

Record Living

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Arduous struggle

**Waterloo student is determined
to lead an independent life**

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The first thing you notice about Robert Hill is a conglomeration of metal rods, bolts and plates attached to his head like some sort of antennae.

Four screws have been drilled into his skull to hold a metal headband in place. Two of these go through his eyebrows, the others behind his ears.

Pieces of his “halo” stick straight up into the air.

It's difficult not to stare at the contraption, designed to keep his broken neck in place.

But then you see his eyes.

Below the metal ring, a pair of cool blue eyes – eyes that have laughed often and now suddenly felt too much – stare out at an uncertain future as a quadriplegic.

Yet the eyes betray no fear and no self-pity. Only a steely determination to live a normal life, to fulfil the same goals he held up to a few weeks ago, can be detected through the thick lashes.

Before July 13, Hill was a typical 25-year-old business student at Wilfrid Laurier University. He was making the most of his summer job managing a student painting business with his friends.

It took only an instant at a cottage near Bracebridge to permanently paralyse him below the chest. The rest of his life will be spent in a wheelchair.

Seated upright for only the second time, in a glassed-in room at the neurological intensive care unit of Sunnybrook Medical Centre in Toronto, Hill spoke of the accident and of his future.

He and his friends were gathered on a dock that sat about a foot off the surface of the northern lake. At that point, the water was about three feet deep.

Deciding to push one of his friends into the water, Hill said, “I knew before I'd be going in with him. My head hit the bottom. I had no sensation at that point I felt my neck go. I knew immediately what happened.”

Hill couldn't push himself off the sandy lake bottom. He felt a combination of pain in his neck and feeling very cold.

Two friends there were lifeguards who performed first aid. He was taken to a local hospital, then flown to the Toronto facility.

“I accepted it in the water,” he said. “I knew what I'd done in the water. My best friend was holding my head, saying, ‘Rob, you're going to be fine.’ That was bullshit. I knew what I'd done.”

“I knew the rules about diving into shallow water, but you never think about pushing people in.”

Hill wanted to tell his story, to prevent others from making the same simple, yet dramatic mistake.

While he spoke in the corner room of the 12-bed hospital ward, rock music played softly from a portable stereo beside his bed. A diamond stud in his left ear lobe, a pair of small toy animals perched on his halo and a crumpled bag of day old Chicken McNuggets resting on nearby hinted at a dramatic personality within the metal constraints.

But did a careless moment on a dock change all that?

Hill's answer combined humor with determination.

“Golf’s going to be tough,” he quipped. “Skydiving’s going to be tough, but going out for a few beers will be no problem. You deal with it and go on.”

At Sunnybrook, he was in the care of Dr. Michael Schwartz, a neurologist who specializes in spinal cord injuries.

Hill was diagnosed as having a dislocated sixth cervical vertebra in his neck. While there was some fracturing, the paralysis was caused when the trauma caused the bone to slide out of place, in pinching off his spinal cord.

He has no feeling in his legs. Because he has some use of his arms, he’s classified as a low quadriplegic.

Hill was equipped with the metal halo to keep his broken neck from rolling from side to side and causing more damage. While medical staff tried to use weighted pulleys to realign his spine, the efforts failed. Surgery was performed to permanently wire his neck bones in proper position.

Supported by a plastic, sheepskin-lined vest on his chest, the halo will be on for five or six weeks.



Friend Paul Pascoe lends quadriplegic Robert Hill a helping hand with his burger



Physiotherapist Hilary Smith jokes with Hill during regular exercise program to improve circulation and keep leg muscles from deteriorating

Hill speaks confidently of his plans to return to his studies as soon as January and to lead an independent life. He set a goal of getting a van, equipped with hand controls so he can drive.

But his return to an independent life will be a step by step emotional and physical struggle. He admits being retaught to wash, feed and care for himself can be frustrating.

“You lay there and you have people spooning food into your mouth and you’re 25 years old,” he says, adding with characteristic determination, “I’m not the type of person who gets depressed. It’s absolutely pointless to worry about something you have no control over.”

Paul Pascoe, a friend at whose cottage the accident occurred, called Hill a realist.

“He doesn’t reflect on what could or should have been,” he said. “He’s still strong. He knows what he’s got to do, but maybe he doesn’t know how tough it’s going to be.”

Hill has regained some fine motor control of his right hand, but he may not regain much use of his left.

Each day, he and occupational therapists work on squeezing colored sponges to strengthen his functioning muscles and picking up a spoon with an oversized grip as part of basic rehabilitation treatment. In a few weeks, he’ll be transferred to Lyndhurst convalescent home to further improve his life care skills.

He now delights in accomplishing whatever tasks he can—feeding himself a piece of toast or picking up and playing cards one by one.

The doctors tell Hill he’ll be in the convalescent home for three or four months. He cuts that time in half as a goal for himself.