

2018

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Recommended Citation

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DOI: [10.1017/S0898030618000143](https://doi.org/10.1017/S0898030618000143)The definitive version is available at: <https://www.cambridge.org/core/journals/journal-of-policy-history/article/how-the-nations-largest-minority-became-white-race-politics-and-the-disability-rights-movement-19701980/20EB1D5DD39E5B1C55C5B1BFD4A82B9E>

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Full citation:

Erkulwater, Jennifer L. "How the Nation's Largest Minority Became White: Race Politics and the Disability Rights Movement, 1970-1980." *Journal of Policy History* 30, no. 3 (July 2018): 367-399. <https://doi.org/10.1017/S0898030618000143>

<CT> How the Nation's Largest Minority Became White: Race Politics and the Disability Rights
Movement, 1970–1980

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ABSTRACT: Scholars point out a tension between racial justice and disability rights activism. Although racial minorities are more likely to become disabled than whites, both disability activism and the historiography of disability politics tend to focus on the experience and achievements of whites. This article examines how disability rights activists of the 1970s sought to build a united movement of all people with disabilities and explains why these efforts were unable to overcome cleavages predicated on race. Activists drew from New Left ideas of community and self-help as well as the New Right rhetoric of market freedoms to articulate a vision of liberation for people with disabilities. Though they yearned for racial solidarity, in practice, activists could not overcome institutions that separated antipoverty and racial politics from disability policy, nor could they figure out how to incorporate minority voices in an identity-based movement forged around disability rather than color.

KEYWORDS: Disability Rights, American Coalition of Citizens with Disabilities (ACCD), , New Deal Liberalism, Independent Living, Disability Activism

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I am grateful to the staff at the Bancroft Library in Berkeley, California, for their assistance, and to the panelists and participants at the 2104 American Political Science Association Meeting in Washington, D.C.; the 2016 Policy History Conference in Nashville; and the four anonymous reviews for the *Journal of Policy History* for their many helpful comments.

In April 1977, the American Coalition of Citizens with Disabilities (ACCD) become frustrated with the Carter administration's failure to issue rules implementing Section 504 of the Rehabilitation Act of 1973, a provision that guaranteed a limited set of nondiscrimination rights to people with disabilities. After Secretary of Health, Education, and Welfare (HEW) Joseph Califano suggested the need for further study, the ACCD, an umbrella organization of disability groups, called on people with disabilities around the nation to protest the delay. Approximately

150 activists showed up at the regional offices of HEW in San Francisco and began a sit-in that lasted for twenty-five days, the longest in American history. They intentionally chose the tactic of the sit-in to draw parallels between disability rights and the African American fight for equal dignity. The Section 504 sit-in brought together a cross-impairment and racially diverse group of the disabled, supported by a legion of radical organizations in the Bay Area, from the Black Panther Party, which supplied hot meals, to the gay rights Butterfly Brigade, which smuggled walkie-talkies into the building after federal officials cut the telephone lines. For many activists who participated, the diversity present and the organizational cooperation exemplified the inclusivity of the civil rights struggle. “The whole thing was like a living role model” of “the purpose . . . embod[ied] in those regulations,” recalled Mary Lou Breslin. Another protester, Ron Washington, found himself moved by “the comradeship around political needs and the working together to get those needs taken care of,” so much so that he was reluctant to leave the federal building at the conclusion of the protest.¹

Given the resonance of the Section 504 sit-in, the estrangement between many people of color and a movement that aspired to speak for all people with disabilities is rather puzzling. Despite the fact that racial minorities report higher rates of disabilities than whites, Chris Bell and Josh Lukin argue that disability studies scholarship largely chronicles the achievements and experiences of white Americans.² The alienation extends beyond historiography. During the Section 504 protest, Ed Roberts proclaimed that the disabled were the nation’s largest minority group.³ Disability rights activists, however, have sometimes borrowed from the iconography of black history in awkward ways. In 1986, for instance, ADAPT founder Bob Kafka asked civil rights heroine Rosa Parks to lead his group’s protest against the American Public Transit Association in Detroit. Not wanting to embarrass the black political establishment of her

hometown, including Coleman Young, the city's first African American mayor, Parks refused, much to the dismay of the many disability rights activists who admired her.⁴ A few years later, during congressional debate over the Americans with Disabilities Act (ADA), supporters of the law repeatedly resorted to racially coded language by promising that it would turn people with disabilities from welfare recipients into productive, taxpaying citizens.⁵ Of course, the disability rights movement is not alone in facing accusations of privileging white voices and white experiences.⁶ Nor are black activists necessarily attuned to disability-based injustices.⁷ But what is striking is the extent to which estrangement emerged despite moments of racial solidarity and despite activists' professed commitment to racial justice.

Drawing from oral histories, records of the Center for Independent Living (CIL) in Berkeley, California, and congressional documents, this article grapples with the struggles of disability rights activists to create a racially inclusive movement of people with disabilities.⁸ Lukin suggests that the tension between disability advocacy and black activism has been present since the earliest days of the disability rights movement.⁹ Accordingly, in this article, I focus on the period between 1970 and 1980, which spans the founding of the Physically Disabled Students Program (PDSP), the first organization dedicated to independent living and self-help, to the end of the Carter presidency. During this decade, the independent living movement became the grassroots vanguard of a broader but loosely connected coalition that included the deaf, the blind, parents of disabled children, self-advocates, and people with psychiatric and developmental disabilities.¹⁰ Many of the ideas regarding independence, consumerism, and empowerment developed by these activists shaped the political discourse of disability rights in the 1980s.

This article contributes to our existing understanding of disability rights in two ways. First, it draws attention to the work of grassroots activists and volunteers, especially those in California, who were vital to the development of disability rights as a national social movement. The approach complements existing histories of disability policy, which emphasize the “insider” efforts of members of Congress, their staff, and program bureaucrats when explaining the development of disability programs.¹¹ By contrast, the focus on “outsiders” sheds light on how activists labored to incorporate racial justice into what they saw as a larger movement for basic human rights. Second, the article enriches existing assessments of disability rights activism. Much of the scholarship on the contemporary movement points out that activists were quick to adopt conservative criticisms of “big government” as intrusive and “condescending . . . toward those it supposedly serves.”¹² Indeed, some scholars view the activists as privileged and politically savvy libertarians, who rejected pity, charity, and welfare and allied with Republicans to secure passage of the ADA.¹³ These assessments, however, do not fully capture the challenges activists faced not only in uniting disparate groups of the disabled but also in articulating a strategic vision of egalitarianism. Movement leaders claimed that, despite differences in their impairments, the disabled shared the experience of social isolation and exclusion. Some of them also recognized that race, socioeconomic class, and gender mediated the ways in which disabled individuals were marginalized. Yet they remained uncertain about how to fold racial equity into disability rights. My purpose is to embed their search for unity among the disabled within a larger institutional context and to illustrate the ways in which that context complicated efforts to forge an agenda to address exclusion in all its forms.

To do so, I use Desmond King and Rogers Smith’s concept of racial institutional orders. According to King and Smith, racial institutional orders are coalitions of political institutions,

organizations, and actors that are held together by shared beliefs about race and common aims with respect to race relations. Political leaders maintain these coalitions by pursuing governing agendas that distribute authority, resources, and prestige along racial lines. Competition between two such orders, one committed to white dominance and the other to egalitarianism, has shaped American political debates over citizenship across time and has informed the nation's conflicts over other forms of hierarchy, including economic and gender inequality.¹⁴ Viewing disability advocacy through the lens of racial orders moves us beyond thinking of disability rights activists as merely strategic or inherently libertarian. Instead, the perspective calls attention to activists wrestling with vexing questions of identity, equality, and state action amid political and institutional terrain upended by the African American civil rights movement. Attention to racial institutional orders, in short, allows us to understand how disabled activists could yearn for racial solidarity yet still fall short of racial inclusivity.

The independent living movement came into being at a time when America's racial order was in turmoil. In the 1960s, blatant white supremacy gave way to a formal commitment to egalitarianism, not just with respect to race but also gender. By the 1970s, however, efforts to transform social and economic institutions so as to achieve egalitarianism in fact, rather than just in name, had stalled.¹⁵ This article examines both how disability rights activists navigated this turbulent political landscape and how these activists took advantage of these changes in an effort to transform disability policy. Politically awakened by the campus radicalism of the 1960s, independent living activists used federal resources available to antipoverty organizations to found grassroots associations devoted to liberation politics. They rejected prevailing government programs, which they saw as contributing to their subordination, and instead lobbied for programs that would promote collective action and the right of self-determination. Braiding New

Left ideals of equality with the antigovernment sentiment of the New Right, they sought to create a grassroots network of self-help centers that would teach individuals with disabilities how to achieve self-determination and, they hoped, unite people with disabilities—long divided along cleavages of impairment, age, gender, race, class, and military service—into a political force. But as the consensus supporting New Deal liberalism collapsed in the 1970s so did the momentum behind independent living. Federal social welfare policy came to prize self-sufficiency rather than self-determination, and activists found it difficult to incorporate minority voices. Though they aspired to an inclusive movement, in practice, activists could not overcome institutions that separated antipoverty and racial politics from disability policy. The transformation of disability rights during this period culminated, in the 1980s, with advocates demanding the “opportunity to be productive” so they could break the “bondage of unjust, unwanted dependency.”¹⁶

<1> Disability, Race, and New Deal Liberalism

Throughout the late nineteenth century and for most of the twentieth century, disability and color remained intimately intertwined as justifications for the denial of equal rights. Between 1880 and 1920, theories of scientific racism equated whiteness with physical fitness, mental rigor, and genetic superiority. During the Gilded Age and Progressive Era, widespread beliefs that blacks, Mexicans, and Asians were inferior races justified a host of white supremacist measures, including segregation, immigration quotas, compulsory sterilization, and antimiscegenation laws. So pervasive was the prejudice against impairment and blackness that mainstream organizations representing the blind and the deaf remained racially segregated and avoided association with

groups representing other forms of disablement.¹⁷ Even as it erected an edifice for security against the vagaries of capitalism, the New Deal reaffirmed the existing order of white dominance.¹⁸ Labor policy enforced norms of breadwinning by supporting collective-bargaining arrangements that secured the family wage and publicly subsidized health and retirement benefits for a largely white and male workforce. Social insurance protections against old age and disability were available to workers who held industrial jobs, at the time reserved almost exclusively for white men. By contrast, reasoning that domestic chores did not constitute “work,” vocational rehabilitation (VR) counselors routinely denied services to women too impaired to fulfill household duties, and most African Americans remained locked out of Social Security until 1950, when Congress extended eligibility for Old Age Insurance (OAI) to agricultural and domestic workers.¹⁹ Dependency became a status reserved primarily for women and racial minorities, who, cut off from breadwinning, were compelled to rely on private charities, public coffers, and the wages of breadwinners for their economic well-being.²⁰ Postwar disability activism took root within this racial order. Between 1930 and 1950, disability organizations, such as the League of the Physically Handicapped, the American Federation of the Physically Handicapped, and the National Federation of the Blind, petitioned the federal government for increased job opportunities for the disabled. Their campaigns, however, were waged largely, though not exclusively, by white men demanding access to a labor market where race dictated the jobs available, the working conditions, and the prevailing wages.²¹ While they challenged the denial of opportunity to the disabled, few activists questioned exclusions premised on race or gender. The independent living activists of the 1960s, by contrast, aspired to create racially diverse cross-disability organizations. Their movement arose first on college campuses, where higher education programs for veterans and polio survivors brought young people with mobility

impairments together, and where, in California, the assertiveness of blacks, Asian Americans, and Chicanos affiliated with the Third World Liberation Front offered them a template for defiance of the status quo.²²

By the 1960s, institutions that shored up economic security during the decades following World War II operated in tension with demands for equal respect of people of marginalized identities. The social upheaval of the decade presented independent living activists with both an opportunity to rethink breadwinning as the organizing motif for social policy and the resources to build an organizational infrastructure for political action. Seeking to empower the poor, planners of the War on Poverty created a variety of programs that brought resources into disadvantaged communities to help the poor build job skills and fight entrenched interests. Advocates for the poor used these programs to build welfare rights organizations and to pressure local officials to address the demands of impoverished groups.²³ Disabled activists capitalized on them as well.

