Catalyst

Human Resource Center • Graduate School of Social Work The University of Texas at Arlington

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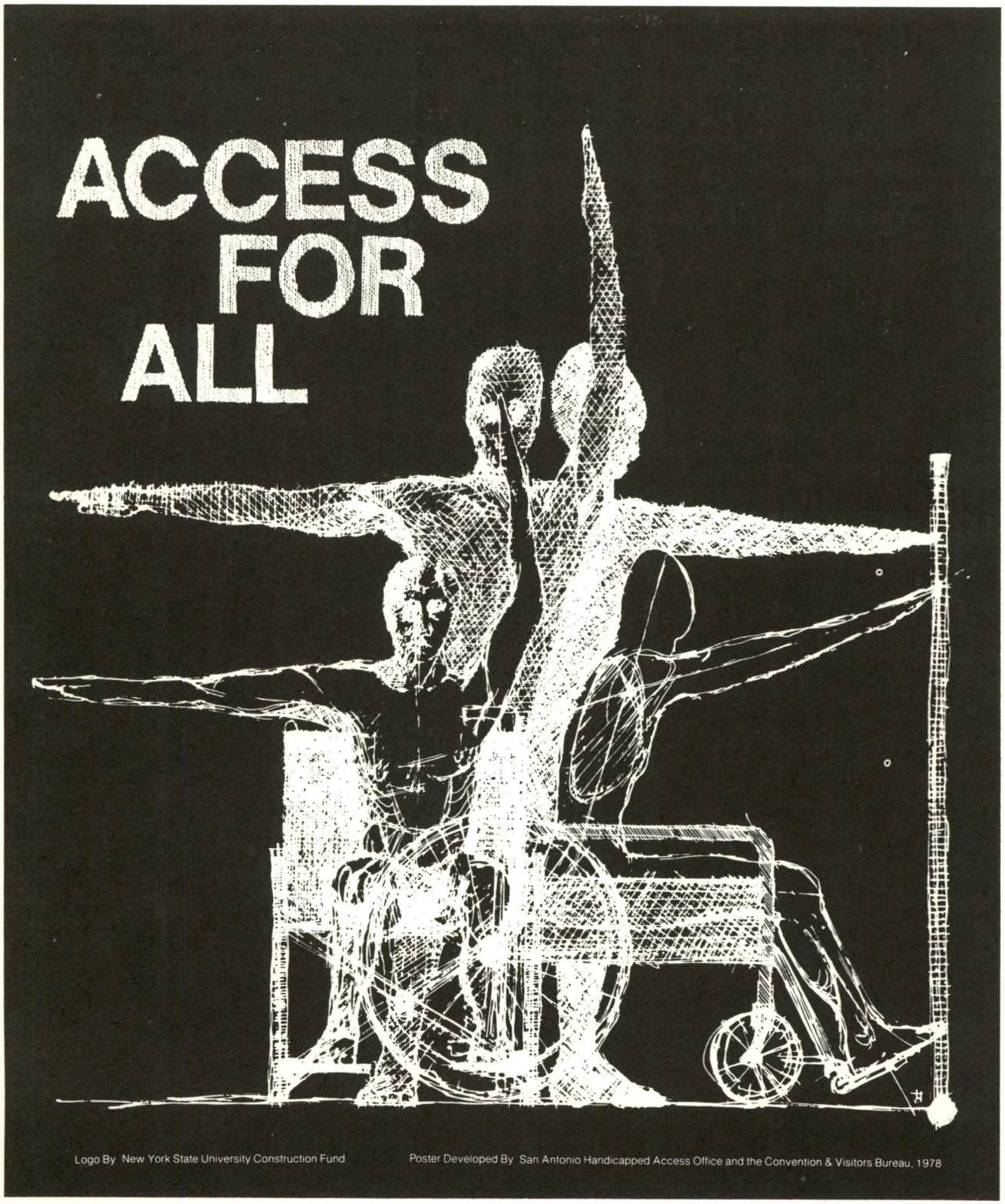
Spring 1980



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With this issue, **Catalyst** adopts a new format — one that reflects our interest in publishing full-length articles of importance to human service professionals. We believe that the need to provide a vehicle for the exploration of issues which concern those who work in the many facets of social service delivery and support requires the continuance of a publication which is serious in style and content. In this regard, we are building on **Catalyst's** well-established reputation in the human service community. We intend to continue to solicit contributions from professionals in public and private agencies, from community organizations, and from academia. Our commitment in this issue, as always, is to provide information and commentary in areas relevant to your practice.

In this issue

On the Cover: The cover graphic is a reproduction of a poster developed by the San Antonio Handicapped Access Office and the Convention and Visitors Bureau.

Catalyst is published by the Human Resource Center, The Graduate School of Social Work, The University of Texas at Arlington, Texas. It is published quarterly by GSSW faculty, students, and staff, and is intended to provide information and commentary on human service delivery concepts, resources and social work education. **Catalyst** is directed to personnel of the Texas Department of Human Resources, United Way agencies, health care delivery systems and other interested non-profit social service institutions.

From the Dean's Viewpoint

The handicapped have been characterized as the "silent minority." Less militant than many other groups in modern American society, they have been slower to make demands upon the community. As a result of modern medical technology their number is growing. Our increasing concern for them, as reflected in the legislation and programs discussed in other sections of this issue, is in response not only to their wishes but also this nation's movement towards a more humanistic philosophy.

As with other minorities, they are asking for opportunities to contribute to the world around them the way that most of the rest to us do. "Self-respect" and the "social good" are consistent ideologies. By making it possible for each person to maximize her/his potential we are also increasing the pool of resources available to the society. Only within the last twenty-five years has the American public become fully aware of this.

The Graduate School of Social Work is trying to provide some leadership in this effort. The School is responsible for administering an Equal Opportunities grant that has as its aim counseling and referral services for potential minority college and graduate students throughout the Dallas-Fort Worth metroplex. Specifically included are the handicapped as well as racial and ethnic minorities and women. Outreach offices are being set up and contacts made with high school staff throughout the region.

A high priority is the establishment of a medical social work curriculum, hopefully in cooperation with the Health Science Center in Dallas and other interested units across campus. The members of a state-wide Advisory Council have already met twice and special funding is being pursued. The Human Resource Center expects to initiate a series of continuing education courses for medical service personnel in the near future. On March 18th the School will sponsor a symposium for professionals in the field entitled "Health Care in the 80's."

The profession of social work has an historic role as advocate for those persons and populations who cannot take full advantage of societal opportunities. This thrust must not be lost among the myriad of methods and techniques taught in various classes in the curriculum. The handicapped are one such group.

Paul H. Glasser
Dean

Programs and Projects referred to in this issue:

Rehabilitative Services Administration
Department of Health, Education and Welfare
330 C Street, S.W.
Washington, D.C. 20201

Division of Handicapped Affairs
Office of the Governor
Sam Houston Building
201 E. 14th Street
Austin, Texas 78711

Handicapped Access Office
City of San Antonio
P.O. Box 9066
San Antonio, Texas 78285

Independent Living Research Utilization Project
The Institute of Rehabilitation and Research
P.O. Box 20095
Houston, Texas 77025

Center for Independent Living
2539 Telegraph Avenue
Berkeley, California 94704

Program Models and Client Needs: Three Practical Applications

by
Lex Frieden and Laurel Richards

Conceptualizing independent living programs as meeting diverse needs in a variety of settings is basic to our understanding of community services for persons with disabilities. Frieden and Richards describe three distinct program types which promote self-sufficiency and offer hope to participants. A version of this article appeared in **"Disabled U.S.A."**

For people who are not familiar with the concept of independent living programs for severely disabled people, the imprecise vocabulary that surrounds these programs and services can be confusing. As is usual with new concepts, widespread acceptance of new terminology develops slowly.

The problem does not lie with the general concept of independent living. This is fairly easy to explain: given appropriate support services, information and skills, and accessible environments, severely disabled people can participate in all aspects of life. The problem comes when we try to distinguish between different kinds of programs which provide independent living services.

Programs frequently referred to as independent living centers can vary tremendously in the breadth of services, and may have little in common except services to severely disabled clients. The question arises, then, what **is** an independent living center, or more perhaps tellingly, what **is not** an independent living center? Are there any bases on which to compare and categorize all the programs providing independent living services?

To answer these questions, the Rehabilitation Services Administration of HEW has sponsored the Independent Living Research Utilization (ILRU) project at The Institute for Rehabilitation and Research (TIRR) in Houston, Texas, to undertake the major task of developing a glossary of terms for independent living.

