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Wolf P. Wolfensberger  
*Syracuse University*

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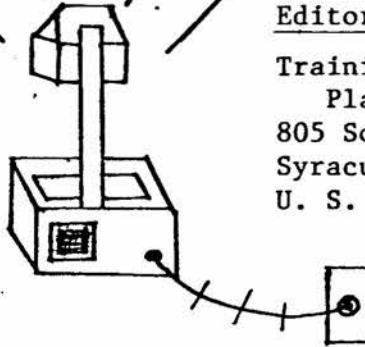
# TIPS

## Editor

Wolf Wolfensberger  
Professor  
Division of Special Education  
and Rehabilitation  
805 South Crouse Avenue  
Syracuse University  
Syracuse, New York 13210

## Editorial Address:

Training Institute for Human Service  
Planning, Leadership & Change Agency  
805 South Crouse Avenue  
Syracuse, New York 13210  
U. S. A.



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## The History of Human Services

TIPS subscribers know that the Training Institute gives presentations on human service history (one is coming up October 6 in Des Moines) and weaves history into much of its other teaching. History is not merely interesting; it is a major source of truth, helps us to understand why we are doing today what we do, and can save us from many errors. Those who do not study, and learn from, history are indeed condemned to repeat it (Santayana). Therefore, we decided to make the history of human services the major theme of this TIPS issue.

### Historical Tidbits from Antiquity

\*The so-called Neanderthal people lived in Europe and the Middle East between ca. 100,000 and 20,000 BC. Where they came from and what happened to them is under debate. One distinct possibility is that at least some contemporary European stocks are their descendants. One interesting finding is that they were apparently much more developed than has been assumed, or than pictures have presented them to be. When the first Neanderthal skeleton was discovered in Germany in 1856, Rudolf Virchow, a leading physician and anatomist of his day, pronounced it as being the remains of a recently deceased "pathological idiot." One of the skeletons was deformed and stooped from arthritis and old age, so scientists thought that the whole race was ape-like. In actuality, their brains were as large as ours today. Neanderthal skeletons have also been found of individuals that had handicaps such as lacking arms, being crippled in one leg, blind in one eye, and so on. Some of these injuries occurred many years before death, which meant that the person must have been supported and aided by his/her society. They buried their members not only with food and tools, but in some cases even with flowers, which certainly bespeaks a most delicate sensibility (Rensberger, B., & Bartlett, L. Facing the past. Science 81, 1981, 2(8), 40-51.).

\*In other societies in the past, elderly people were so much respected that it was sometimes thought that few others were fit to govern. For instance, ancient Sparta was ruled by a body called Gerusia, which is related to the Greek word for old man that we also find in terms such as geriatric and gerontology. Similarly, ancient Rome was ruled by a body called the Senate, derived from the Latin word senex, which means old man.

\*The idea that fertility and sexual vigor are inversely related to intelligence is ancient. It was held by Plato who said that a man whose "humors" (one might translate this as vitality) are scanty will channel these to make fertile seed rather than into good reasoning. Similarly, the Spanish "psychiatrist" Juan Huarte (1530-1589) stated in his 1575 Examen de Ingenies (Probe of the Mind) that the stronger a man is as an eater and procreator, the less is channelled to his faculties of reason. Obviously, such beliefs have their obverse, i.e., less intelligent people have been viewed as sexually more driven--a belief that implicitly, and often explicitly, is still very prevalent.

\*The Church Council of Carthage in 398 enjoined abstinence on husband and wife during their wedding night, asking them to consecrate it to God. This thus being God's night, the concept of "le nuit du Seigneur" was eventually perverted to mean that the couple's secular overlord had the right to the bride's concubinage on her wedding night. This became, linguistically, jus primae noctis, or "le droit du seigneur." This exemplifies how noble practices get gradually perverted into their opposites. (News item submitted by David Schwartz)

\*Based on the two precepts (to "visit the sick" and "liberate" or "go unto" prisoners) of the so-called seven biblical corporal works of mercy, and one precept of the so-called seven spiritual acts of mercy, namely to "console the brokenhearted" there was a long tradition in Christianity to appoint "visitors," "consolers," or "consolators" within the local parish to go to sick, afflicted or imprisoned people and "console" them, which probably not only meant extending love, sympathy and interest to them, but also bringing them God's word and promises, and a token of solidarity with their condition of the Church as the body of Christ. For instance, the Council of Orleans in 549 declared it the duty of all archdeacons to visit prisoners every Sunday, regardless of the nature of their crimes (Wines, 1910). In the Low Countries, the sieckentrooster or "consoler of the sick" was one of the local church functionaries for hundreds of years. His duty was to visit the sick in their homes. This custom was by no means abolished by the Reformation. As late as the mid-1600s, both the Dutch and French congregations in England sent out to the sick what the English then called "consolators." During some of the plague quarantines at that time, these consolators were given a choice by the authorities between abstaining from their visits, or remaining in the home of a sick person they were visiting until the quarantine was lifted (Mullet, 1956). Thus, the office of the consoler or consolator was one of the major forerunners (together with the almoner) of the modern social worker.

Historical Tidbits from the Middle Ages Through the Renaissance

\*The cutting edge of social developments. For almost 1500 years, St. Paul's advice that women should keep silence during worship services (1 Corinthians 14:36) was interpreted in a very rigid and exaggerated fashion. It probably not only contributed to the exclusion of women from the priestly role, but extended even as far as excluding them from other liturgical participation, including from singing at religious services. Because in the Christian world, the theater was, in part, derived from religious drama (such as the mystery play), women were also excluded

from the stage once secular theater began to thrive again during the Renaissance. This presented a problem once the opera evolved, requiring female parts and voices, and led to the compromise of using boys to play or sing female roles. However, writers of musical productions made demands upon these roles which the voices of young boys were not able to meet; thus, the custom developed and prevailed during the 17th and 18th century (mostly in Italy) of castrating boys with promising voices sometime between their seventh and twelfth years. This preserved the pitch of their voice for life, but permitted the voice to become stronger and richer with age. In time, writers of operas and similar musical productions began to write roles specifically for the (so-called) castrato voice, and castratos even began to play male roles. (Ironically, it was thus often the castrato in a play who, in the end, "got the girl.") All of these practices had consequences which move and horrify us deeply today. Thus, it is estimated that for a rather long period of time, as many as 4,000 boys a year were castrated in Italy alone. Further, all of these regrettable practices prolonged the exclusion of women from yet another sector of performance and accomplishment. When women finally entered the performing arts, it was automatically assumed (for almost several hundred years) that they were of loose virtue--and often indeed they lived up to this expectation. This image of the sexually promiscuous female theatrical performer persisted even into the early 1900s when many a young gentleman was still prohibited by his family from marrying the woman of the stage that he loved. The eunuch system is still not dead in some countries. It is estimated that there are 3500 eunuchs in Bombay, India alone. As late as the 1950s, males in Scandanavia were still castrated for criminal acts.

\*Scholars beware: The medieval scholar Peter Abelard, who should well know these things, concluded that "Haec tria subvertunt sensus: affectio rerum, multus thesaurus, stultus amor mulierum" which, roughly translated, means that three things subvert the mind: attachment to objects, too much versifying, and dumb love of women.

\*Though defective in some of its coverage, an interesting book is Kealey, E.J. Medieval medicus: A social history of Anglo-Norman medicine. Baltimore: Johns Hopkins University Press, 1981. From it, we learn tidbits such as follow.

A carpenter who was admitted to St. Bartholomew's hospice in England during the 12th century because he had become crippled, perhaps because of arthritis, was provided with the means of practicing his craft making very simple things, which helped him become increasingly better until he had recovered so much that he was declared miraculously cured. Of course, this strategy is highly consistent with the principle of normalization which would suggest that the person be involved intensively in culturally valued activities, that this be done with high role expectations, and that culturally familiar valued roles would be established or maintained for the person--in this case, that of a productive "real" carpenter.