Strongly influenced by the civil rights and women's movements, independent living activists rejected the premises of federal disability policy, which they believed reinforced widespread social perceptions that the disabled were fragile, passive, and incapable of leading productive lives. They singled out in particular vocational rehabilitation programs, which routinely excluded the severely disabled as unsuitable for employment, and income support programs like Supplemental Security Income (SSI), which provided a minimum income based on the recipient's presumed incapacity for productive work. These positions set them apart from their counterparts in the black civil rights and welfare rights movements, who lobbied Congress throughout the 1970s to make income support more widely available to the poor. Disability rights activists, by contrast, sought to reorient policy from self-sufficiency and compensation toward self-determination and empowerment, a position also at odds with established disability

organizations, which fought to expand rehabilitative and pension programs. These young men and women instead shared their generation's antipathy toward all things big—Big Government, Big Business, and Big Labor. Embracing do-it-yourself social change, they strove to create a tapestry of community-based organizations controlled by people with disabilities, providing services that the disabled demanded, and awakening individuals to political action on behalf of disability rights. As such, activists did not necessarily seek inclusion in the New Deal's promise of economic security so much as they offered a biting critique of it by embracing a discourse of risk taking, consumerism, and perverse incentives.

<1> Independence as Self-Determination Rather than Self-Reliance

In the 1960s, federal programs either corrected or compensated for disabilities.²⁴ Men who became impaired because of military service or industrial accident learned, through VR programs, to “overcome” their disabilities and resume their rightful place as breadwinners. Those who could not were “compensated” for their lost earning capacity through public and private disability pensions.²⁵ Much of the administrative apparatus of the New Deal state was devoted to figuring out which programs individuals belong to given their medical impairment, age, and employment history. Once sorted into the proper categorical programs, individuals then faced a phalanx of administrators, rehabilitation specialists, physicians, therapists, and social workers, who helped to determine a benefit schedule or a suitable mix of rehabilitative services. Like Progressive reformers before them, postwar liberals believed that a robust and professionalized bureaucracy was the hallmark of a modern state and the best way to avoid the political conflict that surrounded matters of redistribution and race.²⁶ To the New Deal generation, Social Security's Old Age Insurance served as a paragon of administration, where clear, uniform

procedures and professional distance circumscribed program discretion. While Disability Insurance was much more problematic, its association with OAI maintained—if not objectivity, precision, and consistency—at least their appearance amid a sprawling bureaucratic apparatus.²⁷

Young disabled activists, however, viewed the centralized state, staffed by experts applying uniform rules to reach standard program outcomes, as the very instrument of their oppression. The activists were too disabled for rehabilitation and simply were not ready for the “early retirement” that Social Security’s Disability Insurance offered. Few of them would have qualified for much income under that program anyway because they lacked the extensive employment history required. By emphasizing the inadequacies of people with disabilities as a reason for compensation or as deficits in need of correction, activists argued, disability benefit programs fostered social prejudices against the disabled.²⁸

Additionally, activists found VR counselors if not indifferent, then singularly counterproductive to their efforts to create a life for themselves. The overriding goal of vocational rehabilitation was return-to-work, and because resources were limited, counselors frequently turned away applicants with severe impairments, whom they regarded as having little vocational potential. Activists resented being dismissed. Mary Lou Breslin recounted that “perceptions [that people with disabilities could not perform a job] were widespread within the rehab profession as well as among employers.”²⁹ Another activist remembered being bluntly told that the “state doesn’t hire blind rehab counselors” when he shared with his counselor his plans to study rehabilitation in college.³⁰ Activists who had spent time in residential institutions had particularly harrowing memories of powerlessness. Noting that physical and sexual abuse was common at her facility, Lucy Gwin said of her institutional caregivers, “They could do . . . whatever they wanted to do.”³¹ For people with disabilities politicized by their experiences, the

state was, more often than not, a reminder of squelched ambitions and dehumanizing treatment.

In a radical critique of New Deal social policy, disability activists redefined “independence” to forge common ties between groups of the disabled. Postwar liberals had taken for granted that breadwinning was the lynchpin of disability programming, and they endeavored to parse individuals into the diagnostic categories that determined their rehabilitative needs. Activists, however, rejected efforts to proscribe outcomes on individuals with disabilities. Instead, they celebrated self-determination, a concept that came to have many names in disability circles: “normalization” among specialists in developmental disabilities and parent advocates, “self-advocacy” among adults with developmental disabilities, and “independent living” among wheelchair activists.³² At its core, self-determination entailed the right of people with disabilities to live in integrated community settings, to form relationships, to pursue a vocation, to make everyday choices such as what to eat and when to sleep, and most important to determine the direction of their lives.³³ Activists admitted that life outside the protective cocoon of parents and professional caregivers could be challenging, rife with mistakes and disappointments. But they insisted on letting the disabled experience “the dignity of risk” that the nondisabled took for granted. The right to chart one’s life, free of institutional, professional, and parental control, they argued, even if that course included the “possibility of failure,” constituted “true independence and the mark of one’s humanity.”³⁴

Though “independence” would later become associated with conservative themes of self-reliance, activists in the 1960s and early 1970s emphasized that independent living entailed neither physical nor economic self-sufficiency.³⁵ In fact, activists came to see the overriding emphasis on employment outcomes as contributing to the marginalization of disabled people. While VR counselors viewed the severely disabled as poor candidates for productive work, Ed

Roberts insisted that “there are very few people in this society who should be written off.”³⁶ According to Roberts, independent living could entail part-time work or no work at all; what mattered was that the individual chose for herself. That independence required substantial societal supports would have been all too clear to the young activists, whose university tuition, room and board, and cadre of personal attendants were made possible through grants from state vocational rehabilitation agencies, county social welfare funds, and federal cash and medical assistance to the disabled.³⁷ “Even the most severely and profoundly disabled individual can be independent,” Roberts argued; “they may need all kinds of help—but they can be in control of their lives.”³⁸

Congressional liberals found independent living alluring. It converged with both attempts to rehabilitate the poor for the workplace and efforts to extend civil rights protections to the disabled. Rehabilitation legislation in fact became the vehicle for civil rights. In 1972, Senator Hubert Humphrey (D-Minn.) proposed amending the Civil Rights Act of 1964 to include the disabled. With the election of Richard Nixon to the White House having emboldened conservatives, however, civil rights activists and Democratic congressional leaders were hesitant to open the law to reconsideration. Instead, they convinced Humphrey to append his civil rights provisions to the Rehabilitation Act, currently winding its way through Congress. What eventually became Section 504 required federal agencies and federally funded programs to provide job accommodations and accessible facilities to the disabled. Section 504 received little attention during congressional debate because the Rehabilitation Act of 1972 contained much more controversial measures, including funding designated for independent living programs. Underscoring its intention to reorient rehabilitation services toward independence living rather than employment, Congress dropped the term “vocational” from the title of the act. Its bill gave

priority for services to severely disabled individuals even if they had little vocational potential, allowed clients of VR to pursue nonvocational goals, and permitted state agencies to spend resources on services that helped the disabled live independently, even if they did not obtain a job. To accomplish these goals, it authorized \$1.7 billion for state rehabilitation services over two years. Nixon vetoed the bill, arguing that he would not “waste taxpayers’ dollars” on “activities that have no vocational element.” Congress passed the Rehabilitation Act again in 1973, and Nixon vetoed the bill a second time. Six votes short of overriding the president’s veto in the Senate, congressional Democrats gave up. They stripped the bill of its funding for independent living programs and repassed it as the Rehabilitation Act of 1973, which Nixon finally signed.³⁹ Although activists would not secure explicit funding for independent living programs until 1978, Section 504 had become law, and Congress had signaled its enthusiasm for the concept.

The problem for activists, however, was that rehabilitation leaders embraced their own version of independent living. In the early 1960s, seeking to expand their professional scope, they began to promote the teaching of self-care skills to people who otherwise would not have qualified for vocational rehabilitation because they were too old, too young, or too impaired to make promising job candidates.⁴⁰ But the differences between the form of independent living the activists demanded and the kind that federal and state administrators practiced could not have been more profound. Although rehabilitation officials had made limited forays into independent living services, their programs remained fundamentally oriented toward self-reliance, not self-determination. In a planning document, activists at the Berkeley Center for Independent Living criticized state rehabilitation counselors, who considered a disabled individual “trained” once he or she completed a tertiary course of study and, therefore, refused to pay for study beyond a

college degree or a vocational education program. What about the person who changed his mind about his vocation or wished to pursue “an alternative lifestyle” rather than just a job, they asked.⁴¹ Similarly, Mary Lou Breslin and Phil Draper argued to Congress that, even though its state agencies provided clients with social supports, vocational rehabilitation was nothing like self-help. Because of its orientation toward self-sufficiency, they noted, vocational rehabilitation resembled a factory that moved human bodies along an assembly line, churning out workers and discarding bodies that did not fit the constraints of the bureaucratic machinery. By contrast, the social supports around independent living constituted a relationship, much like a marriage, that lasted “from onset of disability until death.”⁴² Juxtaposing the self-help centers to vocational rehabilitation agencies, fellow activist Judy Heumann reiterated, “We have no closure requirements . . . many of our clients will need our services indefinitely.”⁴³

In keeping with their claim to self-determination, activists resolved to throw off the control that professionals had over their lives. To articulate this vision of emancipation, they borrowed freely from metaphors gleaned from the capitalist market. Activists were not small-government, free-market conservatives; they could be scathing in their indictment of conventional understandings of productivity and efficiency.⁴⁴ But in the idealized market of voluntary exchanges, they found an idiom of empowerment. While public disability programs authorized professionals to measure, evaluate, judge, and act on behalf of their disabled charges, the market gave individuals the power to effect change through individual action. Fusing Ralph Nadar’s crusade against corporate greed and malfeasance with the distrust of medical authority voiced by the women’s health and patients’ rights movements, activists urged the disabled to see themselves as informed consumers rather than as patients or clients.⁴⁵ As patients, they accepted the admonitions of experts, but as consumers they had the right to choose which services they

wanted and to determine how and when to receive them. As clients, they had to take what agencies offered, but as consumers, they could insist that the services they desired, if not currently available, be made so. According to an early description of consumerism, only when “the disabled person . . . shed the patient or client role” and fortified himself with the expectation of choice, could he upend “the dependency-inducing features of the physician-patient or professional-client relationship.”⁴⁶

