South Dakota
Possibilities
2021

A publication by the Center for Disabilities highlighting the state's abundant opportunities for people with disabilities.

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Welcome
to Our Sixth Edition of *South Dakota Possibilities!*

This publication was created as a way to share the successes of individuals with disabilities and their families. It is our goal to continue to raise awareness and highlight the skills and unique talents of people with disabilities.

In this edition, you will find stories of independence, diligence, optimism and commitment to pursuing one's life ambitions. No matter how big or small, everyone has something to contribute. We are eager to share with you the truly great faces of South Dakota. The possibilities are endless, and the potential is great!

We are always looking for more people to feature from around the state. If you know of someone who might be interested in being in our next issue, please send an email to cd@usd.edu with the name and contact information.

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Catalyst for Change evening celebration.

Run, Walk and Roll

Leah Bernard accepting Catalyst for Change Award on screen.

For the past thirty years, the Center has been a leader in the state and nation in providing the highest quality interdisciplinary, culturally competent, and family-centered care as a Leadership Education in Neurodevelopmental Disorders (LEND) site. South Dakota LEND has successfully prepared hundreds of healthcare and related professionals to assume leadership roles while also providing ongoing continuing education and technical assistance for thousands of practicing professionals.

The Center for Disabilities' fiftieth anniversary was formally celebrated with our inaugural Run, Walk, & Roll and Catalyst for Change events. Open to people of all ages and abilities, the first-ever Run, Walk, & Roll brought people together in the spirit of health, wellness and camaraderie. The Catalyst for Change evening honored the Center's history, milestones, challenges and visionaries of the past five decades, as well as emerging leaders of tomorrow.

Whether through diagnostic clinics, engaging with state and national policy makers, or training the next generation of professionals, the Center for Disabilities' work continues to focus on the strengths and contributions of people with disabilities. With the knowledge that disability is a natural part of human existence, we believe that everyone can achieve independence, self-determination, productivity and community inclusion.

This past year has presented unprecedented challenges but has also created great opportunities. We are grateful for our strong network of partners across healthcare, education, mental health, human services, state and federal agencies, and most importantly people with disabilities and their families. We are stronger together and positioned to continue our work as a catalyst for change to improve lives and systems of care into the future.

Take care of yourself, and one another.

Sincerely,
Eric G. Kurtz, Ph.D.
Executive Director, Center for Disabilities

Deaf-blind client and family with physical therapist.

Center for Disabilities
The History

In the Center for Disabilities' early days, Dr. Charlie Anderson found himself in a vehicle one day, making a quick trip to Sioux City, Iowa. The goal: to purchase carpet for the Center's second location. It needed to be done, and he didn't hesitate to tackle the chore.

But as director of the recently created center, then known as the Development Disabilities Evaluation Center, Anderson actually spent almost every minute of his time just familiarizing educators, health care personnel, parents and grant agencies as to its purpose.

Its mission was just what its name indicated: to provide multidisciplinary evaluation services for children with developmental disabilities. As one of three staff members hired in August 1971 – the other two were a school psychologist and a secretary – Anderson's immediate concern was getting the word out while preparing to evaluate one child a week and reassuring parents that help for their child was available.

"We had to work out scheduling and utilize the participating departments for evaluation space and the dental hygiene lab for staff conferencing," Anderson recalls. "We worked with professors at the University of South Dakota and their graduate and undergraduate students who were there to observe the multidisciplinary evaluation process. Then we had to reach out to schools and families."

Today, the organization offers evaluation, training, technical assistance, research and educational resources to help people with disabilities and their families. It does the same for health care professionals and educators, continuously looking for answers to the questions that come to them daily.

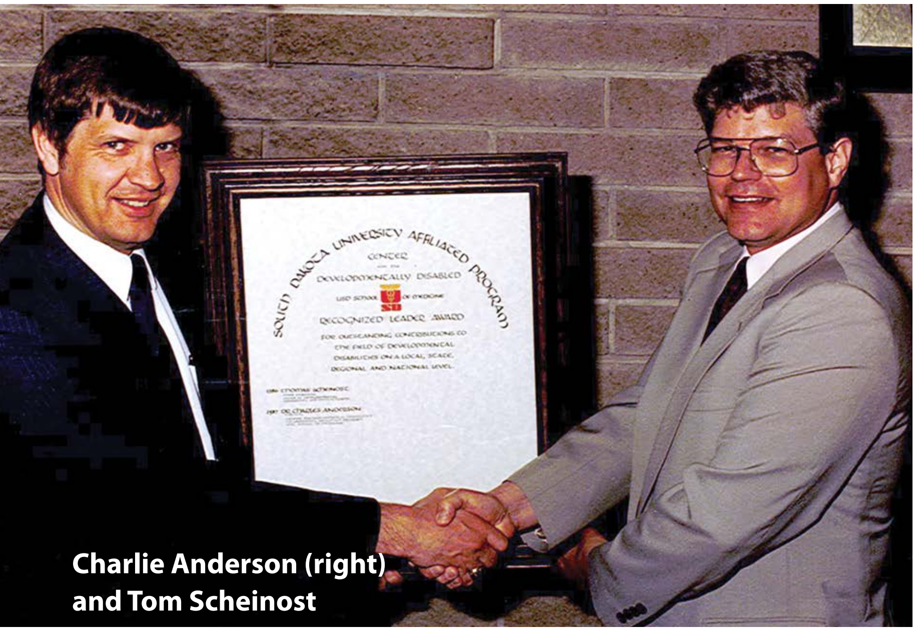
Over the past 50 years, its housing has gone from former dormitory rooms on the University of South Dakota campus (where bunk beds and student desks remained in place and funding was obtained to install an elevator) to a facility designed for its unique purpose. The Center for Disabilities' services cover the state of South Dakota, including the Native American community, reaching out to the people it serves.

