Disability and Diversity: Historical and Contemporary Influences

ABSTRACT

Many of the seeds of contemporary ideas about disability, diversity, and employment policy may be traced to the legacy of the American Civil War and its expansive disability pension scheme. Though not a vocational rehabilitation or welfare scheme per se, the Civil War pension laws set out America’s first large-scale policy of compensation for select men and “worthy disabled,” and led to a medical model of disability and America’s first comprehensive federal retirement program. The post-Civil War shift toward the classification of disability thus laid the groundwork for subsequent federal welfare and employment policies. This chapter overviews the pension scheme, our related investigation of veterans with disabilities, and examines the

* Author’s Note: University Professor & Chairman Burton Blatt Institute (BBI), Syracuse University; Ph.D. Psychology, Harvard University; J.D., Stanford Law School. The program of research described herein is supported in part by grants from: (a) The National Institute on Disability and Rehabilitation Research (NIDRR), U.S. Department of Education, for (i) “The Asset Accumulation and Economic Self-Sufficiency Project,” Grant No. H133A090014; (ii) “Demand Side Employment Placement Models,” Grant No. H133A060033; (iii) “Southeast Disability & Business Technical Assistance Center,” Grant No. H133A060094; and (iv) “Center on Effective Delivery of Rehabilitation Technology by Vocational Rehabilitation Agencies,” Grant No. H133A090004; (b) The Rehabilitation Services Administration (RSA) for “Technical Assistance and Continuing Education (TACE) Center Region IV (Southeast TACE),” Grant No. H264A080021, and (c) the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services, for “New York’s Comprehensive Medicaid Infrastructure Grant (MIG),” Grant #1QACMS030318. I gratefully acknowledge the support of NIH/NIA grant number P01 AG10120, “Early Indicators of Later Work Levels, Disease and Death”—Robert Fogel, principal investigator. This chapter summarizes research with many colleagues, with relevant articles at http://bbi.syr.edu. Portions of this chapter are drawn from Blanck, P. (2010). Disability and Aging: Historical and Contemporary Views, in Disability and Age Discrimination: Perspectives in Law and Psychology (ed. R. Wiener), Springer, 49-70.
Disability and Diversity: Historical and Contemporary Influences
BY: PETER BLANCK*

ABSTRACT

Many of the seeds of contemporary ideas about disability, diversity, and employment policy may be traced to the legacy of the American Civil War and its expansive disability pension scheme. Though not an vocational rehabilitation or welfare scheme per se, the Civil War pension laws set out America’s first large-scale policy of compensation for select men and “worthy disabled,” and led to a medical model of disability and America’s first comprehensive federal retirement program. The post-Civil War shift toward the classification of disability thus laid the groundwork for subsequent federal welfare and employment policies. This chapter overviews the pension scheme, our related investigation of veterans with disabilities, and examines the

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implications of this study for attitudes and policy toward persons with disabilities, with emphasis on the disabled in workplaces, as today’s veterans, and as global citizens.

I. INTRODUCTION

Today’s civil rights model of disability is set out in federal laws like the Rehabilitation Act of 1973, the Individuals with Disabilities Education Act, and the Americans with Disabilities Act (ADA) of 1990 and as amended in 2008. In a program of study, my colleagues and I, and others, examine the social and political forces underlying contemporary views about the rights of persons with disabilities (Blanck, 2001, 2008; Liachowitz, 1988; Scotch, 2001; tenBroek, 1966).

In the move toward disability rights, one primary period recognized in American history is when societal and medical views of disability evolved from the passage of the first civilian national Vocational Rehabilitation Act in 1920 to the signing of the ADA in 1990 (Milani 1999; Obermann, 1965). During this period, policy innovations, notably the New Deal and the Social Security Act, won public support and sought to eradicate social problems associated with poverty, disability and employment (Blanck & Millender, 2000; Skocpol, 1993). Rehabilitation programs identified disabled beneficiaries as “deserving” individuals who, especially when war veterans, made sacrifices for the national interest (Gerber, 2001; tenBroek, 1966).

In this chapter, I offer that many of the seeds of contemporary ideas about disability, diversity, and employment policy may be traced to the legacy of the American Civil War and its expansive disability pension scheme. Though not a vocational rehabilitation or needs-based welfare scheme per se, the Civil War pension laws set out America’s first large-scale policy of compensation for select men and “worthy disabled,” and led to an increasingly medicalized model of disability. By
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1890, the pension laws further evolved into America’s first comprehensive federal retirement program (Costa, 1998).

The post-Civil War shift toward the classification of disability laid the medical-socio-political groundwork for subsequent federal policies, such as the 1920 Vocational Rehabilitation Act and the Social Security system, as well as for state workers’ compensation laws (Baack & Ray, 1988; Crossley, 1999; Drimmer, 1993; Hickel, 2000; Orloff, 1993). This chapter uses as a starting point a period during the late 1800s when hundreds of thousands of soldiers from the north and south were returning to their homes with disabilities never before, and perhaps never since, seen by American society in number and scope.

These individuals and their families navigated a society before notions of disability rights and advocacy existed, and at the beginnings of the medical classification of disability. Union soldiers and their families confronted a new federal bureaucracy, housed in the massive Pension Bureau (“Bureau”), which itself was besieged by lawyers, lobbyists, and politicians. As never before, northern veterans came from all walks-of-life and included a wave of immigrants and African Americans who sought newly promised rights from their government and benefits for their service. My colleague historian Michael Millender and I elsewhere examine the pension system for former confederate soldiers, who faced different challenges and were not covered by the federal system (Blanck & Millender 2000).

Part II of this chapter overviews the Union Army Pension Scheme from 1862 to 1907. Part III discusses our program of empirical study on the pension laws and veterans with disabilities as they aged. Among other forces, stigma, conceptions of malingering and feigning, and new industry players (i.e., lawyers and lobbyists, bureaucrats, and physicians) together influenced attitudes of disability
after the Civil War in regard to veterans in particular, and employment in general. Part IV examines
the implications of this historical study for analysis of contemporary attitudes and policy toward
persons with disabilities and diversity, with emphasis on research and programs affecting the
disabled in workplaces, as today’s veterans, and as global citizens.

II. DEFINING DISABILITY AND THE CIVIL WAR PENSION SCHEME

The Civil War changed how Americans thought about disability. Attitudes were shaped
about and by returning veterans and their families as they engaged the pension system. There
were 860,000 disabled survivors from nearly 2.5 million members of the Union Army (Gould,
1869). The pension scheme for disabled Union veterans became, up to that time, this nation’s
largest and most medicalized welfare scheme (Klages, 1999; Oliver, 1917; Skocpol, 1992;
Skocpol, 1993).