Considering the way mental health and psychiatric practitioners today prescribe various forms of sex as if they were medical treatments, it is interesting that according to an unverifiable tradition, a similar event occurred in 1114 in England. The dying archbishop of York was told by his physician that the only thing that could remedy his illness was sexual intercourse with a woman. Some advisers urged him to accept this guidance, asserting that God certainly would not be offended since the act would be performed solely for medical reasons, rather than to satisfy carnal lust. The archbishop appeared to consent, whereupon a beautiful woman was imported to his quarters. However, it turned out that the archbishop merely pretended that he had intercourse with her in order to placate his friends. Upon discovering the truth, they strongly rebuked the patient who finally reasserted his principles and declared that he would not surrender the immortal glory of chastity for the sake of his mortal flesh. "Shame" he thundered, "upon the malady that requires sensuality for its cure."

\* A major medium through which people rendered help and services to each other in the Middle Ages was the confrérie, or brotherhood. It usually included between 20 to 100 members, and revolved around a trade, craft, or village. Such organizations addressed a wide range of people's needs, including the leading of a religious life, charitable and social service, and entertainment. Such a group would help members who fell ill, support those who slipped into poverty, accompany members to the town gate if they set off on pilgrimage, march in their funeral, pay for their burial if they died in poverty, and even accompany them to the scaffold if they were condemned to execution. In the social and religious realm, the brotherhoods might stage religious plays, make music, serve as stagehands and actors, hold competitive and sports events, put on games, arrange public entertainments, import orators or preachers, march in a group in various events, donate works of art, etc. The funds for all these activities came from dues that were scaled according to income, and paid either weekly, monthly, or quarterly.

\*One interesting forerunner of the modern nursing home was infinitely more normalizing than nursing homes are today. It consisted of a hospice founded in 1388 for 12 elderly craftsmen of the city of Nuremberg. Not only was this hospice small, but it was very spacious and provided all sorts of shop space for the craftsmen to practice their respective crafts as much as they could, regardless of their age. Thus, we see one of them engaged as a filemaker, the other one as a street sweeper, the third one as a wound surgeon, etc. Furthermore, upon entry, the members were considered brothers of the community and sat for portraits which showed them busily engaged at their trades. Since this community was run, like many others, in close similarity to a monastery, even with its own adjacent chapel, the brothers wore monk-like habits.

\*The TI sometimes talks about human service workers "being crazified" by the human service system. We have since learned that as with many good things, the word crazification may not be entirely new. Apparently, there used to be a Latin word, insanicere (at least in Medieval Latin), equivalent to "crazify," judging from a 1506 complaint about the obscenities perpetrated by the clergy at the Medieval Feast of Fools (shortly after Christmas): "Iam clerici et laici et princeps ubique insanicent sanctissimam natalis noctem celebrantes ludo taxillorum" (Rigollot, 1837, p. 99).

\*In a lengthy alliterative poem, entitled "The Hyeway to the Spytte Hous," Robert Copland in about 1536 described the many poor and handicapped people of the highways, byways, and hedgerows of his day in England. Here is an excerpt in which he relates how such street beggars pleaded passers-by for alms.

#### The Beggars' Plea

"Master, in the way of your good speed  
To us all four, behold, where it is need;  
And make this farthing\* worth a halfpenny  
For the five joys of our Blessed Lady."

"Master, do what no man did this day  
On yon poor wretch, that rotteth in the way,  
For the one who died for us on a tree  
Let us not die for want of charity."

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\* A farthing was a quarterpenny

\*One of the major milestones in the development of institutions and hospitals was an edict by King Louis XIV of France in 1656 that every town was to start an all-purpose residential facility for needy, homeless, handicapped and/or sick people. Such a facility was called a hôpital général. A recent publication (Griffin, J. D., & Greenland, C. Institutional care of the mentally disordered in Canada--A 17th century record. Canadian Journal of Psychiatry, 1981, 26(4), 274-277) revealed that this system was copied in Quebec (then called New France) in the late 1600s. Charters for such institutions were granted in 1693 and 1694, one in Quebec City and one in Montreal, though there appear to have been even earlier ones. The register of the hospice in Montreal was, in a sense, re-discovered in the 1970s. It disclosed that during its first 45 years, at least 7 of the 66 males admitted between 1694 and 1738 had some kind of mental handicap. Some were specifically referred to as innocent (mentally retarded), muet et innocent (mute and retarded), another as insensée, which was translated as insane. The register also revealed that the residents must either have been very robust, and/or excellently cared for, because they tended to live in the hospice for a very long time and to a ripe old age.

### Historical Tidbits from the Pre-Contemporary Age

\*Michel Foucault is one of the most insightful modern analysts of human services, subjecting these to analysis from a wide spectrum of perspectives, such as economic, social, and especially the perspective of human imagery. He has written a number of books which have looked at different elements of human services, and though he has heavily emphasized their manifestations in French society, the material has had much relevance to human service developments in the modern world in general.

Foucault's use of language is double-edged. Its unorthodoxy and privateness of meaning can be utterly obscure at times, and utterly liberating at others, because often, an idiosyncratic insight must be highly unorthodoxly translated into language in order to express a previously hidden or ill-understood reality. For instance, he points out that images have a "dangerous privilege" "of showing while concealing," and for being "substituted for themselves indefinitely in an open series of discursive repetitions."

His The birth of the clinic: An archaeology of medical perception (A. M. Sheridan, trans. New York: Vintage Books (Random House), 1973) is a work which addresses the history of what we might call the medicalization of human service and, to some degree, of the world, with a major focus upon the period of circa the mid-1700s to the early 1800s. A major impetus to the medicalization of human service and to the materialization of medicine can be found in the French Enlightenment just prior to, and during, the French Revolution--a time when human rationality began to be treated like a religion. For instance, during the 1780s, it was proposed that epidemics should be combatted by having health regulations and instructions read at every Sunday and holy day Mass or religious service. These "readings" would explain what one should eat and how, how to dress, and how to prevent or treat illness. As one proponent of this scheme put it: "These precepts would become like prayers that even the most ignorant, even children, would learn to recite." Making a religion (in essence, an idol) out of medicine can be expressed by either transforming medical practitioners into a kind of priesthood, or by attempting to transform the clergy into a class of scientific (rather than faith) healers. The latter trend might be said to involve the establishment of a therapeutic clergy, and the former a medical priesthood. We have been able to observe both phenomena since the scientification and materialization of medicine. Indeed, during the Enlightenment, some people referred to physicians as the "priests of the body."

In order to tie medicine more intimately to the natural sciences, one movement promoted the custom of physicians making systematic meteorological and climatic observations. For instance, before taking the temperature of a patient, the physician would take the temperature of the day. During the Enlightenment, medicine also began to demand the kind of political power and dominance we are accustomed to seeing it seek in our own day. As one such proponent put it: "Who should denounce tyrants to mankind if not the doctors who make man their sole study?" Other similar spokespersons proposed that if people would only accept the frugal but rational style of living that medicine could prescribe, almost all social ills would disappear--the kind of claim we still hear today in only slightly altered form. One leader proposed that "doctor magistrates" be instituted to be in charge of local affairs, and to function as guardians of both public health and public morals. One proposal was that physicians should determine which books should be available to the public and what plays would be performed in theaters, and physicians should assure that people would marry not out of passing infatuation but from considerations for the larger good. A good society could only be attained if medicine would be able to dictate the standards for physical and moral relations among individuals, and between individuals and the state. Of course, all of these things were to be done for the good of the people who "must be saved from their own errors."

Positive ideals cultivated by the Enlightenment and the French Revolution included the importance of serving people at the level of their own families, the decentralization of human services to the local levels, the abolishment of institutions to confine the poor, and the entitlement of the poor to public support. Many of these ideas were expressed in a fashion that was ideologically far superior to similar ideas promoted for very different motives earlier, as for instance via the edicts of Louis XIV and the Elizabethan poor laws. However, because of the confusion of the French Revolution and the early demise of the First Republic, many of these ideals were very poorly or only temporarily realized. It is also interesting how the leaders of the French Revolution showed a remarkable degree of insight into the reality of deviancy image juxtaposition. When proposals were made by the medical profession to create a national commission responsible for health, welfare, and imprisonment, the national assembly rejected the proposal because "it debases the lower classes of the people by entrusting the care of the unfortunate and of criminals to the same persons." Instead, in 1792, the Société de Santé was founded to function as a coordinative and facilitative body for medicine and health.

