

amplified

edition 3 | 2018

The Power of Peers
meet Mike and Trent

The countdown begins
for the AMP-ED Up!
Conference

Get on board with
'Geoff's Big Walk'



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Distributed by OPC Health

Paul Coleman - Prosthetics & Orthotics Product Manager

T: 03 9681 9666 M: 0411 959 462 E: pcoleman@opchealth.com.au www.opchealth.com.au

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'ONE IN A MILLION'

INCORPORATING THRIVE
limbs4kids



amplified
edition 3 | 2018

Welcome to the third and final edition of Amplified for 2018.

This edition is packed full of good news stories.

Limbs 4 Life is thrilled to announce that we have funding available to support people to attend the AMPED-Up! Conference in Canberra. The Conference will provide people with limb loss with the opportunity to see the latest in prosthetic technology, speak to the manufactures, try new activities and meet other amputees. Don't miss out on this incredible opportunity. To find out more or to receive an 'Application Form' see the AMPED-Up article in this edition.

We are happy to share good news stories and this one is no exception. We chat to Mike, Peer Support Volunteer and Trent who met through a peer support connection when Trent was considering amputation; we also feature an insight on the impact of the Peer Support research study that we are conducting in conjunction with Monash University and we learn about 'Geoff's Big Walk for Limbs 4 Life,' not to mention the 'amazing Milla, whose story will melt your heart!

Limbs 4 Life Incorporated

ARBN 613 322 160 ABN 25 116 424 461

T 1300 78 2231 (toll free)

E info@limbs4life.org.au

limbs4life.org.au

limbs4kids.org.au

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The power of Peer Support

As a 14-year-old, Trent was an outgoing and adventurous teenager. On a Sunday afternoon in June 2008, his life took a sudden turn for the worst. What was meant to be a fun day out with friends and family, ended up being the start of a ten-year battle with pain, isolation, depression, and anger.

Trent and his mother Leonie headed out to meet family and friends for a picnic at a remote property in Somerville, southeast of Melbourne. "I was excited. It was always fun catching up with my cousins and friends," Trent shared. "There was a motorbike on the property and we were all allowed to take turns on the bike. It was so much fun!" Trent said.

"When I got onto the motorbike it flipped. The bike landed on my right leg, crushing it badly," Trent shared. "I thought that I had hurt my knee, but I couldn't tell where the pain was coming from," he said. Trent's mum, Leonie, took Trent to Frankston hospital to be assessed. The x-rays showed a break in his tibia (shin) bone. In order to keep the bone in place and to stop it from moving the doctors applied a plaster cast. "It was a complete cast from my hip all the way down to my ankle. The doctors put the cast on prior to my leg starting to swell. The problem was that the swelling had nowhere to go and the cast became very tight. It was like a tourniquet," stated Trent.

As the result of the premature cast, Trent developed compartment syndrome, a condition sometimes caused when a plaster cast or tight bandages are applied to an injury before the swelling has stopped, or when the cast is put on too tightly.

After two weeks of agonising pain, Trent returned to the hospital to have his cast changed, but unfortunately for him things were going to get worse before they got better. When doctors split the cast, they discovered large black pressure sores on his leg.

"I remember he had two large pressure sores, one on the back of his heel and another under his pinkie toe. The sores were the size of a 50 cent coin. For two years Trent was unable to walk or weight-bear on his leg waiting for the pressure sores to heal," shared Leonie.

During the two years that followed, Trent was constantly in and out of hospital while the doctors tried to repair his leg. At this point Trent had also developed foot-drop meaning he had no strength in his foot. Trent had physiotherapy sessions, underwent MRI scans, and a total of eight operations on his Achilles tendon to try raise his foot. Trent also endured several nerve conduction tests to measure the muscle response in his leg. "I found the nerve conduction tests to be very painful," Trent shared. Leonie agreed, "They put long needles into the muscle and administer an electric current to test the nerves and strength of the muscle. This was excruciatingly painful for him."

