Interpreting Access: A History of Accessibility and Disability Representations in the National Park Service

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Interpreting Access: A History of Accessibility and Disability Representations in the National Park Service

A Thesis Presented

by

PERRI SARAH MELDON

Approved as to style and content by:

Marla Miller, Chair

David Glassberg, Member

Brian Ogilvie, Chair, History Department
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ABSTRACT

INTERPRETING ACCESS: A HISTORY OF ACCESSIBILITY AND DISABILITY REPRESENTATIONS IN THE NATIONAL PARK SERVICE

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PERRI SARAH MELDON, B.A., TUFTS UNIVERSITY

M.A., UNIVERSITY OF MASSACHUSETTS AMHERST

Directed by: Professor Marla Miller

This thesis traces the history of the National Park Service (NPS) Accessibility Program and examines accessibility initiatives and representations of disability history at one national historic site. The work illustrates the accomplishments and challenges of enhancing accessibility across the national parks, at the same time that great need to diversify the parks and their interpretation of American disability history remains. Chapters describe the administrative history of the NPS Accessibility Program (1979-present), exploring the decisions from both within and outside the federal agency, to break physical and programmatic barriers to make parks more inclusive for people with sensory, physical, and cognitive disabilities; and provide a case study of the Home of Franklin D. Roosevelt National Historic Site (HOFR) in New York. The case study describes the creation of HOFR as a house museum and national historic site, with a particular focus on the history of the site’s accessibility features; considers existing barriers; and makes recommendations for programmatic changes to improve the experience for disabled and nondisabled visitors. By collaborating with and learning from nearby organizations by and for people with disabilities, HOFR can serve as a model for other historic house museums in how to effectively interpret “disability stories.”

Contemplating how the National Park Service has interpreted the histories and heritage of
other historically marginalized communities through theme studies, on-site interpretation, and public history scholarship yields lessons for how best to interpret disability history and depict nuanced representations of the varied disability communities living in the U.S. Current portrayals of disability history in the National Park Service are insufficient. It is not enough to make places physically accessible and provide programmatic experiences to support different audiences. Rather, the inclusion of “disability stories” and representation of people with disabilities in the past—through a disability history theme study or similar measure—will help foster deeper connections with and welcome diverse visitors to the parks.
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INTRODUCTION

LOCATING ACCESS AT NATIONAL PARKS

The Majestic Yosemite Hotel (formerly the Ahwahnee Hotel) at Yosemite National Park attracts visitors year-round for its stunning views and remarkable architecture. On the east coast, Harriet Tubman National Historical Park interests those who would like to learn more about the Underground Railroad and the abolitionist’s final years in New York. Meanwhile, hundreds of national military parks, battlefields, and war memorials invite millions of visitors annually who want to learn about and commemorate America’s military past. What do these sites have in common, besides their national park status?

Each place has a disability story to tell. During World War II, the Majestic Yosemite Hotel served as a hospital for wounded and recovering soldiers. Harriet Tubman, who is believed to have lived with epilepsy following a childhood incident, established a Home for the Aged in Auburn, New York, where she herself passed away in 1913. National park sites that commemorate military history contain the stories of soldiers who, while fighting for the United States, sustained psychological and physical damage to their minds and bodies.

It is not only these seemingly unlikely places that contain disability stories. Every historic site, house museum, and national park has a disability story to tell. Some places investigate these stories more than others, but the stories of accessibility and lived experiences of people with disabilities are interwoven in the fabric of each site’s history. How have some sites come to grapple with these stories? What are the challenges? What has been the evolution of the National Park Service’s approach to acknowledging these
histories? This thesis seeks to explore these questions through an administrative history of NPS Accessibility Program (1979-present) and a case study of the Home of Franklin D. Roosevelt National Historic Site. Answering such question is essential to enhancing not only the inclusion of visitors and employees with disabilities in the National Park Service, but to the vitality of NPS visitation numbers.

According to the 2010 U.S. Census Bureau Report, nearly 60 million people in the U.S. (that is, one out of five people, or nearly nineteen percent of the population) identify as having a disability.\(^1\) Disability is an umbrella term for people with intellectual, physical, and sensory conditions. People are born with and/or can acquire disabilities throughout their lifetime. The term can vary across legal and medical contexts, but, according to the Americans with Disabilities Act, a person with a disability “has a physical or mental impairment that substantially limits one or more major life activity.”\(^2\) While being cognizant of the legal definition, it is also important to recognize that many people with disabilities do not feel *impaired* or *limited* by their disability. Rather, their condition informs their life experience and is a critical part of their culture. Disability also impacts communities differently: people of color are more likely to be disabled than white people, and one’s disability is frequently informed by and affects an individual’s financial security. As many disability studies scholars have shown, access to treatment and care vary significantly across geographical, racial, gender, and ethnic lines; and these disparities are often historical in origin.\(^3\)

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has the potential to assist the National Park Service in how best to serve and welcome this diverse population.

1. Scope of Chapters

This thesis is divided in two chapters. The first traces the history of the National Park Service Accessibility Program; the second offers a case study of accessibility initiatives and representations of disability history at the Home of Franklin D. Roosevelt National Historic Site. My goal is to illustrate the accomplishments and challenges of enhancing accessibility across the national parks, at the same time that a great need remains to diversify the parks and their interpretation of American disability history.

Chapter One describes an administrative history of the NPS Accessibility Program, examining the decisions from both within and outside the National Park Service, to break physical and programmatic barriers to make parks more inclusive for people with sensory, physical, and cognitive disabilities. Established in 1979, the Accessibility Program provides technical, interpretive, and architectural services; ensures federal accessibility compliance and establishes policies, guidelines, and standards; and oversees systemwide support for accessibility implementation at all national park units.

In developing this history, I have consulted and recorded oral histories with current and former National Park Service Accessibility Specialists. While Ray Bloomer (Accessibility Specialist, 1976-present), W. Kay Ellis (Accessibility Specialist 1982-1995, Chief of Accessibility 2009-2013), and David Park (Chief of Accessibility, 1979-2009) are not the only specialists to have served in the Accessibility Program, their tenure...
in the National Park Service spans over forty years and they have both witnessed and contributed to the dismantling of barriers across federal public lands. The oral histories of these individuals, who are both disabled and nondisabled, flesh out this story in critical ways. Administrative histories can at times be rather dry, but the experience of these individuals bring color and a degree of radicalism to a federally-funded institution such as the National Park Service. Bloomer, Ellis, and Park have often needed to fight against traditional methods of historic preservation, as well as challenge nondisabled people’s prejudices and assumptions about disability. Their efforts have largely shaped the accessible landscape of national parks today, while they remain cognizant of the ongoing challenges that the national park system must face.

Although the Accessibility Program (formerly called the Special Programs and Populations Office) was not established until 1979, Chapter One begins in 1964 with the passage of the Civil Rights Act. The language of the Civil Rights Act did not include people with disabilities; rather, it focused on guaranteeing one’s rights regardless of color, race, sex, religion, or national origin. The legislation’s wording served not only as ammunition for disability rights activists, it acted as the basis for later disability rights laws. The 1968 Architectural Barriers Act and 1973 Rehabilitation Act had direct implications for the National Park Service on physical and programmatic accessibility, and the language of Section 504 of the Rehabilitation Act drew directly from the Civil Rights Act. While the 1990 Americans with Disabilities Act has brought tremendous changes in access, these two earlier laws continue to inform federal accessibility compliance in general and the National Park Service in particular. The administrative history of the NPS Accessibility Program therefore weaves in the impacting federal
legislation and policies regarding people with disabilities with the actions and publications of NPS accessibility specialists. It also refers to the grassroots actions of disability rights activists throughout the 1970s onward, whose protests would have been discussed among accessibility specialists and informed policies of inclusion and equal rights.

My work focuses predominantly on the impact of the Accessibility Program’s efforts at national historic sites, as opposed to other national park units such as wilderness parks. Simply put, national historic sites must reckon with different challenges than wilderness areas due to federal legislation and NPS policies, such as the National Historic Preservation Act of 1966 and the Secretary of the Interior’s Standards on the Treatment of Historic Properties. While this administrative history will reference accessibility projects in other national park units, I focus predominantly on historic sites and house museums.

To depict these unique challenges, Chapter Two examines the Home of Franklin D. Roosevelt National Historic Site (HOFR) in Hyde Park, New York, as a case study. Dedicated to portraying the former president’s life, the staff at HOFR also interpret Roosevelt’s polio diagnosis in 1921 and the ways it impacted his life thereafter. Roosevelt’s wheelchair and other assistive devices are on display throughout the home, and the neighboring Roosevelt Presidential Library and Museum (run by the National Archives and Records Administration) features displays pertaining to his disability. Furthermore, the Home of Franklin D. Roosevelt is one of the only national park sites that explicitly interprets disability history. Although other sites may refer to the existence of people with disabilities in the past—either who lived at or passed through these
HOFR must grapple directly with FDR’s lived experience as a disabled person. Studying HOFR as a case study has therefore been a two-fold experience of understanding the site’s accessibility implementations both in the past during FDR’s lifetime and later as a historic house museum, as well as how it portrays FDR’s disability through interpretation and representation.

Chapter Two is divided in two parts. Part One describes the creation of HOFR as a house museum and national historic site, with a particular focus on the history of the site’s accessibility features. HOFR’s commitment is due not only to federal compliance but the desire to honor FDR’s legacy. Interviews with current and retired HOFR staff and reviews of cultural landscape reports, general management plans, and interpretive prospectuses reveal this dedication. However, there are a number of physical and programmatic barriers with which HOFR still struggles. Part Two examines the existing barriers and make recommendations for programmatic changes to improve the experience for disabled and nondisabled visitors. Furthermore, it suggests how HOFR could explore a number of interpretive opportunities which would incorporate practices of shared authority and participatory programming. By collaborating with and learning from nearby organizations by and for people with disabilities, HOFR can serve as a model for other historic house museums in how to effectively interpret disability stories.

It is not my intention here to write a history of Franklin D. Roosevelt the man; rather, I examine how a historic site interprets this one historic figure’s relationship with disability and how the site attempts to dismantle barriers for people with physical, sensory, and intellectual disabilities today. However, I include a brief biography, as it informs how Roosevelt interacted with the world around him and how the world
interacted with him. While this thesis is not focused on the international events that occurred throughout FDR’s life and presidential terms, it is important to recognize the physical and emotional toll the Great Depression and World War II took on FDR’s body. This biography serves as a narrative to which people with disabilities, or the friends and family of people with disabilities, can both relate to and be unfamiliar with—due to the unique circumstances that allowed Roosevelt the privileges to live as comfortably as possible during his lifetime. An interpretive tour or other programmatic offerings related to the history of FDR’s disability creates a dialogue with visitors and allows them to reflect on how disability shapes their lives or the lives of their loved ones. Interpreting FDR as a disabled person and the experiences of other persons with physical disabilities during his lifetime can facilitate a sense of empathy and connection-building with disabled and nondisabled peoples today. In so doing, the National Park Service commits to enhancing a sense of inclusion for people with disabilities and has the potential to diversify their audiences.

The conclusion of this thesis considers how the National Park Service has interpreted the histories and heritage of other historically marginalized communities through theme studies, on-site interpretation, and public history scholarship. For decades, the National Park Service has published theme studies that assist in identifying sites of national significance, and, in recent years, there has been a greater push to include sites pertaining to LGBTQ communities, people of color, and other groups that have traditionally been underrepresented in the park system. Through examining these efforts, the National Park Service (and non-federal historic house museums) can glean lessons in
how best to interpret disability history and depict nuanced representations of the varied
disability communities living in the U.S.

Current portrayals of disability history in the National Park Service are insufficient. It is not enough to make places physically accessible and provide programmatic experiences to support different audiences. Rather, the inclusion of disability stories and representation of people with disabilities in the past—through a disability history theme study or similar measure—will help foster deeper connections with and welcome diverse visitors to the parks. As has been found through studies on park visitation and diversity, people are less likely to visit parks if they do not believe their own communities are represented in the stories depicted and spaces provided. As the American population continues to grow in its diversity, it is necessary that federal public lands can meet the public’s needs regardless of race, gender, religion, class, or disability. It is for this reason that the National Park Service must address the subject of diversity and inclusion.

The question of diversifying audiences in the national parks has remained ongoing since the 1960s and ‘70s, and social movements and the demand for equal rights has largely driven this push for inclusivity. While Chapter One focuses on the administrative history of the NPS Accessibility Program, I describe below a brief history of the National Park Service, with a particular focus on the second-half of the twentieth century. This serves to provide background on NPS initiatives that eventually led to the Accessibility Program’s creation in 1979.

2. A Brief History of National Park Service Social Initiatives
The National Park Service, officially created in 1916, saw a boom in visitors in the post-World War II era. With more leisure time and the increasing ubiquity of personal automobiles, middle- and upper-middle class (predominantly white) families began visiting the national parks in greater numbers. According to one set of statistics, the 6 million visitors of 1942 jumped to 72 million by 1960.\(^4\) Conrad Wirth, who served as the National Park Service director from 1951 to 1964, requested support from federal government to renovate its facilities and construct new roadways and trails to meet the demands of ever-increasing visitor numbers. His request resulted in Mission 66, a ten-year project to improve the national park system. In addition to the construction of “thousands of residential, maintenance, and administrative facilities, as well as the beginning of new methods for managing and conserving resources” Mission 66 also introduced a degree of park standards that each “visitor could expect the same basic facilities in every park.”\(^5\) The establishment of the NPS Accessibility Program in 1979 would later require that dozens of these Mission 66-era facilities make extensive renovations to become physically accessible.\(^6\)

When the new NPS director George Hartzog, Jr. arrived in 1964, the National Park Service began a renewed focus on the role of interpretation at national park units.

Concerns regarding urban renewal, highway construction, and the demolition of


significant structures resulted in the passage of the National Historic Preservation Act of 1966 and the formation of the National Register of Historic Places. In addition to increasing the overall acreage of the national park system by nearly ten percent, Hartzog also initiated several national park sites in urban areas, thus contributing to a shift in how the National Park Service imagined spaces and who accessed them. Until that time, the NPS had predominantly emphasized the significance of wilderness spaces, which were not only inaccessible due to financial barriers, but also often necessitated the removal of longtime inhabitants of these lands. This removal, as well as the physical and financial hurdles to accessing these lands, facilitated a visitor audience that was majority white, nondisabled, and financially secure. With Hartzog’s decision to establish national park units in urban environments, however, the NPS began to envision more diversified visitation and reconsider how they placed value on lands worth protecting. Passage of civil rights laws and the end of segregation in public spaces also informed Hartzog’s decision-making.

Beginning in the 1960s, as civil rights actions and legislation filled the newspapers and the streets, along with the vocal presence of women’s rights groups, the National Park Service initiated a long process of self-reflection in how people accessed the parks. The year 1962 marked the first congressional report that recorded statistics on diversity in American outdoor recreation areas, which found that largely white visitors

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and people of European origin populated the parks. Social scientists outside the NPS studied the reasons that predominantly white nondisabled people visited the parks and what kept other groups from entering. Developing hypotheses and solutions, these scholars argued that historical legacies of racism and discrimination infused institutions and interpersonal relationships, thus affecting where and how traditionally marginalized groups accessed the parks. The 1973 essay “Red, white, and black in the national parks” by James Meeker was among the first to examine the reasons for this discrepancy. Throughout the 1980s and 1990s, social scientists and park professionals continued “to tease out racial, ethnic, and gender differences in attitudes and behaviors toward parks, and toward a variety of other natural resource issues.” In so doing, they sought to enhance equity and inclusion in state and federal public spaces.

Dwight Pitcaithley, former chief historian of the National Park Service, partially attributes the shift in diversifying audiences to the emergence of the so-called “New Social History” beginning in the 1960s, which examined history from the ground-up, studying social processes within communities. This approach to history attempted to offer a revision away from top-down power structures in seeking to understand the role of popular movements and working-class groups. The legacy of the new social history can be seen through the creation of national park units including Tuskegee Institute National

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10 Myron F. Floyd, “Managing National Parks in a Multicultural Society: Searching for Common Ground,” The George Wright Forum 18, no. 3 (2001): 41-51. Note that these early researchers did not examine people with disabilities but focused predominantly on people of color and racial prejudice. However, disability rights are civil rights, and the civil rights legislation of the 1960s paved the way for disability rights actions that followed.

Historic Site (1974), Women’s Rights National Historical Park (1980), Manzanar National Historic Site (1992), Selma to Montgomery National Historic Trail (1996), and Sand Creek Massacre National Historic Site (2000). These parks, instead of emphasizing narratives of “Great White Men,” expanded on telling the stories of people who were historically left out of the American master narrative. By integrating social histories, the NPS aimed to widen visiting demographics through broadening the represented narratives.

3. The Role of Disability Rights in Shaping NPS Policies and Staff Perceptions

This push for greater inclusion of people of color and other historically marginalized groups coincides with the emergence of the disability rights movement in the second half of the twentieth century. As historian Alison Carey has written, the early 1960s marked the passage of several laws and the creation of committees—both in and outside the federal government—that examined the needs and rights of people with disabilities. At this time, the language regarding and understandings of disability were still largely misunderstood by nondisabled peoples as an individual’s burden, informed by medical knowledge and rehabilitation research of the era. Through both grassroots efforts among disabled peoples and their nondisabled allies, as well as legislation from federal and state governments, the United States witnessed a transformation of the rights of disabled peoples beginning in the 1960s. This is due to several reasons including psychiatric deinstitutionalization, the return of wounded veterans from Vietnam, medical

advancement and technology, and parallel movements pushing for women’s and civil rights. The disability rights movement was highly intersectional, as it commingled with and included women and people of color, and overlapped with a variety of social issues which people confronted in an array of meaningful ways throughout the 1960s onward. Among the greatest successes of the disability rights movement was the emergence of independent living centers, where people with disabilities served as their own advocates to meet their needs instead of relying on caregivers, family members, and medical professionals. These independent living centers have since spread across the country, with chapters available in many cities today.

The impact of the disability rights movement has infused the way disabled and nondisabled peoples interact with the spaces around them. One such way is through universal design, or the concept that making places and objects accessible serves not only people with disabilities but nondisabled populations, as well. Ron Mace, an architect and designer who lived with polio, developed the concept in the 1980s. Mace established the Center for Universal Design in North Carolina in the late 1980s, which has spearheaded projects in developing assistive technology and dismantling barriers in the built environment. According to art historian Bess Williamson, the concept of universal design emerged from criticism that accessible design was considered “special,”

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14 Refer to the bibliography for scholarship on these subjects.
15 The group that initiated the independent living center movement first met at Cowell Memorial Hospital in Berkeley, California. For a time, Cowell Memorial Hospital was listed on the National Register of Historic Places, although the building has since been demolished. For more information, go to “Cowell Memorial Hospital,” National Park Service, last modified September 5, 2017, https://www.nps.gov/places/cowell-memorial-hospital.htm.
“expensive,” and “ugly.” By incorporating universal design into all facilities and structures, architects had (and today by law continue to have) the opportunity to increase accessibility as well as challenge stereotypes about aesthetic and cost.

These stereotypes are deeply connected with long-held prejudices about and toward people with disabilities. According to disability studies scholar Michael Oliver, these stereotypes are rooted in the medical model of disability, which locates the ‘problem’ of disability within the individual and secondly it sees the causes of this problem as stemming from the functional limitations or psychological losses which are assumed to arise from disability. These two points are underpinned by what might be called ‘the personal tragedy theory of disability’ which suggests that disability is some terrible chance event which occurs at random to unfortunate individuals.