\*It is commonly assumed that electroconvulsive shock as therapy had its beginnings in the 20th century, but this is not true. George Adams Jr., mathematical instrument-maker to His Majesty, and optician to his Royal Highness the Prince of Wales, invented a device from which a powerful electric current could be generated and applied directly to the head of people with mental problems. This procedure, called "electrification" of people, was first applied by surgeon John Birch of St. Thomas Hospital in London, who stunned depressed patients with it in the late 1780s. Indeed, by 1793, the London Electrical Dispensary was founded "with a view to afford a new benefit to the lower order of mankind" (Macalpine & Hunter, 1969, p. 285).

\*Benjamin Rush was one of the first prominent American psychiatrists (1745-1813), and a signer of the Declaration of Independence. In 1792, he "discovered" a new disease which he called "negritude." The discovery was made when he observed a Negro who suffered a rare skin disease which was symptomized by white spots on the skin. Rush concluded that all Negroes were suffering from a mild form of hereditary non-contagious leprosy of which the major symptom was blackness. Thus, the Negro was safe as a domestic, but not as a sexual partner, and Negro identity was subjected to medical supervision. This discovery has been analyzed with his usual acerbity by Thomas Szasz in 1971.

\*In J.G. Kohl (Petersburg in Bildern und Skizzen. Vol. 2. Dresden & Leipzig, Germany: Arnoldische Buchhandlung, 1846), we find three chapters on human services in St. Petersburg (now Leningrad), Russia, during the early part of the 1800s: one chapter each on hospitals, insane asylums, and foundling homes. Apparently, these charitable institutions proliferated to a remarkable extent in that city, due to massive donations by various rich and noble personages. Interestingly, the author reveals a number of facts and insights into European, and especially German, charitable institutions, and compares them rather unfavorably with the Russian ones he observed. The author documents the existence of an institution in St. Petersburg for deaf-mutes with about 110 residents, and a daughter institution in Moscow. It was customary in this institution to bring up one non-handicapped orphan (from the orphanage) for every nine deaf-mute children. Deaf males were often trained as scribes or copyists to work in various offices in Russia that laid value on secrecy; and obviously, a scribe or secretary that could not hear had many advantages, and was well paid.

The name of the insane asylum in St. Petersburg could be translated as "house of care for those full of sorrow." It was located in a rustic villa outside of town. Obviously, some form of moral treatment was practiced. Staff were required to show the utmost kindness and patience, and were dismissed instantly for even a single instance of impatience. They were not permitted to return violence with violence, but at the most to try to avoid being hurt. Upon admission, residents were treated kindly and involved in realistic work, and in aesthetic and intellectual appreciation. For instance, they were shown museum-like collections of natural history items. However, some mild forms of restraint were used. Of the 130 residents in 1835, 50 were released, half of them recovered from their affliction.

The foundling institution was initiated in 1770, and by 1836 had grown to serve 26,000 children, with 7,000 new admissions per year. One quarter of the infants died within six weeks. This meant that daily, four to five infants died on the site, a total of up to 1800 per year. After a few weeks, the surviving infants were farmed out to peasant families in the countryside, where another half died within six years. However, the total mortality of about 2/3 did not compare too unfavorably with the "normal" mortality in those days of about 50%. The remainder returned to the institution for formal schooling, their education lasting for most of them until they were about 18.

\*In California, a very large hospice was built by Spanish missionaries in 1822 as part of the San Fernando mission, dedicated in 1797. Miraculously, the building has survived to this day.

\*Emil Kraepelin, the famous German psychiatrist who delineated schizophrenia, wrote, in 1917, One Hundred Years of Psychiatry (New York: Philosophical Library, 1962). Some tidbits from this history follow.

In the late 1700s, it was widely believed in France that people who cared for the mentally disordered would become delirious or insane themselves. This rumour swept across the western world. Basket-weaving was recommended in the 1800s, when it was also still normative in the culture. It is, of course, now still part of the institutional scene, though no longer normative. Even in Germany's earliest mental institutions, it was customary to hire ruffians and even ex-convicts, as in the Sonnenstein Sanatorium. The employment of disabled veterans for reasons of economy was also advocated in the mid-1800s. In the 1800s, German institution attendants sometimes used semicircular "catching sticks" in order to pin unruly institution residents against the wall before overpowering them. Some alienists recommended that attendants wear invisible coats of mail under their outer clothing. The mortality in the institutions in the 1700s and 1800s was horrendous, as high as about 50% of residents in a year. Some residents in English asylums in the early 1800s simply vanished, but were entered in the records as discharged. Kraepelin hailed the 1811 construction of what was perhaps the most famous German institution for the mentally disordered in Sonnenstein (previously a monastery) as "the dawn of a new day in the treatment of mental disease in Germany." Later, the Nazis made Sonnenstein one of their major centers for killing handicapped people.



\*Perhaps one of the first books by a handicapped person for handicapped persons was Buckeliana oder Trost- und Hilfsbuch für Verwachsene, published anonymously in Leipzig, Germany, in 1826. It is believed that the author had a humpback and worked in the book business. The title might be translated as Hunchbackyana, or Consolation and Aid Book for the Malformed.

\*In 1845, Perceval formed the Alleged Lunatic's Friend Society in England, designed to "stir up an intelligent--and active sympathy, on behalf of the most wretched, the most oppressed, the only helpless of mankind, by proving with how much needless tyranny they are treated--and this in mockery--by men who pretend indeed their cure, but who are in reality, their tormentors and destroyers" (Skultans, 1979, p. 100).

\*Many of the responses to social role valorization (formerly called the principle of normalization) remind one of Conolly's 1847 (1968) observations on the response of his contemporaries to the proposals of moral treatment and the abolishment of forcible physical restraint. In 1838, a Mr. Hill from Lincoln Lunatic Asylum had declared that "in a properly constructed building, with a sufficient number of suitable attendants, restraint is never necessary, never justifiable, and always injurious, in all cases of lunacy whatever." Conolly continues: "This sentence, when published in 1838, was declared, even by those most inclined to the new system, to be too decided, and likely to produce a bad effect; but fortunately the lapse of eight years has proved its perfect truth, by its adoption as a principle in all the most important asylums in the kingdom. But the upholders of the old system received the announcement of a doctrine so startling as if there were something atrocious in proposing to liberate those who were unfortunate enough to be insane; and for years after restraint had been actually abolished, the non-restraint system was declared 'utopian' and impracticable; then declared to be practicable, but not desirable; and at length, when every other argument has failed, those who have so strenuously opposed it come forward and claim it as their own system, which they have been practising for years, excepting that it is carried a little further."

\*Human Service in Olden Times: It is estimated that in 1857, there were 80,000 prostitutes in London, and one house out of every 60 was a brothel. These prostitutes "served" 2 million customers a week at a time when the entire male population of London was only 1.25 million (Sojourners, January 1982, p. 38). And it was all a lot cheaper than "sex therapy."

### The Era of Social Darwinism

\*Social Darwinism was the application of the theory of evolution by selection of "the fittest" to the human social domain. An early leader of this perspective was Herbert Spencer who used the phrase that nature was "red in tooth and claw." In his book, Social Statics, he said this: "The poverty of the incapable, the distresses that come upon the imprudent, the starvations of the idle, and those shoulderings aside of the weak by the strong, are the decrees of a large, far-seeing benevolence. We must call those philanthropists spurious who, to prevent present misery, would entail greater misery upon future generations. All defenders of the poor law must be so classified. That rigorous necessity which, when allowed to act upon them becomes so sharp a spur to the lazy, and so strong a bridle to the random, these paupers' friends would repeal. Blind to the fact that under the natural order of things society is constantly excreting its unhealthy, imbecile, slow, vacillating, faithless members, these unthinking men advocate interference that not only stops the purifying process but even increases the vitiation." It was thinking like this which led to the so-called "genetic alarm" or "social indictment" period (ca. 1880-1930), which was drawn upon by Nitschean Nazism, and which will probably continue to thrive in many people's minds (e.g., of the Reagan administration) for a long time.

