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Below please find the text of my remarks as prepared for a keynote address today at the University of California -- Berkeley. The conference is sponsored by the Regional Oral History Office of UC-Berkeley's Bancroft Library, and is titled: "Intersections of Civil Rights and Social Movements: Putting disability in Its Place." I talk about how I view disability rights as part and parcel of the American civil rights tradition, and how the Clinton-Gore Administration has recognized this in its policy development.

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THE GENEALOGY OF A SOCIAL MOVEMENT:
DISABILITY RIGHTS IN COMPARATIVE PERSPECTIVE

I am truly honored to join you here today for The Bancroft Library's Conference, "Intersections of Civil Rights and Social Movements: Putting disability in Its Place." No conference could more perfectly weave together my professional interests as a historian and the essence of my public service in the Clinton-Gore Administration. In my historical research and writing, I make the case that the disability rights movement should be spoken in the same breath as the African-American civil rights, women's rights, and gay and lesbian rights movements. Although none of these movements are identical, they share much in common. I have carried this perspective as a guiding principle in all my work in the White House. I have urged disability advocates to view their cause as part of the broader struggle for civil rights in America, and to find strength in forging coalitions with other civil rights communities. And I have continually sought to help others -- inside the government and outside -- to understand the needs of people with disabilities by viewing disability rights as civil rights.

Today I'd like to tell you about how I have come to view the disability rights movement as part and parcel of our civil rights tradition -- with a framework I call "The Genealogy of a Social Movement." And I'd like to tell you how the Clinton-Gore Administration has worked to defend and advance our hard-won disability rights.

I

Let me begin by telling you a story. A Vietnam veteran returned to the United States and called his mother. "Mom," he said, "I'm state-side. I'd like to come home." His mother was elated. "Come on home!" she exclaimed. "We're looking forward to seeing you!" "Well, Mom," her son added, "there's something else. I'd like to bring a friend home with me." "By all means," his mother quickly replied, "bring him along." The veteran hesitated, and then proceeded reluctantly, "But mom, there's something else. My friend stepped on a landmine, and he lost one of his arms and one of his legs." There was a long pause. Then a sigh. "Well, son," his mother said, "maybe you should bring your friend home... some other time." The next day the boy's mother received another call. This time, however, it was the police. "We're sorry, mam, but you're son committed suicide last night." An officer explained that her son had just returned from Vietnam. He had been badly injured in battle. In fact he had stepped on a landmine. And he had only one arm and one leg.

In this homecoming tragedy, an unwitting mother delivered the devastating message that people with disabilities didn't belong in her home. Alienated, facing the supreme rejection of his own mother, and having lost his sense of belonging, this Vietnam soldier took his own life. I wish I could say that we no longer have to confront such negative attitudes and destructive stereotypes. Regrettably, people with disabilities too often struggle to claim their place in this world. Only a small minority are driven to the point killing themselves, sometimes encouraged to do so by proponents of assisted suicide who think that people with disabilities have lives not worth living. More often, people embark upon a personal and social journey, punctuated by ups and downs, moments of triumph and oppressive barriers.

A disability advocate named Dan Wilkins fortunately has a much different story. After sustaining a high-level spinal cord injury, and living for many years on public benefits, Dan took the risk to start his own business. Unfortunately, he didn't get much assistance. Making money meant he'd lose his access to public health insurance. He was almost able to obtain private insurance as independent businessman, because his application looked good on paper. But when the insurance agent came to Dan's home for an in-person meeting, and saw all the ramps leading up to Dan's home, he turned around and left. And Dan never heard from him again. Despite these obstacles, Dan's now an entrepreneur who, among other things, designs some fabulous T-Shirts. He shouldn't have had to give up health insurance. But I'm glad he took the risk. I'm indebted to Dan for his work -- not to mention his encouraging humor. I have been joking that Dan has managed to capture the essence of my dissertation better in just four words from one of his T-Shirts than I will ever do in hundreds of pages. I've realized it's no joke, and I have now obtained Dan's permission to use that shirt as my dissertation title. It's a white shirt, with black lettering, two words each in two lines. It says, simply:

SAME STRUGGLE
DIFFERENT DIFFERENCE

That is the essence of the disability rights movement. And that is the core of President Clinton and Vice President Gore's commitment to the disability community. People with disabilities want access to jobs, education, transportation, health care, housing, public accommodations, and technology just like African Americans, women, gays and lesbians... and all Americans. It's just a

different difference. Something rooted in what we call mental and physical impairments, as opposed to skin color, gender, or sexual orientation. What we need to do as a community, in policy, and as a nation, is focus more on the commonality of the struggle, and less on the differences that seemingly divide us.