In contrast, Oliver posited a new social model of disability, in which disabled peoples rejected medical perceptions and (mis)understandings from nondisabled peoples. Instead, the social model of disability framed these issues as “society’s failure to provide appropriate services and adequately ensure [that] the needs of disabled people are fully taken into account in its social organisation.” The underlying assumption in the medical model is that people with disabilities need to change or be cured to “fit” in society, whereas the social model suggests that society, historically designed for nondisabled peoples, must dismantle physical and figurative barriers for the inclusion of all peoples. Ultimately, the social model of disability demands a restructuring of power in favor of people with disabilities. The social model of disability, while not the only non-medical

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19 Oliver, “The Individual and Social Models of Disability.”
model of disability and despite receiving a range of critiques due its limited focus on societal reasons for ableism, has held great implications for disabled and nondisabled populations alike.\textsuperscript{20} Since 1983 when Oliver first theorized this model, disability rights have shifted significantly, not only due to the 1990 Americans with Disabilities Act, but also from the international disability community’s persistence in asserting and demanding the full rights of citizenship. While this is an ongoing struggle, infused with intersectional challenges of racism, classism, and sexism, the inclusion of people with disabilities in public spaces has continued to develop and improve.

The history of the National Park Service Accessibility Program is one example of that progress, and, as I will argue later in Chapter Two, disability representation through exhibits, interpretation, and material culture at national historic sites (and historic house museums more broadly) continues to support this inclusion. Historic sites and house museums have a particularly unique opportunity compared to wilderness parks, as their physical location acts as a space to trace the arc of disability rights, perceptions, and (mis)understandings in the past and present. Interpreting the lives of disabled people who inhabited this space historically allows staff to contextualize disability history and educate the public. Ultimately, the aim of this thesis is to continue bringing awareness to issues of access and facilitate future partnerships and collaborations between the National Park Service and visitors and staff with disabilities.

A note on language: The language conferred upon people with cognitive, sensory, and physical disabilities and mental illness has historically been given without consent

from these individuals. Terms like “handicapped” and “retarded” are now considered outdated and inappropriate. Quoting from older sources, including from the NPS and other federal publications, requires that this thesis at times uses outdated language. This thesis frequently employs person-first language (i.e. a “person with a disability,” recognizing an individual’s personhood first as opposed to their condition), but I will also describe individual’s specific disabilities based on how the individuals identify themselves. As this language continues to evolve, it is also possible that the language employed in this thesis someday, too, could become outdated.
CHAPTER 1
AN ADMINISTRATIVE HISTORY OF THE NATIONAL PARK SERVICE ACCESSIBILITY PROGRAM

1.1 Introduction: “From Good Will to Civil Right”

When people ask Ray Bloomer “What is more important: historic preservation or accessibility?”, he answers, “Yes.” Laughing, Bloomer opens with this semi-joke at the “Historic Structures and Accessibility” workshop. It is a drizzling fall morning at Salem Maritime National Historic Site in 2018. Bloomer is an accessibility specialist with the National Park Service, serving in various capacities with the federal organization since 1976. Posted at the National Center on Accessibility in Indiana since 1992, he and his colleagues travel across the country to present at national park units, as well as state- and local-level organizations, consulting on best practices for accessibility.

In many ways, Bloomer’s answer of “yes” is an honest one. The truth is that, within the National Park Service, the agency has struggled to strike a balance between accessibility and historic preservation. Bloomer, along with his current and former NPS accessibility specialists, have witnessed the transformation of accessible landscapes in both federal and public spaces over the past forty years, and their efforts have been integral to the potentially competing needs of this process. Bloomer’s ambiguous answer

21 National historic sites must apply principles of universal design if they do not significantly impact or alter the historic integrity of that space. These principles are dependent on the four treatments as prescribed in the Secretary of the Interior’s Treatment of Historic Properties: Preservation, Reconstruction, Restoration, and Rehabilitation. These Standards were first developed in 1979 as part of the legislation surrounding the 1966 National Historic Preservation Act. Since then, these Standards have been revised several times, with the 2017 version reflecting the latest guidelines on historic preservation and accessibility. To learn more about these Standards and how to actually implement them, the National Park Service Denver Service Center has developed webpages devoted to “Accessibility and Universal Design Standards” (https://www.nps.gov/dscw/ds-accessibility-universal-design.htm). This site outlines all laws, guidelines, and standards pertaining to architectural accessibility, whereas the Harpers Ferry Center provides assistance with media development (including exhibits, interpretation, graphics, and publications) and accessibility. Their Guidelines (https://www.nps.gov/features/hfc/guidelines/) describe the standards required of national park units to comply with accessible programming.
regarding historic preservation and accessibility illustrates the challenges to making places available for people with cognitive, sensory, and physical disabilities, while at the same time ensuring that structures retain their historic integrity. Though the specifics change from site to site, these same challenges are present at all NPS units—including national parks, monuments, military battlefields, memorials, cemeteries, preserves, and historic sites. Since 1979, the National Park Service Accessibility Program has committed to tackling these challenging and overcoming physical and programmatic barriers.

This chapter describes the administrative history of the Accessibility Program and how it has both influenced and been influenced by politics, medical advancements, and the disability rights movement in the United States since the 1960s. To illustrate this history, I turn not only to federal laws and memoranda, but to the voices of individuals who have effected change. By incorporating oral histories from former and current NPS accessibility specialists, this administrative history shows how the establishment of this program developed not in a vacuum, but as a product of the times. The social and political unrest of the Vietnam War era, as well as the struggle for civil rights, profoundly shaped the program’s formation. As these accessibility specialists describe, the fight for accessibility within the federal organization was also a grassroots effort: these individuals in the NPS demanded inclusion, often confronting resistance from established park units and federal employees at the highest levels of the National Park Service and Department of the Interior. In the early years and to an ongoing extent today, it has remained the task of NPS accessibility specialists to transform attitudes of nondisabled employees toward disability and accessibility.
Integral to this task is the notion that sociologist Richard K. Scotch calls shifting disability rights from an act of “good will to [one of] civil rights.” Historically embedded in American culture is the idea that making places accessible is an act of good will, rather than a fundamental civil right. Since the 1960s and in particular since the NPS Accessibility Program was formed in 1979, social activists as well as federal employees have strived to make federal and public spaces accessible—to include all peoples regardless of race, gender, or (dis)ability. This is an ongoing struggle, and this chapter serves to illustrate both the accomplishments and challenges.

This account is divided both chronologically and thematically, framed between 1964 and 2018. Federal laws, including the 1964 Civil Rights Act, 1968 Architectural Barriers Act, 1973 Rehabilitation Act as amended, and the 1990 Americans with Disabilities Act provide the scaffolding for changes experienced within the National Park Service. Throughout the passage of these laws, social activism has also changed the accessible landscape. These changes reflect both bottom-up and top-down processes. While the National Park Service must adhere to federal regulations, it must also respond to feedback from the American public. As federally public lands, national park units are available to all American citizens as well as world travelers. The public’s involvement with and response to these units indicate their value, and making places accessible has widened the reach of these parks to more communities.

1.2 The Relevant Laws for Federal Accessibility Compliance

When examining how laws have shaped the National Park Service, it is important to understand how the word “federal” impacts mandates and regulations. The confusion

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around this term impacts many federal employees, especially when discussing the Americans with Disabilities Act of 1990 (ADA). Generally, the ADA does not directly affect the National Park Service or any other federal organization or office. The ADA has had tremendous cultural impacts, influencing public attitudes and perceptions of disability, but the National Park Service is not legally bound to comply with it. Rather, the NPS is under the jurisdiction of the 1968 Architectural Barriers Act (ABA) and the 1973 Rehabilitation Act as amended, both of which framed the ADA to apply to nongovernmental entities. These two laws pertain to structures, spaces, and activities that are federally conducted or federally assisted. “Federally conducted” refers to any program or activity run by a federal agency, whereas “federally assisted” means a program or activity run by an external public or private entity which receives federal funding. For example, a café outside the boundaries of a national park in 1974 did not need to offer an accessible bathroom, but any concessioner located within and contracted by the national park was legally required to follow the ABA and Section 504 of the Rehabilitation Act. The following pages explores these laws and their ramifications within the Park Service, as well as how additional laws influenced the social atmosphere and attitudes regarding accessibility.

Historians of federal disability laws have argued that the Civil Rights Act of 1964 did not impact people with disabilities specifically, but it had broader consequences on civil rights of all peoples. The legislation did not include people with disabilities, but it set a precedent for guaranteeing rights for historically marginalized individuals and communities. Sociologists Sharon N. Barnartt and Richard K. Scotch make this point in their book, *Disability Protests: Contentious Politics, 1970-1999*:
one of the most important things to come out of the civil rights movement was the “frame” of civil rights. This frame included the notion that places should be accessible to all groups; the notion that all citizens should be able to exercise their political power through the voting booth; the notion that discrimination in hiring, promotion, or firing was not acceptable; and the notion that separate facilities were inherently unequal.  

The language of civil rights has served as a mobilizing force in disability rights activism and the passage of laws. For example, the language of Section 504 of the 1973 Rehabilitation Act is nearly identical to Title VI of Civil Rights Act. Title VI strictly forbids “discrimination on the basis of race, color, or national origin in any program or activity that receives Federal funds or other Federal financial assistance.” In writing the original Section 504 of the Rehabilitation Act, Congress drew explicitly from Title VI of the Civil Rights Act. A mere forty words embedded at the end of the text read:

No otherwise qualified handicapped individual in the United States…[shall] solely by reason of his handicap, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance.

These lines, seemingly innocuous, sprung from the Civil Rights Act of 1964 and the efforts of civil rights activists in the 1960s. The tremendous impact of Section 504 will be examined later, but it is important to recognize the effect that the Civil Rights Act had, as well as did not have, on disability rights.

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26 In addition to these rights-driven laws, a number of laws also emerged in the first half of the twentieth century that supported medical interventions and protection of people with disabilities. For more information, read Alison Carey, *On the Margins of Citizenship* (2009).
Two other bills, passed in 1968 and 1973, aimed to guarantee the rights of people with disabilities on federal properties, including those of the National Park Service. The 1968 Architectural Barriers Act emerged from a commission formed in the mid-1960s in Congress, demanded by and comprised of rehabilitation professionals in the federal sector. Entitled the “National Commission on Architectural Barriers to the Rehabilitation of Handicapped People,” this group located barriers and possible architectural solutions to their dismantlement in the federal arena. This paved the way for the 1968 ABA, which mandated that any building or facility receiving federal dollars needed to abide by accessibility regulations. The General Services Administration, the Department of Defense, the U.S. Postal Service and the Department of Housing and Urban Development consulted with the Department of Health, Education, and Welfare (today the Department of Health and Human Services) in developing standards with which each Federal agency needed to comply.\(^\text{27}\)

These early accessibility standards were based on the \textit{A.117.1-1961 American National Standard Specifications for Making Buildings and Facilities Accessible to, and Usable by the Physically Handicapped} (ANSI). This publication, released by the University of Illinois and Easter Seals Foundation, served as a non-binding model for private-sector accessibility.\(^\text{28}\) ANSI has since provided the scaffolding for the Uniform Federal Accessibility Standards, established in 1984.\(^\text{29}\) According to the ABA, any federal building financed, constructed, or leased in whole or in part by the United States


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after August 12, 1968 needed to follow the accessibility standards. This provision offered only momentary relief for the the National Park Service, which, in addition to managing hundreds of historic buildings, had only recently completed renovations and construction through the Mission 66 initiative. With passage of the Rehabilitation Act in 1973, however, and in particular Sections 502 and 504, all federal agencies needed to make physical structures and programs accessible for all staff and visitors.

The history of the Rehabilitation Act of 1973 has been well-explored by historians and disability scholars, but the importance of Section 504 cannot be overemphasized. As Scotch writes, “the bill used an enhanced definition of rehabilitation that required the federal government to address the issue of societal discrimination.” Intentionally vague, the language of accessible “programs” and “activities” in Section 504 had far-reaching implications in the National Park Service. Furthermore, Section 502 of the Rehabilitation Act laid the groundwork for the Architectural and Transportation Barriers Compliance Board (Access Board), which continues to provide technical assistance to federally funded facilities, structures, and programs today. Despite passage of the Rehabilitation Act in 1973, Section 504 applied only to programs and activities receiving Federal financial assistance. This meant that any program or activity run directly by Federal agencies did not necessarily need to adhere to this law. The “Rehabilitation, Comprehensive Services, and Developmental Disabilities Amendments of 1978” (the Rehabilitation Act of 1973 as amended), however, introduced provisions to the 1973 law. In particular, Section 119 (2) of Section 504 “strik[ed] out the period at the end thereof

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31 Scotch, From Good Will to Civil Rights, 59.
and insert[ed] in lieu thereof ‘or under any program or activity conducted by any Executive agency or by the United States Postal Service.’” Writing on behalf of the Department of Justice, lawyer John Wodatch developed the lead regulations for these 1978 amendments. Each federal agency referred to these regulations until they were tailored to meet the specific needs of their department.

1.3 A Groundswell of Disability Awareness

Throughout the passage of the Rehabilitation Act of 1973 as amended and eventual creation of the NPS Accessibility Program (formerly Special Programs and Populations Office) six years later, the United States began to experience a shift in the awareness of disabled people’s rights driven by a number of factors, which former accessibility specialists David Park and Kay Ellis have described. In an oral history recording, Park explained how, in the 1960s and 1970s, state and local public parks and recreation departments began to take an interest in providing programs for people with disabilities. Aiming to make parks more usable for people with disabilities, the National Park Service and state and local parks started hiring more people with disabilities and nondisabled individuals who had experience working with people with disabilities.

The 1960s also marked a wave of psychiatric hospital closures and deinstitutionalization, which initiated a move toward developing community mental health centers and societal reintegration for people with intellectual disabilities and

33 Prior to the 1978 amendments, the Department of Health, Education, and Welfare promulgated the 1973 Rehabilitation Act regulations.
34 David Park, interview by Perri Meldon, Oral History Recording (Phone: June 3, 2018); W. Kay Ellis, interview by Perri Meldon, Oral History Recording (Bethesda, MD: June 13, 2018).
mental illness. Whether people were born with or acquired disabilities, there were simply greater numbers of disabled peoples demanding access to parks than ever before. This was particularly the case for injured veterans returning from the Vietnam War. With modern medicine, the US experienced fewer deaths in comparison with previous wars, but more soldiers returned home disabled.\textsuperscript{35} Throughout the twentieth century, dozens of disabled veterans’ organizations, supported by laws such as the 1944 Servicemen’s Readjustment Act (better known as the GI Bill), had formed to advocate for and protect the rights of returning physically and psychologically wounded soldiers. These groups pushed for the reintegration of disabled veterans into public spaces.

Finally, Park argues, people with disabilities demanded their right as taxpayers to the same access to public facilities as nondisabled visitors.\textsuperscript{36} In \textit{From Good Will to Civil Rights}, Richard K. Scotch also echoes these points, as well as the impact of the psychiatric deinstitutionalization movement and changing age structures.\textsuperscript{37} It is not that this was the first time that people with disabilities took an interest in public and federal lands, but the sheer number of people culminated in the increased demand for access. As Kay Ellis described, “The atmosphere in the country was beginning slowly to change…and it took individual people, advocates to say, ‘We need this.’”\textsuperscript{38}

A number of publications, both federally and privately produced, reveal this increased degree of awareness on issues of access. Documents from as early as 1971 indicate an interest from both the American public and NPS employees to welcome a

\textsuperscript{36} Park, Oral History Recording (Phone: June 3, 2018); Ellis, Oral History Recording (Bethesda, MD: June 13, 2018).
\textsuperscript{37} Scotch, 6-7.
\textsuperscript{38} Ellis, Oral History Recording (Bethesda: June 13, 2018).
broader range of visitors, but it is also significant that the National Park Service commissioned these documents. *The National Park Guide for the Handicapped* is a 1971 federal publication describing the extent of each park unit’s accessibility. Language in this guide indicates that the perception of people with disabilities still relied heavily on a medical rather than social model (as defined in the Introduction): “The national parks are particularly concerned with the deaf, the blind, those confined to wheelchairs, and heart and special medical patients, but visitors should not hesitate to seek advice or assistance for any purposes.”39 Rather than emphasize the full inclusion of people with disabilities, this guide informs people with disabilities about nearby assistive services and accommodations. The language here indicates how disability was understood largely as an individual’s problem to manage. Instead of making physical and programmatic accessibility embedded in the site design, the National Park Service at this time followed an approach common for the rehabilitation field. According to historian Bess Williamson, “these forms of access reflected a clear stance that navigating and negotiating the inaccessible society was the responsibility of the individual. As this rehabilitation approach drove the earliest standards and policies encouraging access, it shaped national policies on accessibility that emphasized maintaining existing modes of design.”40

Other documents, including the 1975 publications *Barrier Free Site Design* from the American Society of Landscape Architects (ASLA) Foundation and *Interpreting for Handicapped Persons: A Handbook for Outdoor Recreation Personnel* by Jacque Beechel, reveal a number of innovative changes increasingly available at parks. The

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ASLA document provided technical assistance, as developed in conjunction with the Housing and Urban Development Office of Policy Development. Two crucial points emerge from this publication. *Barrier Free Site Design* describes the increasing number of older people who, with advancements in medical techniques, live longer, “[y]et, in general, the physical environment of our Nation’s communities continues to be designed to accommodate the able-bodied, thereby, increasing the isolation and dependence of disabled persons. To break this pattern requires a national commitment.” In making this commitment, the authors also emphasize that making a place accessible “should never accentuate a disability or bring unnecessary attention to a disabled person.” These sentences capture the shifting mood regarding accessibility: making places accessible are not acts of good will; people are both born with and acquire disabilities throughout life. By desegregating spaces for nondisabled and disabled visitors, ASLA suggested that parks have the power to integrate populations and encourage a sense of community.

Beechel’s booklet, *Interpreting for Handicapped Persons* also alludes to changes in mentality. Rather than assume that disabilities limit people’s opportunities, Beechel, an interpretive planning consultant who wrote other accessibility assessments for the National Park Service, provide guidelines for maximizing visitors’ interaction with wilderness areas. In her 1979 document, *Crater Lake National Park: Modifying Visitor Facilities and Programs for Disabled Persons*, Beechel recommends that nondisabled interpretive staff spend time with people with disabilities, learn American Sign

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Language, and familiarize themselves with disabilities in general. Such recommendations depict the shifting tide of employees and consultants in their perceptions of disability. These booklets encourage breaking physical and programmatic barriers in park and museum settings but, in many cases, it remained in the hands of the personnel and site to break those barriers.

The 1978 publication *Access National Parks: A Guide for Handicapped Visitors* reveals the public’s desire to visit parks and the efforts of NPS sites to become more accessible. As Secretary of the Interior Cecil D. Andrus wrote in the book’s preface,

> Physical barriers and the equally frustrating barriers to full understanding found in one-dimensional educational programs can prevent a person from fully enjoying a park and its resources. In planning this handbook we have tried to show where these obstacles have been eliminated and where they still exist. And in our review of them, we have also learned of many that can and will be easily corrected and of others that can be corrected in future planning.