To these market metaphors, activists added romanticized images of the community. Rather than rely on the professional, activists insisted on the value of advice born of lived experience. Patterning “peer counseling” on the consciousness-raising methods used by early feminist consciousness-raising groups and self-help organizations like Alcoholics Anonymous, activists urged people with disabilities to turn to their fellow disabled “peers” rather than to physicians and disability professionals for help in learning how to live independently.⁴⁷ They also believed in collective self-help and set about founding a network of self-help centers run by people with disabilities for people with disabilities. Ed Roberts captured the resolve when he declared in 1970, “I’m tired of well-meaning non-cripples, with their stereotypes of what I can and cannot do, directing my life and my future. I want cripples to direct their own programs and to be able to train other cripples to direct new programs. This is the start of something big—cripple power.”⁴⁸

<1> Do-It-Yourself Social Change

Funding for community action through the War on Poverty gave activists the resources they needed to erect an institutional rival to vocational rehabilitation and an organizational base from

which to advance disability rights. Throughout the 1960s, self-help, mutual aid, and cooperative living arrangements for polio survivors, injured war veterans, and ex-mental patients sprang up around the nation. On the campus of the University of California at Berkeley, the Rolling Quads, an organization of wheelchair-using students that Ed Roberts founded, put peer counseling and self-help into practice in the dormitories. The students began repairing wheelchairs, teaching one another how to care for themselves in community settings, and assisting with the finding, hiring, and firing of personal attendants. Because these services were not vocational in orientation, state VR agencies did not offer them, but the students saw these services as vital to their ability to live on their own, outside of adult care facilities, following graduation. The Rolling Quads also infused self-help with political action, famously taking sledgehammers to sidewalks in Berkeley to dramatize the need for curb cuts and lobbying the statehouse in Sacramento for funding for personal attendants.⁴⁹ In 1970, using an \$80,000 grant from the War on Poverty program, TRIO, Ed Roberts, John Hessler, and Hale Zukas chartered the Physically Disabled Student Program to bring independent living to all Cal students.⁵⁰ Requests for self-care courses and independent living services poured in from individuals around the nation, overwhelming the resources of the small campus group. Two years later, a community-based corollary to the PDSP, the Center for Independent Living, opened its doors to disabled adults in Berkeley. By 1977, the CIL had increased its staff from 11 to 117. Supported by twenty-one contracts and an annual budget of \$900,000, it served two thousand people a month in the San Francisco area.⁵¹

Because it catered to a low-income population, the CIL was limited in what it could charge for its services, and because of Nixon's veto, it lacked federal funds specifically for independent living. Fundraising, therefore, dominated the agenda of the CIL's staff and board of directors from the onset. An account of revenues in the late 1970s illustrates the inventive ways

activists cobbled together a budget. The center operated with financial support from revenue sharing, the Comprehensive Employment and Training Act (CETA), the Community Development Block Grant (CDBG), and Title XX of the Social Security Act; six grants from U.S. Rehabilitation Services Administration; three grants from the California state vocational rehabilitation office; grants from the Veterans Administration, VISTA, the U.S. Commission on Aging, and the U.S. Community Services Administration (CSA); local and state money; thirteen foundation grants; and a smattering of corporate grants.⁵²

A private-sector, nonprofit, community-based organization, the CIL embodied the activists' suspicion of state power and their embrace of voluntarism and grassroots initiatives. While government programs bent individuals to serve policymakers' desired ends and divided the disabled along diagnostic lines, the CIL sought to unite them around shared needs and common experiences with prejudice by putting the philosophy of self-help into practice. In contrast to the large centralized programs that epitomized New Deal rationalism, activists embraced the messiness and diversity of local action, solving social problems through "whatever method is appropriate within the context of particular lives and communities," as one independent living manifesto put it.⁵³ According to its authors, independent living rejected the "mythical instant utopias effected by 'great leaders,' 'government,' and 'society'" in favor of the "real progress" that occurred through "changes in the daily thoughts and actions of individuals."⁵⁴ Like other counterculture initiatives of the time—community gardens, urban homesteading, and cooperative living—people with disabilities sought freedom and meaning in the intimacy of face-to-face relationships and hands-on problem solving.⁵⁵

Found in major metropolitan centers and university towns, the centers eschewed professionals, aspiring instead to consumer control and peer counseling. At the Berkeley CIL, for

instance, most of the staff, the board of directors, and volunteers were blind or wheelchair users. The CIL offered a menu of services from which the “consumer” could select services designed to meet goals that she had chosen for herself. If she wished, the consumer could seek help from a peer, a person whose lived experience with disability served as all the expertise needed.⁵⁶ Ostensibly, robust roots in the community would allow the center to tailor its programming to the demands of consumers. The CIL, for instance, featured an expansive list of services, including job training, addiction counseling, recreational opportunities, housing referral, wheelchair repair, computer training, college-credit courses, deaf-accessible services, classes on cane walking, and a legal advocacy program that supported both individuals who had experienced discrimination and employers seeking to hire people with disabilities.⁵⁷ Which particular services were offered at any given time depended on surveys of the disabled in Berkeley and, more important, the funding priorities of private foundations and the local, state, and federal governments.⁵⁸

The CIL was one of a number of disability rights and self-help groups that blossomed in Boston, New York, Houston, St. Louis, Denver, and other cities between 1970 and 1974. After the 1978 rehabilitation amendments authorized federal funding for independent living centers, their number exploded, from fifty-two in 1977 to three hundred within a decade.⁵⁹ The Berkeley CIL, however, remained a pioneer. Rather than becoming yet another social service agency, the centers, Roberts hoped, would empower people with disabilities and draw them into politics to demand their rights, much like community action programs did for the urban poor. As a place of volunteerism, employment, and political action, the CIL negated entrenched stereotypes of the disabled as passive, weak, and unproductive.⁶⁰ Roberts also hoped that the self-help centers would facilitate cross-impairment and cross-racial organizing and transcend the boundaries that

divided the disabled from one another. The Berkeley activists cultivated the CIL to become a national model for this sort of community building.⁶¹

Because independent living first took root on college campus, its founders were mostly white and much more educated than the typical person with a disability.⁶² From the earliest days of the Berkeley center, its leaders were determined to diversify the independent living movement and spread the philosophy of self-help and collective action to minorities. During board meetings between 1971 and 1972, they suggested recruiting more “third world people” and committed themselves to an affirmative action policy for hiring, even as debates over racial preferences roiled college campuses.⁶³ Roberts recruited Don Galloway, an African American active in both the NAACP and the National Federation of the Blind, to join the board and assist in grant-writing. In 1975, the CIL sought to build a presence in majority-black Oakland, partnering with the Black Panthers to offer independent living services through the Panthers’ neighborhood health clinic.⁶⁴ In its heyday between 1977 and 1980, the CIL offered services that brought the blind, the deaf, wheelchair users, and people with mental impairments together under one roof, and offered counseling in Spanish, Mandarin, Cantonese, and Tagalog, all in an effort to hammer home the imperative of a disability identity that transcended traditional social cleavages.⁶⁵

Activists, moreover, envisioned the centers serving as the sinews linking a nascent disability rights movement together. Traveling frequently to annual conferences of the ACCD and the President’s Committee on Employment of the Handicapped, CIL leaders connected the small and loosely organized grassroots network of self-help centers to an insider circle of rights activists, lawyers, and sympathetic congressional staffers in Washington, D.C.⁶⁶ Judy Heumann embodied the deep ties between the grassroots activists in Berkeley and the supporters of disability rights in the Capitol. In the mid-1970s, she left the CIL to serve as a legislative aide to

Senator Harrison Williams (D-N.J.), before joining the ACCD board of directors. In the late 1970s, she returned to the CIL as a director. When the ACCD lost patience with the Carter administration in 1977, Heumann had a hand in both ACCD's decision to stage protests and in the CIL's efforts to rally Bay Area people with disabilities and their allies to HEW headquarters.⁶⁷

<1> The Racial Legacy of Independent Living

Nevertheless, despite the parallels they saw between the disabled and minority groups, CIL activists were at a loss as to how to diversify the independent living movement. In 1971, at one of their first planning meetings, leaders brainstormed about groups with which the organization could forge alliances. They listed several disability organizations but did not include any groups representing the poor and nonwhites, not even the NAACP or black churches, a conspicuous omission for activists who had modeled themselves on the African American civil rights movement.⁶⁸ To help, PDSP staff member and community organizer Michael Fuss took it upon himself to map out Berkeley organizations that were politically active in causes relevant to the physically disabled. His list contained several organizations working with the elderly, the poor, and African Americans, but the CIL board never acted on it.⁶⁹ Board members also delayed issuing a formal affirmative action policy, wondering whether their first priority should be to hire and promote from within the organization's existing (and largely white) ranks. As late as 1978, despite long recognizing a need for increased outreach to Latino and Asian communities, the CIL still lacked permanent Spanish- or Asian-language-speaking staff. That year, only 15 percent of clients served belonged to racial and ethnic minorities.⁷⁰ After the center turned down a Chinese American woman applying for a secretarial position, the San Francisco-based organization

Chinese for Affirmative Action (CAA) filed a complaint with HEW, accusing the CIL of discriminating against Asian Americans seeking jobs, leadership opportunities, and services at the center. When HEW asked the CIL to step up its outreach to Asian communities, executive director Phil Draper argued that the center was already in contact with four organizations. The CCA responded by forwarding to Draper a list of nearly ninety local Chinese American organizations, newspapers, and radio stations.⁷¹ Racial outreach, however, never rose to a high priority in a grassroots organization that was perennially long on need and short on resources. The CIL did not make substantial headway in hiring staff of color until after 1978, when racial diversity was made a condition of a grant it received from the CSA.⁷²

The problem, however, was one of more than simply a failure to hire minorities or conduct sufficient outreach in nonwhite, non-English speaking communities. Bay Area residents viewed the CIL as a space for whites and wheelchair users.⁷³ While staff made a concerted effort to add services for the deaf and blind, they were ambivalent about whether assertions of racial identity belonged within a movement that coalesced around a disability identity. In 1976, noting how problematic it was that CIL was “white in the black community,” board member and black activist Don Galloway became interested in expanding the number of center materials available in Braille and ensuring that black staff members were promoted to program directors. He took it upon himself to recruit African Americans as drivers, personal attendants, and professional staff and to organize them into a minority caucus “to make sure we get our voice heard.” Galloway called his caucus the Fine, Black, and Intelligent (FBI) and announced its formation in the center newsletter. The FBI, he declared, would not only conduct outreach to nonwhite groups but would also facilitate “ongoing communication with the general CIL staff about issues of racism.” Fellow activists, though, found racial organizing divisive. Despite the fact that announcements

for the Disabled Women's Coalition regularly appeared in the newsletter, Galloway was dismissed from the center's board and the FBI failed to materialize. The message from his colleagues was clear, Galloway recalled years later: "We are not racist, [but] we do not think we need to change our system to accommodate any particular group . . . we were all one."⁷⁴ Discomfort over assertions of racial solidarity were not confined to the CIL. Several years later, while serving as a board member of the National Council on Independent Living, the primary lobbying organization for disability self-help centers, Galloway again tried to organize a minority caucus to address the paucity of centers in communities of color and the lack of racial minorities in positions of leadership. Again, he faced resistance from a majority white board, which worried that competing claims of racial justice would, as he put it, "splinter" and "weaken" the disability movement.⁷⁵

