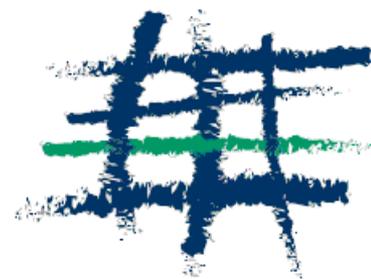


Mission Accessible: Disability Rights and Culture 101



AIRS 2013
Blazing the Trail in I&R
#AIRS2013

Bob Joondeph
Executive Director



DISABILITY RIGHTS OREGON



1750: The Acts and Laws of His Majesty's English Colony of Connecticut in New England in America provided An Act for Relieving, and Ordering of Idiots, Impotent, Distracted, and Idle Persons. This act stated that those considered "idiots, impotent, distracted, and idle persons" should be cared for by their closest relative. If such a person had no relative then the town or the colony itself took direct responsibility.

Institutional Timeline

- ❑ **1460:** Bedlam Hospital in London, England completes conversion into a mental institution.
- ❑ **1752:** The Pennsylvania Hospital began admitting mentally disturbed patients.
- ❑ **1760:** *Institut National de Jeunes Sourds de Paris* (INJS) school for the deaf founded in Paris, France.
- ❑ **1784:** *Institut National des Jeunes Aveugles* (INJA) school for the blind founded.
- ❑ **1815:** First school for the deaf in US founded in Goochland, VA.
- ❑ **1829:** Perkins School for the Blind founded in Boston.
- ❑ **1848** - The first residential institution for people with mental retardation is founded by Samuel Gridley Howe at the Perkins Institution in Boston.
- ❑ **1908** - Clifford Beers publishes *A Mind That Found Itself*, an expose of conditions inside state and private mental institutions.

Remaining in the P. H. 1000 27, 1838-

Insurance Pay -

1790. 12 mo. 18. Mary Baker -
 1820. 7 mo. 7. Samuel B. Pease -
 1803. 8 mo. 30. Alice August -
 1808. 8 mo. 16. Edw. Chatham -
 1812. 4 mo. 9. Anna Lewis.
 1813. 8 mo. 13. Samuel Dilant -
 1814. 1 mo. 29. Lisa O'Brien.
 1815. 4 mo. 18. Rebecca Torrala.
 1816. 9 mo. 25. William Cault.
 1818. 6 mo. 14. Maria F. Rodrigue.
 1819. 9 mo. 4. Hannah Block.
 1821. 6 mo. 2. William Motely.
 1822. 6 mo. 5. Mossman Nastoun.
 - 5 mo. 3. Sarah Dampfield.
 1823. 9 mo. 3. A. H. L. Livingston.
 1824. 12 mo. 23. Matthias Demer.
 1825. 8 mo. 30. Will^m Watt.
 1826. 7 mo. 2. Ann Wood.
 9 mo. 5. Rachel McLellan.
 1827. 10 mo. 13. Eliza Armstrong.
 1828. 5 mo. 17. George Gibbs.
 12 mo. 20. John Mastrie.

1828. 12 mo. 22. Esther Darday.
 1829. 4 mo. 14. Maria M. Gibbs.
 - 25. Edward Parker -
 - 27. Geo. J. Bowman -
 6 mo. 10. Elizth Burke.
 1830. 2 mo. 15. Amy Phillips.
 5 mo. 24. Christopher Weirne.
 1831. 7 mo. 25. Rebecca J. Cohen -
 10 mo. 5. Stewart Wilson -
 1832. 6 mo. 1. David Miller.
 11 mo. 15. Ann M'Queen.
 12 mo. 6. Wenzth B. Sinclair.
 1833. 2 mo. 25. Mary Hall -
 3 mo. 18. Daniel Lehman.
 7 mo. 29. Jacob Wolfe -
 9 mo. 27. Jean B. Parier.
 1834. 4 mo. 23. Priscilla W. Gammill.
 1835. 2 mo. 19. Louisa Hackett.
 1836. 2 mo. 5. Edward Terry -
 4 mo. 3. Margaret George.
 " 16. Francis Shaw.



1907: The first Compulsory Sterilization Law was passed in Indiana. Sterilization was made easier with the development of the vasectomy by Dr. Harry C. Sharpe. Several other states followed Indiana's lead including Oregon.

Buck v. Bell

- 1927: U.S. Supreme Court upheld a Virginia statute requiring compulsory sterilization of the unfit "for the protection and health of the state." Justice Oliver Wendell Holmes found that the state interest in a "pure" gene pool outweighed the interest of individuals in their bodily integrity.
 - "It is better for all the world, if instead of waiting to execute degenerate offspring for crime, or to let them starve for their imbecility, society can prevent those who are manifestly unfit from continuing their kind. The principle that sustains compulsory vaccination is broad enough to cover cutting the Fallopian tubes. Three generations of imbeciles are enough".

Oregon Timeline

- **1843:** Oregon territorial government adopts laws for care of the mentally ill.
- **1861:** Dr. J. C. Hawthorne opens private “insane asylum” in Portland.
- **1883:** Oregon State Hospital opened in Salem.
- **1907:** Oregon State Institution for the Feeble-Minded created.
- **1923:** Oregon mandates sterilization of some citizens.
- **1958:** Patient population at OSH peaks at 3,545 patients.
- **1961:** Dammasch State Hospital opens, Mental Health Division established.
- **1977:** Patient population at OSH bottoms out at 525.
- **1983:** Abolishment of the Board of Social Protection.
- **1995:** Dammasch closes.
- **2000:** Fairview closed.
- **2002:** Gov Kitzhaber issues apology for Oregon's forced sterilization of institutionalized patients.