As part of a large investigation, my colleagues and I examine the lives—from “cradle to
death”—of a sample of Union Army veterans and conceptions of disability in American society
after the Civil War (Logue & Blanck, 2008, 2010). The random sample consists of almost 36,000
white males from the Union Army and 6,000 males from the U.S. Colored Troops, with
information on their military, pension, medical, and census records (Fogel et al., 2006). The
information on returning veterans and their families was examined in the context of laws
associated with Civil War pensions (Glasson, 1918; Oliver, 1917). I briefly review these laws
next to illustrate how they set the stage for subsequent law and policy, and attitudes.

In 1862, the General Law (Curtis & Webster, 1885) set pension benefits for those with war
disabilities and established a medical rating system for compensating disabilities (Fogel, 1996;
Skocpol, 1993). A pension claimant was required to “show that his disability was incurred as the
direct consequence of the performance of his military duty.” (Glasson, p. 125). Under the law,
claimants were rated in their “total disability” in the performance of labor (Fogel, p. 135; Skocpol). In addition, certain war-related conditions or diseases were compensated regardless of a total inability
to work (Blanck, 2001).

For instance, a Northern army private in 1862 received a maximum of $8 per month for being
“totally disabled.” A veteran whose disability was rated as less than “total” received a corresponding proportion of the $8. For purposes of compensation, therefore, the system defined fractional rates of
total disability. A lost finger or small toe was compensated by a prescribed rating of 2/8 totally
disabled, with a corresponding pension allotment of $2 per month. A lost eye or thumb, or a single hernia, resulted in a 4/8 rating of total disability with a corresponding award of $4 per month.

Today, the “inability to work” model of disability remains the dominant means for assessing compensation in pension, workers’ compensation, and disability support programs (Fogel, 1996, p. 135-36). Professor Dora Costa notes that, since the Civil War pension scheme, “inability to participate in the labor force became the standard means for compensation in subsequent American pension and support programs.” (Costa, 1998, p. 36). Also, as in today’s benefit schemes, the Civil War Pension Bureau hired physicians to rate claimants’ disabilities, who categorized them by disease and severity.

In 1873, the Consolidation Act expanded the General Law to compensate veterans for service-related conditions or diseases that later caused disabilities, such as noise-induced hearing loss occurring later in life as a result of wartime gun fire (Blanck, 2001; Sewell, Song, Smith, Bauman, & Blanck, 2004). The 1873 Act created confusion as to how disability was to be defined and rated for
pension compensation (Glasson, 1918). Increasingly, the definition and classification of disability was questioned and contested, as is still evidenced today (Blanck, 2010; Stone, 1984). The press sought to expose alleged pension fraud, with the view that the Bureau was a partisan machine and its funding paid for exaggerated and feigned disabilities (“Movement,” 1875). Editorials described “bogus” disabilities contrived by pension claim agents and lawyers who stood to profit from successful claims (“Editorial,” 1881, p. 4). Indeed, by the late 1880s, pensions granted under the General Law were greater for diseases claimed as a result of the war than for actual war injuries (Glasson).

In 1879, the pension law allowed the use of arrears—or back pension payments—to attract “deserving” veterans who had not applied for pensions, which added to pension growth and fueled controversy (Glasson, 1918, p. 150-53). The Arrears Act enabled veterans to receive pensions the Bureau found should have been granted as a result of war service, and to be paid from the time of their discharge from the army (Glasson). The Arrears Act used the same classification scheme for awarding pensions on the basis of war-related disability (McConnell, 1992). Professor Skocpol (1993) and earlier historians argue the Arrears Act was spurred by the pension attorneys, who collected a $10 fee for each application. Popular criticism at the time appeared in papers such as the New York Times in articles such as “The Plundering by Greedy Pensioners and Speculators Should Stop.” (“Arrears,” 1881, p. 4; “Time’s Pension Articles,” 1894, p. 4).

With a flood of new veterans applying for and receiving disability-based pensions (Dearing, 1952), the “soldier vote,” and its political lobby through the Grand Army of the Republic (G.A.R.), was reinvigorated (Sanders, 1980, p. 139-40). After the war, Union Army veterans had transformed their national G.A.R. organization into a political machine that kept the veterans’ wartime sacrifices in public consciousness (Blanck & Song, 2002). These developments generated predictable resistance
along partisan lines, with the G.A.R. and its Republican allies in favor of pension expansion, and the Democrats, comprised of large numbers of immigrants and southerners, generally opposed. But the G.A.R. was not a disability lobby. Its primary mission was to replace the General Law with pensions based solely on military service, regardless of disability origin (Glasson, 1918, p. 204-05).

The 1890 Disability Pension Act accomplished this goal and expanded pensions to include physical and mental disabilities not related to wartime experience (Fogel, 1996; Glasson, 1918). Although disability for pension eligibility continued to be defined by an individual’s incapacity to perform labor, after 1890 it also covered those honorably discharged veterans “who are now or who may hereafter be suffering from a mental or physical disability of a permanent character, not the result of their own vicious habits.” (Stone, 1984, pp. 90-110; see also Blanck & Song, 2002 noting vicious habits were associated with sexually transmitted conditions, alcoholism, and smoking). In earlier studies, Blanck (2001) finds that Union Army veterans whose examining physicians noted their alcohol and drug use, malingering behavior, or sexually transmitted disease were substantially more likely to receive a lower pension rating or to have their claims rejected outright.

With its expanded mandate, the 1890 Act became, up to that time, the most costly welfare and old age measure “ever passed by any legislative body in the world.” (Glasson, p. 233; Skocpol, 1993, p. 214). Professor Deborah Stone articulated the link between ideas of legitimacy and deservingness of disabled persons in attitudes in the late nineteenth century medical community with the evolution of the concept of the “inability to work” as a means for developing the first comprehensive, scheduled, needs-based system of governmental compensation.

By 1893, pensioners numbered almost one million, consuming nearly half of the federal budget (Fogel, 1996; Skocpol, 1993; Vinovskis, 1990). Claims of excess, fraud, and corruption were
widespread. Pensions were said to be windfalls to the “undeserving” disabled. Stigmatized and less understood disabilities, mostly mental and infectious conditions, were harshly criticized (Anderson & Anderson, 1984). Despite evidence to the contrary, disabled veterans and their attorneys were portrayed as scamming the system, bilking the public treasury and trust—stories appeared with titles such as “A Raid upon the Treasury,” “Fraudulent Practices of the Pension Sharks: Uselessness of Pension Attorneys,” “Pensions and Socialism,” “Pensions: Time to Call a Halt,” and “Half a Million Dollars a Day for Pensions.” (Bacon, 1889; Boynton, 1898; “Pension Arrears Bill,” 1878; Sloane, 1891; Slocum, 1892; Warner, 1893). Disabled pensioners were mocked and the legitimacy of their disabilities questioned (Glasson, 1918).

