After I became disabled in 1959, I moved from my house into a nursing home because I didn’t realize I could live independently. I knew I didn’t want to spend the rest of my life in a nursing home—I wanted to contribute to the community. Then I began to watch other disabled people going through some of the same problems I was going through, and I wanted to resolve the situation.

Some disabled individuals in Berkeley, CA, and in Massachusetts formed organizations which dealt with the “independent living” concept. I visited the group in California to see what they were doing and came back to St. Louis to look into the possibility of forming a group of our own. Although things move a little slower in Missouri than in California, I began to see disabled persons dealing with their own problems. I thought if the concept worked in Missouri, it could work anywhere in this country. Independent living evolves when disabled persons realize they need physical or personal assistance, and they pool their professional backgrounds and personal experiences to form a base for action. I lived in a nursing home only because I needed physical and financial support. I figured the financial support was there if I could only find the physical assistance. I knew my own needs and physical limitations. One of the main focuses of independent living is to develop a good attendant program. It seems to be one of our biggest problems. When a disabled individual needs attendant services and comes into an independent living center for that support, he or she can learn from other people’s experiences. They share problems with others and get peer support.

Role modeling also plays an important part of the independent living program. That is when an individual can come to the center and observe other disabled persons going on with their lives in a natural and normal way. They talk about how they’re going to mow their lawns, their families, and who will do the shopping. The visitors develop confidence because they figure if others can live independently, they can, too.

The independent living concept is very important to the entire rehabilitation process because disabled individuals are becoming a part of that rehabilitation process at a professional level. We need to realize that disabled individuals play a large advocacy role in making sure that favorable legislation is passed concerning their needs. We’ve seen a lot of progress in the area of the Rehabilitation Act and rehabilitation programs, but the only way we can continue to grow is to expand the involvement of disabled persons in the movement. Health care professionals and the handicapped need to work hand-in-hand to accomplish some of our goals.

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