Six features by which programs providing independent living services can be compared and categorized were identified. They are: service setting, service delivery method, service delivery style, vocational emphasis, goal orientation, and disability type served. Each of these features denotes a continuum or dimension within which programs may vary. The service setting ranges from residential to non-residential; the service delivery method ranges from direct to indirect, or a combination of both; the service delivery style ranges from non-handicapped to consumer; the vocational emphasis ranges from primary to incidental; the goal orientation ranges from transitional to ongoing; and the disability type served ranges from single to many.

By comparing programs along these dimensions, one can distinguish the differences among many programs designed to facilitate independent living. Also, it is possible to identify reliably several basic types of programs.

Conceptually, "independent living program" is the most broadly defined term relating to organizations working with disabled individuals who wish to live independently. What kinds of features an independent living program has will depend on the needs of the clients served, the availability of existing community resources, the physical and social make-up of the community, and the goals of the program itself. The program is community-based, has substantial consumer involvement, and provides directly, or coordinates indirectly through referral, those services necessary to assist severely disabled people to increase self-determination and to minimize unnecessary dependence on others.

Services that must be provided or coordinated by an independent living program are housing, attendant care, readers and/or interpreters, and information about goods and services relevant to independent living. Other services include transportation, peer counseling, advocacy or political action, independent living skills training, equipment maintenance and repair, and social-recreational services.

It should be noted that custodial care facilities and primary medical care facilities are specifically excluded from the definition of an independent living program.

Discriminating further, three different types of programs with specific purposes have been identified. They are independent living centers, independent living transitional programs, and independent living residential programs.

An independent living center is a community-based, non-profit, non-residential program which is controlled by the disabled consumers it serves. In addition to services already noted as part of an independent living program, an independent living center also promotes community awareness and barrier removal programs.

The Center for Independent Living (CIL) in Berkeley, California is perhaps the foremost example of an independent living center. (See Curtis, "Social Change Through Self Help" in this issue.) The CIL was probably the first disabled consumer-operated service organization established in the United States. From its beginning in 1972, it was geared toward making support services in the comunity available to disabled individuals.

CIL is not a residential program, but a multifaceted program of referral services, support services, and research and advocacy projects directed toward removing architecutral and attitudinal barriers existing in the community. Its goal is total integration of people with severe disabilities into community life by minimizing those aspects of a person's disability that become handicaps.

To do this, CIL provides various counseling programs, independent living skills training programs, and vocational rehabilitation services. Whenever possible, existing community services are used, and CIL refers many people to agencies and organizations that provide such independent living services as vocational counseling, vocational rehabilitation and training and financial support. CIL was founded and is operated by disabled people. The counseling and instruction

of participants is conducted by disabled staff members. Through political and legal advocacy, the center works for the complete and active participation of disabled people in society.

The central philosophy of CIL is that disabled people can be actively contributing members of society, and that they should be the ones to control their own lives. To achieve the goals of an independent lifestyle with self-determination, CIL has worked to involve disabled people in all aspects of the program.

Unlike an independent living center in some ways and very much the same in others is an independent living transitional program, which facilitates the movement of severely disabled people from comparatively dependent living situations to comparatively independent living situations. The primary service provided by these programs is skills training in such areas as attendant management, financial management, consumer affairs, mobility, educational-vocational opportunities, medical needs, living arrangements, social skills, time management, sexuality and other areas. Transitional programs are usually goal-oriented and time-linked.

The New Options program at TIRR in Houston is an example of an independent living transitional project. It is designed to foster independence among severely physically disabled persons, enabling them to become a part of their community.

Begun in 1976, New Options is a six-week residential program that is structured to provide information and first-hand experiences which enable participants to acquire necessary independent living skills in a short period of time. Its dormitory-style setting and non-professional attendant staff provide a new experience for many of the participants who have known only family help or a professional nursing staff.

The program consists of a six-week cycle of instructional modules that emphasize the skills needed to live and work with a minimum of assistance. The goals of the program include the establishment of an independent living situation which includes working with personal care assistants, involvement in educational opportunities, active participation in the community, and the enhancement of personal, physical and functional skills.

New Options also has an extensive independent living research program which traces the influence of the program on former participants. In this way, modules can be created or modified to train more effectively disabled individuals to participate in the community as contributing citizens.

The third major type of independent living program is the independent living residential program, a live-in program that provides directly, or coordinates through referral, shared attendant services and transportation. Related services which increase personal self-determination and minimize unnecessary dependence on others may be provided.

"Not every person is capable of achieving total independence in the sense described here, and not every person who is able to achieve it chooses to do so."

A good example of an independent living residential program is Creative Living in Columbus, Ohio. It was established in 1968 to assist young physically disabled people who wanted to pursue educational or vocational training. The Creative Living facilities are located in an apartment building specifically designed to be wheelchair-accessible and to allow as independent a lifestyle as possible.

The building is located adjacent to Ohio State University, where many of the program participants are students. Transportation to other parts of the city is available for those who are participating in vocational training programs or who are just beginning to work.

The program provides only the residential facilities and necessary physical assistance needed by an individual during his or her educational training program. Its focus is self-help, and all the participants are motivated toward developing a self-sustaining lifestyle with each participant expected to arrange and pursue his or her own training program. Once this training is complete, the participants are encouraged to locate and establish their own living arrangements in the community.

In addition to the three basic types of programs just described, many independent living service providers, including medical and vocational rehabilitation facilities, community and social service agencies and others, provide services which help severely disabled persons to live more independently. For example, the United Way Information and Referral Service in Houston, provides an interpreter referral service for hearing-impaired individuals, and the Metro Lift service in Houston provides accessible transportation for persons in wheelchairs.

Despite the existence of several different types of programs which foster independent living, it is important to remember that independent living is not dependent on programs of any sort. Rather, it is based on a person's ability to choose and achieve a desired lifestyle and to function freely in society. Not every person is capable of achieving total independence in the sense described here, and not every person who is able to achieve it chooses to do so.

Independence for us all is an intangible quality. It is control over our own lives. It is managing our own affairs and participating in the day-to-day life in the community. It is fulfilling a range of social roles, and making decisions that lead to self-determination and the minimization of physical and psychological dependence upon others.

For disabled people, independent living is a long-sought goal which is just now beginning to be recognized by the general public as one which is reasonable and just. With the goal of independence in sight, new programs are being set up to help disabled people all over the country. Hopefully, the semantics of the movement will not interfere with its progress.

Lex Frieden is the Director and **Laurel Richards** is the Training Activities Coordinator at the Independent Living Research Utilization Project, The Institute of Rehabilitation and Research, (TIRR), Houston, Texas.

New Rights for the Handicapped . . . New Roles for Social Workers

by
Eunice Fiorito

Attitudinal as well as architectural barriers must be confronted by social workers in their efforts to achieve equal rights for their disabled clients. The author explores the implications of the Disabled Rights Movement on the roles of workers and challenges professionals to renew their commitment to social change for "the hidden minority".

Disabled activism. Disabled rights. The terms take some getting used to. Who would have thought a decade ago that disabled Americans would soon be demanding their civil rights as another emerging minority? Who would have admitted a decade ago that disabled persons **have** civil rights apart from those accorded us all? Why now, after thousands of years of pity and after centuries of charity, are disabled persons demanding **equality?** And how, after years of paternalism and occasional exploitation, must the professional community respond?

Federal and local civil rights legislation enacted during the past several years has opened new vistas for disabled persons and has necessitated new roles for the professionals serving them. Today's disabled consumers are no longer content to sit back and let rehabilitation counselors and other agency personnel run their lives, plan their futures, or otherwise make decisions on their behalf. Today's consumers are no longer content to sell pencils on street corners, weave baskets in sheltered workshops, or take jobs beneath their capabilities. Certainly there are many, perhaps too many, who are oblivious to this new liberation movement. Yet millions of disabled Americans are demanding, and getting, greater control over the decisions and conditions affecting their lives.