In 1904, progressive Republican President Theodore Roosevelt broadened the 1890 Act with Executive Order No. 78, which provided old-age itself was a “disability,” even if no disabling cause was claimed, and regardless of the claimant’s level of income provided the claimant showed ninety days service and an honorable discharge (Glasson, 1918). Roosevelt transformed the 1890 Act into a service-and-age pension law. In 1907, the 1890 Act was replaced formally by the Service and Age Pension system—referred to as old-age pensions—that granted pensions based on a veteran’s age and length of military service. The 1907 law provided that veterans over the age of sixty-two years were to receive pensions, with graduated increases in payments with age (Glasson). Most veterans pensioned under the 1890 Act transferred to the rolls under the 1907 Act to receive increased payments (Glasson). Congress passed subsequent legislation in 1908, 1912, 1917, 1918, and 1920 that increased the Civil War pension rates based on age and length of military service (Fogel, 1996; Glasson).

In 1907, it was estimated the 1890 Act had cost over $1 billion (Glasson, 1918). Between 1870 and 1910, the proportion of veterans receiving pensions rose from 5% to 93% (Orloff, 1993;
Rubinow, 1913). By 1907, the General Law had been transformed from “a provision for compensation of combat injuries into a de facto system of old age, retirement, and disability protection.” (Orloff, p. 134).

Over time, the identity and definition of disability also became tied in the public’s mind to the character and moral fiber of veterans (Katz, 1986; Matza & Miller, 1976). Disabled pensioners with “legitimate” war wounds were a “righteous core of a generation of men.” (Skocpol, 1992, p. 149). The legitimately disabled and their families deserved public support and were not in need of charity (Skocpol, 1992). The war-disabled were particularly worthy beneficiaries, as compared to those with mental or “nervous” disabilities (“Arrears,” 1976; Dean, 1997; Shields, 1891). All this labeling, classifying, and what historian Larry Logue has called “the moral economy of veterans benefits,” (Logue & Blanck, 2010) was linked to “a morass of fraud, a bottomless pit of extravagance” embodied by the pension system (“Democrats,” 1898, p. 6; “Spoils,” 1894, p. 1-2). Those blamed were veterans who feigned or exaggerated disability, with a supporting cast of pension examiners, certifying surgeons, claim agents, and lawyers (Oliver, 1917).

III. DISABILITY AND “WORTHINESS”, 150 YEARS AGO

The Civil War affected society’s views of a huge swath of disabled men in American society, which also impacted their widows and children. Like today, discrediting and stigmatizing attitudes about disability after the Civil War were shaped by prejudice and stigma, ethnicity and race, the medical model, as well as by bureaucratic factors, attorney advocacy and lobbying, and workplace culture and economics (Oliver, 1917). Our findings suggest a relation between negative stigma toward certain disabilities such as mental illness and pension outcomes (Cf.
Pensioners with visible or “less obscure” injuries from gunshot wounds (i.e., the “War Worthy”), by contrast, comprised the greatest proportion of successful claims, especially early after the war.

Not surprisingly, bodily war wounds were subject to less attitudinal prejudice and less likely to be rejected by the Bureau. By comparison, veterans with less visible and less understood conditions were subject to particular prejudice and stigma, and were more likely to be denied pensions outright. This penalty was found for those with so-called “nervous” mental conditions, with strong distinctions drawn between physical and mental impairments (Blanck, 2005a; Waterstone & Stein, 2008).

Our historical studies examine the roots of attitudinal prejudice and stigma toward veterans with mental disabilities. As discussed later, contemporary investigations show that today’s young veterans with post-traumatic stress disorder (PTSD) and mental conditions, for instance, are among those with the highest war-related injuries and most stigmatized impairments (Blanck, 2008; Dean, 1997). We find even with the broadening of pension policy after 1890, which in effect created a welfare program for aging veterans, those with mental disabilities still were more likely to be rejected from the system. Others suggest as the pension system became more open, and as prodded by pension lawyers and the G.A.R., more veterans with stigmatized disabilities took the risk of rejection (see Blanck, 2001). In turn, this may have fed into the prevalent skepticism about disability worthiness and scamming the system, creating a self-fulfilling prophecy.

Cynicism, or at least skepticism, about a system that incentivized the unworthy disabled was famously observed by Civil War General M. M. Trumbull:

If pension laws are potent in the making of diseases, pensions themselves have the opposite effect—they cure them. There is nothing that promotes longevity like a pension. …
Veteran diseases’ are those miraculous ailments, which rage unsuspected in the bodies of old soldiers until seductive pension laws bring them to the notice of the sufferers (Trumbull, 1889, p. 724).

No doubt, pension doctors’ classifications of veterans were affected by the developing attitudes and stigma toward disability, normality and worthiness. Moreover, a contentious process existed between the Pension bureaucrats and the examining physicians, who often had differing definitions and conceptions of disability (Logue & Blanck, 2010). During this period, examining doctors were adapting to a new medical and scientific approach to illness and disability, driven in part by rising workplace injuries from industrialization. Historian Douglas Baynton finds that “the concept of normality” began in America in the mid-1800s and was quickly linked to beliefs of industrialization and social Darwinism (Baynton, 2000, p. 35).

Yet, despite negative attitudes and pressure from the bureaucrats to label those as medically worthy or unworthy, in relatively few cases did examining pension doctors question the legitimacy of veterans’ disabilities. Our analyses performed on examining surgeons’ medical notes for roughly 6,600 white pension claimants, searching for reference to the terms “malingering,” “deadbeat,” “fake,” and “fraud,” yields these terms were used by surgeons in only six of the 6,596 cases studied, representing .09% of the sample (Blanck, 2001, p. 165-66).

Larry Logue and I find that, although physicians were more skeptical of African Americans than of white pension applicants, they were more likely to give black veterans the “benefit of the doubt” than were Bureau officials; a notation of service in the U.S. Colored Troops on an application was enough to set Bureau reviewers against the applicant (Logue & Blanck, 2008, p. 394). Thus, the meaning of disability and pension worthiness often were contested in the context of race (Logue &
Blanck, 2010). One struggle involved the meaning of disability, working to black veterans’
disadvantage insofar as they declined to pursue pensions. A second tension involved perceptions of
the inability “to earn a support.” Here, Bureau reviewers were disproportionately skeptical of black
applicants’ claims that they were unable to support themselves.

Not surprisingly, our studies of Civil War pensions show discrimination on the basis of race.
Logue and I examine such disparities facing African-American Civil War veterans (Logue &
Blanck, 2008). Almost two hundred thousand African-Americans, most liberated from Southern
states, joined the Union Army in the later years of the war. Similar to our findings for
immigrants mentioned below and for those with stigmatized disabilities, black veterans
increasingly applied and subjected themselves to the Bureau’s “moral cost containment” as the
pension law became more inclusive (Logue & Blanck, 2008, pp. 397-398). Essentially, race,
similar to disability type, offered a shortcut for Bureau reviewers to cope with increasing
applications, resist spiraling payouts, and impose order, albeit a discriminatory ordering, on a
massive social program (Logue & Blanck, 2010).