The idea for such a facility first was broached in the 1960s through the South Dakota Mental Retardation Planning Project, with USD officials including President I.D. Weeks and Professor Henry Cobb offering strong support. Indeed, the University of South Dakota itself deserves much credit for playing a major role in not only creating the Center but in building the South Dakota Developmental Disabilities service network and support system, says Tom Scheinost.

"They listened to the parents' requests during the planning process and responded with the initial spark that became the Center," he says.

In 1971 the South Dakota Board of Regents authorized the University of South Dakota to develop the Center with funding from external sources. That year it received monies from the state Division of Developmental Disabilities to begin the programming. In 1973, the receipt of a grant from what today is the U.S. Department of Health and Human Services established the Center as a University Affiliated Program (UAP). That allowed the Center to expand its services from diagnostic and related clinical services to the multidisciplinary training, technical assistance, outreach and sharing of information that are its bedrock now.

Scheinost, now retired and living in Fort Pierre, South Dakota, began his career with a bachelor's degree in social work as the assistant director for a newly developed national and state program now known as the Division of Developmental Disabilities." He saw the challenges facing parents and their children with disabilities when his career began in 1964. That year, four day-only community programs designed to serve fewer than 100 individuals were in the early stages. The state provided no funding for the planning program. Instead, it operated with $30,000 in federal funds, matched by using the donated salary of the director of the Association of Retarded Children.



Charlie Anderson (right) and Tom Scheinost

"There was no special education, there was nobody to meet the needs of children with disabilities," Scheinost says. "There were only four programs that were volunteer programs developed by the Association for Retarded Children in those days. I was able to work with a lot of dedicated parents and professionals to build from nothing what we have today."

Sioux Falls had a program called the Hollister School, a precursor to community-based sites for children with disabilities, but rural areas offered little. Parents were told to place their children in the state facility at Redfield, which for years offered little to no educational services. People were sent there inappropriately, says Robert J. Kean, whose legal career has been spent addressing the rights of people with physical and mental disabilities. He has seen historical records indicating that people with various non-developmental disability challenges were sent to the Redfield facility. The early admissions authority process was so broad even dentists could fill out the commitment certification to recommend admission.

School districts and communities could be resistant to providing services, says Kean of Fort Pierre, South Dakota. On February 1, 1977, Kean, Scheinost and two others argued against a city proposal to zone out community living programs. "That's why emerging out of the straight diagnostic aspect of the Center was really important," Kean says.