As Secretary Andrus expresses, recognition of sites’ barriers propelled parks and federal offices to find ways to dismantle them. In 1979, not long after passage of the amendments to the Rehabilitation Act, the National Park Service began to take a focused look at accessibility for disabled visitors and employees.

This attention to accessibility in the National Park Service came not only top-down from federal ruling, but from a groundswell of disability rights activism. By 1977, no regulations for Section 504 had been published by the Department of Health, Education, and Welfare under either the Nixon or Ford administrations. This meant that, despite the law, federal offices were not compelled to follow the set of guidelines as

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described in the 1973 Rehabilitation Act. In the winter of 1977, disability rights activists staged a series of protests at the Department of Health, Education, and Welfare offices across the country. In the San Francisco office, 120 protestors set up camp in the offices, where members of the Black Panthers brought them food and other supplies. These protests garnered national media attention in both newspapers and on television, and, in April of that year, the secretary of HEW, Joseph Califano, signed a set of regulations.44

These regulations set a precedent for all federal agencies, although the Department of the Interior did not release its own regulations until 1987. This delay was due to the difficulty in making public lands, facilities, and experiences—such as historic sites and wilderness areas—equally accessible for disabled and nondisabled visitors.45

It was in this politicized climate that NPS Assistant Director for Park Operations Robert Stanton released Staff Directive 77-4 on April 25, 1977, accentuating the need for accessible facilities for “handicapped” visitors. Stanton began this directive by observing,

Seldom does an opportunity present itself that can provide a great public service at little cost and that does not require long, involved planning and programming. We believe such an opportunity exists in which we can make modest modifications to visitor facilities to make them more accessible.46

Stanton continued by reminding NPS staff of federal disability laws including the 1968 ABA and Section 504 of the Rehabilitation Act. This reminder seems to suggest that many park units were not aware of or compliant with these laws. Stanton demanded that

44 Barnartt and Scotch, 164-167.
each park must “take immediate action, using existing operation funds, to eliminate the minor barriers to access to visitor facilities (including concessions) where this is prudent and reasonable, given existing conditions. At the very least, suitable parking should be provided and curb-barriers eliminated.”

A year earlier, in 1976, the National Park Service was busy with a slew of events to commemorate the nation’s bicentennial. It was during that year that Ray Bloomer, a recent history graduate, took a job at Independence National Historical Park in Philadelphia. Employed as a park ranger, Bloomer faced initial resistance from employers due to his blindness. Bloomer recalls how people doubted his ability to lead tours and work with the public. Bloomer’s inability to see required him to become intimately familiar with the objects in every room and site he interpreted, but it did not limit or inhibit him. Rather, it made him keenly aware of the needs of other people with disabilities visiting parks.

In 1977, Bloomer transferred to Boston National Historical Park, where he served as an interpretive guide and Special Populations Coordinator. The term “Special Populations” referred to nontraditional visitors in the National Park Service at this time, including people of color, people with disabilities, and visitors from other countries. At this time, there was not yet an established NPS Accessibility Program; rather, the NPS North Atlantic Region developed its own accessibility policies and procedures with Bloomer serving as a lead advisor. Until the service-wide program began in 1979, all accessibility initiatives happened on a site-by-site basis. Bloomer believes that at both

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47 Stanton, "Staff Directive 77-4."
48 This information and the statements below are drawn from multiple oral history recordings and informal conversations with Bloomer.
Independence National Historical Park in Philadelphia and across the Boston offices, there was a grassroots effort among staff to reach out to a wider demographic. He thinks this was in part due to publicity during the Bicentennial; at the time Bloomer was hired in 1976, the NPS released a press statement about the new hiring, and he was interviewed by several newspapers. From these interviews, interest in accessibility snowballed throughout the National Park Service, says Bloomer. When asked if he intended to pursue disability rights in the National Park Service, he responded,

I did not go into the Park Service with this in mind at all. My intent was that I was going to be a park ranger interpreter. And it was serendipity... that it just so happened that I had seen and recognized the need for people with disabilities was just something I pursued. The National Park Service has always been an agency that does continued training of its personnel, so that they can better interact with all populations, whether it's children, adults of all different types, or different populations of all sorts.49

Ira J. Hutchison also pushed for greater integration of people with disabilities visiting the national parks. As the first African American deputy director of the National Park Service, Hutchison came to the agency with a background in therapeutic recreation where he worked with people with addiction and mental illness. Hired in 1972 as the Park Service Chief of Community Programs in the National Capital Region and later employed in different positions over the decades, Hutchison became the Deputy Director of the National Park Service in May 1977. Hutchison initiated several programs that sought greater inclusion of people of color, women, and other historically marginalized communities.50 Hutchison’s own interests, both personally and professionally,

49 Raymond Bloomer, Interview with Perri Meldon, Oral History Recording (Phone: September 17, 2018).
emphasized the need for civil rights within the National Park Service. In addition to Hutchison, Ray Bloomer suggested that, change came “because Bill Whalen was our director [of the entire NPS] at the time [1977-1980]—he was a very young director, and he had a bigger influence on addressing not just on people with disabilities, but on urban populations... and many of the populations that were your nontraditional visitors.”

During his brief tenure as NPS director, Whalen advocated for the inclusion of urban areas into the park system, thus shifting the focus away from iconic parks in the West. Whalen’s actions, along with those of his colleagues at the time, reflect the political and social landscape across the United States in the 1960s and ‘70s, where the disability rights movement commingled with civil rights activists in demanding their right to the same equal services as nondisabled peoples.

As part of this push for greater inclusion, the National Park Service held a week-long training at Horace Albright Training Center in Arizona called Full Spectrum Visitors Services. This marked the first of many accessibility trainings of the National Park Service, which have served as the backbone for NPS education and awareness-building regarding people with disabilities. “Full Spectrum” was not focused specifically on people with disabilities, but more broadly on communities who were not typical park visitors. Participants examined the ways race, gender, class, and (dis)ability affected park visitation. This training engaged regional directors, associate regional directors, and superintendents. Two more “Full Spectrum” workshops occurred at the Mather Training Center in 1978 and 1979, attended by park rangers, chiefs of interpretations, chiefs of maintenance, landscape architects, and park technicians. Topics included

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51 Bloomer, Oral History Recording (Phone: September 17, 2018).
52 Bloomer, Oral History Recording (Phone: September 17, 2018).
legislation, therapeutic recreation, information regarding different kinds of disabilities, attitudinal barriers, and barrier-free design. At the latter training, attendees visited Gallaudet College, and heard presentations from the Brooklyn Children’s Museum in New York and the Perkins School for the Blind in Massachusetts.\textsuperscript{53} David Park, Ray Bloomer, and Wendy Ross—who all later joined the NPS Special Programs and Populations division—spoke at these trainings. This first training in 1978 spurred the beginning of what is now one of the main services the National Park Service Accessibility Program provides.

One year later in 1979, Ira Hutchison established the Special Programs and Populations division and hired Tom Coleman and Wendy Ross as accessibility specialists. Before arriving at the Washington Area Support Office (WASO), Tom Coleman had worked in the private social work sector. With the NPS, he focused primarily on addressing accessibility complaints, a job he would hold until his retirement in 2006. Wendy Ross had been an artist working with children with disabilities in Glen Echo, Maryland. She stayed with the NPS for only a few years before returning to artwork, a career that has garnered her international attention.\textsuperscript{54} In December of 1979, Ira


Hutchison hired David Park as the first NPS chief of accessibility. At the Denver Service Center (DSC), Steve Stone worked primarily as a planner although he assisted the new division with accessibility work. Although Stone was not an accessibility specialist, he was physically disabled and keenly aware of the existing barriers throughout the NPS. The DSC supported the Special Programs and Populations Division with accessibility compliance in architecture and engineering, while the Harpers Ferry Center for Interpretive Media (HFC) developed interpretive tools for programmatic accessibility. Meanwhile, Ray Bloomer remained at Boston National Historical Park, working as their Special Populations advisor. In March 1980, Special Directive 80-2 publicly announced formation of the division and recognized the achievements of these individuals: “a number of persons throughout the Service have initiated actions at the regional and field levels which have significantly advanced the accessibility of our services to handicapped populations.”

David Park was born in Kentucky, where he received a Bachelor’s degree in history from the University of Kentucky. During his summers as an undergraduate and following his graduation, he worked at a nearby psychiatric institution. When he decided to return for graduate school, he pursued a career in the mental health profession and studied therapeutic recreation. Park later joined the National Recreation and Park Association and eventually took a job as therapeutic recreation program coordinator at George Washington University. It was in the late 1970s that NPS deputy director Ira Hutchison contacted Park about creating an accessibility program. As Park explained,

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Hutchison recognized there were federal disability laws with which the National Park Service was not compliant. Hutchison asked Park if he would apply for the job as first chief of an accessibility division, a position he accepted at the end of 1979.⁵⁶

According to the NPS document “Accessibility for Special Populations” from 1980,

The primary goal of the Division is to develop and coordinate a Systemwide, comprehensive approach to achieving the highest level of accessibility that is feasible while, at the same time, assuring that we are consistent with the other legal mandates of preservation and protection of the resources that we manage.⁵⁷

This release answered questions regarding the need for such a division. The document explains that it “simply makes good sense” to create facilities that are available for all users and do not discriminate against people who are able to participate in some programs but not others. Furthermore, it was a matter of law to train employees and make facilities and programs accessible. The document concludes, “Section 504 is essentially a ‘civil rights’ law for disabled persons, and that ‘lack of funds’ has never been a legitimate excuse for denying a person's civil right.”⁵⁸ As Park and other accessibility specialists have explained, the effort to make places accessible has frequently required changing people’s attitudes about the inclusion of people with disabilities: as described earlier, this was not a matter of good will, but a person’s right to access federally-owned public spaces.

Early on, the Special Programs and Populations division focused on training NPS staff about accessibility and compliance with laws. In Park’s words, “What we were, in

⁵⁶ Park, Oral History Recording (Phone: June 3, 2018).
⁵⁷ David Park, Chief of Division of Special Programs and Populations, “Accessibility for Special Populations,” 2. Located at Accessibility Program Office, National Park Service WASO.
⁵⁸ David Park, Chief of Division of Special Programs and Populations, 9.
essence, charged to do was to create some degree of cultural change in the way people
were thinking about people with disabilities and… what role the National Park Service
could play in providing access.” This involved educating NPS employees and
contractors—particularly architects, engineers, and interpreters—through accessibility
trainings. In addition to hosting the trainings, the Special Programs and Populations
Division requested that each region appoint a collateral-duty accessibility coordinator.
These coordinators served as point-persons for learning more about regulations, technical
assistance, and compliance. According to a 1980 NPS document, regional coordinators
would act as liaison officers with WASO and coordinate with other divisions “with
regard to promoting greater sensitivity to and awareness of needs of special groups.”
These coordinators were essential for advocating the need for accessible spaces at
national park units. Some of these coordinators early on included G. Michael Strock in
the Southeast region, Warren Hill in the Midwest Region, Dick Cunningham in the
Western Region, and Elsie Roach in the National Capital Region. According to a 1977
newsletter for visitor services and interpretive staff *Interpreters Information Exchange*,
Roach had implemented many programs on the “interpretation for deaf and handicapped
visitors.” Commenting on a report about Roach’s work, a supervisory park technician at
Independence National Historical park mentioned they had established

>a modest attempt at reaching those who cannot hear. The Park Service Sign Shop
has provided us with several name-tag type pins, for those interpreters here who
sign, to wear above their regular name tags. Most deaf persons will not make their
problem known readily while on a tour, but with this tag for them to see, they will

59 Park, Oral History Recording (Phone: June 3, 2018).
60 “Position Description: Regional Coordinator - Special Programs and Populations, Draft C” (United States
Department of the Interior, National Park Service, 1980). Located at Accessibility Program Office,
National Park Service WASO.

As this excerpt reveals, parks had already initiated accessibility projects on a site-by-site basis. By establishing accessibility coordinators, the Special Programs and Populations Office attempted to enforce federal regulations and guidelines.

As Park explained, implementing accessibility in the National Park Service was a slow process. Many employees were resistant to complying with disability laws, as they were unable to conceive of ways that parks could become accessible. Some superintendents, Park recalls, argued that there was no need to do so, since there were so few visitors with disabilities. Park and others, however, retorted, “If you build it, they will come.” As they found, the demand was there, both as evidenced by the disability rights protests of the 1970s and 1980s and international political action.\footnote{Park, Oral History Recording (Phone: June 11, 2018).}

\subsection*{1.4 Putting the NPS Accessibility Program to Work}

In March 1981, National Park Service Director Russell Dickenson sent a Memorandum on the International Year of Disabled Persons to all NPS regional directors. Designated by the United Nations General Assembly, this year focused on equality, rehabilitation, and prevention—with a particular emphasis on full participation and inclusion.\footnote{For more information on the IYDP, visit the United Nations website https://www.un.org/development/desa/disabilities/the-international-year-of-disabled-persons-1981.html. Dickenson reported that a Federal Interagency Committee had specified five objectives for all agencies to fulfill. Two of these objectives had direct consequences for the National Park Service: to promote research on improving the quality of life for,
and to develop an awareness on, the needs of individuals with disabilities. However, Dickenson made clear, “we do not want to promote isolated activities that will be provided only for this special year. Instead, we would like…to highlight the many creative things we have already accomplished as a part of our day to day efforts and to continue this process by initiating whatever new programs we can accomplish within our available resources.” Following this memorandum, parks and regional directors received a form that offices needed to return, describing their accessibility projects, what made them unique for IYDP, and how they collaborated with other organizations.

Possible examples at this time might have included affirmative action, educational programs, captioned films, removal of barriers, and interpretive programs.

David Park and Ray Bloomer both recall the 1981 IYDP and how this influenced their time in the National Park Service. Park believes that the need for IYDP stemmed from federal mandates for accessibility and the rise of disability rights activism in the late 1970s. “People began using the same process as other civil rights groups had used, which was beginning to march in the streets,” Park says. Demanding access for public facilities garnered national and international attention, and IYDP attempted to acknowledge these demands. Bloomer assisted with the NPS North Atlantic Region’s participation in IYDP. The region’s director, Richard Stanton, contacted Bloomer and assigned him to a 120-day detail focused on IYDP planning. Bloomer agreed to the assignment on the condition that whatever work they produced that year would have

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66 Park, Oral History Recording (June 11, 2018).
long-lasting impacts. It was during that year that the Special Programs and Populations division formed the Servicewide Accessibility Coordinating Committee (SWACC). This advisory group, still in operation today, is comprised of collateral-duty NPS employees, collaborating to develop strategies for full inclusion of people with disabilities. Their objectives include providing technical assistance; identifying parks, offices, and individuals who have made outstanding contributions; recommending special studies; and maintaining consistency regarding technical assistance and policies. Meeting twice a year, SWACC is evidence of the National Park Service’s efforts during the IYDP and its enduring legacy.

One year later, in 1982, accessibility specialist Wendy Ross reduced her hours to focus more time on her artwork. David Park hired his former student and fellow recreation therapist, W. Kay Ellis, as a part-time specialist in the NPS Special Programs and Populations Office. Ross decided the following year to leave the National Park Service to pursue artwork full-time. Ellis, meanwhile, took over as a full-time accessibility specialist. Ellis had received her training in therapeutic recreation and sociology at the University of North Carolina-Greensboro and George Washington University; prior to joining the National Park Service, she worked with the American Red

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67 Bloomer, Oral History Recording (September 17, 2018).
68 “Charter: National Park Service Coordinating Committee on Accessibility for People with Disabilities” (United States Department of the Interior, National Park Service, June 22, 1999). Located at Accessibility Program Office, National Park Service WASO. During 1981, David Park also hired Don Goldman. Goldman, who became a paraplegic following a skiing accident in his teens, worked in the DOI Heritage Conservation and Recreation Service until it was abolished in 1981. Although he had no professional experience working in accessibility, he was transferred to the division as an accessibility specialist. He later transferred to a Texas-based national park. “Obituary: Don Goldman,” Sante Fe New Mexican (April 14, 2014), http://www.legacy.com/obituaries/santafenewmexican/obituary.aspx?n=don-goldman&pid=170648054&fhid=7148.
Cross as a recreation specialist at Camp Lejeune Naval Hospital in North Carolina and in various accessibility-related positions in Washington D.C.

Ellis joined the NPS Special Programs and Populations division just as it prepared to publish two major documents. Special Directive 83-3 (S.D. 83-3) “Accessibility for Disabled Persons,” issued by the National Park Service in June of 1983, superseded the 1977 S.D. 77-4 “Accessible Facilities for Handicapped Visitors.” This document, signed by NPS director Russell Dickenson, outlined the policies of the National Park Service as developed by the Special Programs and Populations division. In drafting this directive, Ellis was responsible for sending the policy draft to disability rights organizations in the D.C. area for review. The NPS division has always worked closely with outside advocacy organizations on all publications. According to Ellis, the draft was well-received. Park explained that S.D. 83-3 codified how the NPS interpreted and applied the presiding laws. It served as the first policy statement released by Special Programs and Populations.

A year later, Park, Ellis, and Wendy Ross co-wrote and published Interpretation for Disabled Visitors in the National Park System. This book acts as a guide and resource document for park staff on making their interpretation accessible for visitors with various disabilities. This 1984 volume stands apart from earlier NPS accessibility-focused publications in its language and imagery. The book depicts photographs of employees and tourists alike, fully experiencing the outdoors and other programs provided by the National Park Service. Former director Russell Dickenson writes in the introduction,

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69 Sometime in the early 1980s, the term “Staff Directive” became “Special Directive” and has remained this way since.
70 Ellis, Oral History Recording (Bethesda, MD: June 13, 2018).
71 Park, Oral History Recording (Phone: June 11, 2018).
“Our efforts to improve access are evidenced by the number of architectural barriers that have been identified and eliminated. This publication represents our efforts to identify and eliminate programmatic barriers to participation as well.” NPS Chief of Interpretation Vernon D. Dame writes in the foreword,

We now recognize our responsibility to provide the basic services necessary to enable all of our visitors to have a safe and enjoyable park experience. This publication, developed by the Special Programs and Populations branch working closely with interpreters throughout the nation, provides us with the guidelines and resource information we need to enable us to ensure that we are meeting the interpretive needs of our disabled visitors.72

As opposed to earlier NPS publications, which emphasized access to nearby medical facilities or physically accessible spaces, Interpretation recognizes the need for programmatic accessibility, including interpretation. Meanwhile, Special Programs and Populations continued to offer accessibility trainings, although for funding reasons they cut back from offering these annually to every two years. It is also in the mid-1980s that the Accessibility Program changed its name from “Special Programs and Populations” to the “Office of Accessibility.” Rather than cater to “special” populations, this office worked directly with people with disabilities to enhance accessibility, and they decided to have the office’s name reflect that.