As disabled persons become politically aware, they realize that their apparent second-class status stems not as much from their own inabilities as from society's inability or unwillingness to accommodate their special needs. The barriers are as much attitudinal as they are architectural, although the prejudice confronting disabled people is far more subtle than the outright bigotry encountered by ethnic minorities in their own liberation struggles. The problem, it seems, is that many able-bodied people find it difficult to regard as equals those whom they have been conditioned to regard as objects of pity. This sentiment has been reflected in public policy which has provided consistently **for** disabled persons while discouraging disabled persons from providing **for themselves.**

The disabled rights movement has mounted a two-pronged attack against both kinds of barriers because the two are interdependent. As improved accessibility integrates greater numbers of disabled persons into society's mainstream, many of the myths will begin to disappear. By the same token, as negative attitudes toward disabled persons are dissolved through public awareness campaigns, society's more progressive elements will demand that the architectural barriers be removed as well. The movement has achieved, thus far, a measurable degree of success in that many barriers have been eliminated; public officials have come to accept disabled persons as a politically significant constituency; meaningful jobs are becoming available in increasing numbers; and media people are beginning to portray disabled characters in ways that will not reinforce negative or stereotypical images.

There is even a "new language of disability" which emphasizes the individual over the disabling condition and which often describes the disabilities in terms of the tasks which can or cannot be performed. For example, people whose visual or manual impairments prevent them from reading books, newspapers, or magazines are termed "print handicapped" and thus become eligible for special library services offering recorded versions of some of this material. Persons who cannot use effectively the buses and subways are termed "transportation handicapped" and, ironically, become eligible for reduced fares on the buses and subways that many cannot use at all. Most mobility-trained blind people are either "cane travellers" or "guide-dog users", and an increasing number of deaf persons either "sign" or "lip read" and are classed accordingly within the deaf community. While many deaf persons are skilled in both techniques and many more remain unskilled in either, each mode has its die-hard adherents and many training institutions have opted for one to the exclusion of the other.

Even the terms "handicapped" and "disabled", once used interchangeably, have come to have different meanings. A handicap is now a limitation placed on an individual by environmental or attitudinal barriers — barriers which can and should be removed. A disability is the mental or physical impairment which might be made more tolerable or less confining through the elimination of the handicap. Paraplegia, for example, is a disability. Not being able to ride to work on a bus is a handicap. Both "handicapped" and "disabled" are now used only as adjectives to modify such words as people, persons, individuals, students, adults, etc., and while we still have agencies serving "the blind", "the deaf", and "the handicapped", some have begun to modify their names in order to reflect this new emphasis on individual identity.

One of the greatest challenges facing today's social worker is that posed by the reluctance of many human services professionals and their agencies to change with the times. As the new militancy confronts the old paternalism, some "old school" institutions and personnel actually find themselves in what seems to be an adversary reltionship with those they are mandated to serve.

Comedian Jerry Lewis, whose annual telethons have raised millions of dollars to combat muscular dystrophy, now must temper his pleas for charity with pleas for dignity and opportunity. A few years ago, United Cerebral Palsy (UCP), found its telethons picketed by many of those who, as children, had hobbled across the stage to the patronizing strains of "Look at

Them, They're Walking. . . ." The demonstrations were discontinued only after UCP agreed to dignify its appeals, eliminate the offending segments, and include disabled persons in the planning for each year's production.

Sheltered workshops run by some of the most prestigious rehabilitation agencies have come under repeated attack for policies and practices which have kept hundreds of otherwise employable clients in dead-end jobs at "salaries" far below the minimum wage. Workers in those shops are beginning to unionize in an effort to change the laws which have enabled many shop operators to exploit, with impunity, those whom they have been mandated to rehabilitate.

Social workers who interface with disabled clients are caught frequently between an unyielding social welfare bureaucracy and a service population whose needs and aspirations have outgrown the services being provided. No longer merely the dispenser of charity, today's social worker must be an ally, an advocate, a catalyst, and often a prime mover in a disabled client's struggle for independence and equal opportunity. An enlightened professional can ignite the spark of political awareness that is often the key to an individual's motivation. A counselor willing to make the effort can alter an individual's family environment from one of discouraging over-protection to one of encouragement and liberation.

Through traditional community organizing skills, a politically knowledgeable worker can form a bond between otherwise disunited members of a disabled population, thus forging a politically active unit eager to confront the problems that draw them together while overlooking the differences that set them apart. The challenge here is to shift each individual's focus away from his or her own shortcomings and toward the inequities of a less than accommodating environment without creating a "cop out" through which one might blame society for what may be a lack of initiative.

Today's social worker must also keep abreast of new laws and programs and the opportunities created by them. Today's social worker must evaluate and re-evaluate continually each client's potential in terms of these constantly changing factors. A decade ago few disabled persons could obtain a license to teach. Today we find increasing numbers of disabled persons not only in the upper echelons of academia, but in industry, government, and the professions.

But encouragement in the light of new opportunities also entails a degree of restraint and the ability to distinguish between what should be and what is. Civil rights laws, after all, are only as effective as the mechanisms created for their enforcement, and enforcement is often a long and arduous process with uncertain results. Agency rule-making and federal court decisions have taken some steam out of major Congressional enactments. Government regulators, as well as private sector employers, have yet to agree on what constitutes "reasonable accommodation", the degree to which a job or job-site must be modified to meet a disabled worker's special needs.

Critics of federally mandated mainstreaming argue that accommodations and modifications in schools, colleges, transportation facilities, and public buildings are just too expensive and would divert funds from more vital programs and services affecting greater numbers of people. Civil rights activists counter that these expenditures would be recouped many times over through reductions in the income maintenance rolls and through revenues and purchasing power of disabled persons who are tax-paying workers and consumers.

While many officials and institutions share this view and have eagerly complied with accessibility guidelines, others have resisted steadfastly and have gone to court. A recent Supreme Court ruling barring a deaf woman from a college nursing program has been viewed as a major setback for disabled rights. But the loss here may be more in principle than in law, because the narrowly applied decision has not closed the door to similar actions and has had little effect on the law itself.

Yet, while such setbacks pose new challenges, they often prove discouraging to those whose years of institutional contacts have taught them "not to make waves" and who have been watching patiently from the sidelines for a sign that they too have rights worth asserting. For these individuals, who far outnumber the activists, a counselor's enlightened support can mean the difference between rising to meet these new challenges or quietly accepting a seemingly inevitable defeat.

We've come so far, yet we've so far to go. It's ironic, that more than a generation after Franklin Roosevelt and Helen Keller, forty million disabled Americans still must do battle for equal opportunity, architectural accessibility, and even for the modicum of dignity to which we all are entitled. It's absurd that more than fifteen years after we outlawed "the back of the bus", many disabled people can't even get **on** the bus. And it's a blatant injustice that, while some disabled persons have managed to become educated and gainfully employed, many others with similar abilities or potential continue to make brooms for $1.85 an hour.

Today's social worker holds a key position in the struggle against apathy, prejudice, and a status quo that has relegated disabled persons to second-class citizenship. We can become change agents for improving the delivery of human services, or we can become another layer in a social welfare bureaucracy that has failed to deliver. We can serve as the inspiration behind a disabled person's success, or become another obstacle to the fulfillment of his or her true potential. We can help disabled persons free themselves from lives of dependence, or we can bury them in programs that prevent or discourage true independence.

How we help our disabled clients today will determine how they help themselves and society tomorrow. If we all work hard, really hard, we might just live to see the reality of social justice for which many of us have been fighting and which, despite our advances, remains long overdue.

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Section 504: Opportunity or Impediment?

by
D. Virginia Roberts

The author explains the provisions of Section 504 of Title V of the Vocational Rehabilitation Act of 1973 prohibiting discrimination on the basis of handicap in programs and activities receiving or benefiting from federal financial assistance. She explores the implications for employers and argues that reasonable accommodation promises benefits for the community as well as disabled persons.

Many people are not yet familiar with Section 504. Some disabled people have never heard of it and have no idea of the implications it has for their lives. Many professional people are aware of it and are excited about the opportunities that it offers. Others view it with suspicion, skepticism, and distaste and see it as yet another encroachment of the Federal government into the operations of state and local agencies. Many contractors and local education units are only just beginning to be aware of Section 504 and have questions about what bearing it will have on their programs and activities.

In dry technical terms, Section 504 is that provision in Title V of the Vocational Rehabilitation Act of 1973 that prohibits discrimination on the basis of handicap in programs and activities receiving or benefiting from Federal financial assistance. The law provides that "no otherwise qualified handicapped individual . . . shall, solely by reason of his handicap, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance."

A simple recitation of the words does not convey the human meaning of Section 504. Provisions that may be viewed by a recipient of Federal funds as a bothersome imposition, can be seen by a disabled person as an invitation to hope. People with disabilities are becoming increasingly assertive about their rights and see Section 504 as a means of restraining the influence of centuries of tradition that has held that there is a qualitative difference between the nondisabled and the disabled.