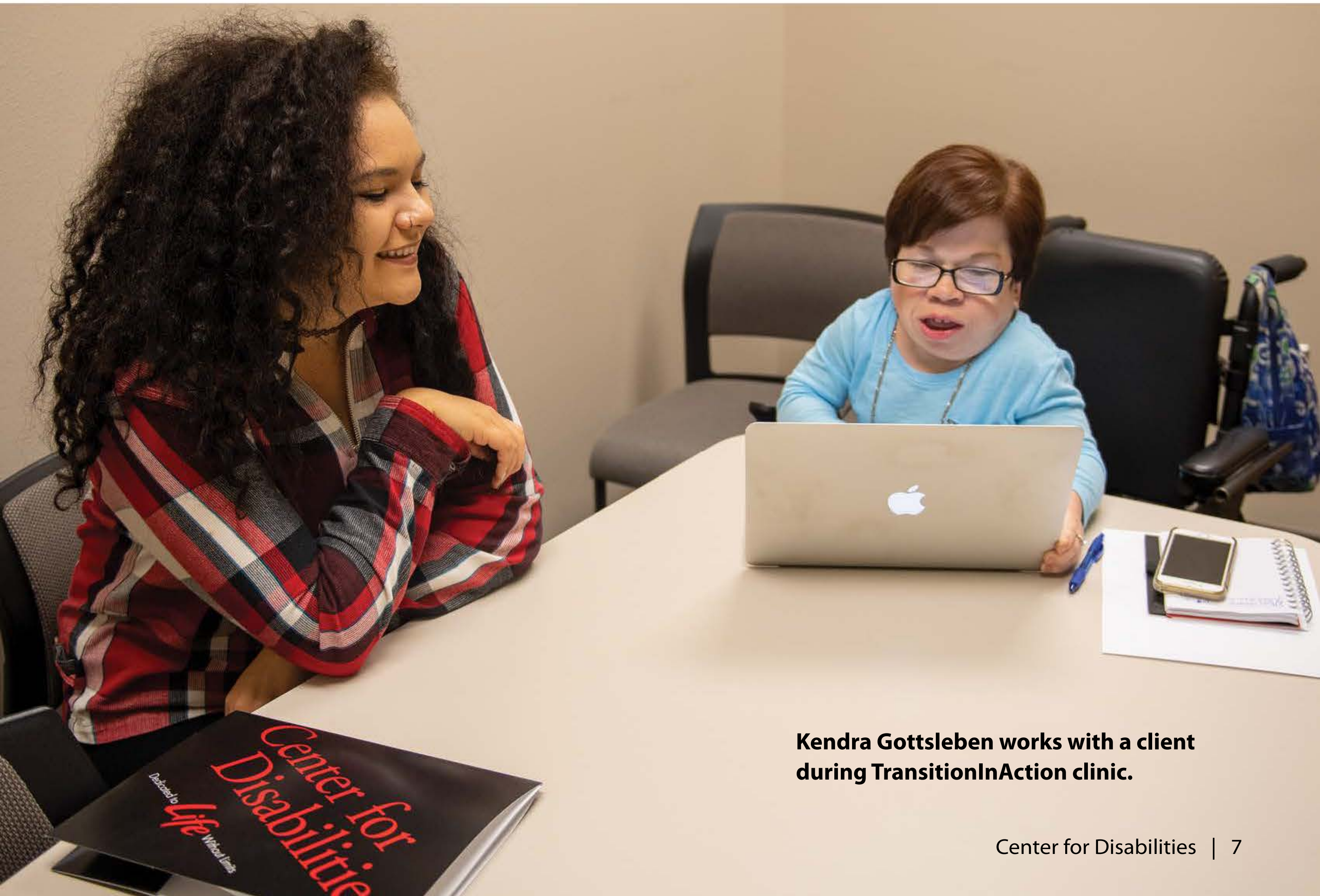
Anderson, of Sioux Falls, South Dakota, praises the early work of the University of South Dakota professors in establishing the Center, particularly the late Henry Cobb, Ph.D. Then the vice president of academic affairs at the University of South Dakota, he was nationally and internationally known for his work in the area of intellectual and developmental disabilites. Anderson credits the Center's emphasis on multidisciplinary training on Cobb's influence.

"He was a very kind man, a bright man, a great teacher and a great lecturer," Anderson says. "He believed services had to be changed nationally for individuals with intellectual and developmental disabilities."

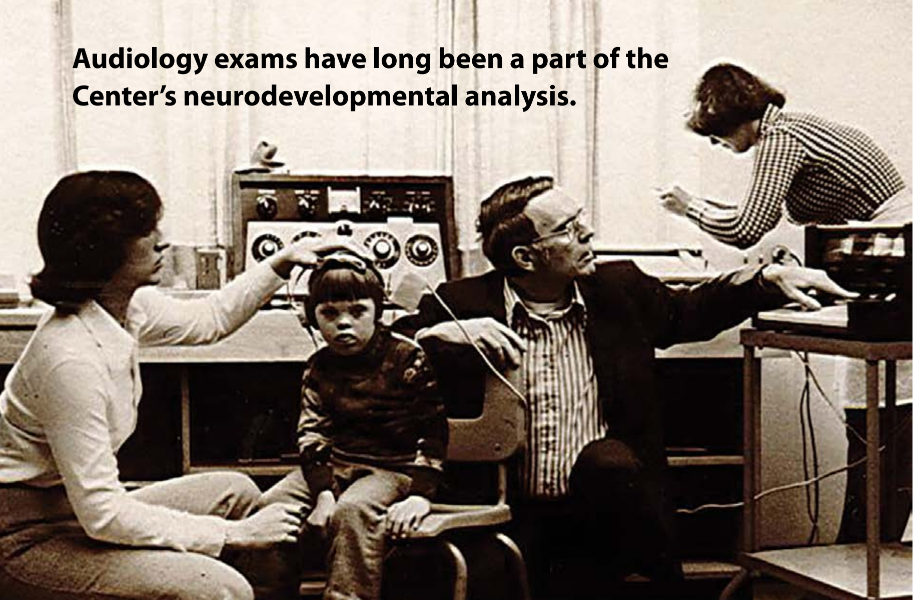
As attitudes changed nationally, the Center kept South Dakota up to speed. Early in the Center's history, outreach staff began to videotape contact sessions that took place off campus. The Center team would watch the tape, make their recommendations, then forward the tape and materials to the John F. Kennedy University Affiliated Facility (UAF) in Denver, Colorado. The staff there would evaluate the South Dakota Center's work.

"I wanted to make sure what we were doing was supported by the UAF centers," says Anderson, who served as director from 1971 to 1976 and again from 1982 to 1987. "And we were pushing to offer outreach and see if we couldn't help the students even before they got here."