Galloway's efforts to organize people of color within the independent living movement and the CAA's complaints against the CIL were attempts by people of color to shape whose encounters with oppression became the defining narrative of disability rights. Reflecting on his experiences organizing the disabled in Boston during the 1970s, Fred Fay explained that whites and racial minorities often did not share the same experiences of exclusion. The accessibility barriers that whites faced were compounded for African Americans by a lack of public transportation routes in low-income areas, racially segregated and dilapidated housing, and the material want of poverty. In addition, Fay found some of his fellow white disability activists reluctant to enter black neighborhoods to organize the African American disabled.⁷⁶ The mantra of consumer control and self-help did little to clarify how movement activists and center directors should handle racial antagonisms, instead pushing these questions into local arenas. Johnnie Lacy, a community organizer and black activist, noted that whether a center addressed

the needs of people of color and the poor depended a great deal on who sat in positions of leadership. Pointing to her own experiences directing the self-help center in Alameda County, California, Lacy said, “I always felt that the board had to first identify those communities” it served before deciding its mission.⁷⁷

At the same time that activists wrestled with incorporating racial difference into the day-to-day operations of independent living centers, an increasingly ominous political environment complicated their efforts to build a movement that spoke to the needs and experiences of all people with disabilities. In 1974, the United States slid into a prolonged recession marked by high inflation and unemployment. Though the downturn ended in 1975, low growth persisted into the early 1980s, bringing the post–World War II economic expansion to an end. From New York to Philadelphia, Seattle to San Francisco, unionized public-sector workers went on strike demanding wage increases to keep up with rising inflation.⁷⁸ Meanwhile, a revolt among taxpayers erupted in California with the passage of Proposition 13 in 1978. The ballot initiative not only galvanized conservatives of the New Right but, by capping property taxes, robbed local governments of revenue and set nonprofits in competition with one another for what resources remained.⁷⁹ Governments at all levels entered a period of fiscal austerity that had a profound effect on independent living centers, which relied heavily on grants from the public sector. At the CIL, staff prepared to close programs and lay off personnel, a wrenching choice given that so many of the employees were low-income and the center was under pressure from HEW to hire minority staff.⁸⁰ Even though Congress authorized funding for independent living as part of the 1978 rehabilitation amendments, it appropriated only \$10 million, a small fraction of \$80 million lawmakers had imagined spending with the Rehabilitation Act of 1973 before Nixon vetoed the bill.⁸¹

What public grant money was available was aimed at developing self-sufficiency rather than self-determination. Enacted in 1973, CETA gave grants to state and local governments to provide training and jobs to low-income people in the public and nonprofit sector. The following year, President Gerald Ford signed the CDBG and Title XX into law, both of which had the express purpose of promoting “economic self-sufficiency,” preventing “dependency,” and fostering community-based and home-based care.⁸² Activists had envisioned their centers offering community-determined services, including leisure and recreation activities, mental and sexual wellness courses for the disabled, and political advocacy, but what federal officials would pay for was economic independence. They soon fretted over the extent to which their organizations had become trapped in “a state of dependence on establishment funding.”⁸³

Concerns about dependency were not confined to the centers. Activists also worried that social policy encouraged “dependency” among individuals with disabilities. Between 1968 and 1972, Congress debated the Nixon administration’s proposed Family Assistance Plan (FAP). The plan would have set an income floor below which no impoverished family would fall below, irrespective of the marital or work status of the parents; SSI would do the same for adult individuals who were poor.⁸⁴ Dominated by Southern conservatives and its powerful chair, Russell Long, the Senate Finance Committee was determined to rein in welfare spending and compel welfare mothers to work. The committee balked at the FAP, but Long pushed SSI through, noting that “there was not much abuse” of welfare among the aged and disabled.⁸⁵ SSI was a boon to independent living. So long as centers kept salaries below poverty level, their disabled employees qualified for SSI and, in California, Medicaid benefits to pay for the costs of personal attendants. The CIL pursued this strategy in order to stretch its payroll to cover as many disabled employees as possible and reserve grant funding for its social-service programs.⁸⁶ But

SSI also constrained self-determination. SSI recipients who worked could not move to higher-paying jobs or accrue savings in pursuit of long-term goals, such as a house or a small business, lest they lose Medicaid eligibility and, with it, the supports that made employment possible in the first place.⁸⁷

The conundrum led disability activists to focus their advocacy on the “perverse” incentives of welfare. “The SSI program unequivocally prohibits severely disabled people from seeking employment,” declared a CIL internal planning document.⁸⁸ The condemnations of work disincentives in SSI anticipated arguments that conservatives would launch in the 1980s against most forms of assistance to the poor, particularly Aid to Families with Dependent Children.⁸⁹ CIL activists, however, wanted SSI to become more, not less, generous. They recommended making the disabled presumptively eligible for disability benefits, exempting nearly \$200 of a recipient’s quarterly earned income and 20 percent of unearned income, and capping a recipient’s out-of-pocket work, health care, and attendant care expenses.⁹⁰

In the late 1970s, the emphasis on facilitating the entry of the disabled into the workplace set independent living activists apart from both President Jimmy Carter and civil rights and welfare-rights organizations. The president’s welfare reform initiative, the Program for Better Jobs and Income (PBJI), consolidated the aged, disabled, and mothers of young children into one cash-assistance program that guaranteed a minimum income. In addition to an income floor, parents in two-parent households, single mothers with teenage children, single persons, and childless couples were required to find full-time work or accept a public-sector job or training position. PBJI did little to address disabled activists’ arguments that they needed earnings exemptions and attendant care to bridge the chasm between welfare and the workplace. The disability rights critique, however, struck a discordant note with the National Urban League.

Reading work requirements as racially coded appeals to whites, the league urged Carter to treat all low-income citizens alike by providing a minimum income irrespective of whether they held jobs.⁹¹ The positions of independent living, civil rights, and welfare rights activists were not necessarily incompatible; they all sought adequate resources that would allow the poor to choose for themselves how to live their lives, including deciding for themselves whether to work. But the distinction between incomes insufficient for self-determination and incomes so liberal that they dampened an individual's desire for employment was a difficult one to make in the increasingly polarized political debates over welfare.

Despite activists' efforts to unify the disabled, fissures emerged as the New Right became ascendant in the late 1970s, culminating in the election of Ronald Reagan as president in 1980. In a hearing before Congress in 1978, Ed Roberts warned that SSI discouraged work because its ceiling on earnings was low, and it did not cover the costs of attendant care. He was careful to underscore the importance of SSI and Disability Insurance to the ability of people with disabilities to live independently. Other witnesses, however, saw SSI as too generous. At the same hearing, a Texas rehabilitation official complained that "if you draw \$1 in SSI benefits, you are eligible for literally thousands of dollars in fringe benefits . . . through the welfare department. . . . That is an encouragement not to work."⁹² The balance tipped toward antiwelfare rhetoric with the election of Reagan. In his first budget, Reagan proposed reducing spending on social services, converting Medicaid into a block grant, and tightening eligibility for SSI and Disability Insurance. With federal support for the disabled embattled on many fronts, the ACCD sounded the alarm. Warning that the cuts would "result in utter disaster for disabled children and adults," the ACCD pleaded with its members to "speak with one clear voice" or else "many of us will revert to the status of dependency and second-class citizenship of thirty years

ago.”⁹³ At the same time, criticism of income-support programs intensified in some quarters of disability activism. In a manifesto on independent living published in 1982, Justin Dart, Reagan’s director of rehabilitation services and later a tireless champion for the ADA, denounced federal disability benefits as “involving massive, inefficient subsidies, which support large segments of the population in relatively idle dependency.”⁹⁴ The “one clear voice” the ACCD sought was fractured.

<1> Conclusion

The ambivalence that disability activists voiced toward prevailing federal policy toward the disabled reflected a larger societal interrogation of the New Deal during the 1970s. Scholars have puzzled over this period, characterizing it as both one in which Americans rejected decades-old racial and gender hierarchies but also came to see the capitalist market rather than the state as the solution to most social problems.⁹⁵ Although Thomas Borstelmann suggests that only in the wake of “a purified version of individualism and consumer capitalism, one in which all were welcome as buyers and sellers” could egalitarianism advance, King and Smith characterize the period as an “anti-transformative” one. Supporters of egalitarianism remained divided and could not overcome resistance from adherents of white dominance, who exchanged overly racist rhetoric for indirect or racially coded appeals to white interests.⁹⁶

Thinking of disability activists as embedded within these two contending racial orders helps us understand the roots of the contemporary antagonism between social justice demands for recognition of identity, on the one hand, and redistribution of wealth, on the other hand.⁹⁷ As the story of independent living illustrates, <au: please read rest of sentence again; word

missing?><yes>moments of racial cooperation, such as the Section 504 protests against HEW, could and did exist alongside ideological and institutional forces <that<?><yes> that kept the two movements distinct. Though independent living celebrated grassroots community and consumer control, the experiences of activists of color suggest that maintaining “community” among the disabled could also suppress discordant voices. Activists could not resolve how to forge a common identity among the disabled that also accommodated differences in how the disabled experienced oppression, differences that were informed by race and poverty. Moreover, the fact that the self-help centers relied so heavily on government grants, much of it aimed at increasing employment among the poor, confounded attempts to promote self-determination and unity among people with disabilities. By the end of the 1970s, the crumbling of the New Deal order failed to fully sweep away the hierarchy at the heart of the breadwinning welfare state, leaving in place the foundation for a much subtler reconstitution of racial and disability-based inequalities.