These differing views give rise to many questions, some of which can only be answered in the courts and with further clarification of congressional intent. Whatever parameters are finally developed for implementation of nondiscrimination and affirmative action for the handicapped, it is almost certain that disabled persons will enjoy civil rights and have a social visability and status unknown to previous generations.

Employment is one area in which Section 504 has a heavy impact. Currently, over $100 billion a year is being spent on dependency among disabled people. This amount is made up of monies spent in various welfare programs, Supplemental Security Income, and Social Security Disability Income. A change in discriminatory employment practices, along with the removal of environmental barriers and legislatively created work disincentives, could significantly reduce that mammoth figure.

Subpart B of the Department of Health, Education and Welfare (HEW) regulation implementing Section 504 deals with employment. There are a number of pamphlets, brochures, and articles available that summarize the requirements of the Section 504 regulations. These are available from sources such as HEW's Office for Civil Rights, the President's Committee on Employment for the Handicapped, Mainstream, Inc., and the National Center for Law and the Handicapped. In addition, HEW is establishing a technical assistance unit to give information and advice to recipients of Federal funds subject to Section 504.

It will suffice here merely to mention some of the more outstanding aspects of the regulation affecting employment and then to concentrate on discussing some of the problems of implementation.

Employment Provisions of Section 504

First, Section 504 nondiscrimination requirements pertaining to employment include all employment-related activities. Some examples are recruitment and advertising, hiring and promotion, demotion, termination and rehiring, rates of pay and any other form of compensation, job assignments, leave, fringe benefits, training and apprenticeships, and employer-sponsored activities including social or recreational programs. Next, employers subject to Section 504 are forbidden to have contractual or other relationships, such as with unions or employment agencies, that indirectly discriminate against qualified handicapped applicants.

Third, the regulation requires that recipients of Federal financial assistance make reasonable accommodation to the known physical or mental limitations of qualified handicapped applicants or employees. This reasonable accommodation requirement is central to the implementation of Section 504 in regard to employment and has its counterparts in other sections of the regulation. The regulation specifically forbids denying a qualified applicant employment if the denial is based on the need to make reasonable accommodation to that qualified handicapped persons's physical or mental limitations.

Fourth, the regulation forbids the use of employment tests or screening criteria that screen out or tend to screen out handicapped persons. The recipient of Federal financial assistance must select and administer employment tests so as to insure that the results accurately reflect the applicant's job skill or aptitude rather than merely reflecting impaired manual, speaking, or sensory skills.

Finally, the regulation forbids, except under special circumstances, making preemployment inquiries about whether an applicant has a disability or the extent of that disability. Inquiry must be directed solely toward the ability of the applicant to do the essential functions of the job in question.

Problems in Implementation

There are a number of hindrances to achieving adequate implementation of Section 504. The problems can be categorized to some extent into physical problems, financial problems, informational problems, attitudinal problems, and conceptual problems. The most difficult to resolve are the atti-

tudinal and conceptual problems. This discussion will concern only those.

Without a growing acceptance of persons with disabilities and without a growing understanding and acceptance of the concepts underlying the law, compliance with Section 504 will move ahead very slowly. While the law cannot dictate private morality or directly change attitudes, it can change particular behaviors and, thus, affect attitudes. Attitudinal change is essential if anything more than superficial compliance with the letter of the law is to be achieved. It comes slowly, however, and often follows behavioral changes.

Although a variety of attitudes may be present in a group of people at a given time, the behavior of the individuals may be quite similar because of the influence of social pressure. For example, the author, who is considered severely disabled and who uses an electric wheelchair for mobility, graduated from a school of social work in 1967. In my search for employment, I contacted a large number of social service agencies both in Texas and in other states. Since I was a product of my times and conditioned to understand that my physical limitations constituted a burden to all of society and a legitimate basis for rejection, I carefully (though I hoped with an air of cheerfulness and confidence) explained my physical limitations to each potential employer. I saved most of the replies to my inquiries, and I happened to come across them and reviewed them just within the past year. It is interesting to note the variety of attitudes expressed in the replies.

These replies from the potential employers fell into roughly four categories. First, there were those who said either tersely or circuitously "No we can't employ you; you are handicapped." Second, there were those who said, "No we can't employ you; our facilities program, etc. are inaccessible to a handicapped person." Third, "We doubt that we can employ you, but we will be willing to consider it if you overcome x, y, z, obstacles." Fourth, "We are interested in employing you. However, your disability poses certain problems that we do not know how to overcome. If you can help us resolve these problems, we would be happy to consider you further." Category four was by far the smallest. For that day and time, employers in category four represented a very progressive and enlightened view of employment for the disabled.

Whatever the shade of opinion, the outcome was basically the same. Few agencies tendered an offer of employment, apparently for reasons pertaining to my disability. Had they considered my application in greater depth, they might still have chosen not to hire me but for other reasons. We shall never know.

There are a number of very common stereotypes that are attached to persons with disabilities in our culture. Some of these follow:

People with disabilities are one dimensional; they are either sweet and grateful or bitter and hateful.

Disabled people have nothing to give; they can only receive and must live as parasites on their families and society.

Disabled people are entitled to pity.

Disabled individuals must be protected from any form of risk or disappointment.

Disabled people are nonsexual.

Disabled individuals who succeed by normal standards are superhuman.

All of these stereotypes reduce a handicapped person's chances of being employed and can affect the relationships that he or she can experience if employment is secured. These stereotypes have the same degree of validity as other stereotypes about other groups of people. Just as there are blacks with no "natural sense of rhythm," Chicano males who do not fit the "macho" stereotype, and women who are intelligent as well as beautiful, there are people with disabilities who are complex in their psychological makeup, who have much to give to family, friends, and society, who despise pity and refuse smothering protection, who lead satisfying sexual lives, and who, given a reasonable opportunity to do so, will use their abilities to succeed at jobs that need to be done.

With the increasing emphasis on employing handicapped persons, a number of myths concerning employment of the handicapped have been defined. Some of these myths are that handicapped workers are more likely to have accidents than other employees; that an employer's Workmen's Compensation insurance rates will rise if he hires handicapped workers; that insurance companies won't let handicapped workers be hired; that there is a higher absentee rate among handicapped workers; that handicapped workers are not highly motivated; that handicapped workers are a bad influence on other workers; and that handicapped workers do work of a lower quality than nonhandicapped workers. Information disputing these myths is readily available from sources such as the President's Committee for Employment of the Handicapped, local vocational rehabilitation agencies and other public service agencies. Studies and surveys done by the U.S. Department of Labor and firms such as DuPont, Bulova Watch, Sears-Roebuck, Hughes Aircraft and other private and nonprofit organizations that hire handicapped workers also refute these myths.

Data from these studies has been widely used in training programs to encourage employers to utilize handicapped employees. The information has become so widespread in fact that it seems important to note that although the facts given are statistically true, persons with disabilities are fully human and are not saintly by virtue of their disability. They sometimes have unpleasant personalities and bad work habits as do nondisabled persons. Therefore, it is important for employers who get a "lemon" not to despair and think that any handicapped person they hire will be a poor performer.

Apart from the attitudinal factors that may hinder employers' willingness or creativeness in complying with Section 504, there are some conceptual issues that, while related to underlying attitudes, are possible to define and important to discuss separately. First, Section 504 of the Rehabilitation Act of 1973 is civil rights legislation even though it was placed in the Rehabilitation Act, which basically has been concerned with the establishment and funding of rehabilitation programs for disabled people. The legislative history of Title V, which includes Section 504, reveals this legislative intent very clearly.

Section 501 and 503 of Title V of the Rehabilitation Act both have affirmative action requirements. Section 502 of Title V creates the Architectural and Transportation Barriers Compliance Board, which is an enforcement agency for the Architectural Barriers Act of 1968, an act designed to insure that Federal buildings and buildings constructed with Federal funds be readily accessible to and usable by handicapped persons. Section 505 was added to Title V in the Rehabilitation Act Amendments of 1978. It provides for attorney's fees to the prevailing party in proceedings to enforce the provisions of Title

V. This amendment has important ramifications because it makes it easier for private persons to bring suits alleging discrimination on the basis of handicap. Comments by members of the Congress and the record of subcommittee reports and conference committee reports indicate that Title V, including Section 504, was intended by Congress as legislation guaranteeing the civil rights of persons with disabilities.

It is important to recognize this fact because to do otherwise may lead to unnecessary and peculiar compliance efforts. This is particularly true in the area of employment. Potential employers who erroneously see Section 504 as an extension of rehabilitation training concepts are likely to believe they have some obligation to provide rehabilitation or social services to the handicapped employee. This belief, coupled with the discomfort that arises from being ill-equipped to provide such services and knowledge that such services are not appropriately given by their organizations, may lead employers to reject the whole concept of employing persons with disabilities. Such reactions, though based on unwarranted fears would be understandable.