Thus, all else equal, black veterans were less than one-third as likely as white veterans to
be approved for pensions during the General Law, and less than half as likely as they aged under
the expanded 1890 law. Historian Donald Shaffer finds, among other barriers, the pension
process disadvantaged poorer and less literate black veterans who had difficulty proving their
claims (Shaffer, 2004). Black veterans often were subject to “special examinations” or
supplementary investigations to prove their pension worthiness. At the same time, the Bureau
complained of widespread fraud by pension lawyers against their African-American clients:
“[d]ue to fear . . . the negro hands over his whole money, and these agents help themselves to
whatever they see fit.” (Oliver, 1917, p. 34).

Whatever the cause, the end result of this discrimination was, compared to whites, lower pension payments were linked to a shorter life expectancy for African-American veterans. Veterans fortunate enough to receive pensions had their lives extended—after the immediate post-war years, generous pensions were related to improved chances of survival; and the more contact with physicians, the longer the veterans were likely to live (Baynton, 2000; Logue & Blanck, 2004).

Martin Salm finds this same outcome for increases in Civil War veteran life expectancy across socioeconomic status and for those living in urban and rural areas, but particularly for poorer individuals and those in rural areas with acute and chronic conditions (Salm, 2007). Salm concludes “government transfers such as veteran pensions can not only improve the quality of life for beneficiaries, but can also substantially extend their length of life.” (Salm, p. 25).

Likewise, economist Dora Costa finds, especially for black as compared to white Union army veterans, pension incomes increased the chances of retirement and independent living for the elderly prior to the advent of the Social Security scheme (Costa, 2008). After Social Security was enacted, from 1930 to 1950, these differences in black-white retirement rates and living arrangements declined, with concordant rises over time (Costa).

Veterans’ social status also affected disability pensions. Ethnicity was tied to views of deservingness and moral worth, which were linked to nativist views after the Civil War (Baynton, 2000; Gerber, 2001). Although we uncover no apparent disparity associated with nativity when veterans were accepted to the pension system, foreign recruits with disabilities were significantly less likely to apply for a pension in the first place (Blanck & Song, 2001). Compared to the native born,
non-native veterans and particularly Irish immigrants had a substantially lower likelihood of applying for pensions.

Besides attitudes, race, and ethnicity, other post-war social dynamics shaped (and were shaped by) conceptions of disability, and undoubtedly affected longevity. One high profile element was the new attorney bar that represented veterans in their quest for pensions. Never before had attorney advocates been involved in a program of such social and political scale, ostensibly to help disabled veterans pursue monetary gain, public acceptance, and recognition (Blanck & Song, 2002).

Claim agents and their attorney partners lobbied Congress for expansion of the pension system (Glasson, 1918). They reached veterans through newspapers and pamphlets (DeWitt, 2003). However, a backlash came against pension lawyers’ activities during the later part of the nineteenth century when partisan tides changed and critics denounced attorneys as parasites responsible for defrauding the government and their clients of hundreds of millions of dollars. Whether pension attorneys were dedicated advocates or shrewd businessmen, they helped America’s first major disability retirement and welfare system to flourish.

With this complexity and dynamics in play, it is hardly surprising that Bureau officials saw themselves as the last line of defense for the public trust and treasury. Perhaps this is why, as Logue suggests, bureaucrats fell back on comfortable biases about disability worthiness, ethnicity, race, lawyers’ and lobbyists’ motivations, and other like cognitive short-cuts in reaching their ultimate decisions (Logue & Blanck, 2010—for instance, discussing case of veteran Clay Ballard who insisted “I did not receive a fair and impartial examination,” because no “colored ex-soldier can get justice from that board”; see also Oliver, 1917).
In our book, “Race, Ethnicity, and Disability: Veterans and Benefits in the Post Civil War America,” Larry Logue and I pay attention to how veterans’ experiences with the government extended beyond the pension system as they aged (Logue & Blanck, 2010). After the Civil War, partially motivated by the political potential of the “soldier vote,” Congress set up a network of communal homes for older Union veterans, many of whom had war-related disabilities or were living in poverty. Thus, in 1865 Congress established the “National Asylum,” which in 1873 became the “National Home for Disabled Volunteer Soldiers,” also known as the “Old Soldiers Home” (Kelly, 1998, p. 91-93). These homes were integrated into the community and distinguishable from stigmatized “asylums” and poorhouses of the day (Rockoff, 2001).

By 1900, the “Old Soldier” network assisted tens of thousands of veterans in finding communal homes. Historian Patrick Kelley notes “‘cultural attitudes molded during this period permanently shaped the evolution of veterans’ care in the United States.’ … The Old Soldier Homes were the ‘direct bureaucratic forbear of the vast medical system ... operated today as the Department of Veterans Affairs.’” (Kelly, 1998, p. 2). The National Homes contributed to ideas about community integration and support for those deserving and aging veterans who made sacrifices for the country.

Nevertheless, in our studies we find relatively few aging black Union veterans lived in the soldier homes; black soldiers made up about eight percent of the Union army but less than three percent of soldiers’ home residents (Logue & Blanck, 2010). When they lived in the homes, blacks were sent to segregated quarters. By contrast, a high proportion of foreign-born veterans resided in Old Soldier Homes. Irish-born veterans outpaced other groups living in Soldiers Homes, while veterans least likely to live in the homes were the native-born African Americans.
and whites, though these patterns changed over time. By the 1900s, rather than providing for severely disabled veterans, elderly veterans predictably were the majority of residents.

Historian David Gerber suggests today’s attitudes about disability may be found in an examination of the social construction of veterans’ pension programs historically: “The story of disabled veterans is not complete without analyzing the ways representation and discourse transform functional impairments into fixed handicaps or disabilities in various historical environments.” (Gerber, 2001, p. 80). Study of evolving attitudes about contemporary disability laws and policies may be enhanced by an appreciation of the experiences of disabled Americans historically.

The pension scheme with all its partisan faults provided a chance for disabled veterans “to make their political influence felt and [was] a unifying focus for the disability rights movement.” (Dinerstein, 2008, p. 21-22). Civil War veterans formed a unique and newly affiliated group, in which they accepted, to use sociologist Erving Goffman’s approach, “special opportunities for in-group participation.” (Goffman, 1963, p. 38). Disabled pensioners developed, as Professor McMurray suggests, a new and “distinct class consciousness.” (McMurry, 1922, p. 21).