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¹ Though several excellent narratives of the Section 504 protests exist, this account is based on Susan Schweik, “Lomax’s Matrix: Disability, Solidarity, and the Black Power of 504,” in *Foundations of Disability Studies*, ed. Matthew Wappett and Katrina Arndt (New York, 2013), 105–24. Jacquelyn Dowd Hall, “The Long Civil Rights Movement and the Political Uses of the Past,” *Journal of American History* 91, no. 4 (2005): 1255, also emphasizes the extent to which civil rights and disability activists were part of a “matrix” of overlapping labor and social justice groups. The point is further underscored in the oral

histories of Kitty Cone, Donald Galloway, Michael Fuss, and Johnnie Lacy. Kitty Cone was initially a member of the Socialist Workers Party in Chicago and a feminist activist before coming to work at the Center for Independent Living, and Donald Galloway was an active member of the NAACP and National Federation of the Blind before joining the CIL. Michael Fuss was active in the antinuclear arms movement, while Johnnie Lacy was a community and welfare rights organizer. See Kitty Cone, “Political Organizer for Disability Rights, 1970s–1990s, and Strategist for Section 504 Demonstrations, 1977,” an oral history conducted in 1996–98 by David Landes, Oral History Center, The Bancroft Library, University of California, Berkeley, 2000, 66–68 (hereafter Cone, Oral History); Donald Galloway, “The Independent Living Movement in Berkeley and Colorado: Blind Advocacy and Minority Inclusion,” an oral history conducted by Fred Pelka in 2001, in *Blind Services and Advocacy and the Independent Living Movement in Berkeley*, Oral History Center, The Bancroft Library, University of California, Berkeley, 2004, 67–68, 72–73 (hereafter Galloway, Oral History); Michael Fuss, “Attendant for Cowell Residents, Assistant Director of the Physically Disabled Students’ Program, 1966–1972,” an oral history conducted in 1997 by Sharon Bonney in *Builders and Sustainers of the Independent Living Movement in Berkeley, Volume II*, Oral History Center, The Bancroft Library, University of California, Berkeley, 2000, 51–52 (hereafter Fuss, Oral History); Johnnie Lacy, Director, “Community Resources for Independent Living: An African-American Woman’s Perspective on the Independent Living Movement in the Bay Area, 1960s–1980s,” an oral history conducted in 1998 by David Landes, Oral History Center, The Bancroft Library, University of California, Berkeley, 2000, 43–44, 49, 60, 66 (hereafter Lacy, Oral History).

² Josh Lukin, “Disability and Blackness,” in *The Disability Studies Reader*, 4th ed., ed. Lennard J. Davis (New York, 2013), 308–34; Chris Bell, “Introducing White Disability Studies: A Modest Proposal,” in *The Disability Studies Reader*, 2nd ed., ed. Lennard J. Davis (New York, 2006), 275–82. A recent effort to address the paucity of scholarly attention to the black disability experience in disability studies is Jane Dunham, Jerome Harris, Shancia Jarrett, Leroy Moore, Akemi Nishida, Margaret Price, Britney Robinson, and Sami Schalk, “Developing and Reflecting on a Black Disability Studies Pedagogy: Work

from the National Black Disability Coalition,” *Disability Studies Quarterly* 35, no. 2 (2015): online document at <http://dsq-sds.org/article/view/4637/3933>.

³ Jeffrey A. Brune, “Minority,” in *Keywords for Disability Studies*, ed. Rachel Adams, Benjamin Reiss, and Davis Serlin (New York, 2015), 122–24, describes the emergence of minority consciousness and its impact on disability studies and disability activism. Ed Roberts is quoted in Brune, 122.

⁴ Katherina Heyer, *Rights Enabled: The Disability Revolution, from the U.S. to Germany and Japan, to the United Nations* (Ann Arbor, 2015), 51–52.

⁵ Samuel R. Bagenstos, “The Americans with Disabilities Act as Welfare Reform,” *William and Mary Law Review* 44, no. 3 (2003): 921–1027. On racial coding and the rhetoric of the New Right, see Thomas Byrne Edsall with Mary D. Edsall, *Chain Reaction: The Impact of Race, Rights, and Taxes on American Politics* (New York, 1991); Ian Harvey-Lopez, *Dog Whistle Politics: How Coded Racial Appeals Have Wrecked the Middle Class* (Oxford, 2014).

⁶ Gloria T. Hall, Patricia Bell Scott, and Barbara Smith, *All the Women Are White, All the Blacks Are Men, but Some of Us Are Brave* (New York, 1982), called attention to the contributions of nonwhite women to the feminist movement and feminist studies and opened up intersectional feminist analysis. Cathy Cohen points to a similar estrangement between contemporary queer activists and the voices of people of color. See Cathy J. Cohen, “Punks, Bulldaggers, and Welfare Queens: The Radical Potential of Queer Politics?” *GLQ: A Journal of Lesbian and Gay Studies* 3, no. 4 (1997): 437–65.

⁷ Lukin suggests that African Americans are reluctant to embrace disability rights because blackness in the United States has so often been equated with physical and mental deficits. Disability becomes just another hardship that blacks must deal with. Lukin, “Disability and Blackness,” 309. The ambivalence is a continuing one. See The Harriet Tubman Collective, “The Vision for Black Lives is Incomplete without Disability Solidarity, For Harriet blog, September 29, 2016, online document at <http://www.forharriet.com/2016/09/the-vision-for-black-lives-is.html#axzz4m9cOsLcN> (last accessed 7 July 2017); Luticha Doucette, “If You’re in a Wheelchair, Segregation Lives,” *New York Times*, 17 May

2017, online document at <https://www.nytimes.com/2017/05/17/opinion/if-youre-in-a-wheelchair-segregation-lives.html> (last accessed 7 July 2016).

⁸ I supplement use of Fred Pelka, *What We Have Done: An Oral History of the Disability Rights Movement* (Amherst, 2012), with oral histories in the Disability Rights and Independent Living Movement collection and the materials from the CIL contained in two collections, the Center for Independent Living records and Hale Zukas papers, in the Bancroft Library, University of California at Berkeley. Although Pelka's volume is a rich resource, it focuses on the development of the national disability rights movement. The oral histories and CIL materials in Bancroft, on the other hand, provide insight into the operations of the self-help centers and activists' puzzling through of questions related to race relations, self-help programs, center budgets, and social policy. The oral histories include interviews with attendants and employees of the Center for Independent Living who were vital to the continuation of PDSP and the CIL and the blossoming of independent living in the Bay Area but otherwise were not known as leaders in the national disability rights movement.

⁹ Lukin, "Disability and Blackness," 308.

¹⁰ The contemporary disability rights movement is actually a coalition of many smaller movements on behalf of people with different impairments, united by a core set of beliefs: namely, that the disabled are a minority group and that they have a right to live with dignity in community settings. Samuel R. Bagenstos, *Law and the Contradictions of the Disability Rights Movement* (New Haven, 2009), 4, 11–13. On independent living as the core of disability rights, see Bagenstos, *Law and the Contradictions of the Disability Rights Movement*, 13; Richard Verville, *War, Politics, and Philanthropy: The History of Rehabilitation Medicine* (Lanham, Md., 2009), 195. It is worth noting that one's choice of terms to describe people with disabilities is a complicated one. See Paul K. Longmore, "A Note on Language and the Social Identity of Disabled People," *American Behavioral Scientist* 28, no. 3 (1985): 419–23. In this article, I have tried to strike a balance between "people first" terminology and fluid syntax. In addition, following the convention of the National Federation of the Blind, which seeks to destigmatize blindness, I use the term "blind" and "the blind" rather than "people with visual impairments" to refer to the

nonsighted. Personal communication with Anna Kresmer, archivist, National Federation of the Blind, Baltimore, 26 April 2017. Individuals who are deaf sometimes regard themselves as members of a cultural or linguistic minority rather than individuals with a hearing impairment, and thus they capitalize the word Deaf to denote the difference between deafness as an impairment and deafness as a minority identity. Not all individuals who are deaf, however, are culturally Deaf, especially in nonwhite communities. To be inclusive, therefore, I do not capitalize the word “deaf.” The Harriett Tubman Collective, online document; Susan Burch and Ian Sutherland, “Who’s Not Here Yet? American Disability History,” *Radical History Review* 94 (2006): 127–47. Self-advocates are people with intellectual and developmental disabilities who are committed to know and speak up for their right to self-determination as well as to protect others who cannot speak for themselves. Michael J. Ward and Roger N. Meyer, “Self-Determination for People with Developmental Disabilities and Autism: Two Self-Advocates’ Perspectives,” *Focus on Autism and Other Developmental Disabilities* 14, no. 3 (Fall 1999): 135.

¹¹ Accounts that emphasize the role of political insiders in shaping policy outcomes include: Edward D. Berkowitz, *Rehabilitation: The Federal Government’s Response to Disability, 1935–1954* (New York, 1980); Edward D. Berkowitz, *Disabled Policy: America’s Programs for the Handicapped* (Cambridge, 1987); Richard K. Scotch, *From Good Will to Civil Rights: Transforming Federal Disability Policy* (Philadelphia, 1984); Robert A. Katzmann, *Institutional Disability: The Saga of Transportation Policy for the Disabled* (Washington, D.C., 1986); Ruth O’Brien, *Crippled Justice: The History of Modern Disability Policy in the Workplace* (Chicago, 2001); John D. Skretney, *The Minority Rights Revolution* (Cambridge, Mass., 2002). Lennard J. Davis, *Enabling Acts: The Hidden Story of How the Americans with Disabilities Act Gave the Largest U.S. Minority Its Rights* (Boston, 2015), emphasizes the interplay between Washington insiders and grassroots activists. While the insider accounts help us to understand how legislation is passed and why legislative intentions go awry at implementation, they are less helpful in allowing us to see what most disability activists—the grassroots volunteers and organizers, rather than the lobbyists, lawyers, or congressional staffers—tried to accomplish. Furthermore, by focusing on

national legislative victories, these accounts, even Davis's chronicle of the enactment of the Americans with Disabilities Act, risk glossing over fissures between disability groups.

¹² Evan J. Kemp Jr., "Stop 'Caring for' the Disabled," *Washington Post*, 7 June 1981, online document at https://www.washingtonpost.com/archive/opinions/1981/06/07/stop-caring-for-the-disabled/2ea92fe5-8b02-4e32-a5a2-077b87da782d/?utm_term=.e8baa5b7ec82 (last accessed 9 September 2016).

¹³ Bagenstos, *Law and the Contradictions*, 6, 27–29, 31; Thomas F. Burke, "On the Rights Track: The Americans with Disabilities Act," in *Comparative Disadvantages? Social Regulations and the Global Economy*, ed. Pietro S. Nivola (Washington, D.C., 1997), 256–57; Joseph P. Shapiro, *No Pity: People with Disabilities Forging a New Civil Rights Movement* (New York, 1993), 121.

¹⁴ Desmond S. King and Rogers M. Smith, "Racial Orders in American Political Development," *American Political Science Review* 99, no. 1 (2005): 75, 78, 84.

¹⁵ *Ibid.*, 83.

¹⁶ Tony Coehlo, in U.S. Senate, *Americans with Disabilities Act of 1989*, Hearing on S. 933 before the Subcommittee on the Handicapped, Senate Committee on Labor and Human Resources, 101st Cong., 1st sess., 1989, 7; Sandra Swift Parrino, in U.S. House of Representatives, *Americans with Disabilities Act of 1989*, Hearing on H.R. 2273 Before the Subcommittee Select Education and Employment Opportunities of the House Committee on Education and Labor, 101st Cong., 1st sess., 1989, 70.