"As the Center grew, it played a substantial role in training staff of newly developed community programs by going across the state to enable staff to better support individuals," says Scheinost, whose career included serving as director of the state's developmental disabilities program, director of the South Dakota Council on Developmental Disabilities and executive director of the South Dakota Association of Community Based Services. "I remember working with the Center in reviewing the resident population in



Kendra Gottsleben works with a client during TransitionInAction clinic.



Audiology exams have long been a part of the Center's neurodevelopmental analysis.

Redfield, trying to determine who was capable of moving out of Redfield into the newly developing community programs."

Outreach was of particular importance in the Native American communities. Kean would travel to the one-day clinics, providing immediate assistance to family members in accessing Social Security and disability benefits. Center staff actively sought grants for the outreach services. In addition to the long-distance multidiscipline evaluation by videotape, grants were awarded for:

- Training health care workers at Rosebud to perform outreach and home visitations with Native American families.
- Title XX mobile assessment and outreach training team.
- Electron microscope for the developing genetics program.
- The Early Childhood Outreach Program.
- Hiring the first outreach case manager.

The Center's research efforts also have made an impact on South Dakotans since the early years.

"In 50 years, the Center has been very creative in doing research that has turned into direct service or as a direct response to the needs they saw," Scheinost says. "The Center has used fetal alcohol syndrome as a research activity even though it's a service activity.

"They wanted it to be practical," Kean adds. "That practicality has made a real-time difference in communities. They self-imposed that on themselves. It may have crimped their style but yet they got a lot of stuff done."

What the Center accomplished in the past and continues to do today truly is a success story, Anderson says.

"The Center for Disabilities' caring, vision and statewide teamwork will continue to assist the state of South Dakota in meeting the changing needs for individuals with disabilities and their families," he says. "I am proud to have been an early part of the Center's growth process."

Evolution

As needs evolved, so, too, did programs available through the Center for Disabilities.

"A good example is autism," says Dr. Judy Struck, who served as acting director, co-executive director and executive director from 1992 to 2013. "People with autism were being identified all over the place, and nobody knew what to do about it. In addition, a large population of individuals were suspected of having autism, but there was no place in South Dakota to go for a potential diagnosis."

After discussions and planning with partners in state government, the Center hired Dr. Tom Stanage to start and develop an autism program.

"Tom was an excellent resource as he was a South Dakota native and had trained at UNC Chapel Hill, in North Carolina, which was looked at as the premier institution on autism at that point in time," Struck says.

"Tom started with limited resources and manpower, but he built a solid foundation for a statewide program that has continued to develop today," she says. "Statewide

Physical therapy LEND trainees with client.

technical assistance was and is a mainstay of that program."

Stanage also brought together the needed expertise to develop a diagnostic clinic, followed by on-site assistance in setting up programs for those diagnosed on the autism spectrum. In addition, training and summer institutes were developed and offered at sites on both sides of the state to enable professionals working in the field easier access, Struck says.

The Center was and is committed to not just diagnosing a person, but assisting the families and the professionals working with that person on what would be the best approach to encourage their learning and development.

"To me, it's very exciting to have been around a program that started from scratch, but over the years has built into a stable and sophisticated program for continuing to meet the needs of individuals with autism and their families," Struck says. "It goes without saying that as the needs of the field of autism grow and continue to change, the Center for Disabilities works hard to evolve and meet the needs with the necessary expertise and program components."

What remained the same, says Struck, who first joined the Center in 1988, was a determination to serve South Dakotans wherever and however necessary. That meant she presided over the Center during periods of substantial growth, often wearing multiple hats to see programs from start to finish.

"I used to have to do five or six things at once," Struck says. "At one point I reported to the dean of the (University of South Dakota) Medical School because that is how the program was established through the

Laura Lems, Canton, SD.


Dr. Judy Struck

Board of Regents. When the Center received a substantial grant from the federal Maternal Child Health Bureau, it required a close association with the Department of Pediatrics."

Because of the grant, Struck for several years was housed in the department of pediatrics. From her perspective, both of those reporting lines have been good for the Center since they allowed close working relationships that offered a flow of education on both sides – Struck educating medical school administrators on the Center's role, purpose and needs. At that same time, she learned what worked well within the medical school and how they could more easily support Center programs and staff.

The Center was trying to make its services known statewide, but frequent name changes due to federal fund requirements hampered efforts. For example, if legislation at the federal level was revised, the Center would have to alter how it referred to itself.

Moving from Vermillion, South Dakota, to Sioux Falls, South Dakota, when Sanford Health provided land for the University of South Dakota medical school offered the Center much more statewide recognition. It gave credibility to the Center's clinic diagnostic process, Struck says, because it was viewed as part of the school of medicine. In addition, it became easier to connect with expertise available through the medical school's various clinical departments and collaborate as needed. In 2020, the Center moved from the department of pediatrics to become a freestanding Center within the Sanford School of Medicine to reflect the significant focus on the interdisciplinary, life course perspective of its work.

Struck, who started out as a nontraditional student majoring in elementary education and special education at Dakota State University, brought with her experience from an early education center at the University of North Dakota in Grand Forks. Struck also received her doctorate in educational administration from California Coast University, one of the earliest to take part in distance education.