Despite all of these procedures and therapies Trent was still not very mobile. His leg wasn't recovering at all. It was so severely damaged that the cartilage and scar tissue around the bone became stronger than the bone itself. The lack of activity and muscle waste had reduced the size of his leg to the size of a child's arm.

Due to Trent's physical condition, Trent began to withdraw from friends and family. He became isolated and depressed. "I hated looking at my leg. I was embarrassed about it. I would even hide it from myself. I hated that everyone was doing things for me. I felt helpless," Trent shared.

Although they had faced so many setbacks and disappointments, Leonie wasn't ready to give up on a better future for her son. Eventually Leonie contacted Limbs 4 Life to talk about Trent's options and voiced her concerns for her son. Trent was still young, but he was spiralling downward and not getting any better. Leonie



agreed to a visit from a Peer Support Volunteer so that Trent could consider other options.

Limbs 4 Life matched Trent up with someone of a similar age that Trent could speak to about amputation; a volunteer who had also made the decision to amputate his leg after years of trying and waiting for it to heal. Trent was matched with Mike. Mike had contracted meningococcal some 16 years prior and was a bilateral lower limb amputee.

"When I first met Trent, I could see someone with an amazing spirit and thirst for life. Trent was someone that was in a bad way. He didn't know how to find his way out of his current situation and/or what his options were," Mike observed.

Meeting Mike changed Trent's life. Trent had never met another amputee and meeting Mike gave Trent an enormous boost in motivation. "When I first met with Mike, I was stunned to see how active he was. He was confident walking on his prostheses. I learnt that Mike worked, played golf, had positive relationships with friends and basically had a love of life. At the time I thought to myself, wow this guy is walking better than me and he has both legs missing," Trent gleaned.

"Meeting with Mike was extremely valuable to me. He shared his story about the way his first amputation came about and how he made the decision to amputate his second leg to improve his quality of life," shared Trent.



Research investigating our Amputee Peer Support Program

What is the Amputee Peer Support Program?

As most readers of the Amplified Magazine will know, the Amputee Peer Support Program is a national program and it provides a link between people who have recently had an amputation (or just about to have an amputation) and the peer support team. The peer support team are a group of volunteers who have had an amputation in the past and have been specially trained to support new amputees.

Why do this research?

While there has been a lot of positive feedback about the Amputee Peer Support Program over the years, Limbs 4 Life would like to understand the impact that program participation has on the people who have recently had an amputation (or just about to have an amputation). The project will consider the views of people

who participate in the program, people who volunteer for the program, as well as health professionals who refer their patients into the program. As such, the aim of this research is to determine the value of the Amputee Peer Support Program on program participants from the perspective of peer support program participants, peer support volunteers and referring health professionals.

What does participation in the research involve?

From February until August 2019 new program participants, as well as the current peer support volunteers and referring health professionals, will be invited to complete a 15-20 minute survey. For the new program participants there are two surveys, one prior to participating in the program and one six weeks after participating in the program. For the Victorian and South Australian new program participants and current peer support volunteers, there will also be the option of participating in a 60 minute focus group for a deeper discussion on their experiences and views. The focus groups will be held in early 2019 in a hospital in South Australia and at the Limbs 4 Life offices in Mount Waverley, Victoria.

While there are no immediate benefits for those who participate in the research, there

are potential benefits for future program participants as the Amputee Peer Support Program will grow and develop based on the feedback provided. The research will also help Limbs 4 Life understand how and why the program helps people who have recently had an amputation (or just about to have an amputation). This research evidence is also really important in ensuring future financial and in-kind support for the program.

What can you do to help?

We want to hear from you! If you are a new program participant, a current peer support volunteer or a referring health professional, please get involved when you receive the survey. Be assured that only combined results will be presented in the research reports and that there will be nothing that can identify you as an individual.

How will you hear about the results of this research?