It is fitting that we undertake this exploration here in Berkeley. Because this conference, and the archive being opened by UC-Berkeley's Regional Oral History Office, is a fulfillment of a vision that began here in Berkeley two decades ago. In 1980, a fledgling organization called the Disability Rights Education and Defense Fund (DREDF) set out on a very specific mission: "to make disability a real true partner in the civil rights community nationally," and to pursue legal protections for people with disabilities that paralleled those for other minority groups and women. This was a fairly novel approach in the history of disability organizations, many of which focused on programs targeted toward specific disabilities. Pat Wright described DREDF's approach as: "we're here to do one thing, and that's civil rights."

In the fall of 1980, in San Francisco, DREDF took a major step forward to achieving its goals, by convening a meeting of prominent strategists, organizers, and attorneys from other civil rights causes. The purpose of the meeting was to educate the civil rights community about disability, and to provide DREDF with an opportunity to learn from the successes of other civil rights causes and develop a network of allies. Out of this experience, DREDF forged a partnership with Ralph Neas of the Leadership Conference on Civil Rights (LCCR) and began a decade of civil rights advocacy that helped lay the foundation for passage of the ADA.

What a privilege it is to gather twenty years later, at the dawn of a new century, to reflect on the successes of the disability community in establishing disability rights as civil rights! Like the conference in 1980, this conference brings together experts and advocates representing the spectrum of civil rights communities, providing an opportunity to explore how the linkage between disability rights and civil rights can be strengthened for the future.

II

I have attempted to flesh out the intersection between disability rights and America's civil rights tradition by identifying five themes, or stages, in the development of social movements. The story of the Vietnam veteran captures the essence of the first theme. In a word: STIGMATIZATION. People with disabilities, like African Americans, women, and gays and lesbians, have endured assumptions that they were intrinsically inferior to other people. This centers largely around notions of biological inferiority. One sociologist describes how a stigmatizing trait, such as a physical or mental disability, or dark skin, or homosexuality, often "spoils" a person's "social identity." "We intend to impute a wide range of imperfections on the basis of the original one," he writes. Have you ever noticed an able-bodied person who, when speaking to an individual with cerebral palsy, suddenly BEGINS TO SPEAK REAL LOUD, unconsciously assuming that her difficulty with speech must mean she has difficulty hearing.

More troubling than misunderstandings about physical characteristics, however, are the ways in which people infer social roles based on biological characteristics. The "anatomy decrees the life of

a woman," wrote one psychiatrist, who said that women would only find fulfillment in life if they recognized the determinism of their bodies and lived within its parameters. People with disabilities have faced similar assumptions that the inability to walk or see automatically translates into subordinate roles in society -- or worse yet, no social role. The lack of respect -- and sometimes outright hostility -- toward people with disabilities is revealed in a story reported just this week. A 13-year-old girl with a cognitive disability was lured by four men to an apartment after an afternoon football game. They raped her. But they didn't stop there, as if the crime weren't already horrific enough. The four men subsequently took her to an abandoned apartment where as many as 20 more men -- aged 12 to 27 -- raped her over a period of some 12 hours.

Like African Americans, women, gays, and lesbians, people with disabilities have assaulted stigmatization and repudiated assumptions of biological inferiority, contending that disability is a "normal" part of humanity, and that people with disabilities should have equal participation in society. The rejection of stigmatization points to the second general theme crucial to the development of social movements: SELF-DETERMINATION. In 1969, for example, a gay activist wrote that "homosexuals are [increasingly] insisting upon a role in which they are not seen as mere specimens to be examined and discussed, but as active, informed participants in the consideration of their condition and in the disposition of their fate." People with disabilities have shared these sentiments and tried to throw off the burden of, as one woman described it, "a typical minority group stereotype of inferiority: if they know their place . . . they are really quite lovable, happy, childlike, loving creatures." Disability advocates have argued that they, like African Americans, women, gays, and lesbians, should run their own organizations and determine their own fate. This is seen most clearly in the independent living movement, through which people with various types of disabilities seek to develop consumer-run organizations that facilitate living independently in community-based settings instead of deteriorating in institutions.