IV. DISABILITY AND DIVERSITY TODAY AND TOMORROW

The Civil War pension scheme evolved within a unique mix of attitudes about disability combined with partisan, economic, and social forces that in many ways parallel challenges and tensions in the world today (Finocchiaro, 2008). Stigma and discrimination against disability affected pensions even when the system was drafted as neutral. This attitudinal penalty was particularly strong against blacks and non-native veterans as they aged.
Political advantage made the disabled a target in calls for progressive reform. This occurred at a time when norms about disability had not developed and advocacy for disability was non-existent (Burgdorf, 2008). Yet, this also was a time of new group affiliation and identity for the disabled, particularly for veterans, that transcended ethnicity, race, and socioeconomic status.

With this unprecedented array of factors, it is not surprising a political and social backlash to the Civil War pension system occurred that affected notions of disability worthiness and advocacy for decades to come, indeed perhaps until the beginnings of the rights-based approach embodied in the ADA. Professor Theda Skocpol’s seminal analysis articulates the underlying partisan attacks and pushback to the credibility of disabled veterans, saying “[b]ecause the very successes of Civil War pensions were so closely tied to the workings of patronage democracy, these successes set the stage for negative feedbacks that profoundly affected the future direction of U.S. social provision.” (Skocpol, 1992, p. 59).

Still, it must not be overlooked that tens of thousands of disabled Civil War veterans—white and black, immigrants and natives, young and old, across the spectrum of physical and mental disability—and their families fought for their right to participate and to live in the world, albeit through striving for economic advantages from pensions. Professor Hubbard comments, “Advocacy by and on behalf of disabled veterans of the Union Army following the Civil War is, in large part, the genesis of the contemporary struggle of people with disabilities for social and economic recognition.” (Hubbard, 2006, p. 979; see also Burgdorf, 2008; Hickel, 2001).

Through their advocacy, they contributed to the social and political understanding of what it means to be “disabled”—a question that continues to spark controversy today (Burgdorf, 2008). As said, pensions increased the chances ex-soldiers would live independently in their homes and work in
the community as opposed to residing in Old Soldier Homes or segregated institutions. There is, therefore, much to learn about disability policy from history (Baack & Ray, 1988; Rockoff, 2001).

The Civil War pension scheme similarly influenced views of subsequent welfare and elder reform, in particular, the advent of the Social Security system. Indeed, early Social Security programs focused on retirement payments and insurance for “Old Age” (Costa, 1998, p. 17-18). Professors Baack and Ray conclude “the prior legislative history and administrative experience with the veterans’ pension program increased the likelihood that in the context of the Great Depression a coalition could be formed to enact a Social Security Act.” (Baack & Ray, 1988, p. 701). In this and other ways, collective action and the social identity of disabled veterans and their families contributed to the evolution of the modern welfare, health insurance, and old age retirement system.

In this final part, I review areas for future examination related to disability as an element of human diversity. Some question whether disability and disability civil rights even are properly considered an element of diversity policy and practice in the workplace and elsewhere. Yet, as President Franklin Roosevelt stated in his “economic bill of rights” in his 1944 State of the Union address, during another time of great global challenge, “true individual freedom cannot exist without economic security and independence.” (Roosevelt, 1944). The same is true today for millions of Americans with disabilities.

The topics I discuss below link America’s historical conceptions of disability to contemporary attitudes about employment, today’s American disabled veterans, and global opportunities in disability rights. Professor Michael Perlin has written that to make progress in disability rights “[w]e must go beyond the law and focus also on the issues of attitudes.” (Perlin, 2008, p. 416). I draw next on our projects at the Burton Blatt Institute (BBI), through which we
are pursuing a global strategy to help advance the economic, social, and civic empowerment of people with disabilities, in large part, by changing attitudes (Blanck, 2005; Burton Blatt Institute, 2011c).

A. Employment and Attitudinal Discrimination

Our historical and contemporary research illustrates the dynamics, or what Professor Ruth Colker (2005) calls the “pendulum,” of disability identity and affiliation in society. Similar swings are found in early judicial interpretations of the ADA, as judges narrowed the law regarding the inclusion and equal rights of people with disabilities, particularly in the workplace. In 2008, the ADA was amended to address these concerns by broadening the definition of disability for purposes of the law (Blanck et al., 2009). We also have seen judicial and governmental attitudes about disability often combine with a “blame the victim” mindset, which condemns and patronizes disabled people on the basis of their status. Indeed, reports suggest that negative stigma toward people with disabilities in general, and with mental disabilities, in particular, is rising (Markin, 2005, p. 155).

Some disabled leaders at the forefront of advocacy today often are cast as frivolous and serial litigators, supported by fee-driven attorneys (Blanck & Song, 2002). Whether at the height of the Civil War pension system or, for instance, in today’s workplace, disability advocacy is not easily accepted and old tensions emerge: Are they active social participants or passive recipients of welfare and charity, rights-based advocates or prey to “parasite” lawyers? (Rothstein, 2008). Sam Bagenstos examines so-called “abusive and extortionate litigation” under the ADA and contrary to popular belief concludes “judges have shown little concern for whether the defendants were violating the law.” (Bagenstos, 2006, p. 3; Bagenstos, 2000, p. 397).
One area in which attitude change is accelerating is in the private employment sector, particularly reflected in corporate culture about disability and diversity, though overall employment rates for persons with disabilities remain low (Burkhauser & Stapleton, 2003; Schwochau & Blanck, 2003). Professors Lisa Schur, Doug Kruse, Joe Blasi, and I are conducting a series of studies examining corporate practices and collective attitudes in the employment of persons with disabilities (Schur, Kruse, Blasi & Blanck, 2009). We conducted the first large-scale exploration of the experiences and attitudes of thirty thousand employees with disabilities. We find people with disabilities face important disparities at work, including lower pay and benefits, and less job security. These “disability gaps” contribute to negative evaluations of treatment by workers with disabilities, and their higher turnover and lower levels of job satisfaction (Schur et al.). A self-fulfilling prophecy is thereby established.

But also our studies suggest disability gaps vary substantially across companies and worksites, showing that attitudes play an important role in employment outcomes. In workplaces where employees report high levels of company fairness and responsiveness, there are no significant differences between employees with and without disabilities on measures of job satisfaction, company loyalty, willingness to work hard, and turnover intention. By contrast, in worksites where employees perceive lower levels of attitudinal fairness and responsiveness, employees with disabilities have especially low levels of job satisfaction, loyalty, and willingness to work hard, and express greater turnover intentions. The findings point to workplace attitudes and culture having a large influence on the employment of persons with disabilities.

There is a need for future investigation given the limitations of any single sample, however large. Samples of companies should be further broadened and the surveys tailored to study disability
and diversity issues, and information on type (e.g., mental or physical) and severity of disability.