¹⁷ On disability being used as a basis for unequal treatment, see Douglas C. Baynton, "Disability and the Justification of Inequality in American History," in *The Disability Studies Reader*, 4th ed., ed. Lennard Davis (New York, 2013), 17–33; David Wright, *Downs: The History of a Disability* (Oxford, 2011); Nirmala Erevelles and Andrea Minear, "Unspeakable Offenses: Untangling Race and Disability in Discourses of Intersectionality," *Journal of Literary and Cultural Disability Studies* 4, no. 2 (2010): 127–45; David Mitchell and Sharon Snyder, "The Eugenic Atlantic: Race, Disability, and the Making of an International Eugenic Science, 1800–1945," *Disability and Society* 18, no. 7 (2003): 843–64. Though veterans and soldiers are the epitome of masculinity, early twentieth-century officials administering veteran programs frequently used disability, or bodily or mental weaknesses, as an excuse to exclude

black men from the full civic benefits accorded to white men following the military. For instance, after World War I, rehabilitation officials wondered if it was worth accepting black veterans into their programs, given that their race was destined for extinction anyway. Paul R. D. Lawrie, “‘Salvaging the Negro’: Race, Rehabilitation, and the Body Politics in World War I America, 1917–1924,” in *Disability Histories*, ed. Susan Burch and Michael Rembis (Urbana, 2014), 321–34; Jennifer D. Kenne, “The Long Journey Home: African American World War I Veterans and Veterans’ Policies,” in *Veterans’ Policies, Veterans’ Politics: New Perspectives on Veterans in the Modern United States*, ed. Stephen R. Ortiz (Gainesville, 2012), 146–72; Beth Linker, *War’s Waste: Rehabilitation in World War I America* (Chicago, 2011), 135–39. After World War II, black veterans increasingly challenged their exclusion. Even when they gained access to vocational rehabilitation services and medical care, counselors steered them toward jobs in manual labor and agricultural work that buttressed the racial hierarchy of the southern political economy. Ari K. Mwachofi, “African Americans’ Access to Vocational Rehabilitation Services after Antidiscrimination Legislation,” *Journal of Negro Education* 77, no. 1 (Winter 2008): 39–59; Robert F. Jefferson, “‘Enabled Courage’: Race, Disability, and Black World War II Veterans in Postwar America,” *The Historian* 65, no. 5 (September 2003): 1102–24.

¹⁸ King and Smith, “Racial Orders in American Political Development,” 76–77, 82–84.

¹⁹ Jerry R. Cates, *Insuring Inequality: Administrative Leadership in Social Security, 1935–1954* (Ann Arbor, 1983), 104–35; Martha Derthick, *Policymaking for Social Security* (Washington, D.C., 1979), 295–315; Linda Gordon, ed., *Women, the State, and Welfare* (Madison, 2012); Ira Katznelson, *When Affirmative Action Was White: An Untold History of Racial Inequality in Twentieth-Century America* (New York, 2005); Mimi Abramovitz, *Regulating the Lives of Women: Social Welfare Policy from Colonial Times to the Present*, rev. ed. (Boston, 1996); Linda Gordon, *Pitied but Not Entitled: Single Mothers and the History of Welfare, 1890–1935* (New York, 1994). On VR programs turning away women, see Sarah F. Rose, “‘Crippled’ Hands: Disability in Labor and Working-Class History,” *Labor* 2, no. 1 (2005): 27–54.

²⁰ Nancy Fraser and Linda Gordon, “A Genealogy of Dependency: Tracing a Keyword of the U.S.

Welfare State,” *Signs* 19, no. 2 (1994): 309–36, provides a trenchant analysis of how the term “dependency” is employed to stigmatize women and people of color while obfuscating and depoliticizing economic inequality between white men.

²¹ On these pre-1970s disability movements, see Nora Groce, “Parent Advocacy for Disabled Children and the Disability Rights Movement: Similar Movements, Different Trajectories,” PONPO Working Paper No. 237 and ISPS Working Paper No. 2237, 1997, unpublished paper from ERIC, <http://discovery.ucl.ac.uk/15151/1/15151.pdf> (last accessed 31 July 2016); Paul K. Longmore and David Goldberger, “The League of the Physically Handicapped and the Great Depression: A Case Study in the New Disability History,” *Journal of American History* 87, no. 3 (2000): 888–922; Felicia Kornbluh, “Disability, Antiprofessionalism, and Civil Rights: The National Federation of the Blind and the ‘Right to Organize’ in the 1950s,” *Journal of American History* 97, no. 4 (2011): 1023–47; Audra Jennings, *Out of the Horrors of War: Disability Politics in World War II America* (Philadelphia, 2016), esp. 119, 122–23. David Gerber’s analysis of veterans’ organizations underscores the difficulties of articulating an inclusive identity of disability. Gerber notes that prior to the 1960s, almost all veterans’ organizations were all white. The Blinded Veterans Association was a striking exception, bringing blind service members together across racial, religious, and ethnic differences. While larger veterans’ organizations eschewed involvement in divisive social issues, the BAV maintained integrated chapters and an integrated national office, and it staunchly opposed both racial segregation and anti-Semitism. The organization, however, maintained distance from civilian blind organizations, promoted separate programs for veterans, and avoided lobbying for pensions, which it regarded as feminized. David A. Gerber, “Disabled Veterans, the State, and the Experience of Disability in Western Societies, 1914–1950,” *Journal of Social History* 36, no. 4 (Summer 2003): 899–916, esp. 908, 910.

²² On the origins of programs for disabled college students, see Sarah F. Rose, “The Right to a College Education? The GI Bill, Public Law 16, and Disabled Veterans,” *Journal of Policy History* 24, no. 1 (2012): 26–52. On the campus climate at California state universities during this period, see Max Elbaum,

“What Legacy from the Radical Internationalism of 1968?” *Radical History Review* 82 (Winter 2002): 37–64.

²³ Martha J. Bailey and Sheldon Danzinger, “Legacies of the War on Poverty,” in *Legacies of the War on Poverty*, ed. Martha J. Bailey and Sheldon Danzinger (New York, 2013), 1–12. Felicia Kornbluh, *The Battle for Welfare Rights: Politics and Poverty in Modern America* (Philadelphia, 2007), 27–33, is attentive to the connections between civil rights, labor, disabled, and antipoverty activists in California during this time period.

²⁴ Berkowitz, *Disabled Policy*, 153–54.

²⁵ For a discussion of the distinction between programs that seek to ameliorate the disadvantages of disability (such as Social Security Disability Insurance) and those that try to correct disability (like vocational rehabilitation), see Berkowitz, *Disabled Policy*, 153–54.

²⁶ Deborah A. Stone, *The Disabled State* (Philadelphia, 1986), 90–117; Karen M. Tani, *States of Dependency: Welfare, Rights, and American Governance, 1935–1972* (Cambridge, 2016), 27–56. <au: delete? ok>

²⁷ Derthick, *Policymaking for Social Security*, 288–92; Martha Derthick, *Agency Under Stress: The Social Security Administration in American Government* (Washington, D.C., 1990), 31, 58–59; <au: is this same Stone as note 26? yes> Stone, *The Disabled State*, 90–117.

²⁸ For an argument that policy must be reconstructed in order to end societal discrimination against the disabled, see Harlan Hahn, “An Agenda for Citizens with Disabilities: Pursuing Identity and Empowerment,” *Journal of Vocational Rehabilitation* 9 (1992): 31–37. Note that Hahn anticipated the policy-feedback theories of contemporary political scientists. For a review of the literature, see Suzanne Mettler and Joe Soss, “The Consequences of Public Policy for Democratic Citizenship: Bridging Policy Studies and Mass Politics,” *Perspectives on Politics* 2, no. 1 (2004): 55–73.

²⁹ Mary Lou Breslin in Pelka, *What We Have Done*, 66. <au: which Pelka title? Sorry – added it in>

³⁰ Denis Karuth in *ibid.*, 64.

³¹ Lucy Gwin in *ibid.*, 84–85.

³² Normalization was developed by Bengt Nirje and brought to an American audience by Wolf Wolfensberger. See Bengt Nirje, “The Normalization Principle: Implications and Comments,” *British Journal of Mental Subnormality* 16, no. 31 (1970): 62–70; Bengt Nirje, “The Right to Self-Determination,” in *The Principle of Normalizations in Human Services*, ed. Wolf Wolfensberger (Washington, D.C., 1972), 176–93; Bengt Nirje, “The Normalization Principle and Its Human Management Implications,” in *Changing Patterns in Residential Services for the Mentally Retarded*, ed. Robert B. Kugel and Wolf Wolfensberger (Washington, D.C., 1969), 179–95; Wolf Wolfensberger, “The Origin and Nature of Our Institutional Models,” in *ibid.*, 59–171. Self-advocacy and self-determination are both used among people with intellectual impairments and have slightly different meanings. Self-determination means deciding what one wants, while self-advocacy is the action that individuals take to speak up for what they want and need. Ward and Meyer, “Self-Determination for People with Developmental Disabilities and Autism,” 135. Samuel Bagenstos argues that “independence” became the glue that held together a loose coalition of disability groups in the late 1980s. The term is admittedly ill-defined, but, Bagenstos argues, it had come to mean self-sufficiency and freedom from income-support programs. While I do not dispute Bagenstos’s characterization of disability rights discourse in the late 1980s, my intention here is to show that “independence” had a slightly different meaning in the 1970s, one that was much more contested and that drew from similar strands of thinking in other corners of the nascent disability rights movement. Bagenstos, *Law and the Contradictions*, 27–29.

³³ Of independent living, Judy Heumann said in 1977, “It means being able to make independent decisions.” Quoted in Susan Stoddard Pflueger, *Independent Living* (Washington, D.C., December 1977), 1. Lex Frieden, Laurel Richards, Jean Cole, and David Baily, *ILRU Source Book: A Technical Assistance Manual on Independent Living* (Houston, 1979), 3, which defined independent living as is “control over one’s life based on the choice of acceptable options . . . managing one’s affairs, participating in day-to-day life in the community, fulfilling a range of social roles, and making decisions that lead to self-determination and the minimization of physical or psychological dependence on others.”

³⁴ Quotations from Gerben DeJong, “Independent Living: From Social Movement to Analytic Paradigm,”

Archives of Physical Medicine and Rehabilitation 60, no. 10 (1979): 442. On the dignity of risk, see Robert Perske, "Dignity of Risk and the Mentally Retarded," *Mental Retardation* 10, no. 1 (February 1972): 24–27.

³⁵ See, for instance, Frieden et al., *ILRU Source Book: A Technical Assistance Manual on Independent Living*, 3: "Independent living is not dependent upon programs that foster functional independence. Instead, it is based upon the individual's ability to choose and achieve a desired lifestyle and to function freely in society."

³⁶ Ed Roberts, in U.S. House of Representatives, *Oversight Hearings on the Rehabilitation Act of 1973*, Hearings, Before the Subcommittee on Select Education, of the Committee on Education and Labor, held in Berkeley and Washington, D.C., 95th Cong., 2nd sess., 5 January and 7–12 April 1978, 62 (hereafter *Oversight Hearings of the Rehabilitation Act of 1973*).

³⁷ Edward V. Roberts, "The UC Berkeley Years: First Student Resident at Cowell Hospital, 1962," an oral history conducted in 1994 by Susan O'Hara in *University of California's Cowell Hospital Residence Program for Physically Disabled Students, 1962–1975: Catalyst for Berkeley's Independent Living Movement*, Oral History Center, The Bancroft Library, University of California, Berkeley, 2000, 34 (hereafter Roberts, Oral History). The point is also made in Barner, Oral History, 261; Perotti, Oral History, 117–18.