For each of the movements I'm talking about here, a crucial step was developing a GROUP IDENTITY. This identification derives in large part from the need to gain protection under the Constitution as a "suspect class." For movement participants, however, it primarily reflected a powerful change in consciousness. It was not enough, for example, for a woman to be aware that she faced social stigma. As one historian has noted: "The question was when someone would declare that the obstacles faced by individual women added up to injustice done to womankind." Women did just that in the 1960s. "There is no personal escape, no personal salvation, no personal solution," argued one woman. "The first step, then, is to accept our plight as a common plight." For African Americans and women, this process was naturally facilitated by bonds formed in social contexts: whether in homes, churches, or social activities. For people with disabilities, however, this was much more difficult. Most people with disabilities were not born to parents with disabilities, and most people with disabilities do not have children with disabilities. Recognizing a common plight has therefore had more to do with what people with disabilities were denied in isolation than what they positively shared in common. A person who is Deaf and a person with mental retardation, for example, don't automatically share social circles, and they experience discrimination in different ways. The interesting thing is that the negative experience of stigmatization and oppression -- manifested in different ways for different types of disabilities -- has itself been the foundation for a positive group identity. One disability studies expert has captured this idea by describing disability as "a fiction both oppressive and useful."

The first three points I have discussed -- stigmatization, self-determination, and group identity -- point to a fourth theme in the development of disability rights that parallels the development of other civil rights movements. Something I call, A SOCIAL CRITIQUE OF OPPRESSION. This concerns where people identify the locus of the "problem" to reside. African Americans, women, and gays and lesbians have all faced assumptions that there was the "Negro problem," the "woman question," and the "homosexual disease." In each case, the individual was presumably at fault. And the responsibility for reform and life improvement depended upon an individual's ability to accommodate mainstream society. Activists of the sixties, however, undertook a major paradigm shift. The problem, they argued, was not the individual, but society. "There are only majority problems," wrote one activist. "There is no Negro problem except that created by whites . . . and no homosexual problem except that created by the heterosexual society." Many women made the transition to feminism when they recognized that, in the words of one activist, "what was thought to be a personal problem has a social cause and a political solution."

Disability activists underwent a similar transition. By rejecting biological determinism, people with disabilities began to look to the discriminatory structures and attitudes of society: the world had apparently been created for the mythical ideal of an average, able-bodied, white male. But this was not the only possible world. There could be ramps, interpreters, and better signing, for instance. Rehabilitation, in other words, was not a burden that disabled persons should share alone: society needed to be "rehabilitated."

The final theme of my genealogy is a tradition of LEGAL AND POLITICAL ACTIVISM. Disability advocates have asserted their right to access to jobs, education, places of public accommodation, transportation, and communications, in a manner very similar to African Americans, women, and gays and lesbians. They also pursued these goals through similar political strategies, including demonstrations, sit-ins, and litigation. Ultimately, disability activists pursued an overarching tactic: comprehensive federal civil rights legislation modeled substantially after the Civil Rights Act of 1964.

Now, let me emphasize: I use this genealogy as an analytical tool, not as a linear, chronological narrative. The most important point, is that these themes are what the ADA is all about, and what makes the ADA part of the civil rights tradition. The ADA recognizes a history of stigmatization and subordination of people with disabilities as the justification for its creation. It reflects the repudiation of bogus assumptions about people with disabilities' appropriate social role in arguing for full participation in society and economic self-sufficiency. It defines people with disabilities as a class of people, based upon a history of oppression, that deserve protection under the law. It identifies the locus of the problem not simply as intrinsic to the individual, but as endemic to society, requiring social solutions. And the ADA is both the product of -- and ultimate symbol -- of the disability rights movement's legal and political activism.

III

Now, I also want to emphasize again that with this "Genealogy" framework I am not trying to argue that all of these movements are identical. In fact, it is important to point some potentially

significant differences, which I will mention briefly.

First, one could argue that civil rights for people with disabilities as delineated in the ADA are unique because of the concept of "reasonable accommodation." Blacks, women, and gays have argued for equal treatment before the law and by American citizens. For people with disabilities, however, merely receiving equal treatment is not adequate to end discrimination. By the end of the 1980s, state and federal laws had established a central principle of the ADA: "reasonable accommodation." According to this idea, truly equal opportunity for people with disabilities requires that governments and businesses take proactive steps to provide opportunity by accommodating an individual's disability. This might mean adding a lift to a bus, providing an employee with an amplified telephone headset, ramping a few steps, installing Braille signs, or allowing an individual to modify his or her work schedule.