At the end of 2019, when the research project is completed, the research team will give a summary of the findings to all members of Limbs 4 Life through the Amplified Magazine. In addition to this, the research team will publish the results in an academic journal and present the results at a national conference.



Who is doing the research?

The research team includes (from left to right) Dr Narelle Warren from Monash University, Dr Tash Brusco from Alpha Crucis Group and Monash University, and Ms Sarah Foster from Alpha Crucis Group. The Limbs 4 Life advisor to the project is Ms Melissa Noonan, CEO of Limbs 4 Life.

AMP-ED Up!

EDUCATE • EMPOWER • ENCOURAGE

NATIONAL AMPUTEE CONFERENCE 26 - 27 April 2019 Canberra

Join us in Canberra for AMP-ED Up! National Amputee Conference

**Limbs 4 Life is excited to host AMP-ED Up!
National Amputee Conference Canberra 26 -
27 April, 2019.**

The AMP-ED Up! Conference will educate, encourage and empower you, and will provide amputee delegates with the opportunity to network with each other and gain valuable information to support your long-term goals.

This two-day action-packed Conference will bring together amputees, prosthetic manufacturing companies, assistive technology suppliers and a variety of speakers from a range of sectors - all under the one roof.

Delegates will have the opportunity to see the latest in prosthetic technology, hear from a variety of speakers, interact face-to-face with prosthetic providers, try out recreational activities, listen to disability advocates, plus much more!

We want you to leave with a greater education about your prosthetic options, feel empowered to make choices and decisions about your life and encourage members of our community to live independent and fulfilled lives.



Funding Assistance Announced

Limbs 4 Life has received funding from the Department of Social Service for financial support as part of the 'National Disability Conference Initiative' to support individuals on low incomes and/or those from rural and regional locations to attend the AMP-ED Up! Conference.

Limbs 4 Life can support:

- Registration costs for 30 individuals (amputee or parent of a child with a limb difference) currently receiving the Disability Support Pension, Age Pension and/or Healthcare Card or living in a rural or regional community;
- \$200 toward travel or accommodation costs for 30 individuals to attend.

Don't miss out on this wonderful opportunity.

***Download an Application Form today.**

***Applications for Funding Assistance close
5pm Friday 25 January 2019.**

South Australian Limb Loss Capacity Building Project



Limbs 4 Life has recently received funding to roll out a Limb Loss Capacity Building Project as part of the National Disability Insurance Scheme's (NDIS) Information, Linkages and Capacity Building grant, in South Australia.

This funding will enable Limbs 4 Life to engage with more amputees and people living with limb loss from all over South Australia including people in rural, regional and remote communities. The project will connect people living with limb loss to their local communities, while providing support-based linkages.

As part of this project Limbs 4 Life will appoint a South Australian Limb Loss Advisory Group. The Group will oversee the roll-out of the project and provide feedback in relation to project governance, deliverables and information based tools and resources. Members of the Group will be made up of amputees residing throughout metropolitan, rural and regional South Australia. In addition, members of this Group will be the driving force behind the project and will help to create a tailored Information Toolkit. The Toolkit will consist of fact sheets, webinars and NDIS educational material. The Group will use their lived experience to lead the design of the Toolkit that will help to support South Australians through their limb loss journey. The Group will also work to help establish Local Area Support Groups in the following regions:

- Central and Hills
- North
- Outback
- South
- West
- Barossa/Yorke/Mid North
- South East



South Australian Program Manager, Kylie Franson, grew up in regional South Australia and knows first-hand how important it is to have access to support and information for people living in regional and remote areas. "So many people travel to Adelaide for their amputation surgery and rehabilitation and then return home to the country areas," Kylie shared.



"When people are discharged from rehabilitation and return home, there is often no support networks and nobody local who understands their circumstance to talk to. The goal of this project to assist with the development of locally-based support networks. Ideally we want to see groups established and volunteers trained all over South Australia so that nobody has to go through the process of limb loss alone and has access to a support group network to meet their needs!" stated Kylie.