NPS accessibility specialists would have been aware of and influenced by greater accessibility demands that began stirring outside the National Park Service and Department of the Interior. In 1978, the National Council on Disability (NCD) formed as an advisory council within the Department of Education. Later established as an independent agency in 1984, the NCD in 1986 published “Toward Independence: An

Assessment of Federal Laws and Programs Affecting Persons with Disabilities – With Legislative Recommendations.” This report, sent to the President and Congress, emerged from a statutory mandate regarding Federal programs and it outlines recommendations for improvement. It, along with the 1988 follow-up report “On the Threshold of Independence,” served to inform Federal government of trends, progress, and ongoing challenges to implementing accessibility. Furthermore, these documents provided evidence for lawmakers and disability rights activists who advocated for the eventual passage of Americans with Disabilities Act.73

Meanwhile, the National Park Service in particular and the Department of the Interior in general both continued to improve accessibility measures. In 1986, the National Park Service formed a partnership with Bradford Woods at Indiana University, an outdoor therapeutic recreation center, to offer training opportunities for park and recreation employees on the federal, state, and local levels. David Park established this partnership with Gary Robb, executive director of Bradford Woods, and they named the training component “Project Access.”74 By collaborating with Bradford Woods, the National Park Service could offset costs for NPS employees interested in attending accessibility training workshops.75 Up until that time, the NPS held trainings at Mather Training Center in Harpers Ferry, West Virginia, and Albright Training Center at the

74 Raymond Bloomer, Interview by Perri Meldon, Oral History Recording (Phone: October 17, 2018).
75 NPS Accessibility Program, “Briefing Paper: Subject: Cooperative Agreement with Indiana University, Department of Recreation and Park Administration, Outdoor Education, Recreation, and Camping Center to Co-Sponsor Training Opportunities in the Area of Accessibility for Disabled Persons.” (United States Department of the Interior, National Park Service, 1989). Located at Accessibility Program Office, National Park Service WASO.
Grand Canyon, Arizona. During the 1980s, funding for NPS staff dwindled. Accessibility instructors received money to travel, but parks were not driven to send their employees if they could not afford it. Therefore, this partnership with Bradford Woods enabled NPS employees to attend, while state and local employees helped subsidize the trainings.

The following year 1987, the Department of the Interior released its federal regulations, “43 CFR Part 17: Enforcement of Nondiscrimination on the Basis of Handicap in Department of the Interior Programs,” under the authority of Section 504 of the Rehabilitation Act as amended. These regulations followed from a 1985 Notice of Proposed Rulemaking, inviting all interested parties within the Department of Interior to comment. The CFR delineated methods of physical and programmatic access, provide a clearer definition of “handicap,” mandate each park to perform self-evaluations regarding their current policies and practices, and identify the needed modifications.76 Several comments regarding historic sites allude to the degree of concern and lack of awareness for compliance, particularly for “federally conducted” facilities or those receiving “federal assistance.”77 Many NPS employees were resistant to and highly skeptical of making historic sites accessible. The passage of 43 CFR Part 17 caused federal laws to potentially conflict with one another. Section 106 of the 1966 Historic Preservation Act of 1966 delineated clear guidelines to maintain a site’s historic integrity. With these accessibility regulations, NPS staff now needed to balance historic preservation with programmatic and physical accessibility. As Kay Ellis recalls, NPS accessibility specialists needed to educate employees and make them advocates for supporting visitors

with disabilities: “[It was] not so much that it’s the law but that it makes sense to do it… to change the attitude to inclusion: these are visitors and they happen to have a disability.”78 Ellis recounted how employees who attended accessibility trainings often arrived uninterested but left realizing the degree of work that parks needed—and were legally required—to do. 43 CFR Part 17 solidified for the Department of the Interior the rulings that the Department of Justice had already instated.

As the Department of the Interior prepared these regulations, George Covington joined Park, Ellis, and Coleman in Washington, D.C., at the Special Programs and Populations division. Covington, who has been legally blind since birth, worked briefly with Special Programs until he transferred to Vice President Dan Quayle’s office as a special assistant on disability policy. Prior to his work in the Executive office, Covington spent almost two years detailed to Special Programs and Populations “to review and assess the Accessibility Program of the National Park Service and to use that assessment to make recommendations to the Department of the Interior, Office for Equal Opportunity on how they might better implement and enforce Section 504 throughout the entire Department.”79 Although he identified several accomplishments, including accessibility training programs, completed self-evaluations, and the various policies that articulated access requirements, Covington also pointed out significant deficiencies. Of the 426 buildings he tested, only twenty-four percent met all six critical elements for basic accessibility, with seventy-six percent containing at least one deficiency.

78 Ellis, Oral History Recording (Bethesda, MD: June 13, 2018).
Furthermore, parks continued to focus predominantly on architectural, rather than programmatic, access.\(^{80}\) Another major limitation was a lack of working knowledge; regional accessibility coordinators all worked as collateral duty, and information regarding compliance remained confined to a handful of individuals. Covington suggested that maintenance employees receive training; additionally, he recommended that the DOI create an Equal Access office similar to the NPS Special Programs and that this office receive additional funds to implement Section 504.\(^{81}\) According to David Park and Ray Bloomer, no immediate action followed in response to Covington’s work.

The issue of funding and lack thereof has persisted throughout the history of the NPS Accessibility Program. A National Park Service briefing statement from 1989 explicitly addresses this problem. Despite the legal requirements that NPS units must comply with accessibility regulations, there were no special funds provided for these measures. Following completion of the 1988 self-evaluations, the Accessibility Program found that:

> while much progress has been made, many barriers still exist. Further, the reviews have identified that $60 to $100 million is needed to complete the projects identified to bring the parks into compliance. The individual parks are continuing their efforts to improve access utilizing existing operating funds. However, it is unreasonable to expect that the Service will be able to absorb the $60 to $100 million need in this way in any reasonable time period.\(^{82}\)

Another 1989 briefing statement indicates the severity of funding limitations. That year, the Accessibility Program received a budget of $187,000, $171,000 of which was allocated to personnel costs. The office staffed three full-time professionals and one

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\(^{80}\) Covington, "Review and Evaluation of the NPS Accessibility Program," 9.

\(^{81}\) Covington, "Review and Evaluation of the NPSAccessibility Program," 19, 30.

secretary, with collateral-duty regional accessibility specialists scattered across the
country. This briefing statement reiterated the deficit, along with Covington’s findings
that many NPS employees were inexperienced and uninformed regarding accessibility
standards.

Attitudes of nondisabled staff toward disabled visitors have contributed to the
ongoing issue of funding. Some site superintendents and other NPS personnel did not
believe the demand was there to implement accessibility, explained Ellis and Park.
Despite the regulations and mandated policies, site staff were uninterested in allocating
their funds to improving accessibility. It was simply not their top priority. Furthermore,
the lack of interest and commitment has been compounded by a lack of sustained
available funding. The need for compliance, however, became more evident with
passage of the Americans with Disabilities Act. Although the ADA did not apply to the
National Park Service or any other federal organization, it garnered such public attention
that it made NPS staff reevaluate how visitors with disabilities interacted with the sites.

The 1990 Americans with Disabilities Act passed as both a result of politicians’
commitment and the strength of disability rights activism. According to Park, he believes
that disability rights protests had an indirect effect on actions within the National Park
Service, but it was the ADA that solidified what they already had in place. The ADA
determined that virtually all public facilities become accessible. “At that point in time,”
says Park, “the Park Service hierarchy and employees began to realize ‘we’re not being

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83 NPS Accessibility Program, “Briefing Statement: Subject: Special Programs and Populations Branch”
(United States Department of the Interior, National Park Service, 1989). Located at Accessibility Program,
National Park Service WASO.
84 Ellis, Oral History Recording (Bethesda, MD: June 13, 2018).
85 The 1988 “Deaf President Now” protest at Gallaudet University and the so-called “Capitol Crawl”
protest in 1990 at the Capitol building in Washington, D.C.—both of which were led by people with
disabilities—would have attracted the attention of the WASO NPS Accessibility Office.
singly out alone; this is all of society that has these requirements.’ And I think it just sort of opened the door to have a positive attitude toward what we were trying to do and how we might achieve it.” The ADA made it much easier for the Accessibility Program to make recommendations for parks “to achieve accessibility at the same time that it preserves and protects the fundamental nature of the outdoor environment…[or] without negatively impacting on the historic character of the facility we are dealing with.”\(^{86}\)

Although federally-owned properties already needed to comply with the 1968 Architectural Barriers Act and Section 504 of the 1973 Rehabilitation Act as amended, the ADA brought a degree of awareness to the needs of people with disabilities that many had not even considered.\(^{87}\)

In the years following, the National Park Service released memoranda to directors and affiliated NPS staff to delineate the implications of the Americans with Disabilities Act on federal organizations. According to these memos and the back-and-forth that ensued, there was a significant degree of concern regarding historic sites, wilderness areas, facilities, and concessions. These memos clarify that the National Park Service was already legally bound to the Uniform Federal Accessibility Standards (UFAS), which were developed in 1984, and that the Americans with Disabilities Act Guidelines (ADAAG) pulled heavily from UFAS.\(^{88}\) However, as of 1992, the Access Board was at work revising the ADAAG to replace UFAS. Therefore, it was beneficial for parks to

\(^{86}\) David Park. Interview by Perri Meldon (June 11, 2018).


begin using ADAAG when referring to compliance requirements. The ADAAG would quickly become the most comprehensive of the guidelines, with ongoing revisions to these guidelines and standards in the twenty-first century.

The ADA coincided with the impending retirement of Congressman John Myers of Indiana. Congressman Myers contacted Bradford Woods, the NPS partner organization, inquiring about ways he could support them and create legislation to benefit people with disabilities. Bradford Woods staff suggested the idea of a “national center on accessibility” to support their educational and technical initiatives. From these conversations, Congressman Myers assisted in passing a line item through Congress which reestablished the partnership between the National Park Service and Bradford Woods, renamed the National Center on Accessibility (NCA). The center began with three areas of focus: training and education, research, and provision of technical assistance. The NCA assumed responsibility of the training component, Project Access, and the Center opened as a resource for parks and recreation in February 1992. Gary Robb served as executive director, and David Park recommended that Ray Bloomer, who was at that time working at Sagamore Hill National Historic Site, transfer to the National Center on Accessibility. That three-year detail became the job that Bloomer still holds today as accessibility specialist and director of education and technical assistance. While


90 The General Services Administration, the Department of Defense, and the U.S. Postal Service all maintain the Architectural Barrier Act Accessibility Standards (ABAAS). The National Park Service must also comply with ABAAS.

Bloomer is a federal employee with the National Service, he is duty-stationed in Indiana at the NCA.

Kay Ellis, meanwhile, was contacted by the Bureau of Land Management in the early 1990s to help establish its accessibility program. She transferred to the BLM in 1995, where she directed their accessibility initiatives for over ten years.

1.5 Post-ADA and Challenges of Access in the New Millennium

Despite the Accessibility Program’s accomplishments, by 1999 the SWACC committee announced that “we don't yet meet our legal obligations and we are not where should be. It is safe to say that there is no park in the system that is completely accessible -- all have obstacles that limit the enjoyment of large numbers of our citizen [sic]-- some 53 million of them.” Addressed to David Park, this report brought attention to the array of problems plaguing national park units across the country. A partial list of problems included widespread ignorance of legal requirements, limited information about programmatic access, lack of training, and no comprehensive self-assessment tools. A partial list of obstacles described insensitivity of NPS staff, how NPS employees frequently treated accessibility as an option rather than a mandate, that limited funding dissuaded efforts, that there was little accountability for compliance, and that collateral duty limited effectiveness. These complaints followed with a series of proposals, which would include prioritizing high-level NPS leadership and commitment to accessibility, better accountability, and funds to develop, publish, and distribute a reference manual in conjunction with Director’s Order 42. In a multitude of ways, the National Park Service

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has since addressed many of these issues and continues to confront them over a decade later. However, barriers persist to implementing full compliance with federal laws.\(^93\)

Released in 2000, Director’s Order 42 superseded the 1983 Special Directive 83-3, the first NPS policy on accessibility for visitors with disabilities. Signed by NPS director Robert Stanton, D.O.-42, written by the NPS Accessibility Program staff, explained that “various legal mandates… require all government agencies to make facilities and programs accessible” and “it simply makes good sense to employ principles of ‘universal design’ in providing facilities for everyone, rather than for only a portion of the population.”\(^94\)

Universal design, a term coined in the 1980s, means increased access for all peoples; as indicated in the order, “if accessibility is provided at the design state, the extra cost is negligible.”

Director’s Order 42 outlined five objectives:

1. Incorporate the long range goal of providing the highest level of accessibility that is reasonable for people of all abilities in all facilities, programs, and services, instead of providing "separate" or "special" programs.
2. Implement this goal within the daily operation of the NPS, its policies, organizational relationships, and implementation strategies;
3. Provide further guidance and direction regarding the NPS interpretation of laws and policies;
4. Establish a framework for the effective implementation of actions necessary to achieve the highest level of accessibility that is reasonable; and,
5. Ensure the implementation of "universal design" principles within the national park system.


The order defined terms that appear in the 1987 43 CFR Part 17 regulations of the Department of the Interior, along with relevant laws, standards, and guidelines. It recommends strategies for implementation as they appear in the NPS Management Policies and describes the roles and responsibilities of NPS employees to ensure accessibility.95 Director’s Order #42 went into effect in November 2000 with a sunset date four years later. Despite this deadline, there has been no follow-up document to replace D.O.-42, although current accessibility specialists in the National Park Service are at work to create one.

Although D.O.-42 indicated that the cost of incorporating accessibility into design is minimal, it can be costly to renovate buildings, especially those constructed prior to UFAS, adopted in 1984. As a high percentage of buildings in the National Park Service were constructed as part of Mission 66—before the passage of the 1968 Architectural Barriers Act—many parks needed to renovate their facilities. Furthermore, as David Park explained, there was rarely a “pot of money” in the D.C. office available for parks to draw from. The fee demonstration program was the only time that such money was available.96

In 2001, the National Park Service Accessibility Program announced that the “NPS Allocates $5 Million to Enhance Accessibility in the Parks,” through funding received from the NPS Servicewide Recreation Fee Demonstration. According to the announcement, park units submitted over $25 million worth of projects, with over one-hundred projects in total. In selecting the projects, the Accessibility Program rejected applications for construction and major rehabilitation, as these projects were already

95 Stanton, “Director’s Order #42.”
96 Park, Oral History Recording (Phone: June 11, 2018).
required by law. Rather, they based their criteria on the following factors: that these projects grant the same benefits to people with and without disabilities, that they enhance existing infrastructure and programs, and projects work in partnership with private and non-profit organizations to create a more accessible park experience. According to Park, they awarded the funds to a range of a park units large and small, which dealt with issues regarding physical and programmatic accessibility. He also found that, in many cases, NPS infrastructure was so old that it proved more cost-effective to tear down older buildings and replace them with new, accessibility-compliant ones than renovating those existing. This also resulted in an educational experience for NPS architects and park staff in learning about accessibility compliance.

To ensure compliance with federal laws, both D.O. 42 and the SWACC email outlined the need for self-evaluation tools. An NPS memorandum solicited reviews and comments regarding an accessibility plan, which would serve to comprehensively assess facilities, programs, and services; identify barriers that inhibit full access; and develop plans for eliminating those barriers. In requesting all park units to fill out these action plans, the Accessibility Program aimed to complete all evaluations by 2005, all action plans by 2006, and all retrofits by 2010. That same year of 2001 marked the beginning of the U.S. Department of the Interior Disability Rights Committee. The committee was comprised of representatives

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98 Park, Oral History Recording (Phone: June 11, 2018).
including but not limited to the Bureau of Reclamation, DOI Office for Equal
(represented by Kay Ellis), and the National Park Service (represented by David Park,
Ray Bloomer, and another NPS employee). Meeting on a quarterly basis, the DOI
Committee aimed to provide technical assistance, identify continuing education needs
and outstanding contributions, and recommend special studies and strategies and methods
to encourage a “nondiscriminatory environment for people with disabilities.”

Meanwhile, visitor perception studies of national park accessibility and impact
studies from the National Center on Accessibility indicated the accomplishments, as well
as new and ongoing challenges that the NPS faced in the early 2000s. The University of
Tennessee produced a perceptions study on programmatic and physical accessibility in
2001 that surveyed both adults with disabilities and caregivers of parents of children with
intellectual, sensory, and physical disabilities. The researcher conducting this study,
Rachel Chen, interviewed fifty people each at ten different national park units on a
variety of issues, including topics of general physical access to facilities, programmatic
access such as assisting listening devices, and availability of information. Chen found
that park visitors broadly suggested improved funding budgets to support greater
accessibility, but most people felt neutral about the existing accessibility of the site.
Uneven grounds, non-accessible bathrooms, and narrow doorways were among the most
frequent complaints.

The National Center on Accessibility, meanwhile, periodically gathers feedback from surveys on education, technical assistance, and research. In a 1999 random telephone survey that targeted ninety-nine NPS personnel across twenty-nine NPS sites, the NCA found that, across the NPS:

- Park management staff lacked a general understanding about accessibility, especially what was meant by “program’ access;
- Almost 50% of the respondents had had no accessibility training;
- 75% of the park superintendents had had no training at all;
- The major reason cited for lack of park accessibility was lack of funding.\textsuperscript{102}

These issues, in conjunction with the 2001 visitor perceptions study conducted by University of Tennessee reveal a consistent struggle for funding and lack of awareness to properly implement physical and programmatic accessibility.

Throughout the early 2000s, the National Park Service and National Center on Accessibility continued to host accessibility trainings with the goal of expanding awareness for NPS employees. Focus turned toward programmatic accessibility, as indicated by emails and discussions between the Harpers Ferry Center for Interpretive Media, the Smithsonian Institution Accessibility Program, and SWACC. Jan Majewski, who had served as the Smithsonian’s Coordinator for Special Education and later founded the Institution-wide Accessibility Program, communicated with the NPS Accessibility Program about accessible exhibits and matters for consideration: width, height, protruding objects, and exercises for retrofitting inaccessible exhibits.\textsuperscript{103}

Meanwhile, Mather Training Center offered a training titled “The Status of Accessible

\textsuperscript{102} “15\textsuperscript{th} Anniversary Summary Report,” 8.
\textsuperscript{103} Jan Majewski to Kay Ellis, “Here’s the Outline,” December 3, 2001. The Smithsonian Institutions established its own accessibility program in the late 1970s. Like the National Park Service, the Smithsonian initially handled accessibility on a site-by-site basis. The first program began at the National Air and Space Museum under Harold W. Snider in 1977.
Interpretation Services and Media in the National Park Service: Issues and Recommendations” in 2002. The WASO Division of Interpretation, staff from the Harpers Ferry Center, representatives from SWACC, and selected regional and field interpreters were invited. This training identified issues and recommendations regarding barriers, funding, and technical specifications. The increased presence of material in the archives relating to programmatic accessibility reveals a newer emphasis on approaches to breaking barriers. When asked why the NPS focuses increasingly on program access, Ray Bloomer explains that architectural access is, no pun intended, more concrete. Programmatic access, alternatively, has a greater impact on people with sensory, intellectual, and cognitive disabilities, and this form of access can be more challenging to successfully implementing. Working with the Harpers Ferry Center for Interpretive Media, as well as outside organizations, has opened opportunities for innovative solutions to programmatic access.