But this apparent distinction between disability rights and other movements should not be overstated. While laws such as the ADA make "reasonable accommodation" a central organizing concept, the idea of accommodation as a foundation for equality is not completely foreign to other movements. For example, many women argue that having access to a job is not enough, that there needs to be accommodation in the form of access to day care and birth control. Some academicians have argued for exceptions to the typical tenure-track "clock" to accommodate time for child-rearing. I'll come back to this issue again shortly.

Second, the disability rights movement has a somewhat different experience in the relationship between widespread grassroots organizing and legislative victories. For the African American civil rights movement, laws like the Civil Rights Act of 1964 came after many years of confrontation between activists and authorities. For people with disabilities, however, some core provisions like Section 504 of the Rehabilitation Act of 1973 -- which prohibited discrimination on the basis of disability in federal programs -- were crafted without much fanfare, but helped rally the disability community to mobilize around the implementation of the provision. This should not be viewed as a detraction from the viability of the disability rights movement as a social movement. Since some victories came before the community was fully organized, however, I would argue that the disability community did not develop a level of political sophistication as rapidly as some other movements. I'll come back to that issue a little bit later as well.

A third and final difference between disability rights and other civil rights movements has to do with the relationship to liberal capitalism. While the majority of African Americans, women, and gays and lesbians have, arguably, sought to "work within the system," powerful factions of each of these movements have leveled strident critiques of liberal capitalism. As one activist put it: "it's not a question of getting our share of the pie. The pie is rotten."

The disability rights movement, on the other hand, has not really issued a systematic attack against liberal capitalism. Demands for disability rights have largely been about granting people with disabilities the same access to opportunities as all other Americans, not about fundamentally assaulting an "American Creed" with a preference for an altogether different vision of social order. If anything, disability rights ideology has criticized the American welfare system for trapping people with disabilities in a vicious cycle of dependence. Accordingly, a conscious goal of the

ADA and its advocates was to reduce the level of dependence on the federal government by enabling individuals to become self-supporting, tax-paying citizens in a capitalist economy. And I would argue that one major reason for the ADA's success was precisely the fact that it did not threaten liberal capitalism and could actually appeal to a conservative ideological viewpoint.

IV

I'd like to shift gears a bit. What does all of this comparative discussion have to do with policy?

For decades, our social answer for participation in the American economy has been to give two basic options. And I'll exaggerate for effect:

1) On the one hand, we have fostered a spirit of "rugged individualism." It was up to each individual to pull herself "up by the boot straps" and make it on her own in a society where everyone supposedly had an equal chance to succeed.

2) On the other hand, for those who were UNsuccessful, we have offered dependency: society would take care of you.

Now, I'm exaggerating: contrary to myth, America's society and economy have, from its earliest beginnings, been fueled in a multitude of ways by an activist government. Corporations large and small, as well as individuals, have benefited immensely from the assistance of state, local, and federal governments. But I think this framework more or less describes two different and predominant policy approaches toward social intervention.

In March 1998, President Clinton created the Presidential Task Force on the Employment of Adults with Disabilities. Its purpose was to find ways to increase the employment rate among people with disabilities. It would do so in a coordinated fashion, by promoting collaboration among federal agencies that too often worked in isolation. Through the leadership of the Presidential Task Force, we are questioning the two-answered approach that has prevailed in our social policies.

What we now understand, is that an old-fashioned approach of trying to train people with disabilities for narrowly-defined jobs, and then urging them to fend for themselves, just doesn't work. The coordinated approach of the Task Force is based on the recognition that if you don't have a place to live, or health care, or appropriate education and training, or the necessary technology, or a way to get to work, then the availability of a job, on its own, is an illusory opportunity. We must, instead, work to provide people the tools they need to make employment a reality.

The best example of this approach is found in the Ticket to Work and Work Incentives Improvement Act, which President Clinton signed into law on December 17, 1999. Among other things, this legislation will enable people with disabilities to retain access to Medicare and Medicaid when they go to work. Previously, our policies determined that individuals on SSDI or SSI who went to work would lose not only their cash benefits, but also their health care. For millions of Americans, this meant choosing between health care and a job: an absurd choice and a

counter-productive policy. As the President often pointed out during the deliberative process: we're already paying for the Medicare and Medicaid; why not let an individual go to work, feel better about herself, reach her potential, and contribute to the economy. Our nation, as well as the individual, is better off.