Both experiences led Struck to emphasize distance programs in a way that was new to the Center.

"We focused on doing outreach a bit differently than we had before," she says. "We had an office on the Rosebud Reservation for about 20 years and hired local people to run it for us.

"We also had offices at Pine Ridge, Cheyenne River and in Pierre. People got to know us better and saw that we were not expecting them to come to Sioux Falls to us. That's one of the ways we started growth and built on that."

The accomplishments from earlier decades remain important to the Center for Disabilities today, says Dr. Eric Kurtz, the executive director since 2019.

"Those accomplishments are still relevant to what we are doing today," he says. "It's incredible to see the similarities between what we're trying to accomplish now and what was taking place years ago."

Struck's tenure coincided with a period of growth as recognition of the Center's purpose grew and it expanded its services. Kean says the Center has been blessed in the staff it has attracted over the years.

"It's the people, the core of those who got the work done, that helped it to survive," he says. "It was not an easy program to sell because it cost money. These were not necessarily the most popular programs at the federal level, and they were always subject to cuts and to the politics of the national level."

According to Struck, the Center's success comes partially from its strong emphasis on coordinating with multiple agencies such as the state Department of Health, Department of Education, Department of Human Services, Department of Social Services, the South Dakota Council on Developmental Disabilities, Disability Rights South Dakota, South Dakota Parent Connection and many others. The Center's role became more complex because its programs are expected to be regional and national in focus. However, with technological advances, these broader efforts were a bit easier to develop and continue.

One example concerns efforts in the area of fetal alcohol syndrome (FAS), a condition in a child that results from exposure to alcohol during pregnancy. Then-U.S. Sen. Tom Daschle championed work in that area, Struck says. Through his work in Congress, he was able to bring together funding for a four-state consortium on FAS that provided needed research in the area as well as other needs the states had.


Center clinics serve South Dakota's tribal communities.

In South Dakota, the Fetal Alcohol Spectrum Disorders program at the Center developed in similar ways to the autism program. Much awareness information was developed and disseminated statewide as well as technical assistance and training established and provided. In addition, a much-needed diagnostic clinic was developed. Specific parent training was provided through distance-learning opportunities during the winter months due to the busy lives of the state's farm and ranch families.

"I was given the time and resources to do what they wanted me to do," Struck says. "That was nationally but with a regional focus. The work we do is so all encompassing, it's hard for people to wrap their arms around what the Center for Disabilities is."

Eight years after she retired from the Center for Disabilities, Struck continues to run into people who used services such as the Early Intervention Program. One case involved a child who was 6 or 7 when he was tested at a diagnostic clinic in Vermillion. He suffered from seizures that could not be controlled, and a surgery that could help or hurt him was an option for the family to consider. His family chose the surgery, which was successful, and he now is a small-business owner who is active in disability groups.

Struck says, "It is so incredibly rewarding to see people I once served being active community members and reaching the dreams they set out for themselves!"

Future

In the half-century since its founding, the Center for Disabilities' core mission has remained unchanged: to improve the lives of people with disabilities (and their families) in the areas of health care, education, mental health, human services, employment, industry – essentially, anything that impacts them daily.

Achieving that takes determination, patience, knowledge, a cooperative spirit and the humility to learn from past experiences that might not have been as successful as predicted.

Most of all, perhaps, it takes flexibility. Because what do you do when you have goals mapped out, and something like, oh, say, a pandemic happens?

You adjust your services to meet the demands of the time, says Dr. Eric Kurtz, executive director of the Center for Disabilities since February 2019.

"We've partnered to help everyone in our state, no matter who they are or where they're from, have access to accurate health-related information, access to providing vaccines and related care around COVID-19 issues," he says. "We are working to ensure people get the care needed outside of COVID, whether it is health care, therapies, or educational services and that it's at the quality they need. We've done that over the past 18 months, and we'll do it well into the next 18 months."

Kurtz describes the Center for Disabilities as a unique statewide organization that offers initiatives and involvements that span diverse and comprehensive areas affecting a person with disabilities. It features state-of-the-art diagnostic clinic services unavailable elsewhere in the areas of autism spectrum disorders, neurodevelopmental disorders, fetal alcohol spectrum disorders and general developmental concerns. It provides innovative training for the next generation of professionals who will serve those areas, making sure participants have access to unique and specialized clinical training research experience and leadership development.

"We're extremely committed to providing timely and relevant accurate information and resources to people across a whole range of issues, and disseminating that to all areas of the state," Kurtz says. "We're a resource for policy-makers and the legislature on any issues that touch people with disabilities."

And it continues to evolve, offering new services as needs arrive. One example is Project SCOPE, which stands for Supporting Children of the Opioid Epidemic. Project SCOPE addresses neonatal abstinence syndrome (NAS) and neonatal opioid

L to R: Robert Kean, Tom Scheinost, Charlie Anderson and Eric Kurtz, 2021.