Meanwhile, despite the continued success and innovative methods explored by the NPS Accessibility Program, in the late 2000s the office also faced scrutiny from outside forces. In May 2006, Congressman Stevan Pearce of New Mexico convened an oversight hearing entitled “Disability Access in the National Park System.” Attended by the subcommittee on national parks of the U.S. House of Representatives Committee on Resources, several experts were invited to speak, including Sue Masica, associate director of the NPS Park Planning, Facilities, and Lands division; Gary Robb, director of the National Center on Accessibility; and several representatives from disability advocate

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105 Bloomer, Oral History Recording (Phone: October 19, 2018).
organizations. According to Ray Bloomer, Congressman Pearce organized this hearing out of personal interest: his brother uses a wheelchair, and Pearce wanted to understand how the National Park Service makes places accessible, particularly in outdoor recreation areas. Pearce announced at the beginning that the “Subcommittee is most interested in learning what alterations have worked for the Service and the disabled community, and what has not, and where the Service expects to be 20 years from now in terms of disability access.” Experts within and outside the National Park Service spoke, identifying accomplishments, ongoing challenges, and complaints.

Masica highlighted successes of NPS accessibility initiatives, including the fee program which by that time had funded over $140 million of projects, as well as listed obstacles. With 30% of the buildings historic and many of them built prior to the 1960s, the National Park Service faced significant challenges “to determin[ing] the appropriate way to provide access while at the same time preserving and protecting the historically significant features of the buildings and also the landscapes.” To provide education and technical assistance on these projects, Masica described the partnership formed with Indiana University that established the National Center on Accessibility. Like Bloomer, Ellis, and Park iterated in varying ways, Gary Robb of the NCA also argued that

[w]hile physical accessibility remains a major need throughout the National Park Service system, programmatic accessibility should be treated with equal concern. It appears that many NPS units do not fully understand programmatic accessibility. Program accessibility is not as tangible as physical accessibility but is just as

106 Dr. J.R. Harding, vice chairman of the U.S. Architectural and Transportation Barriers Compliance Board, was also present.
important. NPS staff has major difficulties in understanding and incorporating programmatic accessibility in their planning process.\textsuperscript{110}

On behalf of the NCA, Robb offered to assist the Park Service, particularly with regard to captioning, audio description, mapping, and modeling. Following this initial statement period, members of the subcommittee asked questions of Masica, Robb, and others. Masica explained how the NPS handles complaints, and Robb mentioned how staff actually want to attend training workshops—as opposed to earlier and begrudging attendance requirements in the National Park Service.\textsuperscript{111}

Following these statements, representatives of disability advocate organizations described the limitations and barriers they encountered at national park sites.\textsuperscript{112} Janice Schachter identified three major hurdles: little incentive to encourage compliance, poorly allocated funds, and little to no accountability.\textsuperscript{113} According to Nancy Starnes, “[w]ith each generation since Yellowstone was designated as a national park, people with disabilities have grown in their expectation that these wonderful national treasures would be accessible to them.” Starnes described the FDR Memorial in Washington, DC; the need for programmatic accessibility, and the heated conversation over Segway use in national parks.\textsuperscript{114} The hearing concluded with Pearce, who asked everyone present to exchange emails and continue corresponding on suggestions for improvement.

\textsuperscript{110} Robb, “Disability Access in the National Park System,” 13. Robb also described many NPS-NCA accomplishments since 1992, including 121 training programs to over 1500 NPS employees and concession operators; and consultations with the Home of Franklin D. Roosevelt National Historic Site, the Trail of Tears Museum, Yosemite National Park, Petroglyph National Park, and Cape Hatteras National Seashore.

\textsuperscript{111} Masica and Robb, “Disability Access in the National Park System,” 19-20.

\textsuperscript{112} Jerry Kerr was president and founder of the Disability Rights Advocates for Technology; Janice Schachter served as chair of the Hearing Access program at the Hearing Loss Association of America; James McCarthy acted director of governmental affairs at the National Federation of the Blind; and Nancy Starnes was vice president and chief of staff of the National Organization on Disability.

\textsuperscript{113} Janice Schachter, “Disability Access in the National Park System,” 29.

\textsuperscript{114} Nancy Starnes, “Disability Access in the National Park System,” 43
Two years later, in July of 2008, the subcommittee met again, this time to discuss “Expanding Access to Federal Lands for People with Disabilities.” This hearing expanded beyond the National Park Service to include other Federal agencies and nongovernmental organizations.115 As Representative Raúl Grijalva of Arizona explained, they met to examine “the development and implementation of the Access Board’s guidelines for improving access to outdoor developed areas managed by our Federal agencies.”116 Replacing Sue Masica, Stephen E. Whitesell, the associate director of Park Planning, Facilities and Lands, reported on updates since the 2006 hearing.

According to Whitesell, the NPS had since conducted a survey of the major audiovisual programs that were already in existence in the parks to determine how many were not currently captioned for visitors who are deaf, how many were not audio-described for visitors with visual limitations; and how many theaters did not have assisted-listening devices for visitors with hearing loss. Based on the results of the survey, the NPS initiated the Audio-Visual Initiative for Visitors with Disabilities, allocating fee revenue funds for the correction of these deficiencies. As a result, the NPS recently released approximately $3 million of fee revenue funds to add the listed components to over 100 currently used programs in over 85 different park units.117

Furthermore, the NPS had hosted a satellite broadcast training program on universal design, developed a strategy for complying with accessibility guidelines and standards, and continued to work with NCA on technical assistance and training programs.

Whitesell highlighted the expertise of the Denver Service Center and the Harpers Ferry Center and specific projects that broke accessibility barriers. When Donna M.

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115 Speakers included senior officials in the U.S. Department of Agriculture, the Department of Environmental Conservation in New York, the U.S. Access Board, and the National Park Service.115 Representatives from non-governmental agencies also spoke, including the Appalachian Trail Conservancy, Wilderness Inquiry, Inc., Bar Z Adventures, and Robinson International, Inc.


Christensen, a delegate from the Virgin Islands asked, “how accessibility needs fit into the agency efforts to comprehensively assess the entire National Park Service asset portfolio?”, Whitesell responded vaguely about overall improvements compared with the past. More specifically, he emphasized an NPS website that directed visitors to accessibility information and mentioned a memorandum that was sent from the director of the NPS to all parks about actively surveying programs and facilities to improve accessibility.\(^\text{118}\) Although it seems that the first of these two hearings were initiated largely by Congressman Steven Pearce out of personal interest, the topic of accessibility in the National Park Service revealed a range of concerns and complaints from a host of different stakeholders.

On the heels of this second hearing, the National Park Service accessibility initiatives underwent major changes as well as challenges to its authority. David Park retired as chief of accessibility, and Kay Ellis left the Bureau of Land Management in 2009 to return to the National Park Service. However, by the time she returned, the NPS Accessibility Program was no longer a division but a program. Since the late 1980s, the office has shifted around and downgraded in priority. As the division downgraded to a branch, Park answered to the Division of Operations. It was further shifted down to program status upon Ellis’s return and placed under Park Facility Management Division, which distanced the Accessibility Program from more funding and more authority.\(^\text{119}\)

Ellis also arrived following a major lawsuit that erupted against Golden Gate National Recreation Area (GGNRA). In 2008, Lori Gray contacted Disability Rights Advocates (DRA) in Berkeley, California, to convince the NPS-managed Golden Gate

\(^{119}\) Bloomer, Oral History Recording, (Phone: October 19, 2018).
National Recreation Area to implement physical and programmatic accessibility. As a person with physical and sensory disabilities, Gray had taken people on tours to enjoy the natural beauty of the Bay area, but there were “thousands of barriers” to entry at GGNRA. Gray contacted DRA following their 2005 successful lawsuit against the California State Park System, which resulted in a $100 million payout on behalf of the state of California to improve accessibility. With this successful precedent, DRA, as legal representative for Gray, charged the National Park Service with discrimination against people with disabilities and not complying with Section 504 of the 1973 Rehabilitation Act. The trial for Gray, et. al. v. Golden Gate National Recreation Area began in the federal court of San Francisco, but it quickly took on national prominence as it involved the National Center on Accessibility and the D.C.-based NPS Accessibility Program. Kay Ellis, as program manager at that time, needed to send thousands of documents to DRA and testify regarding the mission and commitment of the NPS Accessibility Program. Ray Bloomer and others at the National Center on Accessibility, meanwhile, initiated several self-evaluations at GGNRA until the Department of Justice advised against further self-assessments. Instead, all further evaluation throughout the trial proceedings would be conducted by the courts. The trial continued from 2008 until 2014, when GGNRA and DRA reached a settlement agreement.

According to DRA, this agreement was “the first comprehensive settlement in the country that will increase the accessibility of a federal park system.” The National Park

121 Ellis, Oral History Recording (Bethesda, MD: June 13, 2018).
122 Bloomer, Oral History Recording (Phone: October 19, 2018).
Service agreed to increase trail and beach access; install a variety of modes of programmatic access, including Braille, audio, and tactile guides; require all staff and volunteers to attend accessibility trainings; and establish a fund to guarantee maintenance and development of access features. The Notice of Proposed Settlement stated that the “specific cost of projects in this group will be required to be implemented regardless of cost,” and that the GGNRA also agreed to spend at least $3 million in making these changes. Furthermore, GGNRA paid all legal fees incurred. When asked about the GGNRA settlement agreement, Ray Bloomer points out that, prior to the lawsuit, this national recreation area was the only national park unit with a full-time accessibility coordinator and held accessibility to a high standard.

Despite the tensions and issues that emerged with the GGNRA lawsuit, Kay Ellis, Dave Park, and Ray Bloomer all speak positively about the impact of complaints. It is often only through complaints that parks take the necessary steps to break barriers. Kay Ellis cannot forget what one friend with a disability once told her: “Sometimes, I’d just like to be a visitor.” It is not the responsibility of the person with a disability to report barriers and other forms of injustice, yet it is often their complaints that act as ammunition to drive change. Park agrees that GGNRA instituted necessary changes:

With the pressure of a complaint like that, it resulted in A. that particular park taking some pretty significant actions to improve accessibility, and B. the parks within that region [making changes], because that particular director in the California region didn’t want something like that to happen to any other park in

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124 Bloomer, Oral History Recording (Phone: October 19, 2018).
125 Ellis, Oral History Recording (Bethesda, MD: June 13, 2018).
that area… And then I think that has a domino effect on the rest of the regions and the rest of the parks.\textsuperscript{126}

Kay Ellis retired from the National Park Service in 2013, and Jeremy Buzzell took the role as Chief of Accessibility. Both Ellis and Buzzell have witnessed the accessibility program lose visibility and funding as it folded into one division or another. Despite these challenges, the Accessibility Program remains committed to developing comprehensive accessibility standards at all NPS units. The National Center on Accessibility, long-term partner of the NPS, continues to offer an array of services for national park units. The NPS Accessibility Program has also welcomed Michele Hartley, who joined the Harpers Ferry Center as Media Accessibility Coordinator in 2010. Hartley ensures that national park units are compliant with federal accessibility standards and assists with various media and programming, including exhibitions, videos, and publications for parks across the nation.

As of 2018, the National Park Service accessibility program is a branch under the Park Facilities Management division, and Jeremy Buzzell is branch chief of Accessibility and Employment Housing. Serving as branch chief for two different offices, this doubles the workload and the number of employees who report to Buzzell. Accessibility becomes less of a priority for the National Park Service, despite Buzzell’s own professional background in special education. Ultimately, the commitment to accessibility is largely decentralized throughout the National Park Service, despite the dedication of the National Park Service accessibility program. Ray Bloomer does not shy away from his frustrations when asked about challenges to NPS accessibility:

\begin{quote}
I think in terms of looking at where the National Park Service needs to be right now... We have a branch chief that has divided responsibilities between
\end{quote}

\textsuperscript{126} Park, Oral History Recording (Phone: June 11, 2018).
accessibility and housing. We have one person at Harpers Ferry. And one person at Golden Gate National Recreation Area. We have 417 national park units. And that's not enough people to be successful at what we are doing. So, even though accessibility is in many ways everyone's responsibility, when it's broken down into small levels like I just identified, we're never going to get the level of commitment, which also means not just commitment but we're going to fund the things we say we're going to do. And until we get there, accessibility is always going to be almost a stepchild of the National Park Service.  

Those who work in the systemwide Accessibility Program are proud of and committed to the work they do, but they also recognize the limitations to what they can accomplish.

With little oversight of the more than 400 park units and limited funding, the minimally staffed NPS accessibility program must trust that each individual unit and collateral duty accessibility coordinators on the site-specific and regional levels commit to improving physical and programmatic accessibility. To understand what historic sites and other national park units can do to enhance accessibility—as well as the support they can receive from the NPS Accessibility Program and the National Center on Accessibility, the following chapter will examine the Home of Franklin D. Roosevelt National Historic Site. This national historic site serves as a case study in the ways historic house museums, both within and outside the National Park Service, can break barriers and encourage the participation of people with physical, sensory, and cognitive disabilities in the process.

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127 Bloomer, Oral History Recording (Phone: October 19, 2018).
CHAPTER 2
ACCESS AT THE HOME OF FRANKLIN D. ROOSEVELT NATIONAL HISTORIC SITE

In Chapter One, I described the formation of the National Park Service Accessibility Program, established in 1979, which provides technical, architectural, and interpretive services for all national park units across the country. To illustrate their work in action, I have worked with the Home of Franklin D. Roosevelt National Historic Site (HOFR) in Hyde Park, New York, to understand the ways that the NPS grapples with issues of physical and programmatic accessibility, on both the national scale and on a site-by-site basis. At HOFR, staff have consulted with the NPS Accessibility Program and the NPS partner National Center on Accessibility, as well as local organizations by and for people with disabilities. Divided in two parts, this chapter aims not only to depict accomplishments and challenges of accessibility at national historic sites, but ways that museums and historic sites in and outside the National Park Service can interpret place-based disability history. Part One describes HOFR and its development as a national historic site and how they have incorporated physical and programmatic accessibility to the house museum and surrounding grounds. Part Two then examines the difficulties to implementing more comprehensive accessibility measures and offers recommendations for enhancing inclusion through interpretation. I argue that, in order for HOR staff to meaningfully interpret FDR as a disabled person, they must deepen their understanding of American disability history.

To understand how and why FDR wrestled with his public image and private experience with polio, staff must layer their understandings of disability during Roosevelt’s lifetime, contextualized by an era infused with eugenic ideologies. In
nuancing their interpretation, interpretive staff can reveal how FDR’s life with polio both related to and differed vastly from other people with disabilities from the 1920s to 1940s. Furthermore, such interpretation has the potential to explore how the opportunities for and integration of people with disabilities in both private and public spaces have transformed since the former president’s death in 1945. This case study serves as a model in how other historic sites and house museums—both federal and nonfederal—can 1. make their museum experiences more accessible and 2. develop representations of disability history that convey a more multidimensional perspective of the past.

In many ways, HOFR offers a natural case study of accessibility. As a national historic site dedicated to the home life of Franklin D. Roosevelt— the only president with visible disabilities—, HOFR employees prioritize making Springwood, the house’s name given by the family, accessible for a range of visitors. The house museum and its surroundings strive to be models of physical and programmatic accessibility, as the house already possesses a long history of accessibility dating back to FDR’s lifetime. After his polio diagnosis in 1921, Roosevelt made a series of changes throughout the home and across the landscape to accommodate his wheelchair—which was, in fact, a kitchen chair with caster wheels. Roosevelt’s staff introduced ramps, installed railings and handlebars, and minimized barriers. In later years, Roosevelt would construct Top Cottage, a retreat from Springwood that was totally accessible for his use. From the moment visitors arrive at the Wallace Visitor Center, to entering Springwood, to ending their tour at Top Cottage, visitors come face-to-face with examples of physical and programmatic accessibility, past and present. Highlighting these examples reveals interpretive
opportunities, possible shortcomings, and can inspire other historic sites to explore their own ways of improving access.

2.1 Part One: Locating Accessibility at HOFR

2.1.1 The Need for Accessibility and Disability Representation in Museums and Historic Sites: A Literature Review

Scholarship on museums, historic sites, and interpretation of modern U.S history has informed my understanding of national parks and their responsibility to create equitable and inclusive experiences for all visitors.\(^{128}\) At the Home of Franklin D. Roosevelt National Historic Site, inclusion is a dual process: HOFR must not only comply with federal laws regarding programmatic and physical accessibility; it can also encourage deeper visitor connections through interpreting FDR’s experiences with polio. In examining the simultaneous goals of accessibility implementations and disability representations, this literature review pulls from a variety of texts that examine the intersection of historic sites and social justice.

Paul K. Longmore was among the first disability historians in the United States. Having contracted polio as a child in the 1950s, Longmore was keenly aware of the limitations that others placed on him and the barriers he encountered. As an activist and professor at San Francisco State University, he wrote several books and essays on disability rights, including the 2009 article “Making Disability an Essential Part of American History.” In this brief essay featured in the *OAH Magazine of History*, Longmore points to the omnipresence of disability-related experiences in all aspects of

\(^{128}\) The introduction and conclusion of this thesis explore scholarship regarding museum visitation of other historically marginalized groups, including LGBTQ, Latinx, Indigenous, and African American communities.
American history and the need for greater representation in teaching these histories. The inclusion of disability history, argues Longmore, contributes to our understanding of “modern state formation” in the U.S.:

The point is that in recent American history, as in all previous eras, disability-related experiences and issues, controversies and campaigns appeared in virtually every social institution and sphere: in lawmaking and policy administration, in professional and institutional practices, and in Americans' understanding about some of their most basic values, values regarding equality and fitness for citizenship, autonomy and appearance, gender and sexuality, progress and the ‘health’ of society.129

Longmore’s sentiments reflect Katherine Ott’s position in her 2005 essay, “Disability and the Practice of Public History.” It is telling that the Spring 2005 edition of The Public Historian focused on disability issues in public history, indicating a heightened awareness for the inclusion of disabled peoples both in interpretation in the past and today as visitors and participants in telling history.130 Ott believes that “[h]ow disability is portrayed (or not portrayed) is directly related to core cultural values, including how achievement is defined, how wealth is generated and distributed, the boundaries of community acceptance of difference, and perceptions of age and sex.”131

Through considering disability at historic house museums, museum interpreters have the opportunity to examine the ways in which wealth, whiteness, privilege, and gender affected the options available to disabled peoples in the past. By rejecting this

130 This volume was edited by disability historians Susan Burch and Katherine Ott as part of a special Public Historian edition focused on place-making and cultural representations. Some of the other articles cover southern psychiatric institutions, oral history recordings with deaf people in Nazi-occupied Germany, an annotated bibliography of suggested disability history readings, and a review of digital disability history exhibits. Two of the articles are described later in the chapter (see: Catherine Kudlick, “The Local History Museum, So Near and Yet So Far”; Sally Stein, “FDR, Disability, and Politics: A View from the South”).
opportunity, museum staff risk 1. perpetuating the myths surrounding disability (such as the public’s lack of awareness regarding FDR’s wheelchair use), 2. framing disability as something to be ashamed of and not to be discussed, and 3. misrepresenting physically disabled peoples in the past as all having shared the same experiences.

Rosemarie Garland-Thomson, a professor of disability studies and English, demands greater representation of disability in public culture. She argues that historically, representations have depicted a “paternalistic sentimentality” and “medicalization” informed by an “ideology of cure and the mandate for normalcy.” She uses the March of Dimes campaign, an organization established through FDR’s commitment to polio research, as her example. Since its founding in 1938, the March of Dimes, originally named the National Foundation for Infantile Paralysis, has gained funding through various publicity measures, including radio shows, birthday balls, and telethons. According to Garland-Thomson, “[t]he way we imagine disability through images and narratives determines the shape of the material world, the distribution of resources, our relationships with one another, and our sense of ourselves.” These depictions can have transformative impacts on how people with disabilities are perceived by nondisabled peoples. Such was the case with telethons and advertisements, which had the power to tell convincing narratives that restricted the power that people with disabilities held over their own bodies. Instead, such depictions encouraged and exacerbated medicalized notions of the body. According to art historian Bess Williamson, the success of these widely publicized advertisements and telethons conveyed to the American public that polio was a “white children’s disease.” As Williamson argues, “like other diseases,

[polio] is an individual medical experience that takes on social meaning through media depictions and institutional approaches.”