\*Readers may be interested in a typical 1893 view of deviancy during the genetic alarm period (ca. 1880-1930).

"By carefully providing for its degenerates and abnormals in comfortable prisons, asylums, and almshouses, giving them the advantages of the highest knowledge and science of living, society unwittingly aggravates the evil it seeks to alleviate. It maintains alive those who would perish without its aid. It permits their reproduction and multiplication. It fosters, with more attention than it gives its better types, the establishment and increase of an abnormal and defective class. It not only perpetuates by care, but encourages, by permitting unrestricted 'breeding in' among them, the unnatural spread and growth of a social gangrene of fatal tendencies. It is assuming oppressive and alarming proportions, which begin to be felt in the whole social organization. In terror our advancing civilization begins to inquire if there be no way of counteraction consistent with its highest benevolence, by which this abnormality of abnormalism may be avoided, criminality and pauperism restored to natural proportions, or to that ratio of increase which may be the inevitable result of ignorance and excess in living.

The abnormal does not want children, has no affection for them, and gets rid of them as soon as possible if they come. If this were not so, their offspring, being abnormal, weak, sickly, diseased, deformed, idiotic, insane, or criminal, doomed to a burdensome and suffering existence or an early death, are a curse rather than a comfort to their parents; so that in no sense could the deprivation of these organs inflict injury or damage to criminal or pauper. On the contrary, they would be enabled thereby to enjoy many comforts and privileges, and be relieved from many restraints at present necessarily imposed upon them. The range of their enjoyments would, in fact, be greatly enlarged, both in confinement and at liberty. Many indeed might be allowed freedom who are now closely confined.

The remedy we suggest would certainly be effectual, an immeasurable benefit to the human race, the exercise of an inherent right which really injures none, and moreover, it appears to have become an imperative duty which society owes to its own preservation, which may not be neglected without actual sin.

Society arrests and confines the leper, the victim of smallpox, yellow-fever, cholera, or typhoid, and treats them according to its own will, with or against their consent. It does not hesitate to remove a gangrened limb, a diseased organ, from a person, if it be necessary; it shuts up the insane, the imbecile, the criminal, for the public protection; it inflicts punishments of various degrees; compels men to labor without pay, for its good, in durance; even deprives them of life, if it pleases; assumes arbitrary control of the life, liberty, and happiness of an individual, if it considers it necessary for the public welfare; and no reasonable being questions its right or duty to do these things. At the same time it allows its deformed and diseased in mind and body, and soul, to disseminate social leprosy and cancer with impunity, while the skill of its surgeons could prevent the infection by an operation almost as simple as vaccination. It seems inexplicable that the remedy should have been so long delayed." From Boies, H.M. Prisoners and paupers: A study of the abnormal increase of criminals and the public burden of pauperism in the United States; the causes and remedies. New York: Arno Press, 1972. (Originally published, 1893.)

\*The Jukes. Between 1874 and 1876, Robert Dugdale was employed by the New York Prison Association to study the conditions of the state prisons and county jails of New York. As part of this study, Dugdale "discovered" what he reported to be "one of the crime cradles of the state," consisting of a clan of people whom he called the Jukes who had resided in the woods since the early 1700s in the Finger Lakes region. He estimated or "discovered" that the family founder had spawned 700 descendants, that half the women of the clan had been harlots, that 22% of the clan were paupers, and so on. Based on this study, he formulated a theory of hereditary poverty accompanied by sexual licentiousness, fornication,

drunkenness, poor health and so on. It was specifically in the sexual licentiousness of degenerate people that he believed to perceive a core obstacle to reform, whence came the idea that sexual relations and reproduction of such degenerate clans had to be stopped. This study also gave rise to the idea that rural folk were much more likely to be degenerate than urban folk. The Jukes (1877), re-edited and published through at least four editions, was the first of many studies of so-called "royal lines of degeneracy," believed then to prove the validity of social Darwinism.

\*The Kallikaks return--or is it the Kakaliks? A rather dramatic historical deviancy image juxtaposition occurred when Brewer and Kakalik (1979) authored a book on Handicapped Children. On first sight, Kakalik looks like Kallikak, the famous degenerate family clan studied by Goddard during the genetic alarm period. There is also a modern comedy (ca. 1977?) that was shown on TV, entitled "The Kallikaks."

\*The Monkey Man. In 1904, a 23-year old Congolese pygmy was brought to the St. Louis exposition. After the exposition, the African explorer who had brought him over "gave" him to the Bronx Zoo where the African was exhibited in the same cage as a parrot and an orangutan. There was a futile protest by minority clergy, but the zoo director said that the African was happy and free, though the African himself was not consulted since he could not speak any English. Finally, he was released from the cage, but still slept in the primate house. He eventually became the ward of a series of individuals and agencies, but unhappy and lacking money for the trip home, he committed suicide in 1916 (Parade, 1/3/82). This kind of exhibition was thoroughly in line with many kinds of exhibits and illustrations during the genetic alarm period which put animals and caucasians at the extremes of an evolutionary continuum, with retarded people and members of other races somewhere in between.

\*Apes, men and morons. One of many books from the era of Social Darwinism and the genetic alarm was Apes, Men and Morons by E. A. Hootan (New York: G.P. Putnam's Sons, 1937). On its cover, it showed six heads, progressing from ancestor ape to caveman, modern man, moron and tomorrow's man. The moron was depicted somewhat similar to caveman (thank goodness, rather than to ape), especially with his sharply receding chin, small ears and low forehead. The author, a professor of anthropology at Harvard University, viewed the biological state of the human as constituting an emergency demanding "a surgical operation," and came down on the side of compulsory sterilization of certain sectors of the population (including the mentally retarded), and a eugenic program of education. These two measures, he believed, would "save us."

\*The feeble-minded, flies, mosquitoes, snakes and germs. Murchison was the leading American criminal psychologist of the early 1900s. In 1926, he said in his book, Criminal Intelligence, that a protective attitude toward feebleminded criminals was comparable to similar attitudes toward the "protection of flies, mosquitoes, snakes and diseased germs." He advocated that a third conviction for crime that would ordinarily lead to a prison sentence should instead carry an automatic death penalty. Obviously, since a very large proportion of prisoners have always been of low intelligence, this would have meant practically genocide of a large number of people of low intelligence.

\*It is little known that as a prominent British politician around the turn of the century, Winston Churchill advocated the incarceration and sterilization of mentally handicapped people. One of the things he said was that "feebleminded girls are the easy prey of vice and hand on their own insanity with unerring and unfailing fertility" (Time, 8/16/82).

\*A menace of yesteryear. "He cannot retain employment. His disease isolates him. He propagates his kind. He drains the family purse. He is at times dangerous. EPILEPSY PRODUCES DEPENDENCE." This is from a poster used for staff training in a New York institution (probably Craig) some decades ago. (Item submitted by Harvey Gross)

\*Stationery of the Children's Aid Society of Winnipeg in the 1920s included the following public interest message: "We guard the forest from fire: why not the race from feeble-mindedness? Protect the feeble-minded and prevent their propagation by permanent care in special institutions." (Item submitted by David Wetherow)

\*Margaret Sanger, adulated as a founder figure by Planned Parenthood and feminist circles, was, among other things, a strident eugenicist at a time when virtually all the intelligentsia and leaders of society believed in Social Darwinism and the claims of the eugenic movement. One of her aspirations was to work toward "a race of thoroughbreds," by which she did not mean horses but human beings (The Human, 3/82).

\*From Davenport (1915), another student of royal lines of degeneracy, we learn a fact not too widely known, viz., that the Rockefeller and Harriman families heavily supported the eugenics movement. For instance, the Eugenics Record Office was founded by Mrs. E. H. Harriman, and was located at Cold Spring Harbor, Long Island, New York. By implication, one can surmise that other wealthy members of the ruling classes of the time may have done likewise.