Schur et al. (2009) note there may be interactions between disability and demographic characteristics—such as with race, ethnicity, and gender, which would parallel our historical findings described earlier—that explain a more complex and nuanced picture. Also, it will be valuable to assess whether a disability’s onset occurred before or after the employee joined the company (or from other causes such as incurred in the Armed Services). This is because employers treat employees who acquire a disability differently from job applicants with other disabilities, for instance in the provision of workplace accommodations (Gunderson & Hyatt 1996; Schartz, Hendricks, & Blanck, 2006; Schartz, Schartz, Hendricks, & Blanck, P, 2006). This trend often is found despite accumulating information that workplace accommodations costs are relatively low and their economic benefits high to employees, customers, and workers without disabilities (EEOC, 2011, citing accommodation studies).

Another aspect of the ongoing corporate culture program of research at BBI involves the development of in-depth case study analysis. Initially supported by the U.S. Department of Labor’s Office of Disability Employment Policy (ODEP), our research consortium is developing standardized case studies of disability and diversity, corporate culture, and best practices. The ODEP study is among the first to help companies systematically benchmark organizational culture and diversity practices, and promotion and hiring programs that benefit people with disabilities and the companies themselves.

A further challenge today is to ensure the federal government acts as a model employer for persons with disabilities, promoting values for community and economic participation, and the dignity of independence and recognition. Since the revolutionary war and through the Civil War,
disabled veterans were given preferences in federal employment (Logue & Blanck, 2010). In the late 1800s, many disabled Union veterans (and their widows) worked at the Bureau or for the Customs Service (Dearing, 1952; Glasson, 1918). Yet, federal jobs after the Civil War were hard to come by as veterans with and without disabilities were able to apply (Kelly, 1998).

Unfortunately, the federal government still faces challenges in employment of persons with disabilities and must address aspects of its organizational culture that leaves employees with severe disabilities vulnerable to bias and discrimination in career advancement and promotion opportunities. One promising sign is that the U.S. Department of Labor’s Office of Federal Contract Compliance Programs (OFCCP) is considering strengthening the affirmative action requirements of its regulations for section 503 of the Rehabilitation Act of 1973 (as amended) to increase the employment (i.e., recruitment, hiring, retention, and advancement) of people with disabilities in the Federal contractor sector, and to better assess progress through evidenced-based practices (Federal Register, 2010).

Whether in the private or public sector, organizations need to address discrimination toward persons with disabilities. As we have seen historically, out-group individuals, such as those with severe and mental disabilities face greater stereotyping, stronger negative attitudes, and fewer career opportunities. These attitudinal barriers will continue—as they have for many years—until there is meaningful accountability for change.

Foremost, is the need to address the low employment of persons with disabilities as means to counter longstanding bias and stereotypes. Systemic change is needed to transcend paper or “minimal” compliance with the law (Edelman, 1992; Wooten & Jamesy, 2005, p. 135). Enhanced understanding of attitudes and the diverse experiences of employees with disabilities may help to improve employment rates, working conditions, and, importantly, the acceptance of
people with disabilities as capable contributors in the workplace.

One promising approach toward a broader understanding of attitudinal disability discrimination is proposed by Professor John Dovidio and his colleagues. These researchers isolate the underpinnings and overlap of stigma and prejudice in contemporary research models of race and disability discrimination (Phelan, Link & Dovidio, 2008). They identify dimensions of overlap between prejudice and stigma, which shed light on the evolution of disability as a social and legal construct: “exploitation and domination (keeping people down), norm enforcement (keeping people in) and disease avoidance (keeping people away).” (Phelan et al., p. 365). “Down, in, and away” aptly is shorthand for how historically and today, people with disabilities have been dominated, left out, and segregated.

B. Today’s Veterans of the Middle East Wars

Wars create a cohort of disabled veterans who on their return seek a measure of gratitude and inclusion in society. America now is engaged in wars, with casualties mounting. Since 2001, more than 1.6 million men and women have served in Iraq or Afghanistan (Veterans for Common Sense v. Peake, 2008). Within one year of their return, one third of these veterans were treated for Post-Traumatic Stress Disorder (PTSD) as a mental health diagnosis (Veterans for Common Sense).

More than fifty thousand soldiers have non-mortal war wounds (Bilmes, 2007). The social and economic issues associated with war stressors, and particularly subsequent physical and mental disability, are substantial (Markin, 2005). In addition, many veterans today survive traumatic brain injuries, which require substantial rehabilitation and mental health resources. In his study of Union Civil War veterans, Professor Chulhee Lee finds the economic costs of that War were much greater when adding the adverse effects over time of wartime on veterans’ subsequent physical and mental
health (Lee, 2003), and the same likely is true today.

In a review from the Civil War to the Vietnam War, Eric Dean likewise finds veterans’ claims for PTSD are disfavored by the Bureau and the Veterans Administration (VA) (Dean, 1987). As found in our Civil War studies, less visible and understood impairments, such as mental conditions, were subject to criticism in the press and by the public (Blanck, 2001). Mental illnesses and infectious diseases, for instance, are impairments especially subject to severe prejudice, while orthopedic injuries and visible conditions are subject to less prejudice in pension determinations. Dean similarly finds that although a Civil War veteran’s physical war injuries may produce mental health conditions, “a veteran who suffered no physical wounds or diseases and was anything short of stark, raving mad and yet complained of mental problems originating in the war would have been regarded as a malingerer in this era” (Dean, p.159). Civil War veterans with “nervous disorders” or mental illness, what today we call PTSD, often were excluded from the Old Soldiers Homes.

Today’s generation of disabled veterans, men and women, are navigating the challenges of return to society, work, housing, family life, and attitudinal stigma. Unfortunately, the Government Accountability Office (GAO) finds many government agencies such as the VA lack a modern concept of disability: “[F]ederal disability programs remained grounded in outmoded concepts that have not been updated to reflect the current state of science, medicine, technology, and labor market conditions.” (GAO, 2008, p. 8).

Unlike prior wars where most disabilities and deaths resulted from disease, dysentery, and infection, advances in medicine and technology enable soldiers to survive battlefield injuries that in the past may have been fatal (Burton Blatt Institute, 2011a). The cohort of returning soldiers with disabilities from Iraq and Afghanistan has an average age of twenty-five years, a current life
expectancy of 65 years, and limited education and employment experiences (Bilmes, 2007). With history as guide, disability will affect their long-term employment, health and social status, and life expectancy (Anderson & Anderson, 1984; Gerber, 2001). War-stressors are particularly hurtful to younger and less educated veterans (Anderson & Anderson). These studies suggest the link among war injuries, resultant PTSD, and shorter lives. In a study of Civil War veterans, Professors Costa and Kahn (2008) likewise show greater wartime stress associated with higher mortality rates at older ages.