Kylie will be conducting information sessions throughout South Australia over the next 18 months and will be working with local healthcare professionals and community organisations to engage people with limb loss and assist them to establish support groups in their respective local areas. Kylie will also be seeking people with limb loss who are interested in becoming Peer Support Volunteers with Limbs 4 Life. This will ensure that trained volunteers are available to offer support and inform anyone in South Australia, regardless of their location.

Finally, the project will also be formally evaluated. This evaluation will enable Limbs 4 Life to ensure that the project objectives outlined in our project plan are met and where necessary adopt changes to best meet the needs of everyone involved. Part of this evaluation research will involve people being active members of 'focus groups' while the other will measure the impact of Peer Support.

If you would like more information about this exciting project, or are interested in becoming a Peer Support Volunteer, please contact Limbs 4 Life.

"One of the important aspects about this project is that you don't need to be an NDIS participant to be involved. The project is open to all people of all ages," shared Kylie.

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Listen to us while you are on the go! 'Missing Bits' Podcasts

During National Amputee Awareness Week, Limbs 4 Life launched our new Podcast Channel 'Missing Bits'. Missing Bits features stories about people living with limb loss from around Australia.

You can listen to podcasts online, or on your smartphone or tablet using an app of your choice. Listen, download, subscribe and share the latest episodes with your friends.

Episodes 1-10 in the first season are now available. Podcast presenter Gary, a fellow amputee who was born with limb difference, interviews a variety of guests and discusses a wide range of topics relating to living life as an amputee.

'Missing Bits' gives the listener a look into the lives of our Peer Support Volunteers, provides insight into adapting to amputation, the daily challenges some people face and thought-provoking experiences.

The podcasts are free, so why not visit our website and download an episode today.

The second series of Episodes will be available in January.

If you would like to be involved and share your story, please contact us via email today at media@limbs4life.org.au

The Amputee Diary

Learning that you are facing an amputation can be a frightening prospect. Coming to terms with the idea of surgery and limb loss is not always easy and can lead to many questions. Being in hospital can be a stressful time for both you and your family.

This diary has been developed to help you to record some of the questions you may have, the names of your healthcare providers, and the outcomes and goals that you want to achieve along the pathway to your recovery.

Hospitals are very busy places. Healthcare staff come into and out of your room on a regular basis. Sometimes it can be difficult to remember the staff who are looking after you and the questions you would like to ask. For those reasons Limbs 4 Life has developed the Amputee Diary. You can use the Diary to:

- Write down the names of individual healthcare staff involved in your care;
- Write down questions you might be thinking of when staff are not available; and,
- Write down your goals or the things you would like to do.



The Amputee Diary is a free resource. Copies can be ordered from our office or you can download your copy from our website today!

Melbourne to be the Pilot site for testing of 'Smart' Passive Prosthetic Hand

A radically different passive adjustable hand has been designed and patented by Dr Gerwin Smit, Biomedical Engineer at Delft University of Technology, Netherlands. It is super lightweight (less than 300g), has a smart 'auto grasp' mechanism that can hold a broad range of objects, and does not require batteries or a shoulder harness. The hand has a skeleton of laser-cut steel components and is encased in a 3D-printed shell. It can also fit inside a silicone glove so that it looks like a real hand.

Associate Professor Lisa O'Brien, an Occupational Therapy researcher at Monash University who specialises in hands, met with Dr Smit as part of a Churchill Fellowship to explore the best designs for 3D printed hands. She is now working with Dr Smit's team to pilot test the new hand in Melbourne in early 2019. Also included in the project are prosthetists from Caulfield Hospital so that the best possible socket fit is achieved and expert adjustments are made where necessary.



Call for volunteers

They are looking for 10 adult volunteers in Melbourne to be fitted with the hand, test-drive it for 2 weeks at home, and provide feedback about what works well and what could be improved. If you (or someone you know) has previously used a trans-radial prosthesis (i.e. for below-elbow limb difference) and you're interested in hearing more, please feel free to contact Lisa on **03 9904 4100** or lisa.obrien@monash.edu



Geoff's Big Walk for Limbs 4 Life

Meet Geoff, a Limbs 4 Life Peer Support Volunteer, and walking enthusiast.