³⁸ Roberts, in *Oversight Hearings of the Rehabilitation Act of 1973*, 65.

³⁹ "Nixon Vetoes \$1.7 Billion Rehabilitation Bill," *CQ Almanac*, 1972, 28th ed. (Washington, D.C., 1973), 953–58; "Third Handicapped Aid Bill Signed After Two Vetoes," *CQ Almanac*, 1973, 29th ed. (Washington, D.C., 1974), 557–64; Richard Nixon, "Veto of the Vocational Rehabilitation Bill," 27 March 1973, online document by Gerhard Peters and John T. Woolley, *The American Presidency Project*, at <http://www.presidency.uscb.edu/ws/?pid=4154> (last accessed 30 June 2017); Verville, *War, Politics, and Philanthropy*, 205–7; O'Brien, *Crippled Justice*, 120–25; Scotch, *From Good Will to Civil Rights*, 42–53.

⁴⁰ Despite the demise of the 1972 legislation, federal rehabilitation officials had already begun moving in the direction of serving severely disabled individuals. The Office of Vocational Rehabilitation tried to keep control of rehabilitation activities, but as the War on Poverty came to emphasize rehabilitation of the poor, different offices within HEW vied for control of programs for individuals too disabled for employment. The Public Health Service Administration and the Welfare Administration both wanted control of independent living. The PHSA argued that they had jurisdiction over programs for people with medical conditions, while WA claimed programs that provided cash assistance and social services programs for the poor. As a compromise, OVR director Mary Switzer agreed to a six-month extended period of evaluation so that people with severe disabilities might be more closely evaluated to determine eligibility. During this period of extended evaluation, clients could receive vocational rehabilitation services even though they might not eventually qualify for the program given the severity of their impairments. The provision became part of the Narcotic Addict Rehabilitation Act of 1966. For activists, the provisions did not go far enough in reorienting VR away from outcome-focused norms that, they believed, devalued the worth of people with severe disabilities. The 1972 legislation simply would have given statutory authorization for independent living. Verville, *War, Politics, and Philanthropy*, 161–63.

⁴¹ Center for Independent Living, “Service Areas,” 1977–1978, 3, in Center for Independent Living records, BANC MSS 2000/43c, The Bancroft Library, University of California, Berkeley, Carton 20, Folder 43 (hereafter CIL records).

⁴² Mary Lou Breslin, in *Oversight Hearings of the Rehabilitation Act of 1973*, 128; Phil Draper, in *ibid.*, 213. The image of VR as a factory is repeated in Center for Independent Living, “Service Areas,” 6, 16.

⁴³ Judy Heumann, in *Oversight Hearings of the Rehabilitation Act of 1973*, 79.

⁴⁴ Peg Nosek, Yayoi Narita, Yoshiko Dart, and Justin Dart, *A Philosophical Foundation for the Independent Living and Disability Rights Movements* (Houston, 1982), 8–9, 20–21.

⁴⁵ DeJong, “Independent Living,” 439. <au/ok? yes>

⁴⁶ *Ibid.*, 443.

⁴⁷ Nosek et al., *A Philosophical Foundation for the Independent Living and Disability Rights Movements*, 2, and Margaret L. Shreve, Patricia A. Spiller, Eric L. Griffin, Nancy Waldron, and Lynda Stolzman, “Consumer Control in Independent Living,” Center for Resource Management and the National Council on Independent Living, South Hampton, N.H., 1988, 6, posted at http://www.mwcil.org/home/files/disconsumer_control_in_independent_living_manualedited.pdf (last accessed 28 May 2016).

⁴⁸ The quote is from a letter to rehabilitation advocate and friend to polio survivors Gini Laurie and is repeated several times in websites of independent living centers documenting the philosophy and history of the movement. See, for instance, Danny Housley, “The Life of Ed Roberts,” *I Live With a Disability*, n.d., online document at <http://ilivewithadisability.com/ed-roberts/> (last accessed 12 May 2016); Marin Center for Independent Living, “Ed Roberts: The Father of Independent Living,” n.d., online document at http://www.marincil.org/who_we_are/ed_roberts.php (last accessed 12 May 2016); ILUSA, “Ed Roberts: The Father of Independent Living,” n.d., online document at http://www.ilusa.com/links/022301ed_Roberts.htm (last accessed 12 May 2016); Alicia Ouellette, *Bioethics and Disability: Toward a Disability Conscious Bioethics* (Cambridge, 2011), 330 n. 26.

⁴⁹ Doris Zames Fleischer and Frieda Zames, *The Disability Rights Movement: From Charity to Confrontation* (Philadelphia, 2001), 39, 50; Shapiro, *No Pity*, 36, 49.

⁵⁰ Hale Zukas, “History of the Berkeley Center for Independent Living (CIL),” 1975, reprinted and posted online at <http://www.independentliving.org/docs3/zukas.html> (last accessed 12 May 2016); U.S. Department of Education, Office of Postsecondary Education, “History of the Federal TRIO Programs,” 2011, online document at <http://www2.ed.gov/about/offices/list/ope/trio/triohistory.html> (last accessed 18 April 2016); Brian Woods and Nick Watson, “Power to Independence: A Historical Glimpse at the Interactions between Powered Wheelchairs and the Physically Disabled Students Program at Berkeley,” paper presented at the Inaugural Conference of the Disabilities Studies Association, Lancaster University, September 2003, 5, posted at http://www.lancaster.ac.uk/fass/events/disabilityconference_archive/2003/papers/woods_watson2003.pdf

(last accessed 1 May 2016); Jonathan M. Young, *Equality of Opportunity: The Making of the Americans with Disabilities Act* (Washington, D.C., 1997), 19. For a recounting of how PDSP developed concepts of independent living, see Fuss, Oral History, 57, 88–91; Eric Dibner, “Advocate and Specialist in Architectural Accessibility,” an oral history conducted in 1998 by Kathy Cowan in *Builders and Sustainers of the Independent Living Movement in Berkeley, Volume III*, Oral History Center, The Bancroft Library, University of California, Berkeley, 2000, 39–40; Linda Perotti, “An Employee Perspective on the Early Days of the Cowell Residence Program, Physically Disabled Students’ Program, and the Center for Independent Living,” an oral history conducted in 1997–98 by Kathy Cowan and Sharon Bonney in *Builders and Sustainers of the Independent Living Movement in Berkeley, Volume II*, Oral History Center, The Bancroft Library, University of California, Berkeley, 2000, 138 (hereafter Perotti, Oral History); Billy Barner, “First African American Student in the Cowell Program, 1969–1973; Administrator in Disability Programs in Los Angeles,” an oral history conducted in 1999 by Kathy Cowan in *University of California’s Cowell Hospital Residence Program for Physically Disabled Students, 1962–1975: Catalyst for Berkeley’s Independent Living Movement*, Oral History Center, The Bancroft Library, University of California, Berkeley, 2000, 286–87 (hereafter Barner, Oral History).

⁵¹ Draper, in *Oversight Hearings of the Rehabilitation Act of 1973*, 213. Confirming the rapid growth of the CIL, see Heumann, Oral History, 307.

⁵² *Oversight Hearings of the Rehabilitation Act of 1973*, 52, 56, 222–24, 236–37; Herbert Leibowitz, “Research and Training Specialist for Rehabilitation Services Administration, 1971–1990,” an oral history conducted in 1998 by Susan O’Hara in *Builders and Sustainers of the Independent Living Movement in Berkeley, Volume I*, Oral History Center, The Bancroft Library, University of California, Berkeley, 2000, 16; and Zukas, “The History of the Berkeley Center for Independent Living (CIL),” online document (last accessed 12 May 2016).

⁵³ Nosek et al., *A Philosophical Foundation for the Independent Living and Disability Rights Movements*, 28.

⁵⁴ *Ibid.*, 21.

⁵⁵ Fleischer and Zames, *The Disability Rights Movement*, 42. Observing young people's embrace of voluntary social change, see Suleiman Osman, "The Decade of the Neighborhood," in *Rightward Bound: Making America Conservative in the 1970s*, ed. Bruce J. Schulman and Julian E. Zelizer (Cambridge, Mass., 2008), 106–27.

⁵⁶ Nosek et al., *A Philosophical Foundation for the Independent Living and Disability Rights Movements*, 2; Shreve et al., "Consumer Control in Independent Living," 6.

⁵⁷ Hal R. Kirshbaum and Dominic S. Harveston, "Independent Living for the Disabled," *Social Policy* 7, no. 2 (1976): 59–62; Bruce Curtis, *How to Set Up an Independent Living Program: Twenty-Seven Questions and Answers* (Houston, 1980), 10; Young, *Equality of Opportunity*, 19; Draper, in *Oversight Hearings of the Rehabilitation Act of 1973*, 227–28.

⁵⁸ First Meeting of the Potential Board of Directors, 14 June 1971, in Hale Zukas papers, BANC MSS 99/150c, The Bancroft Library, University of California, Berkeley, Carton 1, Folder 6:A (hereafter Hale Zukas papers).

⁵⁹ For the number of ILCs, see CESS, *Evaluation of the Centers for Independent Living Program*, for the Rehabilitation Services Administration, Office of Special Education and Rehabilitative Services (Washington, D.C., 2003), 1.3. Not all of those were governed according to the model of consumer participation developed by the Independent Living Research Utilization Project. Congress endorsed the principles of consumer control and self-determination by requiring that all independent living centers be governed and staffed by people with disabilities. Though the centers spread, not all of them were run by people with disabilities. In 1986, Congress affirmed its support of consumer control. The 1986 amendments stipulated that 51 percent of staff and board had be persons with a disability before a center could receive federal funding. Scotch, *From Good Will to Civil Rights*, 394.

⁶⁰ Sonny Kleinfeld, "Declaring Independence in Berkeley," *Psychology Today* 13, no. 3 (August 1979): 67–78, reprinted and posted at <http://www.independentliving.org/toolsforpower/tools2.html> (last accessed 15 May 2016).

⁶¹ Janet Brown confirms this assessment from a staff perspective, arguing that Roberts was more interested in creating a national and international example of the CIL rather than providing services, something she was highly critical of. Janet McEwan Brown, “Student Member of the National Federation of the Blind and First Newsletter Editor for the Center for Independent Living, 1972–1976,” an oral history conducted in 1998 by Sharon Bonney in *Builders and Sustainers of the Independent Living Movement in Berkeley, Volume IV*, Oral History Center, The Bancroft Library, University of California, Berkeley, 2000, 11 (hereafter Brown, Oral History). Also noting that Roberts was not often present at the CIL and that the goal of many of the founders had been to create a national social movement for people with disabilities, see Frederick C. Collignon, “UC Professor of City and Regional Planning: Policy Research and Funding Advocacy,” an oral history conducted in 1997 by Mary Lou Breslin in *Builders and Sustainers of the Independent Living Movement in Berkeley, Volume IV*, Oral History Center, The Bancroft Library, University of California, Berkeley, 2000, 82–83, 116–117 (hereafter Collignon, Oral History).