New programs for veterans with disabilities must focus on return-to-work, social competences, independent living, and economic self-sufficiency. In 2007, in partnership with BBI the Syracuse University Whitman School of Management established the “Entrepreneurship Bootcamp for Veterans with Disabilities” (EBV) to offer free programs to disabled veterans of Iraq and Afghanistan (Burton Blatt Institute, 2011a). The EBV program involves online and onsite courses on entrepreneurship and asset accumulation. The venture was so successful that by 2009, its third year of operation, five other universities adopted the Whitman program at no cost to the veterans, and other university participants soon will follow.

As mentioned, despite advances and demonstration projects like the disabled veterans entrepreneurship boot camp, SSA and VA “eligibility criteria fall short of fully incorporating a modern understanding of technology and labor market changes,” as well as the rights-based approach to disability benefits and inclusion in society (GAO, 2008, p. 0). In light of the ADA and its revitalizing Amendments Act of 2008, there is an opportunity to use disability rights principles to ensure full reintegration into society for today’s veterans (Hubbard, 2006; Mor, 2006). Professor Hubbard suggests, “[T]hroughout our nation’s history, veterans and civilian disability rights advocates alike have contributed to advances in medicine and disability policy and informed our collective
understanding of disability.” (Hubbard, p. 986). Even the Civil War Old Soldiers Homes symbolized for veterans and others, as Patrick Kelly found, “the role of family and community at the very center of American national life.” (Kelly, 1998, p. 25).

Perhaps, as after World War II, a GI Bill of Rights is needed to aid veterans with disabilities, and their families, readjust and reintegrate into society. Syracuse University Chancellor Nancy Cantor observed that after World War II, the university enrolled 10,000 veterans, tripling enrollment (Cantor, 2008). Educational and employment opportunities are paramount for veterans and their families to accumulate assets and remain out of poverty.

There are more than two million American veterans now receiving disability benefits (Bilmes, 2007). As the case since the Civil War, while disability pensions tend to extend the lives of veterans, these benefits provide for “a reduction in quality of life due to service-connected disability” and “provide compensation for average impairment in earnings capacity” on the basis of disability severity (Bilmes, p. 7). Our challenge is to ensure for our veterans that the concepts of civil rights—economic empowerment and community integration, rather than “incapacity” or “impairment” to work or stigma toward mental disability—will be embraced.

C. Global Opportunities in Disability Rights

The aspiration for all to live equally in the world is now global. The 2007 United Nations Convention on the Rights of Persons with Disabilities (CRPD) views a world of collective action and participatory justice for persons with disabilities. Particularly in developing countries, persons with disabilities are stigmatized, segregated, less educated, and poor (Braithwaite & Mont, 2008; Filmer, 2008). In developing countries, people with disabilities lack basic life sustaining supports, which contributes to declines in overall health and life expectancy. The CRPD provides an opportunity to
pursue global change in developing and developed countries, and the U.S. has an opportunity to remain a global leader in disability rights when it ratifies the treaty.

Deon Filmer finds “basic facts about disability, poverty, and schooling in developing countries are unknown or have not been systematically addressed.” (Filmer, p. 142). Filmer finds disability associated with poverty, in large part, because children with disabilities are less likely to receive education that allows them to participate in the economy, earn incomes, and pursue economic self-sufficiency. World Bank researchers, Jeanine Braithwaite and Daniel Mont, find in India “poor prospects for education and employment among disabled people, and the intense stigma that they often face, are expected to drive them into poverty.” (Braithwaite & Mont, 2008, p. 12).

One organization addressing these issues is the Global Partnership on Disability and Development (GPDD), which promotes inclusion of persons with disabilities and their families in their local communities and assists in poverty reduction strategies (GPDD, 2008). The GPDD was established by a task force with assistance from the World Bank. For several years, BBI hosted the GPDD’s Secretariat and supported its development and promotion. The effort continues to bring together global stakeholders to promote positive attitudes and action for the integration and economic empowerment of individuals with disabilities. It is developing programs for access to education, employment, transportation, technology, and communications. GPDD is seeking to change attitudes and stereotypes about people with disabilities around the world, in ways consistent with the CRPD (Reina, Adya & Blanck, 2007).

As the CRPD and its human rights model of disability are adopted, other inclusive approaches to development strategies may result (Mont, 2007). One prominent leader, Irish Law Professor Gerard Quinn, views economic development strategies and disability rights as part of a country’s political
process, and that one major goal of the CRPD is to spur this connection (Quinn, in press). Quinn believes the Convention’s values of freedom from stigma and discrimination, independence in living, and economic self-sufficiency “frame disability issues as issues of justice” (Quinn, 2008). Quinn further sees a “deeper reason” for the Convention that addresses:

a chronic failure of politics in the past. . . . a failure in the political process to frame disability as an issue of justice and rights. Its legacy has been a large volume of unjust and discriminatory laws and practices around the world which have yet to be undone. . . . [T]he convention [i]s a means—among others—of correcting for that failure—as something that not only helps roll back that legacy but that also points to a new practice of disability politics. (Quinn, 2008).

It is apparent how far conceptions of disability have come when we reflect on the Civil War pension scheme, which did not frame disability as an issue of “justice and rights,” to use Quinn’s notions, but rather as one of charity, deservingness, and later, welfare, elder support, and rehabilitation (Quinn, 2008). Yet, as earlier advances have faced backlash and recoil, the CRPD is facing pushback and challenges in implementation and ratification (Quinn).

To further the goals of the Convention, along with the GPDD model for economic empowerment and social justice, BBI is working with the National Institute on Disability and Rehabilitation Research (NIDRR) on “Asset Accumulation and Economic Self-Sufficiency” (Burton Blatt Institute, 2011b, c). There perhaps is no other single global policy issue that captures the potential of civil and human rights as does the emerging field of asset-development policy, with its potential to enable social, civic, and economic participation for persons with disabilities.

Economic empowerment policy transcends traditional “income maintenance” and charitable, medical, and welfare “inability to work measures” that have anchored disability policy since the Civil War era (Mendelsohn, 2006). The ability to own and accumulate assets through employment,
entrepreneurship and other means is a right of citizenship, which promotes community inclusion and
social participation, education, independence, self-esteem, and increases in health and later life
functioning (Barr & Sherraden, 2005; Sherraden, 1991).

Yet, our studies and those of others reveal people with disabilities continue to be excluded from
these opportunities (Ball, Morris, Hartnett & Blanck, 2006). There is no simple solution to the global
challenges facing individuals with disabilities to escape poverty and advance economic self-
sufficiency and community participation. Our team is focusing on strategies for attitude change,
educational support, economic policy reform, and government aided savings and micro loan
programs. But as long as disability is viewed as a problem to cure, or an incapacity to participate in the
labor force, and not tied to rights and justice issues, the potential for individuals with disabilities to
accumulate assets and their right to live equally in the world will be stymied. The longer term solution
is to build links across education, economic development, community participation, and positive
attitudes about disability in the United States and globally.