Alternatively, how disability is imagined and represented through images and narratives can have the power to restore agency to people with disabilities regardless of their ethnicity, class, or gender. Such narratives also have the power to challenge nondisabled people’s assumptions about people with disabilities.

The report *Rethinking Disability Representation* was the final product of “a large scale, experimental project which developed new approaches to the interpretation of disability-related themes and narratives and to the representation of disabled people's lives within museums and galleries.” Created in collaboration with the University of Leicester, disabled activists, museum professionals, and artists, “Rethinking Disability Representation” aimed to encourage museums to tether apart their collections and build narratives that encouraged inclusion of people with disabilities—both as historical actors in the past and as visitors today. By pursuing this research, the University of Leicester thinktank sought to challenge ideas and introduce concepts for all agents within the museum experience—including disabled and nondisabled curators, museum staff, interpretive guides, and visitors.

With each exhibit, the museums generated responses from the visitors on how the projects might have changed their perceptions about disability. Visitors remarked that the exhibit challenged stereotypes, they noticed varied methods of interpretation, and they made personal connections with the information on disability. Despite efforts to avoid

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135 Jocelyn Dodd et al., “Rethinking Disability Representation in Museums and Galleries: Supporting Papers” (University of Leicester, Department of Museum Studies: Research Centre for Museums and Galleries, 2008): 3.
“stereotypical representations of disabled people as passive victims, dependent on others, and objects as pity... at the same time [that the museums aimed] to resist overly celebratory and naive views of disability,” many visitors responses elicited pity and “perceived tragedy of impairment.”\textsuperscript{136} Avoiding images and interpretation that depict people with disabilities as “tragic” or “heroes” is a challenge for many historic sites and museums, and it requires ongoing commitment and training from the staff to develop more nuanced interpretation.

A particular highlight of the University of Leicester project is its recognition for “democratization projects.” According to the authors,

[F]or staff who embark on democratisation projects and direct learning from the public with enthusiasm and goodwill, the process may reveal gaps in knowledge, and expose some elements of the self to the difficulties of realising that previous assumptions may have been naive, misguided or even prejudiced. True empathy means being aware of the limits of empathy and the need to learn from witnesses. Applied to one's profession it means emotional as well as cognitive learning.\textsuperscript{137}

Furthermore, this democratization necessitates a more multidimensional understanding for the potential emotions an exhibit or program elicits and the background knowledge or experience with which the visitor comes prepared. The visitor is the critical component in this democratization process, and the museum worker must be cognizant of this. The authors continue,

The need for awareness and the complexity of issues multiply when the question of representation of disabled people's lives within museums is addressed. In a society pervaded by stereotypes and unrepresentative images, it is virtually impossible not to absorb the prevailing perceptions and attitudes... Changing this involves anxieties about 'getting it wrong', along with a need to overcome resistance—often expressed as opposition to 'tokenism' (but often a block to any first step)... [T]here are ways of greatly reducing 'getting it wrong'... '[G]etting it wrong' is part of the expert paradigm in which prestige is based on accurate information. The democratising paradigm recognises that in many way situations

\textsuperscript{136} Dodd et al, 159.
\textsuperscript{137} Dodd et al., 29.
it is difficult if not impossible to get a right answer and the important thing is for the museum to engage, consult, act and learn.\textsuperscript{138}

As the authors convey, humility and risk-taking are essential aspects of the museum worker’s responsibilities. A museum worker continues to build their knowledge through both behind-the-scenes research and interaction with visitors. This is something that any national park must be sensitive to, particularly in the case of telling more “difficult histories.”

This tremendous project has had lasting impacts both in museum settings and in other texts, including \textit{Re-Presenting Disability}, an anthology of essays written by international experts on disability studies and history. Edited by Rosemarie Garland-Thomson, Jocelyn Dodd, and Richard Sandell, these essays portray case studies from exhibits and concerns of museums and historic collections when depicting disability history. Infusing museum exhibits and programs with disability history is an act of disability rights, a move that Sandell and Dodd argue in the first chapter “gained momentum through the 1970s and 1980s” and “offered a radical critique of individualist and medicalised ways of seeing.”\textsuperscript{139}

Julie Anderson and Lisa O’Sullivan’s essay “Histories of Disability and Medicine: Reconciling historical narratives and contemporary values” is insightful for any historic site grappling with histories of aging, medicine, war injuries, and disability. The essay begins by recognizing the recent shifts in museological practices, including a move away from didactic to participatory practices, which encourage a more active

\textsuperscript{138} Dodd et al., 30.
thinking approach on behalf of both the visitor and the interpretive guide. Another consideration is the push toward social justice initiatives in reaching diverse audiences. These innovations in museum work present opportunities for interpreting disabilities in more nuanced, multidimensional ways. For example,

> The documentation of the ‘life’ of an artifact is also that of the life of its user(s)... While the leg is material trace left in the museum collection, this should not read as implying that the object’s material presence has been taken as defining its user. Rather its interest lies in the meanings imposed on it by its user, highlighting the need to continue to preserve the multiple stories that come with objects.”

O’Sullivan and Anderson also warn that there are greater risks to not interpreting disability history than taking the chance and representing histories that can be more challenging. Of course, there are risks to using modern terminology and integrating contemporary values when studying the past, but

> To dissociate disabled people from the terminology used to describe them in the past is to rob them of their historical construction—in essence to de-historicize them. Part of the historical identity of many disabled individuals is the nature of language used to understand, describe, and, in many cases, removed some of their agency from them.¹⁴¹

By discussing the word “cripple”—a term popular during Roosevelt’s lifetime to describe people with physical disabilities—and other terminology that is no longer acceptable, museum workers and historians can “attempt to generate a more nuanced understanding of the correlation and meanings associated with the category of a specific historical time and place, and how that informed the lives and treatment of individual people.”¹⁴²

¹⁴¹ Anderson and O’Sullivan, 151.
¹⁴² Anderson and O’Sullivan, 151.
As the authors above have articulated, there is both a need for and extensive process to developing thoughtful representation of people with disabilities, both as museum visitors today and through depiction of disabled people who lived in the past. In addition to this demand for representation, scholars have also written extensively on the need for accessibility in museums and historic sites.

A number of articles have focused on specific disabilities and methods for developing inclusion. Lois Silverman and Barbara Masberg’s article “Through their Eyes: The Meaning of Heritage Site Experiences to Visitors Who Are Blind or Visually Impaired” and Catherine Kudlick’s “The Local History Museum, So Near and Yet So Far” narrow in on visitors who are blind or have low vision. Silverman and Masberg explain that “the majority of [scholarship about making places accessible] has been generated by experts, rather than having emerged from the actual perspectives and recommendations of visitors with disabilities.”

Relying on surveys and interviews with people with visual disabilities, they found that blind visitors desire museum experiences that emphasize hands-on opportunities, provide good descriptions, and discourage written placards or physical barriers to interacting with the space.

Catherine Kudlick, meanwhile, is a historian writing about her experience as a blind person visiting museums. On her visit, she encounters multiple barriers, from inflexible staff to the absence of audio guides. As Kudlick’s companion mutters, “‘Spontaneity’s always the first thing to go when you’ve got a disability.’” For visitors with disabilities, it is often

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144 Silverman and Masberg, 37-40.
necessary to schedule in advance to ensure that the museum can meet the needs of these visitors, such as having a sign-language interpreter or docent available. As Kudlick depicts, however, visitors with disabilities do not want accommodations; rather, they desire that museums incorporate universal design into the museum experience. Universal design, as Kudlick and others have indicated, not only serve people with disabilities but visitors and staff more broadly.

Alima Bucciantini describes the need for universal design at museums for employees and job applicants in her essay “Getting in the Door Is the Battle.” Bucciantini, herself a professor, museum professional, and a person with cerebral palsy, knows firsthand the challenges of securing jobs that are accessible for her. She describes the barriers she has faced in the museum world, where an “us versus them” mentality persists. As museums maintain physical and invisible barriers to potential job candidates, Bucciantini asks, “[a]t a time when we are—or should be—trying to diversify the museum and public history field, why are we not lowering barriers? Or at the very least, thinking critically about why they are there?”146 Bucciantini’s questions haunt the museum field, particularly when there are already many laws intended to guarantee rights of people with disabilities. Since the 1960s, consultants for the National Park Service and partner organizations have published guides on physical and programmatic accessibility, yet there is a continued need to not only define accessibility, but also ensure that historic sites and museums comply with the legislation.

In addition to these articles, public historian Katie Stringer Clary equips her readers with an essential toolkit in Programming for People with Special Needs: A Guide

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146 Alima Bucciantini, “Getting in the Door Is the Battle,” History News 73, no. 3 (Summer 2018): 5.
for Museums and Historic Sites. When writing her book, Stringer Clary visited multiple sites and explored different museums’ approaches. She also provides “A Case Study and Model for Museums and Historic Sites: Seven Key Elements.” Focusing on a Civil War-era historic site in Tennessee, Stringer Clary describes the museum staff and mission, the school for children with disabilities with which they participated, and the teachers’ priorities for their students. In particular, teachers expressed concern regarding proper transportation, hands-on activities, individualized attention, financing, the chance for all students to participate, integration with nondisabled students and visitors, and access to physical needs like bathrooms. Many teachers agreed that they hoped to provide a social, educational, and entertaining learning experience for their students. Stringer Clary’s book gives museums the potential to develop programming sensitive of people’s needs and ensure effective communication between staff and disabled and nondisabled visitors.

2.1.2 FDR Memorials across the National (and International) Landscape

When writing about Franklin D. Roosevelt and representations of his disability, there is no shortage of material. Across the landscape, several memorials commemorate his life, domestic and international work, and the spaces he inhabited. These include Four Freedoms Park on Roosevelt Island in New York City; Campobello Island straddling Canada and the United States; the Little White House at Warm Springs, Georgia; and the FDR Memorial in Washington D.C.—the last of which has received extensive scholarly and public critique. Analyses that describe the memorialization process, the creation of

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147 Katie Stringer, Programming for People with Special Needs (Maryland: Rowman & Littlefield, 2014). Since publishing this book, the author has changed her last name to Clary.
the wheelchair statue, and the controversies that have ensued around this depiction offer lessons regarding FDR and interpretations of disability history at national park sites.

Only ten years after the president’s death, the Federal government established the FDR Memorial Commission in 1955. The efforts to create this memorial took nearly fifty years to complete. Following decades of conflict surrounding several hundred sculpture submissions, financial hurdles, and depictions, the memorial stood finished in 2001. Due to the multiple parties involved in the decision-making process, it took over twenty years before the Commission settled on landscape architect Lawrence Halprin in the 1970s to design the memorial. The Commission had set aside twenty-seven acres of West Potomac Park, and Halprin envisioned using the whole space.148 After deliberating between stakeholders, Halprin settled on the design of four separate rooms to depict the four freedoms, four stages of life, and four areas of the country. Water would feature prominently throughout the space, symbolizing FDR’s time as Assistant Secretary of the Navy and his time spent at Warm Springs, Georgia.149

To realize this memorial, Halprin hired sculptors Robert Graham, Leonard Baskin, George Segal, Neil Estern, and Tom Hardy. Estern, who created the original FDR statue, depicted the president as larger-than-life and draped in a cloak. Peering from beneath the cloak, FDR’s leg sat withered, while observant visitors might notice the caster wheels of FDR’s kitchen wheelchair. Throughout the memorial, Halprin peppered in a timeline of major events in the president’s life, including his 1921 diagnosis of polio; “[t]hus, Larry [Halprin] and the FDR Memorial Commission felt that they had adequately

told the story of FDR’s disability without betraying his insistence that he not be publicly seen as disabled.”

Furthermore, this memorial would become the first entirely wheelchair-accessible one of its kind, which would symbolize the breaking of barriers that existed during FDR’s lifetime. Despite these efforts, as the unveiling date neared closed in 1997, disability rights activists as well as Roosevelt descendants and biographers from across the country reacted quickly. The National Organization on Disability contacted President Bill Clinton and Congress, pleading to openly depict FDR’s wheelchair use at the memorial. On July 23, 1997, a day before the memorial was signed into law, Congress directed the Secretary of the Interior to have a statue designed and sculpted that portrayed FDR’s paralysis.

As part of the planning process for the new statue, the National Park Service Advisory Board and other stakeholders organized a committee that comprised “representatives of disabled Americans, and representatives of the arts community to evaluate the nature of the controversy and to identify alternative actions which might be taken to alleviate the controversy.” This committee consisted of NPS Advisory Board member Holly Robinson; FDR’s grandson James Roosevelt, Jr. Esq.; historian and polio survivor Hugh Gallagher; chairman of the National Organization on Disability Michael Deland; architect Karl Komatsu; landscape architect Laurie Olin; and author David Dillon. FDR Memorial architect Halprin guided the committee through a “Taking Part” workshop to provide input on the matter. This workshop integrated discussion, graphics,

151 Parsons.
sketching, and movement throughout the memorial space; they also met at Warm Springs, Georgia, and Halprin’s San Francisco office to discuss matters further.\textsuperscript{153}

Meanwhile, disability activists recommended possible themes as well as those to avoid at the memorial. These activists encouraged the commission to select a quotation that creates a sense of community and emphasizes how a person’s disability is integral to their life experience. They also recommended against selecting a quotation that depicted disability as tragic or something to be “overcome.”\textsuperscript{154}

Following recommendations from the subcommittees, the FDR Memorial Commission decided on a life-size statue of FDR sitting in a wheelchair that would be placed at the very beginning of the memorial. Instead of the larger-than-life heroic statue located at the end of the memorial, the life-size statue of FDR in a wheelchair served to make connections between the president and others with and without disabilities.

By placing this statue at the very beginning, it coincided with the chronological order of the memorial. It acted as a “prologue” of Roosevelt’s life in the 1920s, providing a backdrop to his presidency beginning in the 1930s.\textsuperscript{155} The selected quote, however, disappointed activist and scholar Rosemarie Garland-Thomson. The quotation, which came from Eleanor Roosevelt, read “Franklin’s illness gave him strength and courage he had not had before. He had to think out the fundamentals of living and learn the greatest of all lessons—infinitesimal patience and never-ending persistence.” The words are carved in bronze, whereas all others are carved into the granite of the memorial walls. Although Eleanor Roosevelt’s message encourages a positive attitude toward disability, it also

\textsuperscript{153} Olin.
\textsuperscript{155} Parsons, “The Public Struggle to Erect the Franklin Delano Roosevelt Memorial.” 158.
served as the only interpretation of disability—which concerned Garland-Thomson.\textsuperscript{156}

For herself and others, it oversimplified the multidimensionality of living with a disability, both historically and in the present day, and further heroized the president instead of humanize him.

Meanwhile, Michael Deland, chairman of the National Organization on Disability spoke favorably of the new statue:

The statue is by no means a nod to modern political correctness. Instead, it is the accurate portrayal of a man who used a wheelchair every day of his presidency…The statue of FDR in a wheelchair at the FDR memorial is a public testament to the disability that robbed him of the use of his legs, but in doing so enabled him to inspire millions. Thanks in significant measure to the statue, his inspiration continues today.\textsuperscript{157}

As these two disability rights activists’ opinions convey, the FDR Memorial controversy has generated critique from both within and outside communities that share similar values. All parties that contributed to the memorial and statue intended to serve the President and his accomplishments with dignity and respect, while at the same time they desired to open the space to honest portrayals of disability. The memorial, among its many intentions, provides a space to hold dialogue about past and present interpretations of disability.

In addition to the FDR Memorial in Washington, DC, other spaces grapple with interpretation surrounding FDR’s disability. These include Roosevelt’s Little White House State Historic Site in Warm Springs, Georgia; Roosevelt Island in New York City; and Campobello Island National International Park in New Brunswick, Canada.

\textsuperscript{156} Garland-Thomson, 5.
In 1932, Franklin Roosevelt had the Little White House built for his visits to the therapeutic waters of Warm Springs, Georgia. The president visited Warm Springs over forty times and died there in 1945; the springs, meanwhile, have been closed to the public since the 1960s. The Georgia State Park System now owns FDR’s residence, which serves as a historic site for visitors interested in FDR’s relationship to Georgia. The historic site interprets many of FDR’s New Deal programs and his dedication to finding a cure for polio through the lens of his time spent at Warm Springs. The museum consists of the house, a memorial museum and film, historical pools museum, and exhibits. The exhibits display an array of FDR memorabilia, including one of his wheelchairs and braces, the 1930s Buick that was renovated especially for him, a stagecoach that was used in local parades, a bathing suit, and additional materials used by other patients with polio. FDR’s polio diagnosis is central to these exhibits, and the site therefore does not shy away from the president’s relationship to disability. The historic site, while incorporating aspects of FDR’s presidency and influence internationally, carefully manages its regional scope; this allows the site to more intimately tether apart and explore disability during FDR’s time. All other memorials—whether at HOFR, Campobello Island, the FDR Memorial, or Roosevelt Island—must contend with FDR’s role in American twentieth-century history at the same time they acknowledge his polio diagnosis.

Formerly known as Blackwell’s or Welfare Island, Roosevelt Island in New York City received its current name in 1973 by New York State Governor Nelson Rockefeller.

159 Sally Stein, “FDR, Disability, and Politics: A View from the South,” The Public Historian 27, no. 2 (Spring 2005): 83–89.
In addition to the name change, the state also announced the decision to install a memorial dedicated to the former president and his relationship to the city in particular and state at large. Architect Louis Kahn was selected to design the memorial space in 1973, but he died unexpectedly in 1974. Following a statewide fiscal crisis in the 1970s, the memorial lingered in a state of limbo until the 1990s when it resumed construction.\textsuperscript{160}

Four Freedoms Park, which rests in the hands of the New York State Park System, derives its name from the 1941 “Four Freedoms” speech delivered by FDR. Opened to the public in 2012, the park faced a lawsuit only five years later. The legal service Disability Rights Advocates, in conjunction with the Brooklyn Center for Independence of the Disabled and three New York City residents who use wheelchairs, filed against the state park system due to physical barriers that prevented equal access. The parties reached a resolution in November 2017: the park agreed to install a lift at the monument steps and improve other accessibility features.\textsuperscript{161} This lawsuit reveals the need for stakeholder participation in every step of the memorialization and interpretation process, a process that holds for all memorials and museums. However, it is especially pertinent for a site dedicated to the only president who lived with a visible disability.\textsuperscript{162}


\textsuperscript{161} “Settlement Reached to Provide Equal Access to FDR Memorial on Roosevelt Island,” Disability Rights Advocates, last modified November 29, 2017, \url{https://dralegal.org/press/settlement-reached-provide-equal-access-fdr-memorial-roosevelt-island/}.