\*That genetic determinants might be located on chromosomes was first suggested in 1903.

\*Much can be learned from Poverty in New York (reprinted by Oxford Press, New York, 1971) by R. A. Mohl. The pattern of non-cooperation, competition, secrecy, and indifference that today prevails among voluntary human service agencies did not always prevail in the past. During the early 1800s in New York City, the voluntary charity organizations worked closely with each other. When the Humane Society published its 1809 report on taverns and prisons, delegates from 21 other associations met with it in order to jointly plan reform strategies. Part of the secret of this cooperation was apparently the fact that there was considerable overlap in the supporters of various types of charitable organizations. This fact strongly argues for at least a moderate amount of interlocking of boards of directors. Furthermore, many of the organizations had similar types of religious motivations and orientations, even if they did not always pursue classical Christian principles of charity. If they did not actually work for the same organizations at the same time, many of the leaders of New York society worked for different organizations at different times.

Many early American leaders in human services and social reform can stand to us as shining examples of activism. For instance, Matthew Clarkson, a revolutionary general and later New York City businessman and banker, served all at the same time as an officer or manager of the Manumission Society, the Free School Society, the Fuel Association, the Lying-in Hospital, the Institution for the Instruction of the Deaf and Dumb, the Marine Bible Society, and the American Bible Society. At the same time, he presided over the Humane Society, the New York Hospital, the City Dispensary, the New York Bible Society, and the Society for the Prevention of Pauperism. Numerous other New York civic leaders led similarly active lives on behalf of social betterment, as did often their spouses as well.

It is amusing to read Mohl's rationale for criticizing some of the American social thinkers of the early 1800s, who echoed some of the age-old Christian ideas that human affliction was inevitable, that there would always be poverty, and that the presence of affliction afforded people an opportunity to practice "sacred excellencies." Of all the rationales one could muster to criticize these views, the author was most exercised by the fact that these "denied the perfectibility of man."

To some degree, we must look upon the work houses and their forerunners as one of the major ancestors of sheltered workshops. Similarly, any make-work project designed to employ the idle poor, or distract their attention from political thoughts and ideas of riot, must also fall into this category. Sheltered workshops for indigent but industrious women were established as early as 1814 by the Society for the Promotion of Industry in New York City, in order to provide income during the winter for these women.

In locations where no mental institutions existed, but where there were other kinds of institutions, such as poor houses and hospitals, mentally handicapped (disordered or retarded) people might be treated like anybody else, unless they showed marked behavioral disturbances which created inconveniences for staff or other residents. In such instances, the next line of defense was for such persons to be placed in a special part of the existing institution; by all accounts, this appeared to have been either the basement or the attic. In the alms houses of New York City, "crazy paupers" were apparently usually placed in primitive basement quarters.

\*Mohl sketched the life of a most remarkable Christian minister to the afflicted, the Rev. John Stanford, an English Baptist born in 1753 who emigrated to America in 1786, and to New York City in 1789. After 1813 (when he was 60), his schedule looked as follows: on Tuesdays he visited the several wards of the New York Hospital and delivered three sermons. Wednesdays brought him to the state prison, and to the orphan asylum where he preached a "baby discourse" and examined waifs and delinquents in the catechism. On Thursdays he exhorted prisoners in the debtor's jail and the bridewell. On Fridays he visited sick patients at the Bellevue almshouse (forerunner of the Bellevue Hospital), preached twice and then again in the penitentiary, after which he catechized pauper children in the almshouse schools. On the Sabbath, Stanford ministered to all his charges, delivering individual sermons in the penitentiary, the state prison, and the New York Hospital, and two more in the almshouse chapel. He also instructed reformed prostitutes in the Magdalen Society asylum until the organization dissolved in 1818. After 1825, Stanford's itinerary included regular calls at the newly-established House of Refuge for juvenile delinquents, an institution he had proposed as early as 1812. The elderly minister preached an average of 40 sermons each month and an astonishing total of 5,622 between 1813 and 1825. In addition, he assisted with the education of the almshouse children; formed a pauper "singing school"; wrote a catechism for the schools of the almshouse, penitentiary, and state prison; convinced the city common council of the need for a chapel in the new Bellevue almshouse; and participated in a variety of reform causes in the city--all for an annual income of about \$1,150.

\*Around 1820, a popular belief arose that alcoholism and intemperance were the "cause of causes" of virtually every social ill. It appears that alcoholism was essentially the "forerunner" of mental retardation, in that by the end of the century, virtually all social ills were ascribed to the latter. However, a competing view advanced by some parties at about the same time was that virtually any social ill describable by social reformers of the day resulted "because Bibles are not sufficiently distributed" among the classes afflicted with social problems. A report of the day asserted as an indisputable fact that there was a direct correlation among the distribution of Bibles in various countries and social classes, and the temporal and social condition thereof.

Historical Tidbits From the Recent Past

Stevens, E. The American hospital of the twentieth century (2nd. ed.). New York: F. W. Dodge Corp., 1928.

COMMENT: This is a remarkable book considering when it was edited, containing hundreds of photographs and floorplans of all kinds of hospitals and hospital-like settings from all over the United States and a few from abroad. However, many of the pictures were obviously taken well before the publishing date of 1928. In fact, many of them might have been taken in the later 1800s or very early 1900s. An incredible amount of scholarly work went into the pictorial compilation alone, not even to mention the text. Unfortunately the book is relatively ahistorical, and gives no hint as to the historic origins and roots of some of the remarkable things it shows. Around the turn of the century, there developed a kind of facility called a "psychopathic hospital," or "psychopathic department" of general hospitals. The term "psychopathic" not having the meaning that it has today, these services were somewhat comparable to the 1960+ community mental health centers with a residential component, or to our contemporary psychiatric units of general hospitals. They saw themselves as being in the front line of service to people with mental problems, with the mental institutions behind them accomodating people with more severe long-term afflictions. In good part, they saw their function as one of assessing and classifying people. During the days when tuberculosis was still rampant, there also existed a few facilities which carried the name "preventorium." For instance, there was one in Toronto called the IODE Preventorium. In essence, preventoria were facilities for people (often children) who were considered very much at risk of TB. In the early 1900s, Boston had a facility called "Boston Consumptives' Hospital." People with TB in those days received heliotherapy, which of course meant that they were exposed to the sun, since there was really very little else people knew to do against TB. In the early 1900s, New York City had a "Hospital for the Relief of the Ruptured and Crippled." Stevens noted that "there are few hospitals in the world which have a more complete mechano-therapy than the Massachusetts General Hospital in Boston, with its splendid Zander room." Today, we call it physical therapy.

From Vogel (The Invention of the Modern Hospital, 1980), we learn how little people realize that the modern hospital remained a place for mostly poor people almost to the beginning of the 20th century. Poor people came to hospitals because in their homes, it was often dirty and crowded. The rooms were commonly unheated, and with everyone (including children) working, there often was no one at home to care for a sick person during the day. Affluent people had medical services brought to them in their homes. In 1873, a survey identified only 120 hospitals in the United States. Within 50 years, their number had increased to over 6000. Until approximately the beginning of the 20th century, physicians of high social status eagerly sought to serve in the hospitals for little or no remuneration, as a point of honor and in order to gain experience.

\*One of the greatest coincidences in human service history must surely be the 1894 establishment of the State of New York epilepsy asylum (which would abbreviate to SONYEA) in the town of Sonyea, south of Rochester. It was named Craig Colony for Epileptics, after Oscar Craig who was one of its founder figures. The committee of which he was a part selected the campus of the old Shaker settlement at Sonyea, which already had a number of buildings. Amazingly, the name Sonyea is apparently an Indian name that predates the establishment of the asylum. Its first director was William Letchworth, who became quite well known, wrote at least two books, and after whom Letchworth Village for the retarded near New York City was eventually named. Today, Craig is being converted into a prison.