Civil Rights



Martin Luther King

Letter From A Birmingham Jail
April 16, 1963

All segregation statutes are unjust because segregation distorts the soul and damages the personality. It gives the segregator a false sense of superiority and the segregated a false sense of inferiority. Segregation ... ends up relegating persons to the status of things. Hence segregation is not only politically, economically and sociologically unsound, it is morally wrong and awful.

DISABILITY POLICY: A “NEW PARADIGM”

- ❑ Disability considered as a natural and normal part of the human experience.
- ❑ Rather than focusing on “fixing” the individual, it takes actions to “fix” or modify the natural, constructed, cultural, and social environment.
- ❑ It acts to eliminate attitudinal and institutional barriers that preclude persons with disabilities from participating fully in society’s mainstream.

Goals of Disability Policy in the ADA

- **Equality of Opportunity**
- **Full Participation—Empowering Individuals and Families**
- **Independent Living**
- **Economic Self-Sufficiency**

The Integration Mandate of the ADA and Section 504

- ❑ The ADA and Section 504 of the Rehabilitation Act require states to provide services in the most integrated setting
- ❑ Services must be designed to provide persons with disabilities the opportunity to interact with non-disabled peers to the maximum extent feasible
- ❑ *Olmstead v Zimring*, 527 US 581 requires that states end segregation in their service systems, and refers to this command as the integration mandate.

What is a “Disability”?

□ An individual:

- With a physical or mental impairment that substantially limits one or more major life activities of the individual
- With a record of such impairment, or
- Who is regarded as having such an impairment (Unless minor and of actual or expected duration of six months or less.)

Major Life Activities

- Caring for oneself; Performing manual tasks; Seeing; Hearing; Eating; Sleeping; Walking; Standing; Lifting; Bending; Speaking; Breathing; Learning; Reading; Concentrating; Thinking; Communicating; Working; Socializing; Sitting; Reaching; Interacting with others; Employment; Ambulation; Transportation; Operation of a major bodily function, including functions of the immune system; normal cell growth and digestive, bowel, bladder, neurological, brain, respiratory, circulatory, endocrine and reproductive functions; and ability to acquire, rent or maintain property.

Substantial Limitation

- Impairment materially restricts one or more major life activities
 - Can be episodic or in remission if it would substantially limit a major life activity when active.
 - Is without regard to the ameliorative effects of mitigating measures, including medication, devices or learned behavioral or adaptive neurological modifications.



Mistaken Attitudes Toward Disability

- ❑ **Categorizing: *Seeing People as Their Disability***. What is the first thing you say about a person? Use people-first language.
- ❑ **Misunderstanding: *Dismissing a person with disabilities as incapable of accomplishing a task without the opportunity to display their skills***. In fact, people with quadriplegia can drive cars and have children. People who are blind can tell time on a watch and visit museums. People who are deaf can enjoy music. People with developmental disabilities can be creative and maintain strong work ethics.

Mistaken Attitudes Toward Disability

- ❑ **The Spread Effect: Assumption that an individual's disability negatively affects other senses, abilities, or personality traits.** Focus on the person's abilities rather than his or her disabilities.
- ❑ **Stereotypes: Positive and negative generalizations people form about disabilities.** For example, many believe that all people who are blind are great musicians or have a keener sense of smell and hearing; that all people who use wheelchairs are docile; that all people with developmental disabilities are innocent and sweet-natured; that all people with disabilities are sad and bitter. Individuals with disabilities are merely human.

Mistaken Attitudes Toward Disability

- **Backlash: *Belief that individuals with disabilities are given unfair advantages, such as easier work requirements.***
Employers need to hold people with disabilities to the same job standards as co-workers, though the means of accomplishing the tasks may differ from person to person. The ADA does not require special privileges for people with disabilities, just equal opportunities.
- **Denial: *Many disabilities are "hidden,"*** such as learning disabilities, psychiatric disabilities, epilepsy, cancer, arthritis, and heart conditions. Some believe these are not bona fide disabilities needing accommodation. The ADA defines "disability" as an impairment that "substantially limits one or more of the major life activities." Whether a condition is visible or not, it still can result in substantial limitations.

Words



PREFERRED

AVOID

accessible parking/accommodations	handicapped accessible
children with disabilities	special children
Individual without a disability	able-bodied; normal; whole
individual with a physical disability	crippled, handicapped; deformed; defective
individual with a spinal cord injury	quadriplegic; paraplegic; incapacitated
individual with multiple sclerosis (MS)	person who suffers from MS

PREFERRED

AVOID

individual who uses a wheelchair	wheelchair-bound/confined to a wheelchair
individual who is blind or has low vision	the blind
individual who is deaf or hard of hearing	the deaf; deaf and dumb; mute; hearing impaired
individual with burns	burn victim; disfigured
individual of short stature	dwarf or midget
individual who had a stroke	stroke victim/suffered from a stroke

PREFERRED

AVOID

individual with a cleft lip/cleft palate	hare lip
individual with a congenital disability	deformed/person with birth defect
individual with epilepsy or a seizure disorder	epileptic; spastic; person who has "fits" or "attacks"
individual living with HIV or AIDS	HIV or AIDS victim
individual with a learning disability	slow learner; retarded; stupid
individual with an intellectual disability	slow; retarded; dim-witted

PREFERRED

AVOID

individual with dyslexia	dyslexic
individual with a psychiatric disability or with a mental health diagnosis	crazy; maniac; lunatic; demented; schizo; psycho; feeble-minded

Thank You