\textsuperscript{162} A final note on this memorial: Although this website appears inactive since 2013, www.fdrhopememorial.org describes efforts to install a sculpture at Roosevelt Island that depicts FDR in a wheelchair interacting with a child using crutches. It appears that this memorial commission, comprised of artists, disabled activists, and park employees, lacks the proper funds to complete this sculpture.
Finally, Campobello Island International Park, jointly administered and staffed by the peoples of Canada and the United States, commemorates the Roosevelt family’s vacation home. In operation since 1964, the park has many attractions beyond its connection with the Roosevelts, but the presidential family remains one of the greatest draws to the site. Special tours include “Tea with Eleanor,” “An Evening at the Cottage,” and guided tours through the Roosevelt Cottage. The Roosevelts visited this cottage and island from the time FDR was a baby until his polio diagnosis in 1921. Here the future president could unwind, playing golf, sailing, and entertaining friends and family. It is also on this island where he first became ill. Although Roosevelt visited Campobello later in life, his visits were brief and seldom. Today, the park focuses particularly on his life pre-polio and the moment he contracted the illness, as well as more broadly on the Roosevelt family’s relationship to the island.\footnote{\textsuperscript{163} “The Roosevelts at Campobello,” Roosevelt Campobello International Park, last modified 2019, www.fdr.net.} Although there are no alterations to the home that indicate accommodations for Roosevelt’s disability, one of the objects in the Campobello collection include a chair with two poles attached. With these two poles, Roosevelt’s staff could carry Roosevelt to the beach. Staff today receive annual training opportunities at the Home of Franklin D. Roosevelt National Historic Site.\footnote{\textsuperscript{164} Will Kernohan, conversation with Perri Meldon (Phone: February 5, 2019).}

As the memorials described above convey, the representation of FDR is deeply entangled with how the site is accessible for visitors and how it interprets the former president’s experience with polio. The depiction of Roosevelt’s disability is wrought with conflicting opinions; in the struggle to accurately portray his wheelchair use and lived experience, scholars diverge with each other in how to achieve this most effectively. As
Smithsonian curator and disability historian Katherine Ott says of the FDR Memorial, HOFR could also become “a powerful tool for public awareness that sensibilities about, valuation of, and audiences for disability have changes dramatically in the last half century.”¹⁶⁵

2.1.3 The Home of Franklin D. Roosevelt National Historic Site

Since 1946, the Home of Franklin D. Roosevelt National Historic Site has offered tours to the public. Springwood, the birthplace and final resting place of the 32nd U.S. president, opened one year after FDR’s death on April 12. The neighboring library had already welcomed visitors since 1941, following a 1939 Congressional resolution to create the first presidential library, managed by the National Archives and Records Administration. Through this resolution, FDR donated 33 acres and the Springwood mansion to the National Park Service, stipulating that it would become a national historic site following his death.¹⁶⁶ The American public and tourists worldwide have continued to visit this site, the presidential library, and the surrounding related historic sites of Hyde Park, New York.

The national historic site has since expanded to include 719 acres of the family estate, with multiple historic structures, walking trails, managed forests, and agricultural features. Other nearby attractions include the Eleanor Roosevelt National Historic Site (established in 1977), located at the former Val-Kill industries, and the Vanderbilt Mansion National Historic Site (designated by FDR in 1940), all of which are jointly

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¹⁶⁵ Ott, “Disability and the Practice of Public History: An Introduction.”
managed by Roosevelt-Vanderbilt National Historic Sites. At the Home of Franklin D. Roosevelt, the NPS intends

[t]o preserve and interpret the birthplace, lifelong home, and memorial gravesite of President Franklin D. Roosevelt, so that current and future generations can appreciate the life and legacy of the longest-serving U.S. President—a man who led the nation through the two great crises of the 20th Century, the Great Depression and World War II.¹⁶⁷

In the site’s early years, the NPS focused predominantly on managing the site for public use. The site, including the house, gardens, and burial grounds, received heavy foot traffic, which necessitated the creation of paved roads and walks, benches and barriers, and eventually a parking lot.¹⁶⁸ Beginning in the 1950s and throughout the following decades, staff have prepared master plans, furnishing plans, cultural landscape reports, interpretive prospectuses, and a general management plan.

The 2010 General Management Plan for the Roosevelt-Vanderbilt National Historic Sites provides an overview of the sites’ features, interpretive and curatorial accomplishments, as well as ongoing challenges to natural and cultural resources. Most significantly, the sites face a tremendous backlog in preservation work. Many of the historic structures and surrounding landscapes require renovation, with much of this maintenance deferred due to financial constraints.¹⁶⁹ A further concern for these sites is their relevance to younger generations in the twenty-first century. Visitation numbers have dwindled in recent years, and the parks have partnered with outside marketing organizations to appeal to new visitors. As 2005 statistics indicate, visitors to these sites

are predominantly older, white, well-educated, and financially well-off.\textsuperscript{170} This demographic does not “reflect the diversity that now characterizes the U.S. population.”\textsuperscript{171}

2.1.4 The Tour Experience

To visit the Home of Franklin D. Roosevelt, visitors first arrive at the Henry A. Wallace Visitor and Educational Center, which, since its construction in 2003, is jointly managed by the National Park Service and National Archives and Records Administration. Visitors purchase tickets for the house tour and access to the presidential library; while at the visitor center, they can also peruse the gift shop, watch an introductory film (which is captioned and has audio descriptions available), and read large exhibit panels that provide an overview of the site. One of the panels describes Top Cottage, the retreat that FDR built for himself down the road, and how he designed it to accommodate his wheelchair use. It is nearby these panels that a park ranger or volunteer interpretive guide asks visitors to gather so they can begin the tour. The park ranger begins with introductory remarks which give visitors a sense of place; a large mosaic map on the floor illustrates the locale and the Roosevelt family history in the Hudson Valley. From there, the park ranger leads the tour group on a ten-minute walk across gravel to Springwood. For those unable to walk that expanse, another park ranger drives a tram and offers the same interpretive experience as the park ranger walking with the other visitors.

For visitors with sensory disabilities, audio guides are available at the front desk at the Wallace Visitor, as well as a Braille description of the house. If visitors call at least


\textsuperscript{171} Roosevelt-Vanderbilt National Historic Sites General Management Plan 2010, 41.
two weeks in advance, the chief of interpretation can organize an American Sign
Language interpreter from the nearby independent living center to accompany the tour.

Springwood welcomes visitors seven days a week from 9:00-5:00, and the first
floor of the president’s birthplace can hold up to fifty visitors at a time. A tour consisting
of 25 visitors or less can visit the second floor. On the first floor, guests to Springwood
walk into the Entrance Hall, while the park ranger provides a brief overview of the space.
To learn more details about FDR, the home and his family, or any other questions,
visitors must then ask questions themselves. Visitors are allowed to explore the first
floor, peering into the Small Reception Room (Snuggery), Gallery, Music Room (West
Drawing Room), Dining Room, and the Library. In many of the rooms, an interpretive
label propped on a stand describes the room and how it was used. According to the
*Historic Furnishing Report*, “The function of each room is described and questions are
answered along the way. Pertinent anecdotes are given that play off the interpretive
themes outlined above. The house is used as a stage to talk about FDR’s youth and the
effect of his home life on his adult years and political life.”172 From the living room
viewing platform, visitors see an array of furniture, bookshelves, and one of FDR’s
wheelchairs. There are four known remaining wheelchairs that belonged to FDR; there is
another one on display in the converted trunk elevator at Springwood, another in the
study at the presidential library, and one at Warm Springs, Georgia. At this time, visitors
in wheelchairs cannot view the trunk elevator, which is stationed on the second floor of
the house. When standing or sitting atop the glass viewing platform, visitors can peer

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below and see a replica of the ramp FDR would have used to descend into the sunken living room.

To reach the second floor, people who are able to walk the stairs do so; for others who need it, there is an external lift located in the hallway next to the library, operated by the park ranger. The current chief of interpretation, Scott Rector, admits this is hard to manage, as there is only one park ranger on duty for groups smaller than 25. This means that, while the park ranger operates the lift, the other visitors who walked to the second floor are briefly left unattended. If a volunteer or other park ranger is available, they will join the tour to assist the lead ranger.\footnote{Scott Rector, Interview with Perri Meldon (Hyde Park: December 13, 2018).} On the second floor, visitors see FDR’s boyhood room, four guest rooms, the room where the President was born, Eleanor Roosevelt’s bedroom, and Sara Roosevelt’s bedroom. The trunk elevator with one of FDR’s wheelchairs is also stationed on the second floor, although people using wheelchairs today are unable to see this. A set of four steep steps and a narrow hallway make it too challenging for a person using a wheelchair to navigate. During FDR’s time, a small ramp would have been available to allow him to traverse the set of stairs. He had a special railing installed for him to grasp; the original railing is still on display.

Scott Rector explained that HOFR is overdue for a new interpretive plan. The last one was published in 2004, and the Wallace Visitor Center is now over ten years old; the sites have continued to develop new interpretive methods, and language surrounding disability and accessibility has continued to evolve. For example, each site has multiple themes and subthemes to explore with their audiences. At Top Cottage, visitors can enter FDR’s intimate space that he constructed for himself and entertaining friends. Here
visitors can witness his architectural accomplishments, but, according to the interpretive plan, they can also see how he “overcame” his disability.\textsuperscript{174} The language of “overcoming” is problematic for a number of reasons. As Scott Rector says,

\begin{quote}
He obviously never overcame his polio. You always have polio. He learned to live with it, learned to adjust. You see, I have cerebral palsy, I was born with cerebral palsy. It’s not like I ‘overcame it’ or anything. I just adjusted my lifestyle to a right-handed world. I’m lefthanded, so everything I do I have to do with my left side… Again, he never overcame it. He adjusted himself to fit the needs of himself, his house, the outside world.\textsuperscript{175}
\end{quote}

By suggesting that FDR overcame polio, interpretive guides might create a sense of isolation between the president and visitors with physical disabilities. It sets the president apart by further highlighting this heroic status, as if he were something other than mortal. Yes, FDR became president and served four terms, but he also spent the rest of his life after 1921 living with and often struggling through the symptoms and side effects of polio. There was no such thing as overcoming, because there was no cure. This was a diagnosis that would affect him the rest of his life, whether or not the press captured it on film. Instead, interpretive guides have the opportunity to explore Top Cottage as a site that reflects historical attitudes toward disability and FDR’s ingenuity for making spaces accessible.\textsuperscript{176}

\begin{quote}
The assemblage and dismantling of barriers have an extensive history at the Home of Franklin D. Roosevelt National Historic Site, both during the President’s lifetime and\end{quote}

\textsuperscript{175} Scott Rector, conversation with Perri Meldon (Hyde Park: December 13, 2018).
\textsuperscript{176} Clark, Chermayeff Associates LLC, “Roosevelt-Vanderbilt National Historic Sites Comprehensive Interpretive Plan.”
later as a house museum. Making places accessible is not a simple, fixed task; rather it is an ongoing discussion among stakeholders. These stakeholders can include museum staff, consultants, and visitors, but each group must, above all, include representatives of people with disabilities. Only people with disabilities can articulate their own needs, and it is essential to include them in the planning process. Of course, it is also crucial to including preservation experts who can assist in maintaining the historic integrity of the home, but making places accessible cannot be compromised solely for the sake of preservation. As Frank Futral, curator of the HOFR, insisted on a tour of Springwood, “This isn’t a home anymore. It’s a museum.”\textsuperscript{177} If HOFR and other historic sites want to welcome visitors, then they must make it physically and programmatically possible for guests to visit.

\textbf{2.2 Part Two: Past and Present Barriers, and Proposals for Dismantling Them}

In May of 1996, former Home of Franklin D. Roosevelt National Historic Site curator Anne Jordan received a letter from William Smith, an accessibility specialist with the Massachusetts Historical Commission, who had consulted with and researched the history of accessibility at Roosevelt’s Hyde Park home. As a person with a disability working in the preservation sector, Smith was especially sensitive to the needs of visitors as they navigated historic houses. With the Home of FDR, this interest was compounded by FDR’s own adjustments to make the house accessible. However, Smith’s frustration is almost palpable as he wrote Jordan:

\begin{quote}
I spent many hours researching primary and secondary sources on Franklin D. Roosevelt and his disability and came up virtually dry... [A]pparently little is known. It is impossible to date the surviving ramps and we question whether they
\end{quote}

\textsuperscript{177} Frank Futral, Conversation with Perri Meldon (Hyde Park, NY: December 13, 2018).
were the final design and how they compare with the first generation of adapted modifications.\textsuperscript{178}

Over twenty years later, this frustration persists. Speaking with Jordan, who is now retired, as well as current curator Frank Futral and chief of interpretation Scott Rector, I hear their continued exasperation on the lack of information regarding the history of accessibility, both during Roosevelt’s time and today as a museum. Little is known about how the house was made accessible for visitors after 1946. Photographs are scant, and HOFR staff must rely on anecdotes. It seems that visitors used some kind of ramp to enter the living room, although it is not known whether these ramps were original or replicas. Other stories report that visitors with mobility limitations continued to use FDR’s manually operated wheelchair lift, until safety concerns eliminated this option. Rector cannot confirm when lift use was disbanded, but it was out of operation by the time he arrived in the mid-1990s. Due to the lack of information on the historic site’s accessibility, the focus here is on the history of accessibility changes to the house museum since the 1980s. Approximately every fifteen years, the Home of FDR has made extensive changes to—or at least thoroughly discussed—barriers to accessibility. Since the 2010s, the site has focused more deliberately on programmatic changes, following a slew of changes to physical accessibility in the 1990s and 2000s. The founding of the NPS Accessibility Program in 1979 has enabled many of these changes, at the same time that the staff of HOFR have insisted on and pushed for these efforts.

As early as 1981, HOFR employees plotted out ways to increase access at the house. The site prepared for FDR’s one-hundredth birthday the following year, where

\textsuperscript{178} William Smith to Anne Jordan, “Access Recommendations for People with Disabilities to Franklin D. Roosevelt’s Home,” May 9, 1996, Home of Franklin D. Roosevelt National Historic Site.
President Ronald Reagan would deliver a memorial address. In preparation for the celebration, HOFR staff invited NPS Chief of Accessibility David Park and accessibility specialist Ray Bloomer to consult with them. As Park recalls, the superintendent wanted us to come up for a visit to do a walk-through of the facility to make sure that there weren't any glaring accessibility deficiencies that might be a cause of embarrassment with such a high-level function taking place at the site. And so, of course, we agreed to do that, so we scheduled a visit up there to spend a day or so with the staff walking through the facility and discussing what we saw and making any recommendations.\textsuperscript{179}

Park and Bloomer agreed that the house was at that time very inaccessible, although certain accommodations had been made. The ramp that descended into the living room was far too steep for federal accessibility standards, and they were concerned with the safety of the wheelchair lift that FDR himself had once used. Whatever changes were made at this time seem to have been minimal and perhaps temporary.

Accessibility changes for the rest of the 1980s are not well-documented, but Scott Rector and Anne Jordan, who had both arrived at HOFR by 1995, affirmed that FDR’s wheelchair lift was inoperable by this time, but there still remained a living room ramp that was not compliant with federal code.\textsuperscript{180} A corral surrounded the base of the steps, so people could either stand or sit directly in the sunken living room. In October 1997 the Home of FDR collaborated again with Ray Bloomer through the National Center on Accessibility, hosting a day-long accessibility workshop attended by a number of HOFR and NPS staff and FDR biographer Geoffrey Ward. In discussing these matters, HOFR staff aimed to build an equitable visitor experience for all. According to the workshop’s accompanying booklet, “The second floor and the Living Room/Library viewing alcove

\textsuperscript{179} David Park, interview by Perri Meldon, Oral History Recording (Phone: August 24, 2018).
\textsuperscript{180} Scott Rector, conversation with Perri Meldon (Hyde Park, NY: December 13, 2018).
are not accessible to visitors unable to negotiate steps or stairs. The resultant disparity in visitor experience is contrary to federal law, agency policy, and the spirit of the man memorialized by the site.”\textsuperscript{181} Over the course of the day they formulated accessibility goals and discussed possible alternatives to the current conditions and the benefits to each modification.\textsuperscript{182} Possible options included programmatic changes such as models, photos, and exhibits; installing lifts and ramps; building new infrastructure such as elevators or platform chair lifts; locating volunteer assistants; and simply eliminating all visitor access to areas off-limits due to inaccessibility.\textsuperscript{183} These talks eventually resulted in an external lift that was installed on the back side of the house that allowed visitors to access the second floor, and a viewing platform into the sunken living room.

In creating the external lift and the different iterations of the viewing platform, HOFR staff needed to contend with the challenge of balancing historic preservation and accessibility. According to a 1999 email exchange between former HOFR facility manager Henry Van Brookhoven and chief of the Building Conversation Branch Stephen Spaulding, HOFR refused to compromise: “this part of the project is very important as we are introducing an intrusion into one of our most important historic structures. It is a solution to a problem that will be widely studied as a benchmark for this type of accessibility adaptation.”\textsuperscript{184} Construction on this elevator lift began on the western façade of Springwood in the fall of 1999 and was later replaced with new components in the late 2000s. In deciding to construct this lift, HOFR agreed that visitors with mobility

\textsuperscript{181} “Booklet from Accessibility Workshop” (Home of Franklin D. Roosevelt National Historic Site, October 16, 1997), Home of Franklin D. Roosevelt National Historic Site.

\textsuperscript{182} “Agenda for Accessibility Workshop” (Home of Franklin D. Roosevelt National Historic Site, October 16, 1997), Home of Franklin D. Roosevelt National Historic Site.

\textsuperscript{183} “Booklet from Accessibility Workshop.”

\textsuperscript{184} Henry Van Brookhoven, email to Stephen Spaulding, September 10, 1999, accessed at Home of Franklin D. Roosevelt National Historic Site.
limitations would have nearly the same physical access to the house as nondisabled visitors.

The 1998 viewing platform, nicknamed the “Queen Mary,” jutted out into the living room as a removable piece over the stairs, allowing visitors to peer in and experience the space without descending the steps. The Queen Mary was bulky, its white wooden railing interfering with the view for people using wheelchairs. However, it was considered at the time the best solution for providing physical accessibility without affecting the house’s historic integrity.\(^{185}\) It would remain, however, for only ten years before HOFR sought out other interventions.

A March 2009 proposal drafted by HOFR curator Frank Futral explained that, as a nineteenth-century house, it offers

the usual challenges in making a historic property like this publicly accessible. However, FDR lived in this house in wheelchairs of his own design. Therefore, the opportunity to reflect and interpret his accommodations offer the most exciting challenge and make this place unique among historic properties addressing universal design.\(^{186}\)

This proposal lists a number of project goals and objectives to further implement accessibility at the site. HOFR eventually settled on two consulting firms: the Institute for Human-Centered Design (IHCD) and Einhorn Yaffett Prescott Architecture & Engineering, P.C. (EYP). Implementing the tenets of universal design, the IHCD, based in Boston, employs museum professionals, accessibility specialists, and designers to assist an array of businesses and other public toward making their spaces accessible. EYP


is a leading team of designers who consult on innovative architectural solutions nationwide.