\*During the Civil War, the Stewart Home School, a private institution for the mentally retarded in Frankfort, Kentucky served as a Confederate army installation. Temporary wooden barracks were constructed for the soldiers--and some of these are reportedly still used by the institution today.

\*Burns, S.B. Early medical photography in America (1839-1883). New York State Journal of Medicine. 1980, 80(2), 270-282. Around 1870, there was an outbreak of a peculiar malady at the New York State Lunatic Asylum in Utica. The symptom was a red, swollen, bloody ear, called hematoma auris. An article in the American Journal of Insanity proposed that a condition had been discovered that was intimately related to insanity, and reflective of a pathological condition of the brain. The truth was that the condition was the result of violence, mostly of personnel toward the residents. The episode is characteristic both of the dynamic of blaming the victim, and of the developing mentality of mental health workers of the day, and which still prevails today to a large degree.

In 1882, a psychiatrist published a book of engravings of mental patients in various insane asylums in New York City, in part to document the repulsiveness of the faces of the people in such asylums as a result and symptom of their insanity.

\*Ron Gerhard recently gave us a copy of The Humanist, the incongruously named newsletter of the South Dakota Human Services Center, formerly the S.D. State Hospital, and before that the Dakota Hospital for the Insane. The issue observed the centennial of the facility, and noted that "...this hospital has left many fond memories with its employees."

\*In 1893, Westinghouse installed the first alternating current (AC) electric system of any size, namely in the Niagara area, and largely in order to provide electricity for Buffalo. The company had to wage a gigantic propaganda war with Edison who had been successful until that time in promoting direct current (DC) systems. As part of this propaganda war, an Edison employee would tour the country, giving speeches and demonstrations, which included electrocuting stray dogs with alternating current in order to show how dangerous it was, and referring to this procedure as "Westinghousing" the dogs (Technology Illustrated, 8-9/82). Even though Westinghouse won the AC/DC war, there can be little doubt that this demonstration convinced people that if AC could so easily electrocute dogs, then it was a good method for electrocuting criminals. In 1890, the first such execution had taken place, and electrocution soon became the archetypal American mode of executing offenders.

\*While much has been written about so-called street people and their lives, there are a small number of works which must surely be all-time classics on the topic. One of these is The People of the Abyss (1903) which Jack London wrote after immersing himself into the street people culture of London in 1902 as what we would today call "a participant observer." He noted that the awful conditions of the street people (a word actually used) constituted a chronic condition of misery never wiped out even during times of greatest prosperity, and in fact, England was relatively prosperous at that time. London estimates that the city at that time had 35,000 homeless people. The people in the poverty-stricken west-end of London around 1900 had half the life expectancy of those in the prosperous east-end. By age 5, 55% of the children of the poorer classes had died. Much as in California today, where a profoundly retarded person is more likely to die in a "convalescent hospital" than anywhere else, so in the London of 1884, a poor person was most likely to die in a workhouse, only secondly in a hospital, and only an infinitesimal percentage died in lunatic asylums. The workhouses and the quarters of the Salvation Army were besieged, far beyond their capacity to respond, by the unemployed and hungry. The workhouses at that time served mostly as what we would now call a shelter where homeless people were admitted for one or a few nights only,

where they received the sparsest form of food, and where they would then be expected to work, often being locked up to do so for several days at a time. The book is studded with over fifty photographs of people in misery, and of their habitats and the settings which served them. The author discovered what he called a "law" to the effect that "the homeless shall not sleep by night," i.e., during the nighttime, the keepers of law and order relentlessly keep them on the move, accounting for the fact that one can see so many of them sleeping on benches and in parks during the daytime. What is amazing about this story is how little the dynamics of slum-making, marginalization and crowding together of the poor have changed. Equally insightful is the author's analysis of the social helping forms for the poor of the day. He points out their fallacious assumptions and therefore ineffective functioning--many of which assumptions persist and are equally wrong today, with equally ineffective impacts. The author noted that the Alaska natives were essentially better off than the poor in England, and thus concluded that civilization has been a failure. It is fascinating to recall that for writing up his observations of the London street life, London's contemporaries accused him of being a "pessimist." (The item was drawn to our attention by Luca Conte.)

\*Better than morons and monkeys. During the 1960s, Mayor Lindsay of New York City announced a crackdown on "diplomats, doctors, and cripples for possessing and misusing special parking privileges." A rule was promulgated whereby cripples were instructed to drive to a police station nearest their place of destination, leave their cars, and wait until a police vehicle could drive them to their destination. Yes, the man who thought this up was widely considered a candidate for the US presidency, but this particular proposal of his fortunately never got off the ground.

\*In 1980, during the mass exodus of Cubans from Cuba, the Cuban government sent a number of people it no longer wanted to the United States. This included prison inmates, and residents of institutions for the mentally disordered and retarded. These people were all subsumed under a broad category which the Cubans called "scum." Once more, the modern age witnessed the reenactment of the ancient medieval Ship of Fools, in which afflicted people were loaded on ships, and the mariners were paid to take them away and dump them on some foreign shore far away. The New York Times reported the event on May 11 with the unfortunate deviancy imaging headline "Retarded People and Criminals are Included in Cuban Exodus."

\*During its early days in the 1930s, Seven-Up contained Lithium which is today used mostly as a powerful psychoactive drug prescribed to so-called manic depressive people. It can also have powerful side effects, harmful to people with heart and kidney disorders (Parade, 2/7/82).

\*In November of 1973, the first known conference of people with Down's Syndrome took place, repeated annually ever since in connection with the Down's Syndrome Congress, ~~which~~ is a citizen group (mostly family members) of people interested in the welfare of people with Down's Syndrome.

#### Prophecies Against Nazism

An interesting book published in 1946, within a year of World War II, was called Prophecies Against the Third Reich (Prophetien wider das Dritte Reich), Munich: Schnell & Steiner). It contained the work of two early opponents of Hitler, namely Dr. Fritz Gerlich (a convert to Catholicism) and Franciscan Father P. Ingbert Naab. Both began to oppose Hitler in 1930, three years before he came to power. They systematically unveiled the web of Nazi lies. They did this largely through the medium of two newspapers which, of course, were silenced soon after Hitler came to power. One of these was called "The Straight Way."



Hitler and the Nazi movement claimed loudly (at least before they came to power, in January of 1933) that they represented and promoted "Positive Christianity." In fact, paragraph 24 of the Nazi program stated that "the Party stands on a basis of positive Christianity." However they equated positive Christianity with superiority of the Nordic races, and contrasted it with "negative Christianity" by which they meant "dogmas," i.e., the churches, especially in their orthodox expressions. The term "religious freedom" was interpreted by the Nazis to mean freedom from control by orthodox church teaching. Naab said that this should be translated as "the party confesses a barbaric paganism."

The Nazis sometimes referred to the swastika as an expression of the Christian cross in the new era, and associated it with slogans such as "freedom, honor, social justice, life-renewing fertility." However, Naab called the swastika the "counter-symbol to the Cross of Christ."

Interestingly, one appeal used both by Naab and the Nazis was "Germany, Awake!" Of course, Naab used the expression veridically, calling on people to "awake and learn to see, lest those who purport to save the nation will bring it to ruin," while the Nazis used the slogan in a way which meant "Germany, be numbed."

By 1931, Naab began to refer to the continued growth of Nazism as "contagious insanity," "mass psychosis." "Times of catastrophe are times of illness, but whoever tells the masses that they are ill becomes very unpopular. There are ill people who become very mean when they are considered ill. While our only salvation lies in telling the truth, the prophets of the truth are being stoned." He reminded people that "their conscience cannot be replaced or given dispensation by any political leader." He said, "We do not know what will happen to our poor country. However, we know that if we have to undergo a harsh catastrophe, then the guilt must be borne to a great degree by our educated people."

From his analysis of the Nazi program, Naab also concluded that it pointed to the implementation of an episode of "giant child murder"---which was to come to pass in the largely successful efforts to exterminate handicapped children.