Section 504 of the Rehabilitation Act of 1973 does not require that all recipients of Federal financial assistance mutate into rehabilitation or social service agencies that provide training or support services for handicapped employees. It does require that employers, whether or not they hold equal employment opportunity as personal convictions, adjust employment practices in whatever manner necessary to insure that persons with disabilities are given equal opportunity for employment.

Thus, when employers have job openings in their organizations, they need to take steps to insure that handicapped persons can receive effective notice about the opening, can apply, and can receive fair and full consideration based on their qualifications and their abilities to perform the essential functions of the job. This implies that at least the personnel office must be accessible to persons with physical and communication limitaitons.

Potential employers are completely free from considering issues not related to the job, such as how the handicapped applicant would get to work, whether the handicapped applicant lives alone or with someone else, whether the handicapped applicant has friends and relatives in the city who could be called upon in emergency situations, whether the handicapped applicant has friends and a satisfying social and sexual life, whether the handicapped applicant may have to use annual or sick leave for purposes related to his or her disability, and so forth. Employers need to focus only on job-related issues and must be prepared to make reasonable accommodation where necessary.

Employers must be prepared to make available to the handicapped employee opportunities to participate in and benefit from anything that is normally available to other employees of the organization. For instance, employers need not be concerned about the handicapped applicant's living arrangements unless the organization normally makes housing available to its employees. In that case, employers need to provide housing accessible and usable for the disabled employee also. Where organizations operate employee cafeterias or recreation programs, employers need to be certain that those facilities and programs are available to the disabled employee.

"In order to be considered reasonable, the accommodation must be job related, effective, and not require the hiring of a second person who can perform all the functions of the job in question."

Employers need not provide transportation for employees with disabilities unless they do this for other employees; they are not obligated to provide counseling services for employees with disabilities if they do not provide such services to all other employees, ad infinitum.

Section 504 deals with the rights of persons with disabilities to take part in what exists. It is not a license for the disabled to demand that the world and all that is in it be restructured into a sort of womb where all the needs of the disabled person are met without any effort on the part of that person. Section 504, in granting equal employment opportunity rights to disabled persons, places a responsibility on disabled persons. That responsibility is to do the job for which one is hired.

Another concept that is necessary for the employer to grasp is the concept of "reasonable accommodation." It is unfortunate that while the understanding of this concept is essential, there is very little written or unwritten guidance that can be given at present in order to determine what is "reasonable accommodation." The regulation states that reasonable accommodation may include making facilities used by employees readily accessible to and usable by handicapped persons, job restructuring, part-time or modified work schedules, acquisition or modification of equipment or devices, the provision of readers or interpreters, and other similar actions. In order to be considered reasonable, the accommodation must be job related, effective, and not require the hiring of a second person who can perform all the functions of the job in question.

Recipients of Federal financial assistance are excused from making accommodation only in instances where the recipient can demonstrate that the accommodation would impose an undue hardship on the operation of its program. Factors that the enforcement agency would take into consideration in ruling on whether an accommodation would impose an undue hardship include the size of the recipient's program with respect to the number of employees, number and type of facilities, size of the budget, type of operation, including the composition and structure of the recipient's work force, and the nature and cost of the accommodation needed.

An unspoken but salient question in the minds of many employers would be whether any accommodation is reasonable. Why should an employer hire someone for whom an accommodation may be necessary if he can hire someone for whom an accommodation is not necessary? Is it not easier and less expensive to simply hire the applicant who appears to be able to do the job and who would not create any disturbance in routines or procedures either at the time of hiring or at any time in the future? Why not keep doing things the way we have always done them?

The answer is simple. If employers continue as they always have, they will be doing a great disservice to everyone concerned. Organizations will suffer because employers may not hire the most qualified person for a job because that person happened to be handicapped. The nation will suffer because thousands of clients will be added systematically to the already bloated and overburdened welfare system. These are persons who, given equal opportu-

nity to employment, could become tax payers instead of tax users. In addition, the nation is harmed through the existence of a patently inequitable situation that flaunts the very concepts of equality and justice upon which the nation was founded. We do serious disservice to the handicapped person seeking employment by arbitrarily discounting his or her productive ability and by encouraging isolation and dependence.

One reason that it is so hard to grasp the concept of reasonable accommodation is that it is a subconscious ideal that everyone longs for and few feel is granted to them. Who hasn't wanted to be recognized for exactly what he or she is and accepted anyway? Who hasn't desired to have his or her limitations acknowledged but not be disqualified in other areas because of them? Why should one set of people be given what everybody wants and nobody gets?

These feelings can lead to a perception of the requests of disabled persons as being demands for special treatment rather than demands for equal opportunity. For example, one reasonable accommodation that is very common and easily achieved is the designation of parking for handicapped persons near an accessible entrance to a building. Many people feel that they too would like to have parking designated for them at the entrance of a building and see no reason why a person in a wheelchair would need that parking reserved. "After all," they might argue, "it is not any harder to ride in a wheelchair than it is to walk! And after all, am I not just as valuable perhaps more valuable, than that other employee? Even the boss does not have a parking space designated for him; why should that individual have a parking space designated?" These thoughts, which may flit through the mind of an individual and be hastily squashed by feelings of guilt over not wanting to grant special privileges to an obviously underprivileged and pathetic individual, are generally not voiced. However, it is obvious from the behavior of the public, who frequently ignores the **Reserved-for-Handicapped** parking sign and may sneer and argue with the disabled challenging their right to use it, that there is little perception of need and no agreement that accommodation is reasonable.

The irate able-bodied person challenged for misusing the designated parking space will never be convinced that special privileges are not being granted to handicapped people until he or she is informed, understands the reasons for designated parking, and can overcome unnecessary and debilitating pity and fear of disabled persons. This example is chosen for its simplicity. There are many other situations in which employers and co-workers of disabled persons might feel that disabled persons are receiving special treatment when they are granted what under the law is reasonable accommodation.

Other potentially controversial examples of accommodation are granting a disabled person intermittent rest periods during the day, arranging for a disabled person to have flexible working hours, assigning a disabled person a secretary to meet certain needs associated with his or her disability such as taping material for a blind worker, interpreting for a deaf worker, typing and manipulating materials for a manually impaired individual. The factor that makes these actions reasonable accommodation and not special treatment is the real need of the employee. With this treatment the employee can perform the essential functions of the job, and without it he or she will not be employed. The same treatment given to an individual who does not need it would constitute special treatment rather than reasonable accommodation. Reasonable accommodation to a disabled individual should not in any way alter the standard of performance expected of the disabled employee.

Employers need to admit that selecting employees is a rather risky and imprecise art. In fact, employers select employees everyday who do not have visible impairments or history of impairments of the kind that would be covered under Section 504 but who do not live up to the hopes of the employer. Most realistic employers recognize that even their best applicants will have deficiencies in some area, and will plan a program of experience and on-the-job training that will enable the employee to overcome the deficiencies. The same attitude needs to be taken toward disabled employees. They will not be perfect, they will have deficiencies in some areas, but those deficiencies can be addressed through on-the-job training and experience.

It is the responsibility of any recipient of Federal financial assistance to study carefully the regulations implementing Section 504. Taking advantage of explanatory material published by the Office for Civil Rights and utilizing technical assistance that is available from HEW directly or through various contract sources, most employers operating in good faith will avoid any serious, irreparable conflict with the requirements of Section 504. In general, the employer need only ask one question: "Would I hire this person if he or she did not have a disability?" If the answer is "yes," implying that the person has the basic qualifications needed to perform the job, then it must be determined whether any accommodation to the person's disability is needed. If some accommodation is needed, the applicant and employer together will decide what is needed and how it can be secured. The disabled person can be a great ally and consultant in determining what is really needed. Most disabled people will ask for the bare minimum that will enable them to work effectively. Because they cope with their disability twenty-four hours a day, they often have the best, most creative ideas about how to solve problems inexpensively.

Like the proverbial difference between viewing a glass half empty or half full, employers and administrators can view the nondiscrimination requirements of Section 504 as an opportunity or an impediment. Those who accept the challenge of trying to create a more just system will be richly rewarded with more than good warm feelings. They will realize the pragmatic benefits of discovering and fully developing an untapped resource.