In addition to attitude and economic innovations, forward-looking private and public sector
organizations increasingly understand the importance of, and market for, Universal Design (“UD”)
approaches that increase usability, safety and health of environments particularly in times of natural
and man-made disasters, and products and systems in response to the diversity of all people and
abilities. With attention focused on changing demographics, individual differences in functional
ability and personal preferences are part of everyday life experience, particularly as enhanced by our
technologically-based society and markets.

UD is a paradigm for design of the built environment and products to address the diversity of the
human experience and increase use by all by introducing flexibility, choice and accommodating
features to the physical world, products, and business practices. With support from the public and private sectors, I have the honor to serve as chairman of the Global Universal Design Commission, Inc. ("GUDC"), which is a not-for-profit corporation established to increase understanding and use of universal design to change the world in which we live (GUDC, 2011).

With bipartisan support in the U.S. at federal and state levels and from major multinational corporations, as well as involvement of the design, development, disability and aging communities, the GUDC mission is accelerating the adoption of UD concepts. The longer term goal is to move design for the range of human diversity, performance and preferences beyond focus on “minimal compliance” with laws to a vision of design that provides ease of use without disadvantage to any group or individuals. UD benefits everyone—women and men, elders and children, people with diverse disabilities and those without, people using different languages. Practicing UD broadens market penetration, enhances inclusive corporate cultures, and increases consumer satisfaction because it addresses differences and preferences of all types.

UD is changing our world, as sustainable (“Green”) design is changing business practices, business culture, and experience across the globe. Ten years ago, sustainable design was more theory than practice. Today, governments, developers and corporations emphasize sustainability and Green design to respond to changing public expectations. The same trend is evolving in the area of UD. Thus, buildings and products designed according to the UD standards benefit everyone, including the 650 million people living with disabilities worldwide, the growing aging population, and all their family members. Businesses stand to reap enormous social and economic benefits from the implementation and use of UD, including an increase in consumer base, customer loyalty, and an expanded, diverse, and productive labor pool.
V. CLOSING

Yesterday and today, the world confronts prejudice, stigma, and ambivalence toward persons with disabilities. Conceptions of “worthiness” and “capacity” are tied to the social and policy definitions of disability and diversity (Bagenstos, 2004; Stone, 1984). This is the state of affairs as the global population of persons with disabilities grows, ages and lives longer. It is the case as we face global economic and environmental emergencies not seen since the Great Depression. In 2011, Senator Tom Harkin noted that currently “more than two thirds of Americans with disabilities are without a job, and adults with disabilities are leaving the labor force during this recession at more than 10 times the rate of adults without disabilities.” (Harkin, 2011). Harkin challenges corporate America to increase the number of Americans with disabilities working from 4.9 million in 2011 to 6 million in 2015.

These challenges also create opportunities for reform and innovation in economic and business, health care, disability, universal design, diversity, and aging policy and practice. Importantly, such reform must be driven and accompanied by attitudinal change toward disability as a natural element of human diversity. In a recent study with my colleagues Mohammad Ali and Lisa Schur (2010), we asked the question “Do non-employed people with disabilities want to work, and if so, what types of jobs do they want?” Prior research seeking to explain the low employment rate among people with disabilities focused primarily on skill gaps, employment disincentives from disability income, accommodation mandates, and employer attitudes toward diversity and unwelcoming corporate cultures. There has been less attention paid to the actual attitudes of non-employed people with disabilities.
We used data from the 2006 General Social Survey (GSS), which is a nationally-representative survey of Americans age 18 or older, conducted every year or two since 1972 by the National Opinion Research Center at the University of Chicago. We identified 2,777 respondents with disability information, of whom 590 had a disability (weighted disability rate of 19.2%). The findings indicate the low employment rate of people with disabilities is not due to their reluctance to work or to different job preferences. Non-employed people with disabilities are as likely as their counterparts without disabilities to report they want a job now or in the future, and do not express generally different preferences over the characteristics of jobs.

While people with disabilities are as likely as those without disabilities to express the desire for a job, they are less likely to be looking for a job. This lower optimism may reflect the recognition that, without accommodation, one’s impairments may restrict access to possible jobs. But also, the lower optimism may reflect perceptions that employer attitudes about disability diversity, including a reluctance to make workplace accommodations, decrease the chances of a job offer, promotion, or successful retention (Schur et al., 2009). Although government benefits from disability programs influences employment trends for people with disabilities (Bound, 2002; Logue & Blanck, 2010), in this sample we find the same pattern of optimism over finding a job even when restricting the sample to people who do not receive disability, pension, or welfare income.

The answer then to the question —“What types of jobs do with disabilities want?”—therefore seems to be “The same as everyone else.” For employers, who today face an unprecedented challenging and competitive economic environment, people with disabilities remain an underutilized labor pool that can fill expected labor shortages as baby boomers retire. Moreover, present labor demographics and economic realities require more people to remain working at older ages, so there
will be increased attention in corporations to disabilities resulting from work and aging. These combined trends, which are likely to last a generation, are opportunities for those forward-looking employers to develop innovative strategies to hire and retain qualified and motivated workers with and without disabilities, as well as to enhance and expand the diversity of their consumer base.

In 2003, my colleagues and I (Ball et al. 2005) conducted the first investigation of the inclusion of people with disabilities in the diversity policies of the most successful businesses in the United States. We examined the workforce and supplier diversity policies of the top 100 companies on Fortune Magazine’s 2003 list of the 500 most profitable companies in the nation. The majority of these companies (92%) had extensive information publically available about their diversity policies, practices and initiatives. Our findings were that the majority of the companies that top the Fortune 500 list had developed and implemented diversity policies. But, of these, less than half (42%) had diversity policies that included people with disabilities in the definition of a diverse workforce; only 15% of supplier diversity policies examined included disability in the definition of diversity. Further research is needed to examine the effects of diversity policies on people with disabilities in workplaces and in society, and to assess the extent to which organizations increasingly include disability in their diversity and inclusion agendas, as well as in their strategic business planning (Adya et al., 2010).

Historically and today, people with disabilities confront prejudice, stigma, and ambivalence. Unlike the experiences of Civil War veterans and their families, today’s children and young adults, many who are veterans, are the first generation to be born under the principles of disability rights and diversity as set out in landmark laws like the ADA in the U.S. or globally as expressed in the UN Convention on Disability Rights (CRPD). This new generation with and
without disabilities expects to be included and live in society and not in institutions, expects to work and not be relegated to segregated workshops, and expects to be economically secure and independent, and not dependent on governmental benefits or charity.

The challenge is to continue to stamp out stubborn attitudinal legacies of exclusion, unworthiness, and incapacity, and to help the new generation achieve the values of equal rights and inclusion for all. As I have commented elsewhere in regard to disability and diversity (Santana, 2011): “Diversity is not a project to be completed with a crowning success, but a journey of continuing evolutionary refinement.”
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