Center leaders on a Capitol Hill visit.

withdrawal syndrome (NOWS). Project SCOPE uses the Project ECHO™ virtual professional development model. Training is focused on the impact of childhood trauma, medication assisted treatment for addiction, developmental outcomes, family supports and service coordination. Participants include special educators, early interventionists, social workers, physicians, psychologists, nurses, administrators, foster parents and mothers.

Participants in the eight-week Project SCOPE sessions brought cases of opioid-addicted children before a remote panel of experts, receiving feedback and sharing in a community of practitioners.

It used a hub-and-spoke model, Kurtz says. Participants took part in the noon-hour sessions via Zoom, allowing them to fit the education sessions in an already busy day.

The Center's goal now is to continue to use that platform and expand it to other

LEND trainee with a client during Autism Spectrum Disorders Clinic.

topical areas of needs from the autism spectrum to behavioral services to fetal alcohol spectrum disorders. “We can reach professionals on almost any topic where they are, especially rural areas of our state advancing knowledge and skills and ultimately improving the care people receive,” Kurtz says.

Another program that went live in August will fill a need for board-certified behavior analysts. The two-year program will serve eight to ten students a year and offer 12 months of supervised clinical experience without leaving the state.

“To date, we’ve got less than 50 of these professionals in this state,” Kurtz says. “If they leave the state to get certified, they typically don’t come back. Agencies in the state like LifeScape need these employees and have an extensive waiting list for services. We’re really trying to have a pipeline directly to employers that will offers services to individuals and families.”

When the Center for Disabilities began 50 years ago, it numbered three employees. Now, it employs 35 at the site in Sioux Falls, South Dakota, with another 20 affiliated clinic staff and faculty and 20 more leaders from 14 different disciplines. Additionally, about 40 students and trainees are involved with the organization every year.

That’s only a small fraction of the people the Center works with, however.

“Most of the work we do is outside these walls with people not from this organization,” Kurtz says. “Almost all we do is a collaborative effort. We require partnerships and collaborations to carry out our mission.”

One of the longest partnerships is with South Dakota’s Native American tribes and tribal colleges. Advancing those relationships means some of the state’s most underserved and underrepresented residents can pursue their goals and dreams and having a higher quality of life. Kurtz believes what the Center does in South Dakota can become a national model for ways health care, education and government organizations and communities can build bridges with tribal nationals.

“We can learn from one another, support one another and ultimately really be stronger and more effective together,” he says. “That’s another awesome, awesome part of this place.”

The Center’s offerings are so diverse it can take employees up to a year to understand everything it offers. People get to know the Center through collaboration, Kurtz says. It can approach issues differently than hospitals, schools and community-based nonprofits, serving as a resource for all those groups and for individuals and families.

The issues surrounding COVID has made the Center’s staff more acutely aware of the intersection between mental health and developmental disabilities. It is essential that the mental health systems, developmentally disabled and education systems, and others are equipped to identify such individuals and their conditions early.

“What we’ve got available is not enough,” Kurtz says. “I think we’re going to have a role in bringing multiple systems of care together so they can approach this issue in different ways. We’ll be part of the next chapter of what those systems look like.”

Kurtz also expects the Center for Disabilities to advance the knowledge of traumatic brain injuries and expand long-term services allowing people to navigate life more easily. Research efforts will continue, and he says the Center will expand its ability to serve all ages, including the elderly. That means continuing to train future professionals.

“A lot of adults are not able to access the supports they need that would help them lead fuller lives,” he says. “We’ll make sure our next-generation professionals have what it takes.” •

Finding the Plan and Staying Positive

"Look for the silver lining" may be a well-worn proverb, but in Kelan Timm's point of view, it's the only way to live your one life.

"There is a plan," he says with emphatic confidence. "You might have challenges, but just continually remind yourself you could be in a worse situation. No matter how hard things get, just try to be as positive as you can."

And Timm has faced challenges; he arrived extremely early to a young mother unaware she was pregnant until it was too late for proper prenatal care. Her arrival at the hospital was so delayed that family lore says she gave birth in a hallway, not a delivery room.

Timm started his life in a hospital Neonatal Intensive Care Unit, hooked up to multiple tubes and monitors. He has undergone multiple surgeries. One was an unsuccessful attempt to correct his hips and allow him to walk – eventually – likely with a walker. Instead, he uses a wheelchair. Since early grade school, it has been motorized, allowing him easy access in both his work and personal lives.

It is presumed, Timm says, that his premature arrival caused his cerebral palsy. One of Timm's earliest surgeries involved installing a shunt to draw fluids from his brain. Spasticity in his muscles affects his left side more than his right. A baclofen pump installed several years ago relieves the muscle tightness, and leg braces offer support for his feet, which turn inward.

But, yes, it could have been worse. "I feel I've adapted to everything pretty well," he says. "It would have been nice to walk with at least the assistance of a walker. But having to have the wheelchair to get around, this is all I know. I've managed this pretty well."

When Timm was a child growing up in Rapid City, South Dakota, he received some services through Western Resources for Independent Living, a nonprofit that assists individuals with disabilities obtain what they need and advocates on their behalf. That can be anything from filling out forms to helping people stay in their own homes, says Codi Erickson, the agency's interim executive director. Headquartered in Rapid City, it also has offices in Pierre and Spearfish, serving western South Dakota.