Next year Geoff will undertake the journey of a lifetime, walking from Canberra to Melbourne to raise money and awareness of amputation and Limbs 4 Life. Geoff wants you to get on board and support his 'Big Walk.' We are thrilled that Geoff has chosen to share his story about living with limb loss and overcoming adversity.

In April 1985 at the age of 23, I was involved in a motorbike accident that left me with horrific leg injuries. I was told that I'd never be able to walk unaided again.

After 15 months of rehabilitation, determination and hard work, not only was I walking unaided but I took part in my first fun run with a specially designed shoe for that leg.

I continued life with my fragile injured leg for another 24 years until 2010 when I fell and broke my already damaged leg. After six months of having my leg in a cast it was evident that it was not healing so I made the difficult decision to have my right leg amputated below the knee.

It was a life changing decision and definitely not an easy one, but I couldn't live with the pain any longer. I was fitted for a prosthetic leg only a couple weeks after my surgery and after only a month of learning to walk with my prosthetic I started some gentle running on a treadmill. Six months after the amputation I entered my first 5km fun run and since then I have walked the Kokoda Trail twice and climbed Mount Kilimanjaro.

Now I have my sights set on my next challenge which is to walk from Canberra to Melbourne starting in April 2019 to raise money for Limbs 4 Life and to raise awareness of amputation and limb difference. I have been a Peer Support Volunteer with Limbs 4 Life for the past two years and it means a lot to me to help raise funds for Limbs 4 Life so that they can continue to do the fantastic work that they do supporting amputees and people with limb difference from all over Australia. Please donate to this very worthy cause or even join me for part of my walk. I hope to see you on my travels!

Geoff will be departing Canberra on Sunday April 28 following the AMP-ED Up! National Amputee Conference. Geoff is hoping that

people in local towns and communities will greet him along the way and possibly walk alongside him. Geoff's Big Walk for Limbs 4 Life will cover the following towns:

Canberra to Yass - Sunday, 28 April
Yass to Jugiong - Monday, 29 April
Jugiong to Gundagai - Tuesday, 30 April
Gundagai to Tarcutta - Wednesday, 1 May
Tarcutta to Kyeamba - Thursday, 2 May
Kyeamba to Holbrook - Friday, 23 May
Holbrook to Mullengandra - Saturday, 4 May
Mullengandra to Wodonga - Sunday, 5 May
Wodonga to Chiltern - Monday, 6 May
Chiltern to Wangaratta - Tuesday, 7 May
Wangaratta to Benalla - Wednesday, 8 May
Benalla to Euroa - Thursday, 9 May
Euroa to Seymour - Friday, 10 May
Seymour to Wandong - Saturday, 11 May
Wandong to Melbourne - Sunday, 12 May

**Dates may vary due to weather and other conditions*

If you would like to follow Geoff's Big Walk you can track his progress at give.everydayhero.com/au/geoff-s-big-walk or if you would like to meet up with Geoff along the way, please log your support at info@limbs4life.org.au.



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Merry Christmas

On behalf of everyone at
Limbs 4 Life, we would like to
take this opportunity to thank
our dedicated volunteers
and those of you who
have continued to support us
throughout the year.

We would like to wish you
and your family a very
Merry Christmas and a happy,
safe and healthy New Year.

Office Closure

The Limbs 4 Life office will be closed
from Friday 21 December 2018 –
Thursday 3 January 2019.

During our Christmas closure you can
continue to request Peer Support visits
via our online portal.

Please visit the Limbs 4 Life website and
use the tab 'Request Peer Support' on
the landing page of our website.

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Getting back in the driver's seat

For many amputees regaining their driving licence is an essential part of regaining their independence. The ability to drive can give people a sense of freedom.