Ms. Roberts is the former Coordinator of the Handicapped Access Program for the Texas Department of Human Resources and is presently the Administrative Assistant for Handicapped Affairs in the Office of the Governor. She has a masters degree in social work from the University of Texas at Austin and is a member of the Academy of Certified Social Workers. Ms. Roberts is active as a consumer in handicapped advocacy organizations. She serves as president of a local organization and is a founder and board member of a statewide coalition of organizations of disabled persons.

Access for All in San Antonio

by
Judy Babbitt

San Antonio's efforts to comply with the letter and spirit of the Rehabilitation Act are coordinated through an innovative program which brings community agencies and city government together on behalf of citizens with disabilities. Using systems approaches to problems of accessibility has had benefits for all concerned.

With the hoopla that the Rehabilitation Act of 1973 has generated, there are common questions that many citizens and public servants are asking: "What is this Act? How does it effect me and my community?"

Basically, the Act guarantees the civil rights of handicapped citizens. The emphasis is placed on Section 504 of the Act, encouraging handicapped people through the legal process to resist discrimination against them because of their handicap. Section 504 also compels public agencies using any federal funding to make their programs accessible to the handicapped. This means making available to handicapped citizens the same opportunities available to the population as a whole.

With the Rehabilitation Act of 1973 acting as the backdrop, the city of San Antonio conceived, developed and is implementing the Handicapped Access Program. Thomas E. Huebner, San Antonio's City Manager, was instrumental in developing the program model and the City Council has supported his recommendations as the program is implemented. Their intent is to ensure that the city complies with both the letter and the spirit of the Rehabilitation Act, assuring all its programs and services are accessible to the handicapped, as well as to the non-disabled.

There are four basic program components, each having several far-reaching objectives. The first component, "Education and Training", includes an extensive library of materials which is gathered, analyzed and developed for distribution to various agencies, city departments and the general public. Lists of resources available to the handicapped are continuously updated and made available to individuals and organizations. The library also covers current information on legal issues and court decisions, and retains a synopsis of Texas Laws affecting the handicapped.

Education of non-handicapped citizens on the problems and needs of the disabled is an important facet of Component I. In July 1977, a "Plain-Talk" brochure was published by the Handicapped Access Office explaining in simple terms what the program is all about. The brochure is easily read by school children as well as adults. The Handicapped Access staff places a high value on teaching children to understand that handicapped persons have similarities to all people that override their physical differences.

The second component, "Monitoring", provides for technical assistance to facilitate the inclusion of handicapped persons in activities designed for able-bodied consumers. One of the first undertakings of the Handicapped Access Office was a reexamination and restatement of San Antonio's Affirmative Action Plan for employment and promotion. Also under this component, the city's Fair Housing and Public Accommodation Ordinance was revised to cover handicapped participation and guidelines were developed for low-cost home modification for disabled residents.

The main objective of the third component, "Administrative Activities", is to act as liaison among consumers, service-providers and organizations in both the private and public sectors. In May 1978, the Handicapped Access Office and its Advisory Committee prepared and distributed an "Access Checklist" to one thousand local businesses along with a letter encouraging business owners to consider the handicapped as a large group of potential patrons. Managers and developers have come to the Handicapped Access Office for assistance in modifying shopping centers and stores for handicapped convenience.

Finally, the fourth component, "Establishing a System for Problem-Solving and Follow-Up", has as its sole objective the solution of mobility problems. After only one year in existence, the Handicapped Access Office had surveyed two hundred city buildings and properties for physical access problems and made plans to correct them on a priority-of-use basis. In that same year, ramps and reserved parking spaces were constructed at both City Hall buildings. A five-year plan to modify all city facilities is under way. In addition, a survey has been conducted of the more than two hundred polling places throughout the city which are used for several elections each year. Survey questions referred specifically to the trip a handicapped person must make from the parking area to the voting booth. At present, handicapped people may not vote in any precinct but their own, although they may make special arrangements to vote downtown at City Hall. Often, very slight modifications would allow handicapped people to vote in their own precincts. The survey results found fifty-four accessible precincts. These will be published in local newspapers before each election.

Overall, the program utilizes a comprehensive approach in addressing all parts of the urban system that directly or indirectly affect the handicapped population. This encompasses transportation, housing and land use among others. Believing that neglecting one aspect of a problem or concentrating on only one area at a time results in piecemeal solutions, San Antonio considers and addresses relationships among the environmental components as a total system.

Implementation on a one-year pilot basis began in June 1977 with the creation of the San Antonio Handicapped Access Program as the focal point for city compliance efforts. In addition, within the existing city structure, "contact" persons were identified within each of the twenty-seven city departments. These persons then became the Handicapped Access Program representatives of their respective departments. This relationship allows each department the flexibility to tailor its unique functions and services to meet the needs of the handicapped. With the Handicapped Access Office acting as a catalyst and clearinghouse for information pertaining to the handicapped, it becomes the partner of city depart-

ments by offering the assistance any department needs in securing a particular access goal or objective.

An example of this partnership is the survey of city facilities, carried out to determine which facilities required modification to accommodate handicapped people. The program staff coordinated the effort, but each department did the survey for all facilities it administered. Over two hundred surveys were completed. The results were compiled and analyzed, and a report was prepared by the access staff. They then worked with handicapped citizens to decide which facilities should be modified first. The final product is a plan to accomplish all modifications within a five-year period at a total cost of $1,000,000.

Having a small staff able to provide resources and technical assistance and having the freedom to move among departments has helped avoid having to establish a full program for compliance, with all its associated paper work, within each department. The access staff becomes both an advocate for the departments and for the citizens of the community who happen to be disabled. Indeed disabled persons work with the city continually to develop, review and modify any program for accessibility. Disabled persons are specialized experts, and their early inclusion in the planning stages as well as involvement in the implementation stages has given major guidance to the total city access effort.

Rapport with community agencies has been excellent. The city of San Antonio's expertise in interpreting the requirements of the Rehabilitation Act and the location of the Handicapped Access Office in the Citizen Action and Public Information Department of the city government has established the program's credibility and viability.

During the pilot year, three members of the Planning Department were used to develop and refine the program. At the conclusion of the pilot phase in June 1978, an additional Planner and an Administrative Assistant were added. Volunteers, interns and work-study students assist the professional staff as needed. The size and cohesiveness of the Handicapped Access Office has allowed the program to become very responsive to the continually changing access laws and regulations.

San Antonio's effort is unique among cities in the United States in attempting to integrate the handicapped into the daily functions of community life by working through existing city functions and services as much as possible.

In summary, the San Antonio Handicapped Access Program as it has evolved is versatile and comprehensive. The model and its methodology are transferable and applicable to other communities and large administrative agencies.

Judy Babbitt is the Coordinator of the Handicapped Access Program in San Antonio, Texas. She has been a Planner with the city of San Antonio since 1972.

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Social Change Through Self-Help

by
Bruce Curtis

The author reviews the history of legalized dependency and ostracism of persons with disabilities. He cites examples of this legacy of social control in the present day, but describes as well one organization's attempts to change the status quo.

People who have severe disabilities have lived under centuries of legalized dependency and ostracism. Despite laws strengthening society's commitment to disabled people, discrimination in the community didn't really end. This discrimination continued because oppressive changes were introduced to limit society's obligations and the few progressive changes that were introduced were never supported financially. It has become obvious that institutional prejudice will not be overcome by good intentioned but uncoordinated and financially unsupported changes.

People with disabilities have a long history of forced dependency. In 1504 King Henry legally authorized the disabled to beg without fear of punishment. The English Poor Laws of 1601 mandated that the primary responsibility for care of disabled people was with their families. If the family couldn't or wouldn't provide adequate care, then a disabled person would go to live in an almshouse. In the late 1700's and early 1800's, almshouses became very popular throughout the states for disabled people and the poor. Due to their lack of money and a generally custodial attitude by society, people with different disabilities were grouped together in these institutions. In most states institutions for disabled people still exist, although there are often different buildings for people with different disabilities. The filthy and dehumanizing conditions of 250 years still exists in many of these present day institutions because of the same attitudes and lack of fiscal support.

Legal and physical control over the lives of disabled persons was, and often still is, a reality. In some cities, ordinances of long standing prohibit the appearance in a public place of any person who is "diseased, maimed, mutilated or in any way deformed so as to be an unsightly, or disgusting object."

The Immigration and Naturalization Service can still deny a permanent visa to an immigrant or a member of their family who has a physical defect, disease or disability. People who are deaf, under old common law could not be witnesses or make a contract or a will, due to an assumption of incompetancy. They still cannot serve on a jury in some states and cities.