"It's very stressful but a very rewarding job," Erickson says. "You get to help individuals who might not be able to get help in any other way."

Timm first began utilizing Western Resource's services when he was a middle-school student in the Rapid City School District. On August 1, 2017, he joined Western Resources as an administrative assistant, and his job responsibilities have grown since then, Erickson says.

"He's very good at trying to do what he needs to do," she says. "He works very hard at trying to be self-sufficient, and when you ask him to get tasks done, he does it."

In addition, "He enjoys life," Erickson says. "He strives for the funny times, the joking-around times."

During his time utilizing services through Western Resources, Timm learned how to set his goals for independent living. He experienced different jobs through the school district, including Project Search, which placed him at the Rapid City hospital. He was on the verge of moving out of his mother's home and into his own apartment when the hours for his

position as a pharmacy technician ended.

It only proved to be a temporary setback because Timm found information about the Western Resources opening on Indeed.com.

"I applied for multiple things, not just with Western Resources," he says. "Western Resources happened to be one of them, and I got called in for an interview, and that was that."

As someone who received support from the agency in the past, Timm sometimes has better insights into how to help those who now come for help, Erickson says.

"I like to help people, but it's another rewarding thing for me, giving back to Western Resources," Timm says. "I feel like I'm helping people like I've been helped and giving back to others."

Timm works 9 a.m. to 2 p.m. weekdays. Outside office hours, he enjoys watching football and professional wrestling and playing video games. He spends time with friends and his family, which includes six half-siblings. For many years, he points out, he was the only male in a house with his mother and three sisters.

That's not why he wanted his own place, Timm says with good humor. Instead, it was part of the independent living goals he had set for himself. His mother was unconvinced of the soundness of that idea, and he lived with a grandmother for a time while the situation resolved itself.

Timm lived alone for 15 months then moved to a different apartment after he married. When that relationship ended, he ended up living with his grandmother briefly, then moving to another apartment – just in time to isolate for the COVID-19 pandemic.

That period proved invaluable in giving him time to examine his goals once again. Ten years from now, he would be pleased to be nearing his 15th anniversary at Western Resources, although he hopes to travel to and from work in his own car, not public transportation.

In a life studded with multiple accomplishments, it would be too easy to view the too-brief marriage as his greatest failure. It's never wrong, however, to give your heart away, and Timm knows that is the one of two silver linings. The other is that he now is stepfather to his ex-wife's son and continues in the role of dad.

"I want people to take away from my life that anything is possible if you put your mind to it, and you set a goal for yourself," he says. "If it doesn't work out the way you want it to, that's not the end of the world. Just look for the next best thing." •

Brandon Holsather feels most at home in a gym, either in front of a punching bag or training in a sport that originated in Thailand that is gaining in popularity in the Western world.

The 29-year-old Sioux Falls, South Dakota, resident's goal is to become skillful enough at both boxing and Muay Thai that he can participate in tournaments. To reach that achievement, he spends an hour every weekday at a gym, building up his strength and endurance.

"Weekdays are the days to get sweaty," Holsather says.

He also plans to enter body-building tournaments, and scheduled the last eight months of 2021 as a time of preparation. The classic way to building strength is through the squat; Holthauser has lifted 475-pound weights in the past, and now his goal is to reach 500 pounds. He also wants to improve his cardio to the point he can hit a punching bag for an hour a day.

Holsather says he will do it in a healthy manner. "I always try to keep it natural," he says. "A lot of guys cheat and use steroids, and that's not my thing. I want to prove to myself that it's important to do it this way."

People often confuse Holsather's interest in Muay Thai with the sport of mixed martial arts (MMA). Muay Thai, sometimes called Thai boxing, is a martial art and combat sport that uses fists, elbows, knees and shins. It is described as a practical fighting technique that can be used in actual warfare but most commonly is viewed as a sport fought in front of spectators as entertainment.

“MMA incorporates a ground game,” Holsather says. “Boxing is hands only. In Muay Thai, you’re allowed to do kicks and use the elbows, knees and punches.”

A friend introduced him to boxing, but Holsather gravitated toward Muay Thai on his own by watching instructional videos. He is looking for a partner with whom he can train. Muay Thai tournaments come to the Midwestern region only rarely, but Holsather plans to box in tournaments before then. At 170 pounds, he would compete in the light-heavyweight class.

Holsather was diagnosed as being on the autism spectrum when he was 4 years old and living in Iowa. After graduating from Boyden-Hull High School in Boyden, Iowa, he trained as a welder at Iowa Lakes Community College in Emmetsburg, Iowa.

While he may still look for a welding job someday, Holsather now enjoys his work sorting laundry for Shipley’s Garment Spa Cleaners. Avera Health is one of his major clients, and he enjoys occasional delivery trips to the hospital. Sorting clean and dirty laundry can be a soothing experience, he says, and he has worked at Shipley’s for about five years.

