compassion. You've gotten this far. Try to find at least a little something every day that you are proud of or grateful for, whether it's that you've made progress in therapy, a breakthrough in a creative endeavor, or done something as seemingly simple as folding laundry or even getting out of bed to begin with. Every little thing counts.
- Live your life one moment at a time. Sometimes that's the most agonizing path to take, but if you think in milestones — and we often do this — you might not set yourself up for failure, exactly, but you will feel like a failure. You're not. Just because maybe hope isn't quite enough in a given moment or sequence of moments doesn't mean you are irrevocably damaged. It means you are human. Let yourself feel pain, because it is an active part of the grief process.

- Make use of your support networks. The first thing I wrote upon being discharged from the hospital was that love would sustain me, and I later had the phrase tattooed on my right leg in the pattern of one of the more prominent surgery scars on my left. This is because, when I first awoke in Room 532, I was literally surrounded by loved ones. If you do not find you have that advantage, my heart goes out to you, and I hope you'll consider joining a support group of some kind. You are strong but not invincible and are not meant to endure hardship alone. Do not confuse interdependence for weakness. As I said previously, having a support system bore significant influence on my progress.

- That said, there will be people — even loved ones — who will inevitably misunderstand some aspect or another of your situation. You will hear things like, “It could be worse,” or, “Shouldn't you be [insert milestone gerund here] by now?” etc. This is one of those easier-said-than-done dilemmas, but do your best to realize that a) they do not understand because they have not been in your place, and b) even if they have, everyone recovers at a different pace. Embrace yourself where you are. If you feel comfortable doing so, tell these individuals how it makes you feel when they unknowingly put pressure on you, because more often than not, they mean well and wish to uphold you, not tear you down. And I cycle back to the beginning: do your best to actively respond to shame with self-compassion. You owe it to yourself ... you've been to hell and back.