Sterilization of criminals, people who are epileptic, or mentally ill, and the poor became popular around 1910. The alternative for the mentally and physically disabled was life-long segregation in custodial institutions. By 1937, twenty-eight states had laws allowing the sterilization of "defective" human beings in order to reduce the genetic possibility of more disabled people.

People with disabilities, especially people who are mentally retarded, are thought of as non-sexual because to recognize their sexuality is to recognize their common humanity, and therefore their human rights. People who are mentally retarded are, in many states, being legally sterilized by their parents with the help of courts empowered through legislation.

With these centuries, perhaps millenia, of prejudice and oppression, society has made the institutional nature of dependency for the disabled seem inescapable. Many disabled people can only work in sheltered workshops and often at less than one-half the minimum wage. Many physically disabled people cannot travel on commercial transportation without submitting to patronizing assistance or inconvenient regulations that vary from company to company. Public subsidies for personal care assistants who would make it possible for disabled persons to maintain their own homes is not available. There have been numerous cases of parents who are disabled, having their children taken from them because the child would not be raised in a "normal" environment. In divorce proceedings between a disabled and a non-disabled parent, custody has been awarded to the non-disabled parent based on a prejudicial concept of normality.

It is under this kind of basic denial of human and civil rights that disabled people existed with little or no services. What services were provided were full of bureaucratic red tape and regulations that kept us dependent. A lack of coordination of available services contributed to this vicious cycle of dependency. In an effort to change the status quo, people with disabilities organized the Center for Independent Living (CIL) at Berkeley, California in 1972. Its purpose is to protect the civil rights of disabled people, to change the physical and attitudinal environment, and to enable us to live independently in an integrated community. (See Frieden and Richards, "Program Models and Client Needs: Three Practical Applications" in this issue.)

These goals are achieved through the development and coordination of services planned by disabled persons to serve all disabilities through a broadly conceived advocacy program which includes the Disability Law Resource Center, and through consultants in the areas of federal and state regulations, accessibility standards, program planning and education. In addition CIL sponsors a wheelchair repair shop and a machine and automotive shop where vans and automobiles can be modified for use by consumers.

The CIL is not a residential facility where disabled people come to live and have all their needs met. It is not a transitional facility where a person might live until he or she can learn the skills necessary to live alone in the community. The focus of residential models is on the provision of care for a relatively small number of persons and does not reflect CIL's commitment to social and environmental change in the community.

We believe advocacy at all levels is needed if the accumulated barriers - physical, attitudinal and legal - are to be eliminated. CIL has begun the task in many areas through consciousness raising and lobbying for new laws that are enforceable and financially supported. Some accessible housing is being constructed, but the law mandating accessible housing is not always enforced. Transportation sys-

tems are buying accessible buses but not in all cities and often not without a court fight. Sign Language Interpreters for the deaf are now being scheduled for some public meetings but when it is assumed people who are deaf or hard of hearing are not capable of contributing, they are excluded from participation in their community activities. Some T.V. networks are agreeing to caption some of their programs, but there isn't agreement among the major networks on which technology to use. Roles for disabled persons in movies and television are still portrayed by non-disabled actors and actresses by the same reasoning that justified white actors performing in black face. People who are mentally retarded are being deinstitutionalized by legislative action but citizens fearful of decreasing property values don't want them living in halfway houses next door.

The Center for Independent Living is actively trying to make changes around issues like these in our society. Similar centers exist or are being developed in Michigan, Massachusetts, New York, Texas, Missouri, Arkansas and Kansas. More are planned. The passage of the Rehabilitation Act Amendments of 1978 which authorized money for the development of such centers will stimulate the creation of still more.

"We will not accept laws without teeth to enforce them or enough money to implement them."

We know integration and independence in the community is possible for people who are severly disabled. Through the Center for Independent Living and other centers like it, people with disabilities have found the power of unified action. We have begun to take control of our own lives. We have issued a challenge to the centuries of fear and prejudice by those who are temporarily able-bodied. We will not accept laws without teeth to enforce them or enough money to implement them. We don't accept the argument that the cost of implementing our civil rights as a legitimate objection to our integration into society. We will not be hidden away in institutions anymore. We will not be second-class citizens, partonized by good-intentioned professionals.

We have found our power because we are your brothers and sisters and mothers and fathers. We are part of your future.

Bruce Curtis is the founder and former Director of the Center for Independent Living in Pasadena, California and is presently with the Center for Independent Living in Berkeley, California. He is the Vice-President of the California Coalition of Persons with Disabilities and is an activist in the civil rights movement for disabled persons.

Education for All Handicapped Children *cont. from p. 15*

The last major goal of the act is the assessment and assurance of effective implementation. The BEH has formulated a long-term evaluation program which will address the diverse needs of the different audiences, document change, identify obstacles to implementation and highlight superior practices. Through the provision of technical assistance, the dissemination of reports and research findings, the BEH attempts to meet the continuing information needs of the field. In addition, Program Administration Reviews (PAR's) will be conducted once every two years in each state. The PAR's will provide a means of gauging compliance and giving technical assistance to state education agencies when there are procedural inadequacies in implementation.

In summary, the basic goals of the Education for All Handicapped Children Act are very sound, but they must be followed as they were intended or a free and appropriate public education will not be achieved for handicapped students. The first year of implementation has pointed up some problems in realization of its major goals, problems which will require energy, inspiration and dollars to eliminate.

Julie Carroll is a second-year student at the Graduate School of Social Work, The University of Texas at Arlington, where she has concentrated in administration and planning. Her prior experience has been in individual and group counseling.

Education for All Handicapped Children

by
Julie Carroll

In 1975 Congress passed Public Law 94-142 which mandated that by September 1, 1978 all school-aged handicapped students be assured a "free appropriate public education". After one full school year it is evident there are problems with the implementation of the law.

In 1974, Congress became aware that more than half of the handicapped students in the United States were not receiving the kind of educational services which would enable them to have full equality of opportunity. It also was discovered that many handicapped children were not receiving any special educational services at all.

In November 1975, Congress passed the Education for All Handicapped Children Act (Public Law 94-142) which mandated that by September 1, 1978 all school-aged handicapped students in the United States be assured a "free appropriate public education".

"Handicapped children", as defined by the P.L. 94-142 regulations, refers to those children who are evaluated in accordance with procedures specified in the regulations and who, as a result, are found to be mentally retarded, hard-of-hearing, deaf, speech impaired, visually handicapped, seriously emotionally handicapped, orthopedically impaired, deaf-blind, multi-handicapped, other health impaired or specific learning disabled, and are in need of special education or related services.

In their annual report to Congress titled, "Progress Toward a Free Appropriate Public Education", the Bureau of Education for the Handicapped (BEH) discussed the act and the progress of implementation.

It stated that congress enacted P.L. 94-142 to accomplish four (4) far-reaching goals:

- to assure that all handicapped students have a free, appropriate public education which is suited to their unique needs;
- to assure that the rights of handicapped students and their parents or guardians are met and protected;
- to assist financially states and localities to provide for the free, appropriate education for all handicapped students, and
- to uphold accountability by assessing and assuring the effectiveness of the efforts to educate the handicapped students.

A number of processes mandated by the act require public schools to ensure that handicapped students receive the appropriate education to which they are entitled. For example, specialists are required to evaluate each student's special needs and to determine the most appropriate educational environment. The result must be an individualized education program (IEP) developed for each student who is identified as needing special education or any related services. Upon the identification of handicapped students, the schools are required to notify parents or guardians of the findings and include them in the process of decision-making. The parents' or guardians' right to due process is protected by the opportunity for a hearing if they are dissatisfied with the school's decision.

Since the intent of the law was to provide educational opportunities in the least restrictive environments, another mandate of the act calls for the participation of handicapped students in regular classrooms wherever possible and appropriate to their special needs. This provision is intended to encourage the education of handicapped students with nonhandicapped students and to discourage the automatic segregation of these children on the basis of their disability alone.

After one full school year of implementation, it is evident that there are problems with the achievement of the first major goal: providing an individualized education program for handicapped students. Difficulty in identifying handicapped students has resulted in less than full meeting of needs. In addition, the IEP has come up against strong resistance from some teachers due to increased paperwork demands. It has been found that some IEP's were incomplete or not properly filled out. It also has been found that certain areas of the country have been slow to integrate handicapped students into regular classrooms. The concept of least restrictive environments is not practicable without appropriate support staff or without the full understanding and cooperation of classroom teachers and administrators.