As Shipley’s plant manager, Tim Heutzenroeder serves as Holsather’s supervisor. He admits to having doubts when the younger

man first started, but Holsather's attitude and willingness to learn soon changed that.

"I've learned a lot from him about myself," Heutzenroeder says. "There's a shirt out there that says, 'I love somebody with autism,' and I think over time I can say that about myself."

The two men often talk about Holsather's boxing, bodybuilding and Muay Thai goals, and Heutzenroeder encourages Holsather to pursue his goals.

"I've told him over the years, if that's what you want to do, keep trying," Heutzenroeder says. "It's going to take practice. I can tell he's trying really hard. He'll come in and have some bruises on him because he's working so hard. You can just tell it's a passion with him."

Away from the gym or the punching bag in his parents' garage, Holsather enjoys playing pool and darts, bowling and improving his scores at arcade games over the weekend. Never far from his mind, however, is the need to stay in shape to pursue his long-term goals.

"It's good to be strong but never bulky," he says, returning to the topic of Muay Thai and boxing and, yes, life. "You may have one big hit, but if you can't make it land, it's not useful." •

From High School Job to Lifelong Career

When Ben Bartling reported for work at the Burke True Value Hardware Store, the then-high school sophomore didn't know he'd found his place in life.

Instead, the position stocking shelves and taking inventory was to be an introduction to real-life experience at a job while transitioning into adult responsibilities.

Today, seven years after graduating from high school, Bartling now serves as the store's manager. At 25, he supervises three other full- and part-time workers, does the bookkeeping, waits on customers and everything else that comes along with a small business that serves a wide region.

And Bartling, who was born with spina bifida, does it from a wheelchair or, occasionally, crutches.

"He buzzes around that store faster in a wheelchair than some people walk," says Bernice Klein, who owns the hardware stores in Burke and Gregory, South Dakota. "He's never like, 'Oh my, I can't do this.'"

Bartling was enrolled in Project Skills, a program offered to participating school districts through the South Dakota Department of Human Services' Division of Vocational Rehabilitation Services and the South Dakota Department of Human Services' Divisions of Rehabilitation Services and Services to the Blind and Visually Impaired. It serves 400 to 500 students with physical and developmental disabilities a year, says Dan Rounds, transition coordinator for the state's Transition Services Liaison Project offered through Black Hills Special Services Cooperative. The school district supports the student, and the state pays the wages.

Rounds met Bartling through Project Skills and another program offered by the Transition Services Liaison Project, the Youth Leadership Forum. He made such an impact that earlier in 2021 Bartling was asked to serve as a mentor to the young participants at the most recent event.

He was willing to return because the Youth Leadership Forum made a profound impact on him, Bartling says.

"What I learned about leadership I can take to my job as well," he says. "I know not

Ben with Grace Kemp, a Project Skills student.

to be too loud and obnoxious, and at the same time the importance of voicing what you need thinks to be done and when."

Bartling's success shows what such programs can do, Rounds says.

"He's in the business community in his hometown, and everybody knows him and respects him. The work that the people in the state do made an impact on him, and he wants to carry it on," Rounds says.

Bartling not only is a Burke businessman, he is a homeowner, having purchased his own residence about two years ago. The two-story house has wooden floors that make it easy for him to use crutches to navigate the different rooms. Spina bifida affects the spinal cord before birth and can impair mobility, although Klein first met Bartling through a youth baseball team on which he played. He prefers to use a wheelchair at work because he has so much ground to cover.

His current pickup truck has hand controls, making trips into the city much easier. But a city's not where Bartling wants to spend his time. Whenever he can get away, alone or with friends and family, he heads to the river to fish. His prize catch is a northern pike caught on a trip to Minnesota, now mounted and hanging on his wall. Otherwise, to spare himself the tedium of cleaning fish, Bartling prefers the practice of catch-and-release.

"It's a time-passer that keeps me sane," he says of fishing. "I love the peacefulness. I love to sit out there and listen to the wind."

Some people urged him to go on to further education after high school, but he knows Burke is where he wants to be. Through Project Skills, he learned what he wants to do, Bartling says. He wouldn't enjoy a job where he was stuck in the office, and while a manager has plenty of paperwork, he also has the freedom to be on the store floor helping customers. The importance of developing such a relationship is also something he learned at the Youth Leadership Forum, he says.

"It really taught me to be outgoing and a people person rather than a quiet person in the background," Bartling says.

Klein praises his people skills.

"He's good PR," she says. "It doesn't hurt that he was born and raised in Burke. But I get a lot of good comments about how friendly he is to people."

Bartling also continues the store's practice of bringing students in the Project Skills' program to work.

"A lot of it is just finding out what they like to do and letting them take control," he says. "I leave that up to them."

That's because he wants the new Project Skills students who take a job at Burke True Value to learn what he has learned: Do what makes you happy, speak out, don't let people overlook your skills just because you have a disability, and make your voice heard.

Bartling sums it up like this: "Self-advocacy," he says, "that's the best thing ever invented." •

The Center for Disabilities would like to thank all the businesses, organizations and individuals who connected us with the extraordinary people featured in this publication.

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