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Misperceptions

This is a different kind of story than what I usually write. It is about people who look normal but are not. That is not to say that they are strange, only that they have something different about them that is not immediately evident. And that can cause troubles with other people who immediately judge by their own first impressions.

The impetus for this story is a friend who last summer tripped on a loose stone in a city sidewalk, falling and hitting her head. She was en route between her office and a client's office, so she was, as a lawyer, "dressed to the nines", although perhaps her shoes were not as high heeled as some due to her already imposing height of 5'10". The impact of the fall stunned her, and she was taken to a nearby hospital but released quickly after discovering no external injuries.

Headaches set in immediately, incapacitating her for hours at a time to the point that she was not able to work. Furthermore, she started having trouble finding the words she wanted, and her speech became halting, sometimes difficult to follow as her thoughts refused to flow to completion. Her ability to comprehend what she read also diminished, a result of altered concentration and retention. Obviously, as a litigator, she was not able to stand in front of a courtroom, but neither was she able to prepare paperwork in the office.

She asked her employers for a medical leave of absence—after all, she had been injured on the job—and only after a long struggle was granted her request.

But she had to spend the first six weeks of her leave answering questions and organizing files for her employer, so that her "recuperation time" was still laced by stress and her recovery continued to stall, eight months after the accident. Meanwhile, her employers kept telling her that she looked fine, so whatever was the matter that she needed time off at all?

About a month after she was finally allowed the "time off" part of her leave,

understand or accept that something invisible to the eye could be affecting the way that someone is thinking, speaking, moving, behaving. The cause can be an injury, it can be an illness (or leftovers from a prior illness), it can be a developmental disability, or it can be just a difference in the way one brain has been trained to operate.

When I was in college, there was a young man who used to walk through

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without work responsibilities, she was still unable to secure the cognitive therapy from her medical provider that she wanted and needed, although she was diagnosed as now having the reading ability of a tenth grader. And then her employer decided to terminate her in the midst of her approved leave. It took another two months, during which she had to hire another lawyer to represent her, to secure a proper severance package and medical coverage for her on-the-job injury.

Her story is not unique. Too often we perceive people as we wish them to be rather than as they are, and cannot

town singing at the top of his lungs whenever he was happy. While his voice was pleasant, the songs that he would sing sometimes caused strangers to step away from him and look back in alarm, disgust, or embarrassment. After all, it was not "normal" for a 25-year-old apparently hale and hearty guy to be belting out the theme song to the Mickey Mouse club in complete and unreserved glee.

But what they did not know was that Harry had survived surgery to remove brain tumors, more than once, and in the process some of the inhibitions trained

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into him by his family had disappeared. He was perfectly capable of holding an intense conversation about the social implications of sheltering runaway children from abusive families or how to repair an electrical socket. He supported himself and had a steady job. Yes, he was sometimes rash in his decisions, probably related to the changes in his brain from the surgeries, and this caused him bumps in the road from time to time. But he was a good person and a staunch friend, always looking to protect individuals and society as a whole. Although it never bothered Harry, it hurt his friends to see how strangers shunned or mistreated him.

Nearly 30 years ago my brother called me in utter depression about a recent visit to the eye doctor. As he described the symptoms of his diagnosed congenital and hereditary condition, I realized that he could be describing my own symptomatic condition, and a series of tests not long afterwards confirmed that we share the same retinal degenerative disease. While continuing to adapt to my ongoing and incurable loss of peripheral vision, I find that my “different” vision is sometimes perceived by the unknowing as carelessness, impoliteness, or worse.

While I look normal, I do not see normally. The nonfunctional 90% of the rods in my eyes fail to perceive the same light-dark contrasts as others’ eyes, so dim lighting is nearly dark to me. I do walk into things that are below waist level, and our dogs have learned that when I trip over them it is not out of meanness. Someone standing immediately next to me may be invisible within a blind spot, and that is the reason I do not say “hello” or may turn and accidentally bump into the person. It isn’t intentional rudeness, but strangers have railed at me in public despite my apologies.

The point of these stories is that too often we jump to conclusions about someone based on how we are accustomed to perceiving the world, whether in a good or bad light. We anticipate behavior based upon past experiences or sometimes idealized expectations. Anything outside of the usual comfort zone puts us on guard, raises suspicions, makes us dismissive as a situation being “too much trouble”. What relationships are we throwing away in the process? What valuable colleagues are we losing? What skills and knowledge are we missing the chance to gain or share? 