What intrigues me most about the Work Incentives Improvement Act is the way it helps to shift our disability policy in dramatic ways. One of the things that most strikes me about the history of the ADA is the extent to which its supporters made sure that it was described mainly in terms of "civil rights," and not at all in terms of "entitlements." The reason was that if the ADA was viewed as an "entitlements" bill, it would not have had much chance for success. (Indeed, while the ADA ultimately achieved a high-level of bipartisanship, there were fiercely partisan attempts to weaken the ADA throughout the deliberations.) This strategic move aided the passage of the ADA, but it contributed to a perceived dichotomy between the ADA and a history of disability policy based on public benefits programs.

My concern, from a historical vantage point, has been that the strategy for passing the ADA could enable -- or lead -- people to view the civil rights objectives of the ADA as mutually exclusive of any public benefits programs, such as health care. The Work Incentives Improvement Act, however, helps integrate the aims of policies created at different historical moments. Instead of viewing public health care as serving a different purpose (i.e. living dependently on government assistance) than the employment nondiscrimination objectives of the ADA (i.e. full participation in society), the Work Incentives Improvement Act points the way to how we can more effectively meet the purpose of the ADA by bridging -- or transcending -- entitlements, on the one hand, and civil rights, on the other.

This point was illustrated most clearly to me at one of the House hearings on WIIA last spring. DC Mayor Anthony Williams was testifying. He said at one point (paraphrase): "I am through-and-through a product of the civil rights movement, but I wouldn't be here today were it not for the various supports I received along the way." Here, Mayor Williams underscored how the disability rights movement actually parallels the African American civil rights movement with respect to what I earlier suggested might be a difference (i.e. "reasonable accommodation). Even in the context of race, our national policy has not simply established civil rights goals without providing any tools to achieve them -- whether through busing or education funding or any number of policies.

One newspaper columnist offers another illustration. He notes how many people are latching on to Martin Luther King, Jr.'s famous statement that he dreamed of a day when individuals would be judged not by the color of one's sin but by the content of one's character. This statement is sometimes used, however, to justify opposition to public programs or benefits designed to help people of color, suggesting that it's a personal struggle of character. It's that same paradigm I described earlier: let people fend for themselves. But such use of MLK, Jr's vision inappropriately misses the broader content of his message, where he argued that we must work as a society to help provide people with the tools they need to succeed.

The key point about the Work Incentives Improvement Act, is that it radically shifts policy by

viewing public health care -- Medicare and Medicaid -- as tools rather than barriers to becoming employed, more self-sufficient, and more integrated into the fabric of our national life. The bill is not a panacea, as no single piece of legislation is. But it lays a foundation for enabling thousands of people with disabilities to reach their potential and pursue their dreams.

Building on that foundation is key to making the ADA succeed in the twenty-first century. This approach parallels other actions the Clinton-Gore administration is taking. Earlier this year, for example, President Clinton announced an initiative to reform disincentives for people trying to get off welfare. For decades, if a person had modest equity in a car, they become disqualified for food stamps. In today's economy, a car might be necessary for a person to be able to hold a meaningful job. What sense does it make to take away people's ability to feed their families when they're trying to become gainfully employed? President Clinton accordingly lifted the rigid benefits caps that prevented people from obtaining reliable transportation to get to work. Last week President Clinton announced another Administrative action that will further enable states to "disregard" income and assets related to food, clothing, and shelter so that people can qualify for Medicaid and move from institutions to community-based living. The Family Opportunity Act currently pending before Congress is another example of the Administration's support of moving beyond a dichotomy between public benefits and civil rights. This legislation would enable parents of children with disabilities to earn more family income -- which currently many parents have to turn down -- and retain access to the Medicaid coverage their children need.

Some of you may be familiar with the privately-run Welfare to Work Partnership. This summer they released their first report, and one of their chief recommendations was that welfare recipients should be allowed to retain access to their public benefits as a transition to employment. If they could temporarily retain their benefits, business leaders of the Partnership argue, they would better be able to attain permanent gainful employment and not risk going without basic necessities.