The second major goal concerning the rights of handicapped students specifies certain procedures to be followed by parents or guardians and school districts when disputes arise. The procedures are, (1) notifying parents or guardians of any change in the educational placement of their child; (2) providing parents or guardians an "impartial due process hearing"; (3) allowing access to all relevant school records; (4) providing parents or guardians the option of independent evaluation; and (5) enabling parents or guardians to appeal to the state education agency or Federal courts if they are not satisfied with due process procedures at the local level.

A great problem is that many school systems use formal due process hearings without involving parents or guardians prior to making a decision regarding educational placement. Formal hearings generally reflect the adversary positions of schools and parents and do not provide the opportunity for parents and teachers to work out conflicts together as partners. Inequality is also an issue here since school systems are represented by legal counsel, but many parents, especially the disadvantaged or minorities, cannot afford to have legal counsel.

The third important goal is financial assistance to the states. The funds from P.L. 94-142 are added to the funds already allocated for special education by the state and local agencies. These monies are to be utilized for additional services to students already being served as well as for newly identified handicapped students. An additional incentive grant of up to $300 per student is awarded for any handicapped child served between the ages of 3 and 5. This financial assistance was meant to stimulate services for the preschool age group. Unfortunately, states report that even with funding from P.L. 94-142 costs of effective special education programs are rising faster than all funding sources combined.

Cont. on p. 14

Social Work Ethics and Clients with Disabilities

by
Betty McMillan

The author used the code of ethics recently approved by the 1979 Delegate Assembly of the National Association of Social Workers to explicate the role of social workers providing services to persons with disabilities. She maintains that responsibility to clients and society must inform appropriate and effective social work practice.

The 1979 Delegate Assembly of the National Association of Social Workers approved a new code of ethics to be implemented in the near future. It provides some direction for consideration of social work issues in relation to services to handicapped persons.

The major principles of the code concern:

I. The Social Worker's Conduct and Comportment as a Social Worker
II. The Social Worker's Ethical Responsibility to Clients
III. The Social Worker's Ethical Responsibility to Colleagues
IV. The Social Worker's Ethical Responsibility to Employer and Employing Organizations
V. The Social Worker's Ethical Responsibility to the Social Work Profession
VI. The Social Worker's Ethical Responsibility to Society

Each of these principles has implications for the provision of services to handicapped persons. Numbers II and VI, responsibility to clients and to society, are particularly important to any discussion of issues concerning persons with disabilities and will be considered here.

Handicapped persons as clients want what all of us want — to be respected, listened to, taken seriously, and helped when and where help is needed. For too many years persons with disabilities have been patronized, pitied, or ignored depending upon the orientation of the community in which they live. The code underlines a social worker's first responsibility to clients, be they individuals, groups or communities. When clients are disabled, workers must first, educate themselves about the handicapping conditions faced by their clients, about their needs, wants, rights and potential; second, educate the community, develop resources, and cooperate with handicapped persons in being their own advocates; and third, treat them, as all clients, with respect, assurance of privacy and confidentiality, and support of their own efforts to meet their needs.

When one considers social work responsibility to handicapped persons in light of responsibility to society, a number of issues become apparent. The code of ethics states that "the social worker should act to prevent and eliminate discrimination against any person or group on the basis of race, color, sex, sexual orientation, age, religion, national origin, marital status, political belief, mental or physical handicap, or any other preference or personal characteristic, condition or status." In asking that they not be discriminated against in finding jobs, persons with disabilities are saying that they want their skills, education and training to be considered along with those of other applicants. The subtle process of discrimination is evidenced by a community's refusal to provide the architectural modifications, the special transportation services, or the specific equipment necessary for handicapped individuals to take advantage of and enjoy employment, cultural and recreational resources that exist for other citizens. Social workers have a responsibility to examine these subtle as well as the obvious forms of discrimination in their communities.

It is frequently very difficult for the handicapped person to reach services which are available when one service is located in the east part of town and another in the west. Resources may be so scattered and so scheduled that it is next to impossible for a person to hold a job and still take advantage of needed medical and rehabilitation services. By acting to ensure coordination of services and reasonable accommodation, social workers live up to their responsibility "to ensure that all persons have access to the resources, services and opportunities which they require".

Moreover, the social workers who bring the attention of the public to the needs of those of its number who are handicapped either mentally or physically, are acting on their ethical commitment to "advocate changes in policy and legislation to improve social conditions and promote social justice". But legislation does not come about without great effort on the part of those who are most affected and those who are their advocates.

Social workers have much to do in the struggle to help handicapped persons to meet their own needs. But in so doing, they will be giving meaning to their code of ethics.

Betty McMillan is the coordinator of administration and planning field courses at the Graduate School of Social Work, The University of Texas at Arlington. Most of her professional social work career has involved direct practice and administration in the medical and health care services.

The Graduate School of Social Work • The University of Texas at Arlington

1980 Summer Course Offerings

The following courses will be open to community social agency personnel and other social service practitioners who hold either a bachelor's or a graduate degree. Each course will be offered in the evening from 6 p.m. to 10 p.m.

Eleven-Week Session (June 2 - August 19)

Theory and Practice of Administration
Research and Evaluation II
Factors in Alcoholism
Women and Leadership
Issues in Providing Services to Minority Elderly
Female Socialization
Social Psychology for Social Work Practice
Laboratory in Training Methodology
* Tasks and Coping Strategies
* Theories of Psychotherapy
* Group Methods in Counseling and Social Work Practice
* Issues in Planning and Implementation
* Personal Relationships
* Cognitive Intervention Strategies
* Social Work in Health Care Settings
* Financial Management
* Management of Stressful Emotions
* Socio-Behavioral Methods in Social Work Practice and Counseling

*For these courses, instructors may arrange different patterns of class meetings which would result in course completion prior to August 19th.

First Five-Week Session (June 1 - July 8)

Human Sexuality

Second Five-Week Session (July 10 - August 19)

Marital and Family Counseling

Important Dates

May 1, 1980	Final date for submitting applications and supporting documents for admission to the Graduate School during the eleven-week and first five-week sessions. **Applications must precede registration.**
May 30, 1980	Registration for the eleven-week and first five-week sessions.
June 9, 1980	Final date for submitting applications and supporting documents for admission to the Graduate School during the second five-week session. **Applications must precede registration.**
July 9, 1980	Registration for the second five-week session.

Additional information available from:

Graduate Advisor
Graduate School of Social Work
The University of Texas at Arlington
Arlington, Texas 76019
(817) 273-3181

The University of Texas at Arlington
Graduate School of Social Work

The school offers programs of study leading to the Master of Science in Social Work (M.S.S.W.), a dual degree program whereby a student can earn the Master of Arts in Urban Affairs and the M.S.S.W., and an interdisciplinary program leading to the Ph.D. in Administration.

Master of Science in Social Work

The program leading to the M.S.S.W. focuses on developing professional leaders in the areas of direct social work practice and human services planning and administration. The program of instruction includes an intensive academic component integrated with a practicum component allowing the student to learn and apply theory concurrently. Cutting across practice methods are curriculum emphases in alcoholism services, child welfare administration, and health care, with numerous other electives supporting interests in children and families, mental health, gerontology, and poverty.

Dual Degree Program

In conjunction with the Institute of Urban Affairs, the Graduate School of Social Work participates in a dual degree program whereby a student can earn the Master of Arts in Urban Affairs and the M.S.S.W. To participate in the program, students must make separate applications to both the Institute and the Graduate School of Social Work.

All requests for information pertinent to the above two programs should be directed to:

Assistant Dean for Admissions
Graduate School of Social Work
The University of Texas at Arlington
Arlington, Texas 76019
Telephone: (817) 273-3181

Doctor of Philosophy in Administration

The program leading to the Ph.D. in administration is a unique approach to the preparation of students for a variety of administrative positions. Students study in interdisciplinary fields broadly related to general administration and specialize at the dissertation stage by means of a substantive research project. A student's program consists of course work, independent study, research, and a dissertation in an administrative area. Candidates for the degree select five areas to study from among the following: accounting, economics, finance, management, management science, marketing, policy and planning processes, organization and administrative processes, urban systems and research, and urban affairs. Upon special request and approval, a student may include an appropriate external area as one of the five fields.

All requests for information about the Ph.D. program should be directed to:

Graduate Advisor for the Ph.D. Program
Graduate School of Social Work
The University of Texas at Arlington
Arlington, Texas 76019
Telephone: (817) 273-2707

Human Resource Center
Graduate School of Social Work
The University of Texas at Arlington
Arlington, Texas 76019

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