In this article, Chad Kevan from the 'Return to Work' team at MP Occupation Therapy discusses what is involved for amputees who want to drive again.

The first step is for people impacted by limb loss is to let their state licencing authority know about their amputation; if their healthcare providers or specialist have not already done so. The rules state that drivers must notify the state authority if there is loss or significant impairment of one or both legs/arms or the loss of three or more fingers on one hand.



Prior to having your licence re-instated you may need to undergo a medical assessment to ensure that you are safe to drive. If the doctor's medical assessment is satisfactory, he/she will recommend an Occupational Therapy Driving Assessment. A list of national Driver Assessors can be found on the Occupational Therapy Australia website at: www.otaus.com.au/find-an-occupational-therapist

Your Occupational Therapist will conduct two driving assessments.

- The first assessment first is a '**Pre On Road Assessment**' and will comprise of a discussion with your doctor. The assessment will take into account any medical issues that could put your safety and the safety of other drivers at risk. The assessment also checks the person's physical, cognitive and visual abilities and previous driving experience. You will also have your knowledge of road law reviewed.

- The second assessment will determine what modifications are required to your vehicle or which aids will be needed for you to drive safely. This is the '**On Road Assessment**'. Both your Occupational Therapist and a Driving Instructor (who is experienced in driver rehabilitation); will undertake the assessment of you. The vehicle that you will be tested in will be a dual controlled vehicle. If vehicle modifications are required they will be fitted to the vehicle prior to your assessment. As part of the assessment you will be tested on your driving ability on a range of different road environments.

Most '**On Road Assessments**' recommend further driving lessons (referred to as driver rehabilitation) so the driver can increase their level of competency driving, with or without vehicle modifications. Driver rehabilitation programs usually require an additional driver assessment. Your Occupational Therapist needs to be satisfied that that you can safely operate the vehicle.

Examples of vehicle modifications and personal restrictions relevant to musculoskeletal disorders*

Example of disability/situation	Examples of licence conditions (Vehicle modification or personal restrictions)
Left leg disability, left arm disability	Automatic transmission
Short stature	Built-up seat and pedals
Loss of leg function	Hand-operated controls
Loss of right leg function	Left foot accelerator
Reduced lower limb strength	Power brakes only
Short leg/s	Extended pedals
Loss of limb function/limb deficient	Prosthesis required

*These are not mandatory requirements and may be unsuitable in some circumstances
www.onlinepublications.austroads.com.au/items/AP-G56-17

Your Occupational Therapist has the authority to approve an:

- Unconditional licence: This outcome is unlikely for a person with an amputation.
- Conditional licence: The Occupational Therapist and/or the doctor may suggest reasonable conditions are placed on the person's licence for road safety reasons. *See the table above for common restrictions relating to drivers with a disability.*
- No Return to Driving: This outcome would only happen if significant barriers to drive were not able to be overcome through driver rehabilitation and/or vehicle modifications. In most cases client determination, flexibility and high-quality Occupational Therapy support along with the assistance from a Driver Instructor will result in a person's return to driving.

With the support from a specialised Occupational Therapy and Driving Instructor most amputees are able to return to driving. It can sometimes be a lengthy process to meet the 'standards' set by the licencing authority, however with patience and persistence the rewards can pay off. If you haven't already returned to driving, why not think about giving it a try. A driver trained Occupational Therapist would welcome the opportunity to help you to regain your licence and drive again.

Each state and territory have their own licencing processes in place. These can include medical certification documents for specialists or General Practitioners to complete and lodge with the driver licencing authority. Your Occupational Therapist will be able to direct you to the applicable body in your state or territory.

Chad Kevan

Senior Occupational Therapist, Driver Assessor, Team Leader, B.App.Sc (OT)

MPOT/Access Fitness South Australia

To find an Occupational Therapist with specialised skills in driver training in your state or territory visit the Occupational Therapy Australia website at otaus.com.au and go to: Find a private practice OT.