Continuing this policy transformation is crucial to fulfilling the goals of the ADA and other disability rights laws. I'd like to mention one other important key to success. Earlier I mentioned that the disability rights movement has lagged somewhat behind other movements in its level of political sophistication, in part because some legal victories came before the movement itself had fully matured. In my two years of working with the disability community, I have often been impressed with the community's effectiveness in working to pass legislation and secure executive actions.

But it seems to me that the disability community is less effective at the grassroots level in shaping the climate that determines who gets into power. This is not a partisan issue. The extent to which people with disabilities compel all political parties and all candidates to speak to their issues will help create an environment more suitable to change. It's not enough to become experts at working with those who are in power. People with disabilities should also be working to mold public opinion about electing decision-makers who will support and defend disability rights. I am delighted this year to see the success of the National Organization on Disability's non-partisan get-out-the-vote effort. And it is great to see networks like C-Span taking an interest in covering presidential campaign debates about disability issues. Strangely, America's history of low voter turnout actually is an opportunity to wield greater influence. If people with disabilities vote at a

higher rate -- or even equal to the rate of the general public -- the disability community can help secure its place at the table of decision-making by proving that they can influence elections. Justin Dart likes to remark: "Get involved in politics as if your lives depend upon it, because they do." Everyone should take that to heart and take advantage of our privilege to vote.

I am profoundly grateful for the opportunity that I have had to serve President Clinton, Vice President Gore, and the American people with regard to disability issues. Together, we've made tremendous progress since passage of the ADA. To mention just a few achievements:

* Passage of the Ticket to Work and Work Incentives Improvement Act
* Increasing the Substantial Gainful Activity Level
* Expanding hiring of people with disabilities in the Federal government
* Providing parity in mental health coverage in Federal health insurance plans
* Passage of the Workforce Investment Act
* Protecting and Expanding Access to Medicaid
* Dramatically Increasing funding for Special Education
* Defending the ADA and IDEA from weakening amendments
* Expanding access to home-and-community based services and supports
* Passage of the Health Insurance Portability and Accountability Act
* Passage of the Family Medical Leave Act
* Increasing funding for assistive technology
* Bridging the "Digital Divide" among people with disabilities
* Passage of the Telecommunications Act
* Helping to make 80% of public transit vehicles accessible

I am particularly pleased that at a moment when we have achieved the longest, strongest peacetime economic growth in our nation's history, President Clinton decided not just to rest on the accomplishments but to focus on those areas and communities that have not shared equally in our current prosperity. This includes the President's New Markets Initiative and Digital Opportunities Initiative.

Unfortunately, we have so far been unable to succeed on other important issues:

* Passage of the Family Opportunity Act
* Funding for the MiCASSA Systems Change grants
* A permanent extension of Medicare access for people returning to work
* A meaningful, affordable prescription drug benefit under Medicare
* A meaningful Patients' Bill of Rights
* Hate Crimes legislation
* A Minimum Wage increase

These and other issues have been blocked by Congress, particularly the Congressional leadership. In the Senate, for example, the Majority Leadership has been unwilling to take action on the Family Opportunity Act, which currently has more than three-quarters of the Senate as co-sponsors. We had to surmount similar obstacles with the Work Incentives Improvement Act last year. In the

House, we have a Majority Leadership in which the three highest ranking members -- the Speaker of the House, the Majority Leader, and the Majority Whip -- all voted against the ADA ten years ago. It's amazing when you think about it. Fully 93% of all voting House members in 1990 voted for the ADA. But three of the tiny minority that voted "No" are the three highest ranking members of the Majority.

Time, however, is on our side. Although we have a long way to go to achieve ADA's goals of equality of opportunity, full participation, independent living, and economic self-sufficiency, I am encouraged by the progress we have made. And I am satisfied to know that people from all across the country, from all sectors of society, are playing their parts to keep the cause alive.

Let me end with another one of Dan Wilkins's T-Shirts. It's a red shirt, with a black box on the front, with white lettering and big yellow light bulb. The text reads:

IF THERE IS SUCH
A THING AS
"US AND THEM"
IT IS NOT
BETWEEN
BLACK
AND BWHITE,
OLD AND
YOUNG,
DISABLED
AND NON,
MALE AND FEMALE,
GAY AND
STRAIGHT,
CATHOLIC,
PROTESTANT,
BUDDHIST, ETC.
ETC. ETC. BLAH,
BLAH, BLAH.

IT IS BETWEEN
THOSE WHO "GET IT"
AND THOSE WHO DO NOT.

It's an honor to work with so many people who "get it." Thank you very much.