⁶² The typical person with a disability is a middle-aged African American woman beleaguered by arthritis, back or spine problems, or heart conditions. People with disabilities tend to have lower levels of education than the average American. Matthew W. Brault, *Americans with Disabilities: 2010*, U.S. Census Bureau, Current Population Reports, Household Economic Studies July 2012, table 2, p. 6, and table A-2, p. 21.

⁶³ On discussions of the need to hire more “third world people,” see Minutes of the CIL Meeting of 7 July 1972, and Minutes of the Board Meeting of 10 July 1972, in Center for Independent Living records, Carton 10, Folder 3. On the difficulties CIL faced trying to diversify its volunteers, staff, and clients, see Center for Independent Living, “Affirmative Action: February 1976,” in Hale Zukas papers, Carton 1, Folder 13:E.

⁶⁴ Schweik, 112, and Galloway, Oral History, 81–82.

⁶⁵ Young, 33; Nosek et al., 28–29. On the translators available, see letter from Phil Draper, Center for Independent Living, to Steve Owyang, Chinese for Affirmative Action, June 11, 1979, in Center for Independent Living records, Carton 1, Folder 29.

⁶⁶ Scotch, *From Good Will to Civil Rights*, 146; Judith Heumann, “Pioneering Disability Rights Advocate and Leader in Disabled in Action, New York: Center for Independent Living, Berkeley; World Institute on Disability; and the U.S. Department of Education 1960s–2000,” an oral history conducted by Susan Brown, David Landes, Jonathan Young in 1998–2001, Oral History Center, The Bancroft Library, University of California, Berkeley, 2004, 317–19 (hereafter Heumann, Oral History). On the influence of the CIL on national and international disability rights activism, see Young, 32–33; Pelka, *What We Have Done*, <au: which Pelka title? Add it in>88–90, 106; Kathy Martinez and Barbara Duncan, “The Road to Independent Living in the USA: An Historical Perspective and Contemporary Challenges,” *Disability World* 20 (September–October 2003), reprinted by the Independent Living Institute at www.independentliving.org/docs6/martinez200309.html (last accessed 12 May 2016).

⁶⁷ Schweik, “Lomax’s Matrix: Disability, Solidarity, and the Black Power of 504,” 105–23; Shapiro, *No Pity*, 64–65.

⁶⁸ First Meeting of the Potential Board of Directors, 14 June 1971, in Hale Zukas papers, Carton 1, Folder 6:A.

⁶⁹ Fuss, Oral History, 86.

⁷⁰ Phil Draper, “Year End Report, 1978, and Future Projections” (Berkeley: Center for Independent Living, 1978), Part V, p. 2; Part VII, p. 2; Appendix A, Part 2, page 3; in Center for Independent Living records, Carton 20, Folder 39.

⁷¹ Letter from Floyd L. Pierce, Director of the Office for Civil Rights, U.S. Department of Health, Education, and Welfare, to Phil Draper, Center for Independent Living, 29 March 1978, in Center for Independent Living records, Carton 1, Folder 26; letter from Phil Draper to Steve Owyang, Chinese for Affirmative Action, 11 June 1979, in Center for Independent Living records, Carton 1, Folder 29; letter from Steve Owyang, to Phil Draper, in Center for Independent Living records, Carton 1, Folder 29.

⁷² Lacy, Oral History, 96, 106. The Community Services Administration was the successor to the Office of Economic Opportunity. Draper states that, as of 1979, the CIL staff included twenty African Americans and seven Asian Americans (20 percent nonwhite), an improvement from the numbers Draper reported in his 1978 end-of-year report, indicating that pressure from the CSA and HEW had encouraged the CIL to make a concerted effort to increase minority hiring. Letter from Draper to Owyang, 11 June 1979.

⁷³ Staff at the CIL and activists working with the center confirm that the organization was largely staffed and visited by whites with mobility impairments and that it was seen as that kind of organization in the Berkeley area. Galloway, Oral History, 79; Perotti, Oral History, 146–47; Collignon, Oral History, 104–6; Brown, 15–16. The observation is seconded in Martinez and Duncan, online document at www.independentliving.org/docs6/martinez200309.html (last accessed 12 May 2016).

⁷⁴ Galloway, Oral History, 75, 78–79; Don Galloway, “The CIL FBI Files,” *The CIL Classified: In-House Monthly*, issue no. 3, April 1976, in Center for Independent Living records, Carton 5, Folder 10.

⁷⁵ Galloway, Oral History, 100, 103.

⁷⁶ Fay, Oral History, 85–86. For more on the differences between the white and nonwhite disability experience, see Tenneyson J. Wright and Paul. Leung, eds., *Meeting the Unique Needs of Minorities with Disabilities: A Report to the President and the Congress* (Washington, D.C., 1993); David Perry, “Police Killings: The Price of Being Disabled and Black in America,” *Guardian*, 22 June 2017, online document at <https://www.theguardian.com/us-news/2017/jun/22/police-killings-disabled-black-people-mental-illness> (last accessed 7 July 2016).

⁷⁷ Lacy, Oral History, 124.

⁷⁸ Kim Phillips-Fein, *Fear City: New York’s Fiscal Crisis and the Rise of Austerity Politics* (New York, 2017), 132–37.

⁷⁹ Bruce J. Schulman, *The Seventies: The Great Shift in American Culture, Society, and Politics* (New York, 2001), 193–217.

⁸⁰ Draper, “Year End Report, 1978, and Future Projections,” 4, 5; letter from Phil Draper to Assemblyman Dan Boatwright, 14 March 1979, in Center for Independent Living records, Carton 2, Folder 1; letter from Phil Draper to Governor Jerry Brown, 26 June 1979, in Center for Independent Living records, Carton 2, Folder 1; Phil Draper to Mayor Gus Newport, 19 December 1979, in Center for Independent Living records, Carton 1, Folder 33.

⁸¹ Madan M. Kundu and Chrisann Schiro-Geist, “Legislative Aspects of Rehabilitation,” in *Multicultural Issues in Rehabilitation and Allied Health*, ed. Paul Leung, Carl R. Flowers, William B. Talley, and Priscilla R. Sanderson (Linn Creek, Mo.: Aspen Professional Services, 2007), 17–43; “Congress Clears \$5 Billion Handicapped Aid,” *CQ Almanac*, 1978, 34th ed. (Washington, D.C., 1979), 591–95.

⁸² 42 U.S.C. 1397, Social Security Act, Title XX Subtitle A, Sec. 2001 (1), (2), (4), and (5).

⁸³ Nosek et al., *A Philosophical Foundation for the Independent Living and Disability Rights Movements*, 10. See also the same sentiment voiced in Gerben DeJong, “Defining and Implementing the Independent Living Concept,” in *Independent Living for Physically Disabled People*, ed. Nancy M. Crewe and Irving Kenneth Zola (San Francisco, 1983), 27; Muriel Horton, “California, Here We Come,” *Disabled USA* 1, no. 1 (1977): 4.

⁸⁴ For more on SSI and FAP, see Eva Bertram, *The Workfare State: Public Assistance Politics from the New Deal to the New Democrats* (Philadelphia, 2015); Brian Steensland, *The Failed Welfare Revolution: America’s Struggle over Guaranteed Income Policy* (Princeton, 2008); Felicia Kornbluh, *The Battle for Welfare Rights: Politics and Poverty in Modern America* (Philadelphia, 2007); Jennifer L. Erkulwater, *Disability Rights and the American Social Safety Net* (Ithaca, 2006); M. Kenneth Bowler, *The Nixon Guaranteed Income Proposal: Substance and Process in Policy Change* (Cambridge, Mass., 1974); <au: J. Burke Vincent or Vincent J. Burke? Sorry—Vincent J.>Vincent J. Burke and Vee Burke, *Nixon’s Good Deed: Welfare Reform* (New York, 1974).

⁸⁵ Russell Long in U.S. Senate, Committee on Finance, *Hearings before the Committee on Finance on H.R. 1*, 92nd Cong., 1st sess., 1971, 270.

⁸⁶ After his death, Lucy Gwin published the text of interviews she had conducted with Roberts over his

life. In the interviews, he confirmed that CIL supplemented its payroll with SSI. Ed Roberts, “Independent Living, Born on Campus: The Origins and the Purpose of Independent Living, as Told by Ed Roberts,” *Mouth: The Voice of the Disability Nation*, part 4 of 4, online document at http://www.mouthmag.com/issues/101/born_on_campus.html (last accessed 23 March 2016), and also Lucy Gwin, “A Note from the Editor,” online document at <http://www.mouthmag.com/index.htm#start> (last accessed 23 March 2016). The fact that CIL employees received SSI and that the board took benefits into account when it needed to reduce staff salaries in lean times is confirmed in Brown, Oral History, 20; Heumann, Oral History, 289; Perotti, Oral History, 138–39; Board of Directors Executive Session, 8 March 1976, in Bancroft Library, Hale Zukas papers, Carton 1, Folder 14:O.

⁸⁷ Center for Independent Living, “Service Areas,” 14, in Center for Independent Living records, Carton 20, Folder 43.

⁸⁸ *Ibid.*, 14.

⁸⁹ Charles Murray, *Losing Ground: American Social Policy, 1950–1980* (New York, 1984), 227–28.

⁹⁰ Center for Independent Living, “Work Disincentives in the SSI/SSP Program: What They Are, How They Affect Disabled Individuals, and What Should Be Done,” c. 1975–76, in Center for Independent Living records, Carton 5, Folder 26; Center for Independent Living, “Recommendations for Revision of the Social Security Act and Regulations,” 1978, in Center for Independent Living records, Carton 1, Folder 20.

⁹¹ Steensland, *The Failed Welfare Revolution*, 207–9; Jeff Bloodworth, “The Program for Better Jobs and Income: Welfare Reform, Liberalism, and the Failed Presidency of Jimmy Carter,” *International Social Science Review* 81, no. 3/4 (2006): 135–50.

⁹² Ted Thayer, in *Oversight Hearings on the Rehabilitation Act of 1973*, 335.

⁹³ American Coalition of Citizens with Disabilities, “Action Alert!!! Your Immediate Action is Needed in 4 Important Areas,” *ACCD Action*, 6 March 1982, 1–2, in Center for Independent Living records, Carton 19, Folder 9.

⁹⁴ Nosek et al., *A Philosophical Foundation for the Independent Living and Disability Rights Movements*, 11.

⁹⁵ Much of the recent historical work seeks to understand the political and economic turmoil of this pivotal period in American politics. Thomas Borstelmann, *The Seventies: A New Global History from Civil Rights to Economic Inequality* (Princeton, 2011); Daniel T. Rodgers, *Age of Fracture* (Cambridge, Mass., 2011); Bruce J. Schulman and Julian E. Zelizer, eds., *Rightward Bound: Making America Conservative in the 1970s* (Cambridge, Mass., 2008); Edward D. Berkowitz, *Something Happened: A Political and Cultural Overview of the Seventies* (New York, 2007).

⁹⁶ Borstelmann, *The Seventies*, 4; King and Smith, “Racial Orders in American Political Development,” 83–84.

⁹⁷ Nancy Fraser, “Rethinking Recognition,” *New Left Review* (2000): 107–20, suggests the tension between redistribution and cultural or identity-based recognition.