Our one in a million baby

The Gooch's were so thrilled when they were expecting their first baby - they were ready to step in and embrace parenthood until their world came crashing down, discovering that something wasn't quite right with their unborn baby.

It all started when Brooke and Shane visited their doctor for the 20 week pregnancy check-up/scan. At the appointment, the ultrasound revealed that their baby's right leg was deformed due to a missing bone in her lower leg. After a number of specialist appointments and tests it was understood that their baby had a rare congenital lower limb deficiency called Tibial Hemimelia. The condition is characterised by the absence of the tibia bone, and it affects just one in a million unborn babies.

"At first we were in disbelief and shock and were quite unsure of the severity of her condition as



she was not yet born. We spent a lot of time researching online and looked at how we could help our baby,” Brooke said.

Desperate for answers, they met with Professor Leo Donnan from the Royal Children Hospital, who gave the parents to be advice on their child’s congenital disorder. He said that reconstructive options were not recommended and the best treatment was amputation and a prosthetic fitting to ensure the best possible quality of life for their daughter.

Five years on, Milla is like many other pre-schoolers. She loves drawing, writing, playing dress-ups and playing with her little sister Maeve and best friend Holly.

“Milla has adapted incredibly well to her prosthesis. Milla is an outgoing, smart and healthy girl. She has never complained about having a limb deficiency or having to wear a prosthesis. She is very confident and doesn’t think of herself as a person who is limited in things she can do,” Brooke shared.

Milla is currently attending Kindergarten and is looking forward to starting primary school next year. Although school for Milla is still a few months away, preparations are in place to ensure her transition into school is as smooth as it can be.

“We have assessed the school’s environment and ensured that Milla is comfortable with the facilities, and I have made Milla a scrapbook of photos that she takes to Kinder and will take to school to help her introduce “leggy” (the prosthesis) to all the new friends she meets. It’s a chance to show people that Milla can do the same things as other children and that her ‘leggy’ is a special part of her,” Brooke explained.

Brooke’s advice to parents, who are faced with a similar situation, is to research about the condition, speak to the experts, source online support through social media networks, ask lots of questions; and more importantly, ask for help when needed.

“I always think how fortunate we are that Milla is healthy in every way. Her condition wasn’t life or death, and she is living life to the fullest. She continues to surprise us every day and is encouraged to try everything. The world of prosthetic limbs is constantly evolving; it’s getting bigger and better with so much available to provide amputees with a great quality of life,” Brooke shared.





Bullying

What is bullying?

Bullying occurs when a person or a group repeatedly and intentionally use or abuse their power to intimidate, hurt, oppress or damage someone else.

Bullying can be inflicted upon children, young people and adults at any time of their life. Some experts suggest that bullying can happen to as many as one in five children or young people and are more likely to occur during the schooling years.

Bullying can have serious consequences for children subjected to it. Victims of bullying are more likely to suffer from a range of issues which may include anxiety, low self-esteem and depression. Some parents also report feeling angry, helpless and frustrated if they discover that their child has been subjected to bullying.

This article explores issues related to bullying, including: types of bullying; signs of bullying; ways that parents can assist a bullied child; and, links to other resources and supports.

Types of bullying

There are different types of bullying – physical, verbal, social, psychological and cyber – used for the purpose of intentionally hurting or intimidating another person.

Physical bullying can include hitting, kicking, tripping or poking another person or intentionally damaging someone else's belongings.

Verbal bullying can include the use of negative words such as name calling, insults or slurs.

Social bullying can include the spreading of lies, rumours, social exclusion or conducting undesirable pranks.

Psychological bullying can include the intentional use of words or actions (e.g. stalking, intimidation and manipulation) that can cause psychological harm.

Cyber bullying relies on the use of technology to verbally, socially or psychologically bully another person. It is a newer type of bullying that can occur through use of networking sites, mobile phones, cameras, emails or internet chat-rooms.