Also in 1931, Gerlich predicted---again merely by reading the signs of the times---that Germany would not only conduct war in the west but also in the east. The same year, he reported that he was being threatened with "torture and gallows," but replied that "this earthly life is short and your (his persecutors) power does not reach very far." He added, "I cannot imagine a worse torture than having insight into the future of Germany and Europe, and how our poor people are being cheated of their future."

In 1932, Gerlich wrote about the impending elections, and warned that the Hitler movement was characterized by abysmal deception, lies, and mental deviancy, and that the election would decide whether Germany was a barbarous or cultured nation. When Hitler actually became chancellor in January 1933, Gerlich wrote that the German nation had opted for an unavoidable and explicit separation from 2,000 years of culture.

Within months after Hitler attained power, Gerlich, having refused to save himself by flight, was one of the first people in Germany executed for political reasons. Father Naab, in ill health, went into hiding, but depressed over the developments, died in exile within two years.

Each generation thinks of history as something that happened to other people in other places at an earlier time. It seems that people today are no more capable and willing to read the signs of their own times, and to acknowledge its historical realities, than the people of the past. Who are the Gerlichs and Naabs of today? And who listens to them?

### Follow Up

After much agony, we commented in the June issue of TIPS how the nation of Israel is emerging as one of the Nazi powers of our time. One of the things that the Nazis did was to impose such an extreme degree of segregation on the Jews that they were not allowed to do anything, including buying or selling things, sexual

contact with non-Jews was punishable by death, and so on. We now learn that the Israeli rabbinate is demanding that the bodies of a non-Jewish wife and daughter of a Jew should be exhumed from a Jewish cemetery, despite the fact that the wife had kept Jewish observances. Fires are also being set to non-Jewish churches (as the Germans did to synagogues), and Jewish seminary students tried to disrupt a performance of Handel's "Messiah" (as Nazis disrupted Jewish performers). These are all things that one can easily imagine storm troopers doing in the 1930s.

### Parable of the Hole in the Ground

by Daniel Berrigan, SJ

There was once a nation that got bored with winning. They were number one on every page of the Guinness Book of Records--first in outer space, first in percentage of psychiatrists, first in jogging, smoking, lariat spinning. They were first in war, first in peace, first in being first. But they were bored.

So their president decided to do something new. The nation would dig the deepest and biggest hole in all the history of the world. The decision was, of course, reached in secret. "What do you think those foreigners might do if they learned what we are up to, the location of our hopefully number one hole?" the president asked his security advisors. They leaned forward respectfully, for they knew a rhetorical question when they heard one. "I'll tell you what they'd do," he went on. "They'd sabotage us, or steal our blueprints. We all know what they want. No, we can't let our people know. We'll just go ahead and dig and say nothing."

So in a remote pocket of the country, out of sight of TV cameras and snoops, they started to dig. The machines clawed away night and day; in no time at all the hole was so deep the workmen had to go up and down on cable elevators. They'd come up in stages, pausing in little cells clinging to the sides of the hole to avoid the bends.

The number one dig went on. Nothing was allowed to get in the way. The project had sound congressional backing, judicial backing, executive backing. It had huge monies to spend and mega-corporations that, for a tidy price, were rushing in their machines and know-how.

Months passed. The hole was the number one national priority. More and more workmen were transported to the hole site, families and all. More and more scientists were hired to deal with complex questions which the hole, so to speak, raised: questions of gravity, land density, air and weather, dust storms, effects of work underground, and so on.

It was strange: the hole was top secret, yet everyone in the country, in one way or another was in on it without, so to speak, knowing it. A vast continental hole network arose and spread. Very few knew what they were working at in their researching, computing, and programming, yet millions and millions of people were sucked into the hole, taking their bread, so to speak, from a vast mouth in the ground. The hole was becoming a cornucopia in reverse; out of a void came everything.

Since it was awesome, it seemed entirely natural that religion should be invited to bless the hole. So a high priest, standing robed in a helicopter, traced a vast cross in midair over the hole. North, south, east, west the great noisy locust stitched our fate. By now, the hole had its secret acronym--VOID (Veritably Our Identity Declared). "O Void," intoned the priest into the wind, "bless us even as we bless thee."

Blessing or no, it couldn't be said that things were going well for the citizenry. A vague discontent started up. It came from nowhere, yet it was everywhere; in fact, it seemed to get worse in exact proportion as the hole crept toward the world record. The more attention was paid to the hole, the less of everything there was for people--and this, you understand, although the connection wasn't generally known, and couldn't be, the very existence of the hole being tucked away in official skulls.

Still, know it or not, something was wrong. People wondered and complained. Doubts were gnawing away in the night. Where is our money going? they asked. Where are our taxes going? Why is bread so expensive? Why do we have to live like this? Why are trains always breaking down? Why does it cost so much to die or get born?

Then something really terrible happened. Top secret or not, the hole started to take charge of things. What had been a mouth, a cavity, a nothing, suddenly overnight became a kind of stalking Grand Canyon. The hole was on the move. More and more earth caved in around it. Huge workers' camps buckled and slid gently into its maw. Cars went in and streets fell under. Hills folded up like tarpaulin or dough.

Then the great day arrived. The world record was ours. We had the biggest, deepest hole in the history of the world. But there were no flags out, no people in the streets, no jubilant presidential message. Strange! The hole now surpassed the great Siberian open pit and the Mesabi Iron Range mine. It was deeper than the whole central valley of Switzerland measured from atop Matterhorn. It was wider than the African plains from Nairobi to the sea. Yet the President was unavailable. Not a word. The White House was locked tighter than a summer camp in January.

It was only much later that we learned why. It had all started the day our hole made number one. That day everything came apart. That night the guts of the hole began to rumble and grumble. It was no longer a simple gap in solid earth. It had all turned into a great beast. It had gotten up on its own legs and walked. Planet Earth was suddenly in danger of turning inside out, a black hole in space.

The President called a midnight security meeting. He was haggard and sleepless. The news he clutched in his hand was terrifying. His voice broke in a shrill tone as he read it. The hole was becoming bigger than anything, bigger than the world. The United States of America would shortly be swallowed whole!

But the generals shook their heads in disagreement. They were positively humming with good feeling: "No sir, we beg to differ. Why, everything's under control. Don't you give it a second thought. Granted, the hole is growing a little faster than we anticipated; granted, even, that we've had a few flubs here and there, cost overruns and so on. But who ever heard of a job all tied up with the four freedoms, national security, and our way of life not having its little ups and downs? We've flown a new crew of engineers down there. They're pouring concrete into the hole twenty-four hours a day. We'll be hearing any minute on the hot line how everything's stabilized. You'll see." The generals looked sage and steady in their confidence, and chomped away on their cigars.

The hot line rang. The chief of staff leaned over to grab it. His face was like a founding father's, chiseled into the side of a mountain. Seasoned old pro, number one in charge of number one. He listened. Then his eyes went blank and his face fell in like dough in a cold draft. The phone dropped, it spun there on its wire. You could hear it give a semi-articulate scream, as though a doll were being throttled. Chicago was sliding into the hole. Omaha was gone. So was the crew of one hundred thousand cement-pourers, with all their bulldozers, mixers, pourers, trucks, and the back-up crews. So was Salt Lake City; and just as the phone was laid down, so was Minneapolis-Saint Paul.

That was how it went. The rest you know--the day we won, we lost.

(This parable appeared in various publications in 1979. Reprinted here with permission of the author and Unity Grapevine, 6/83.)