Cyber bullying can include sending hurtful text messages, sending nasty or hurtful messages on networking sites, sending images of the victim to others, spreading rumours electronically, and setting up a fake profile of the victim.

Signs of bullying

Children and young people may sometimes find it hard to tell parents and adults if they are being bullied and some children may not exhibit any warning signs.

Sometimes children feel ashamed, embarrassed or too threatened by the bully to tell anyone that

bullying is occurring. However, some signs that may point to a bullying problem include:

- Unexplainable physical injuries (such as bruises, scratches or cuts)
- Lost or damaged personal belongings (such as clothing, books or electronic devices).
- Reluctance to go to school > Lower academic performance or loss of interest in school work.
- Changes in eating habits (such as loss of appetite or over-eating).
- Complaints of physical ailments (such as head-aches or stomach-aches) particularly on school days.
- Major changes in relationships and friendships with others or avoidance of social situations.
- Changes in sleeping patterns (such as difficulty sleeping or bed-wetting).
- Refusal to discuss what is happening at school or in social groups.
- Self-destructive behaviours (such as getting into trouble, self-harming or talking about suicide).
- Decreased self-esteem and increased levels of anxiety.
- Avoidance of the internet or telephone.
- Displays of unusual treatment towards other children (controlling / dominant / lack of empathy).



Parent support

If you become aware that your child is being bullied, you should take your child's bullying seriously. Let your child know you are there to help, assure him or her that the bullying is not their fault and that you will take action to prevent any further bullying. Key ways that you can support your child include

- Stay calm, positive and listen to your child. Listen to your child's experience and focus on identifying a solution with your child. Ensure that your child understands that he or she is not responsible for the bullying. Remain calm, positive and confident as this will reflect on your child and reinforce that the situation can be addressed appropriately.
- Discuss strategies with your child. Discuss short term strategies with your child to see if he or she can resolve the bullying. Encourage your child to: walk away; appear unimpressed; say "no" firmly; or, speak to another adult (such as a teacher). If the bullying continues speak to staff at your child's kindergarten, pre-school, school or social/sporting organisation.
- Do not advise your child to fight with the bully. It is important that you do not advise your child to engage in fighting with the bully. This can be a dangerous and inappropriate approach. This can exacerbate the situation and your child may be reported for engaging in a physical fight.
- Discuss the bullying with your child's school or social/sport organisation. Your child's teacher or the leader at a social or sporting organisation may not be aware that any bullying is occurring, particularly if it is happening outside of the school or program times. Let your child know that you are planning on discussing the bullying with staff and remind him or her that the school / organisation is there to support them. All schools are required to have a bullying policy and when you meet with the school you should ask what their

policies are and how they will handle your individual situation. This also applies to social or sporting organisations that your child is involved in, should bullying occur in those environments.

- Instil confidence and pride in your child. A child that has been bullied can be at greater risk of being bullied again in the future (even if the bullying has been addressed). A child that has been bullied may also lose personal confidence and pride. To assist in restoring it, encourage your child to spend time with other children that are a positive influence or join sports clubs or groups that build personal strength and peer friendships. Foster a positive home environment and allows your child to talk about their limb difference, particularly if reference to their limb difference formed part of the bullying. Remind your child that we are all different and reinforce that he or she has many abilities and skills.
- Seek professional support. If you find that the bullying has deeply affected you or your child you may want to consider seeking professional support. Consider speaking with your GP, a Social Worker, or a Psychologist.

Bullying resources

There is a wide range of websites and organisations exist to specifically address bullying, including:

Office of the e-safety commissioner

www.esafety.gov.au

Bullying. No way!

www.bullyingnoway.gov.au

The Alannah and Madeline Foundation

www.amf.org.au

Beyond Blue

www.beyondblue.org.au

Kids Helpline

kidshelpline.com.au or 1800 55 1800



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A black and white photograph of a woman with a prosthetic leg, smiling as she uses a long-handled net to catch a frog in a pond. The background shows trees and a fence. The overall tone is positive and active.

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