### Resources

\*Since the last TIPS issue, yet another normalization-related publication has appeared, namely a monograph by the TIPS editor, entitled Normalization-Based Guidance, Education, and Supports for Families of Handicapped People. The monograph was co-published by the National Institute on Mental Retardation and the Georgia Advocacy Office, and sells for \$4.50 Canadian or \$4.00 US. This monograph explains the implications of the normalization principle (now called social role

valorization) to the guidance of families of handicapped people, with special emphasis on the parents of handicapped persons. The book includes six major sections, one each on: ideologies and rationales that underly the concept and field of providing guidance to families of the handicapped; different models of how service to/with families is often structured and provided, problems and shortcomings in research on families of the handicapped, especially in the past; a normalization-based perspective on the dynamics of the families of the handicapped; major normalization implications to providing guidance and support to families of the handicapped; and some of the important special responsibilities of a parent of a handicapped person. In Canada, the item can be ordered from NIMR (York University Kinsmen Building, 4700 Keele Street, Downsview, Ontario, Canada M3J 1P3; 10% or \$2 for postage and handling, whichever is larger); in the US, it is available from the Citizen Advocacy Office of Onondaga County (Suite 919, State Tower Building, Syracuse, NY 13202; add 10% for postage and handling).

\*During the war in Lebanon in summer of 1982, an institution for 850 handicapped and/or elderly people (200 requiring total care) suffered damage from several artillery hits, resulting in a number of dead and wounded, and all but 15 of the 200 staff members disappeared for a variety of reasons. Soon, the residents were starving, lacked water, and were overwhelmed by lack of hygiene. There was a proliferation of worms, ticks, lice, tuberculosis, chronic bed sores, and just plain terror. Children would void their bowels from terror wherever they were when airplanes only a few hundred feet overhead broke the sound barrier. This situation persisted for about two months until Mother Teresa arrived.

Sam Zamarripa, former graduate student at Syracuse University and former staff member of the Training Institute, proposed that this situation should be studied as it might contain universal lessons as to what happens to handicapped people in times of severe societal stress. He received some church funding to go to Lebanon for this purpose and has returned with a great deal of material, including video tapes and slides which he is now working up and will eventually present to interested groups. He can be contacted at 458 Seminole, Atlanta, GA 30307.

#### Employment Exchange

Michael Steer, one of the doctoral graduates of the Syracuse University Special Education program who has been to a number of the Training Institute's workshops, is now in a key position in mental retardation services with the government of the Australian state of Victoria. He and some colleagues have been trying to introduce social role valorization (normalization), PASS and PASSING into the human services of Victoria. There now are openings for consultants in the planning and implementation of social role valorizing community services in that state. For a foot-loose person who has been to the types of workshops the TI presents, this might be a very adventurous kind of position. Interested parties may inquire with the secretary, Health Commission of Victoria, 555 Collins Street, Melbourne 3000, Australia.

#### Deathmaking Updates

\*The events which we give addressed to the growing endangerment of the lives of handicapped people are our worst-attended ones. Conspicuous by their almost total absence are parents of mentally retarded people, even though their sons and daughters are among those highest at risk. One parent group gave as its reason for not recruiting and sending any members that "the topic was too touchy." We are sometimes also told that parents need not attend these events because they are already convinced of the issue--which is patently untrue, and which would be one of the things they could learn if they came. Documentation from Germany during the Nazi regime also showed that once genocide of handicapped people became a common practice, families wholesale abandoned their handicapped relatives to genocide, and justified this with the argument that they were better off dead, particularly considering the turmoil of the times.

\*The latest medicalization of social behavior is the theory that people get predisposed to infanticide by having been exposed to abnormally high levels of testosterone before their birth (Science Digest, 4/83).

\*The 1980 statistics on abortions by states (US) are now available. In terms of abortions per 1000 pregnancies, the District of Columbia led with 611, followed by New York State (438) and Nevada (411). The lowest rates were in Utah (88), South Dakota (94), West Virginia (95), and Wyoming (96). The overall national rate was 300, and the total number was 1.55 million.

\*During a recent 16-month period in Texas, there were at least 5 cases of "mercy killing," yet none of the accused was sentenced to prison. In the latest case, a 26-year old man shot to death his 63-year old father who was a resident of the Humble Skilled Care Center. Three generations of the family defended the deed as an "act of love" (UPI, Syracuse Herald American, 7/10/83).

\*Once a decision has been made that somebody should be "allowed to die," a true babble may be instituted that engenders unimagined confusion in the minds of people, particularly the family members involved. For instance, it used to be that even professional personnel referred to very severely impaired people as vegetables. Vegetable language has gotten a bad press for a long enough time that it is not much used any more, at least overtly, but it has now been replaced with the infinitely more sophisticated euphemism "non-functioning human being." This is the kind of language used in intensive care units for the newborn to set up a scenario for making a newborn infant dead. Instead of being told that their child is a monster or vegetable, parents are now told that the child will be a non-functioning creature and possibly a non-functioning human, or non-functional as a human. Also, once everybody has developed an expectation that someone will soon die, suddenly people lose their language to communicate medical news about the person. Should the afflicted person (who may be a newborn infant) improve, then the medical language would ordinarily be positive, and the development would be announced as "good news." However, since everyone had decided that the person really is headed toward death and/or should die, then suddenly "good news" is bad news, while news about the person getting worse (i.e., "bad news") is now "good news" because it permits peoples' expectations to come to fruition. Interestingly, it was a parent of a seriously handicapped newborn that noted that "it goes against everything you have been brought up to cope with" (Syracuse Herald Journal, 7/11/83).

\*In Canada, abortions have been legal since 1969, as long as a committee of physicians at an accredited hospital certify that the woman's life or health is in danger. However, the effect has been that a request by a woman for an abortion is taken as immediate evidence that her life or health is in danger, and the certification is automatically granted. (This exemplifies the principle that prevailing values will override technical obstacles.) Nevertheless, the Canadian abortion rate has been approximately 40% or less of the American rate.

\*In Philadelphia, two aged women in a retirement home for 60 people were murdered in 1983. One of them, age 90, was also raped. Because there had been no forcible entry to their efficiency apartments which had locks, suspicion fell on people who were in possession of keys, i.e., employees. Five additional deaths which had occurred in the preceding seven months were reviewed in order to check whether they might also have been murdered (Philadelphia Daily News, 7/25/83). An additional grisly element in this instance is the location of the home on Monument Road.

"HOUSEKEEPING ANNOUNCEMENTS"

TIPS Editorial Policy. TIPS comes out every other month, and contains articles, news, information, insights, viewpoints, reviews, developments, etc., that relate to the interests and mission of the Training Institute. While TIPS is mostly concerned with phenomena and developments that have to do with human services, it also addresses some of the larger issues which affect our society and the quality of life on earth, as well as the ways in which decisions are made in our society. These higher-order phenomena will eventually express themselves in human services in various ways, including in human service values and funding. Usually a TIPS issue will devote a portion of its space to one specific theme. TIPS will address issues whenever and wherever they occur. Disclosures of adaptive developments promoted, or of dysfunctions perpetrated, by a particular party or government should not be taken as partisan political statements. We assume that subscribers are people who lead hard lives struggling against great odds, and are aware of many shortcomings in human services. Thus, we try to inject a bit of levity into TIPS so as to make subscribers' lives more bearable (or less unbearable, as the case may be), even if not deliriously joyful. In fact, some TIPS content is apt to be depressing and in need of occasional levitation. TIPS gets many items from other sources, tries to report developments truthfully, but cannot be responsible for errors contained in original sources. Specific items from TIPS may be reproduced without permission as long as the full TIPS reference is cited/acknowledged, and as long as only small portions of an issue are reproduced.

The Training Institute. The Training Institute for Human Service Planning, Leadership and Change Agency (TI), directed by Wolf Wolfensberger, PhD, functions under the auspices of the Division of Special Education and Rehabilitation of Syracuse University's School of Education. Dr. Wolfensberger is a professor in the Mental Retardation Area of the Division. Since its founding in 1973, the TI has been supported primarily from fees earned from speaking events and workshops (across the world as well as in Syracuse), and to a small extent from consultations, evaluations of services, and the sale of certain publications and planning and change agency tools. There have been no federal grants. TI training has (a) been aimed primarily at people who are, and who aspire to be, leaders and change agents, be they professionals, public decision-makers, members of voluntary citizen action groups, students etc., and (b) primarily emphasized values related to human services, the rendering of compassionate and comprehensive community services, and greater societal acceptance of impaired and devalued citizens.

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Training Institute  
805 South Crouse Avenue  
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805 South Crouse Avenue  
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