HOFR staff invited these two teams of accessibility consultants to the house in the summer of 2009 to discuss options for expanding accessibility. Walk-through notes from the house tour indicate a number of challenges and possible solutions pitched. The staff and consultants first met at the Wallace Visitor Center, which had opened to the public only six years earlier. One of the consultants, who uses a wheelchair, rode the tram from the visitor center to Springwood, while the rest of the tour group walked the ten-minute stroll. Some of the barriers and challenges HOFR faced included the unevenness of the flagstone porch and the limited lighting in each room. Security barriers between each room and the hallway were made of plexiglass with top rails that blocked the view for people in wheelchairs. As a programmatic barrier, HOFR did not provide handheld devices as an alternative audio option. Staff also continued to express concern with the viewing platform and ways to increase accessibility into the sunken living room. They also desired to install a ramp on the second floor to allow people in wheelchairs to view FDR’s manual wheelchair lift.

To implement these changes, EYP described the following project phases: in the first three months, they would sketch designs. By the fourth month, they would meet with all stakeholders to discuss design options. In the sixth month, they would specify the materials used, the floor plans, and cost estimates. By November 2009, EYP, IHCD,
and HOFR staff had settled on designs to eliminate further barriers. These included renovated security barriers between each room and the hallway and a new version of the viewing platform. The platform would be constructed of glass to allow visitors to see the steps and replica ramp beneath it. It would also need to be large enough to allow full rotation of a wheelchair.

When settling on the new viewing platform, both the HOFR staff and consultants worried that it would appear too “hi-tech.” They voiced concern that the platform would seem out of place in a room that was adorned mostly with dark wood and that it would hover unnaturally over the room.¹⁹⁰ Today, curator Futral and chief of interpretation Rector reflect on this and believe they largely resolved this issue. By installing dark bronze finishes instead of a metal railing, they believe the platform does not feel too obtrusive. According to Rector, the most important aspect is “that everyone views this room in the same fashion. It doesn't matter if you are using a wheelchair or you're using your own two feet.” While walking through the house, Rector and Futra also point out the changes to the security barriers. These barriers now allow everyone to step or wheel slightly into the room, allowing visitors a greater sense of the room’s design and layout. Additionally, the height of the railings no longer obstructs the view of visitors in wheelchairs.¹⁹¹

2.2.1 Ongoing Barriers and Challenges to Accessibility

According to the most recent Roosevelt-Vanderbilt National Historic Sites Comprehensive Interpretive Plan, published in 2004, the National Park Service faces a

number of interpretive challenges. These challenges are outlined in terms of short-term and long-term implementation. Among their short-term challenges, NPS employees at HOFR must address declining visitation rates, strategies to build visibility of Top Cottage, declining budgets for staff hires, and ways to serve new audiences and strengthen programmatic partnerships. Embedded within many of these challenges is the need to “create a unified interpretive strategy”: the park must make connections with visitors’ experiences at the sites and their own lives. Longer-term challenges include the need for enhanced trail and transportation systems, as well as developing new interpretive methods—these may include exhibits, signage, printed material, media, tours, programs, and special events.¹⁹²

Among the primary physical and programmatic challenges for HOFR is navigation through the home. According to chief of interpretation Scott Rector, the external wheelchair lift, though operating, is cumbersome and breaks frequently. When the external lift is broken or the tour group size is too large, the park ranger will not bring guests to the second floor. The park ranger then offers an alternative tour, which leads visitors through the kitchen and work areas of the house. This part of the house, however, is not accessible to people in wheelchairs, as the hallways are too narrow. Therefore, people using wheelchairs are only able to enter the main lobby of the house and the main rooms of the first floor before they must exit. This is a missed opportunity for visitors who use wheelchairs, especially because they cannot see FDR’s wheelchair lift (which is also out of view on the second floor due to a small flight of steps. HOFR staff have not yet found a solution for making the second-floor landing accessible). It is also worth

¹⁹² Jane Clark, Chermayeff Associates LLC, 7.
noting that, because the lift is outside the house, people with mobility limitations must briefly expose themselves to the weather. However, it is enclosed and covered from rain, snow, and, to some extent, wind.

For the tours that remain on the first floor, the Institute for Human-Centered Design had in 2009 suggested making portable wheelchairs available in the lobby. Visitors using wheelchairs could elect to switch from their personal one to the portable wheelchair, which would grant them access to the kitchen, domestic work spaces, as well as FDR’s study. FDR’s study is, at this time, not a part of the tour route for any visitors due to limited navigability. This, too, is an interpretive loss. Firstly, markings in the threshold of the doorway into FDR’s study reveal where FDR’s wheelchair wore down the wood. Secondly, just beyond his secretary’s study, it is possible to glimpse a metal railing beside a toilet, which is one of the only remaining railings in the house that indicate FDR’s physical accommodations.

An ongoing challenge is that of lighting, a topic which was discussed during the consultants’ walk-through in 2009 and again during my meetings with Futral and Rector. The first floor of the house is decorated with many dark wood features, including wood paneling on the walls. The lighting is limited, and staff must rely largely on outside light. This proves a challenge, especially on bright days, as visitors will have just entered the house following a sunny walk from the visitor center. Their eyes have trouble adjusting to the dim lighting conditions, and this is exacerbated by the contrast between the brightness of the windows and the dark rooms surrounding them. The site’s curators have installed standing lamps, but this has not proven very successful. Futral says as he looks


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around the house, “I know we’re about historic preservation. But it isn’t a house anymore, it’s a museum. We have a hard time of finding and crossing that line. But we’re trying everything to improve the light that’s short of hardwiring and altering the structure.”

They have searched for innovative solutions from other house museums, but HOFR has not yet found something that works for them.

Futral and Rector are open to creative ideas; Futral is especially interested in the work of art museums and accessibility. Inspired by lessons from art museums, Futral plans to offer gloves to visitors who are blind or have low vision. This will create a possible tactile option for interacting with the house. In the house’s foyer, there is a statue of FDR before his paralysis. Rector and Futral would like to allow visitors to touch this statue so they can “envision” FDR; gloves would make this possible without harming the historic integrity of this object.

Despite frequent renovations to the Home of FDR, there remain a number of challenges with which the site continues to contend. In the introduction of the 2010 General Management Plan, former superintendent Sarah Olson writes

Even as the Roosevelts recede in memory, the issues they grappled with remain as timely as the latest news. The Roosevelt parks provide a lens through which we can examine political questions that remain vital. Changing conditions call attention to the enduring Roosevelt legacy in unexpected ways… One of the critical issues we face is how to use park resources to demonstrate the continuing relevance of the Roosevelts and Vanderbilts, and their relationship to these places, for generations who have no personal experience with that time.

This statement emphasizes the potential for HOFR and how the site can serve as a catalyst in analyzing relevant issues today. As someone who minimized his reality as a

disabled man, FDR acts an excellent case study to examine disability rights, ongoing barriers, and shifting perceptions of disability access over the twentieth- and twenty-first centuries. The “issues they grappled with remain as timely as the latest news,” claims Superintendent Olson; for this reason, it would serve HOFR well to interpret FDR’s disability and welcome the voices of local people with disabilities and visitors from afar.

To combat the challenges of staying relevant, the authors of the General Management Plan offer an array of solutions, many of which could potentially also serve the disability community. In particular, the sites would like to engage with more educational and participatory programming through partnerships with nearby organizations. As Katie Stringer Clary shows in Programming for People with Special Needs, this kind of collaboration provides an excellent opportunity to include children with disabilities at the historic site.\textsuperscript{196} Scheduled activities that work specifically with disabled visitors allow for specialized attention that meet the needs of diverse communities. Alternatively, integrating people with and without disabilities in programs supports a learning environment that minimizes “special” attention to disabled visitors. In crafting such programs, education staff at these sites can consider the goals of each program and how they can best achieve them. Working directly with nearby organizations by and for people with disabilities, such as the Anderson Center for Autism and Taconic Resources for Independence, enhances the participatory nature of developing such programs. Furthermore, this collaboration will inform NPS education staff how they can best serve the communities located at these two centers. Ultimately, programming with and for people with disabilities will broaden the audience of those

\textsuperscript{196} Roosevelt-Vanderbilt National Historic Sites General Management Plan, 42-46.
visiting HOFR and its partner national historic sites, thus more accurately reflecting American diversity. This will also encourage developing new methods of interpretations through written material and various medias.197

In addition to the programmatic methods described above, HOFR also has the opportunity to interpret Franklin D. Roosevelt as a person with a disability. In conveying the history of FDR through the lens of how disability shaped his life, visitors will learn about the shifting perceptions of disability both during FDR’s lifetime and throughout twentieth U.S. history. This will serve in creating a bridge with the past, or what Lois Silverman calls the “social work of museums,” allowing disabled and nondisabled guests to reflect on their own understandings and assumptions about disability. In order to do this effectively, museum staff must first take a step back and study not only FDR’s polio diagnosis in 1921 but the public’s medicalized attitudes toward disability at that time, which were informed by notions of race, class, and eugenics.

2.2.2 A Brief History of FDR’s Polio Diagnosis and Early 20th-Century Understandings of Disability

The history of polio in the United States is closely bound with the mythology surrounding FDR’s diagnosis. Tales of “overcoming disability,” recovering from the healing waters at Warm Springs, and finding strength from the financial support and

197 The following online resources provide information for developing collaborative tools and programming for people with disabilities. The Museum Access Consortium, which is based in New York City, connects cultural institutions with accessibility experts. Their workshops, available and transcribed online, provide strategies for museums to enhance inclusion and diversity (http://museumaccessconsortium.org). Although geared more toward parks, the National Recreation and Parks Association (http://www.nrpa.org) offers inclusion resources, as well. The Center for Universal Design in North Carolina and the Institute for Human Centered Design in Massachusetts are additional resources for historic sites to consider and form partnerships. The Empathetic Museum (http://empatheticmuseum.weebly.com/), the Inclusion (https://inclusion.com/), MASS Action (https://www.museumaction.org/), and the International Coalition of Sites of Conscience (https://www.sitesofconscience.org/en/home/) all provide tools for initiating social justice and civic engagement programs to museums and historic sites.
press coverage of the March of Dimes campaign have influenced the American imagination toward polio in the early twentieth century. However, it is important to remember—and for museum staff at the Home of FDR to educate the public—that FDR’s experience with polio and disability was exceptional. His was one shaped by wealth, powerful connections, and white skin. And despite the image that FDR crafted of virility and indomitable masculinity, the president never overcame polio. It was not possible to “conquer” the disease, neither for FDR or the thousands of Americans diagnosed with polio in the first half of the twentieth century.

Although polio has existed for centuries, the virus was first identified in 1908. Polio is transmitted through fecal matter, often carried through sharing objects, poor hygiene, and contaminated food and water. Early symptoms include headaches, fever, and muscle aches; most cases will produce minimal side effects, but, for one in one-hundred patients, the virus can reach the brain stem and central nervous system, causing paralysis.¹⁹⁸ A series of epidemics in the United States in the early 1900s immediately concerned medical professionals and the public alike. Falling ill seemed random and unpredictable, and doctors could not prevent either the disease or the paralysis that followed. It seemed to affect children in particular, especially during the summer months. Without a definitive treatment plan that ensured recovery, doctors attempted an array of methods to eradicate the symptoms. Treatments included hospitalization, quarantine, and widespread sanitation campaigns. Doctors recommended physical therapy, along with heat and warm baths to relieve the pain and increase movement, only after the symptoms

had settled.\textsuperscript{199} The Drinker tank, commonly known as the iron lung, was not created until 1928, while the polio vaccine was not discovered until 1954 by Jonas Salk. These earlier, untreatable epidemics seemed to spread easily through immigrant communities in New York City, which contributed to eugenic arguments against the influx of “undesirable” ethnic groups. However, this perception rapidly changed during the 1910s epidemic, when the virus reached middle- and upper-class white neighborhoods in and outside New York City.\textsuperscript{200}

In the summer of 1921, Franklin Roosevelt said goodbye to his family as they departed from Hyde Park, New York, to Campobello Island, which straddles the border with Maine and Canada. As a lawyer in New York City, former Democratic senator of New York, and having recently just completed his tenure as Assistant Secretary of the Navy under Woodrow Wilson and an unsuccessful bid as Democratic vice-presidential candidate, Roosevelt was both busy and exhausted. Before joining his family for a restful vacation, he visited with the local Boy Scouts of Hyde Park. Historians now attribute this visit to the Boy Scouts as the place where Roosevelt acquired the polio virus. One afternoon on Campobello Island, he and his children had an adventurous day of boating, putting out a fire spotted in the woods, and swimming and racing back to the family cottage. That evening, Roosevelt decided to pass on joining his family for dinner. He, instead, opted for his bedroom, telling his wife and children he didn’t feel well. In the weeks ahead, his condition worsened. Paralysis spread throughout his body, and he lost


\textsuperscript{200} Oshinsky: 23. When using the word “white,” I recognize the historical implications embedded in the term. Whiteness here refers predominantly to people of Northern and Western European descent.
control of his bowels. Doctors diagnosed Roosevelt with infantile paralysis, or poliomyelitis.201

That fall, medical professionals and the Roosevelt family traveled with FDR back to Hyde Park. As the press gathered, Roosevelt smiled weakly from the train. The New York Times published an article announcing Roosevelt’s diagnosis of polio, which guaranteed the prominent New Yorker’s full recovery.202 In the weeks and months that followed, Roosevelt lived largely out of the political spotlight, focusing predominantly on recovery and rehabilitation. According to Roosevelt biographer Geoffrey Ward,

[Paralysis] had to be faced and fought, head-on, and that was something new for Franklin Roosevelt. To win that battle—which really meant simply not to lose it, not to allow his crippling to disable his career and destroy his future—would demand of him qualities not conspicuously displayed so far in his largely charmed life: patience, application, recognition of his own limitations, a willingness to fail in front of others and try again.203

Roosevelt, however, would never again use his legs. Instead, he followed an intensive physical therapy regimen to maintain strength throughout the rest of his body, and he projected an image of independence and invincibility.

While not necessarily aware of the extent of Roosevelt’s paralysis, the public undoubtedly knew about his polio diagnosis, as shown by the number of press articles immediately following his return from Campobello Island and in the decades following. Roosevelt garnered immediate and vocal sympathy with letters flooding in, especially

201 For a more involved history of FDR’s diagnosis and experience living with polio, see Hugh Henry Gallagher’s FDR’s Splendid Deception: The moving story of Roosevelt’s massive disability--and the intense efforts to conceal it from the public (Vandamere Press, 1999) and Geoffrey Ward’s A First-Class Temperament: The Emergence of Franklin Roosevelt (Harper & Row: 1989).
from others diagnosed with polio. As historian Daniel Wilson has written, these writers “were not seeking an accurate account of Roosevelt's own struggle with polio, but solace and reassurance that life was still worth living. Whatever the reality, the perception of Roosevelt's success gave them courage.” Initially, Roosevelt wrote many letters personally, offering words of encouragement and appreciation. As the piles mounted, Roosevelt’s secretaries took over the task of responding.

In 1924, Roosevelt’s friend, George Peabody, wrote to FDR, inviting him down to the supposedly healing mineral springs of Warm Springs, Georgia. Peabody owned the neighboring Meriwether Inn, and he had heard reports from a Georgia man who recovered from polio following a swim in the springs. Intrigued, Roosevelt traveled south, thus propelling his lifelong connection to Warm Springs. Taking daily swims and continuing with physical therapy exercises, Roosevelt later purchased the Meriwether Inn from Peabody in 1926 and established the Warm Springs Institute for Rehabilitation. Throughout his first decade of recovery and later as President of the United States, Roosevelt continued to visit Warm Springs, where he was embraced by local residents and could appear openly as a disabled man.

The very fact that Roosevelt returned to the public arena, first in vocal support of New York Governor Al Smith’s run for presidency in 1924 and later as governor of the state himself in 1928, and eventually as the president of the United States in 1932, offered hope to people across the country living with polio. Throughout the presidential election campaign for Smith and Roosevelt’s gubernatorial campaign in 1928, Roosevelt skillfully minimized his disability and avoided questions regarding his health. At the

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same time, he remained a public face associated with research for finding a cure against polio.\footnote{Wilson, 478.} By appearing to walk and avoiding the use of crutches, Roosevelt narrowed the opportunity for the public to question the extent of his disability. This appearance was strengthened by the absence of published photographs and film that would have depicted FDR in a wheelchair or the assistance he received from his staff when transferring from one location to another. The false images he crafted supported the idea that people could not only conquer polio in particular, but disabilities in general.

When learning about FDR’s experience as a person with a physical disability, we must not forget that his recovery and treatment was informed by the privileges of his whiteness and wealth. For most people with polio in the United States during FDR’s time, they could not afford the cost of travel or treatment to Warm Springs in Georgia. Rather, they received care from local doctors or whomever could have provided some form of treatment. Furthermore, Warm Springs was open to whites only. Eleanor Roosevelt asked FDR to establish a segregated “cabin” for black patients, which he refused to do, claiming that he did not want to disrespect the cultural norms of segregation in Meriwether County, Georgia. Instead, Roosevelt invested in a facility for polio patients at Tuskegee Institute in Alabama over a decade later in 1939.\footnote{Ward, A First-Class Temperament: The Emergence of Franklin Roosevelt, 767.} There are a number of reasons for the late investment in polio research and treatment for African Americans. Firstly, in the late 1930s and the following decades, polio was largely misunderstood and portrayed as a white person’s disease. This is due to the obsessive hygiene campaigns among white middle- and upper-class families that made them more susceptible to bacteria. Additionally, the advertising campaigns of white children with
braces that followed the 1938 founding of the Roosevelt-supported National Foundation for Infantile Paralysis—and the research tested by white doctors on white patients—supported this image. Finally, FDR had increasingly attracted black voters by his second term as president beginning in 1936. The move to invest $172,000 for the all-black Infantile Paralysis Center thus served Roosevelt’s own purposes as president for black and white voters alike: the Center hired black surgeons, nurses, and medical professionals—a rarity at the time, and it also maintained a climate of segregation in healthcare.

The rehabilitation and other forms of treatment that Franklin Roosevelt received differed not only from African Americans but from all other American communities that were not guaranteed the full rights of citizenship in the first half of the twentieth century. Understandings of disability and healthcare commingled with eugenic notions of immigration, which would have impacted how FDR perceived himself (or refused to see himself) as a disabled person. Disability historian Douglas Baynton has written extensively on the intersections of disability and immigration in early twentieth-century United States. According to Baynton, nonwhite races were often portrayed in relation to people with disabilities, “both of whom were depicted as evolutionary laggards or throwbacks.” He describes how people deemed “defective” were often displayed alongside “primitives”—or nonwhite persons—at World’s Fairs. Using language such as “defective” and “inferior” was a method of excluding immigrant groups from entering

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207 Williamson, Accessible America, 73.
the United States, and these words served to instill fear in Americans. With the influx of hundreds of thousands of immigrants, the United States aimed to build a racially “healthy” society to support eugenic ideas of better breeding. In Baynton’s words, “[t]he issues of ethnicity and disability were so intertwined in the immigration as to be inseparable.”

Roosevelt grew up hearing this kind of rhetoric, as many laws regarding immigration passed throughout his lifetime. Three years after FDR’s polio diagnosis, the United States passed the Johnson-Reed Act of 1924, also known as the Immigration Act. Employing the 1890 National Census, this law limited entry on how many immigrants could arrive in the U.S., and the federal government established further barriers to ban certain communities altogether. The 1890 National Census reflected fewer numbers of overall immigrants, as opposed to the millions who arrived annually in the first years of the twentieth century. Therefore, the U.S. government was able to reduce numbers of particular nationalities, which favored northern and western Europeans over southern and eastern Europeans. Asian nationalities, meanwhile, were banned entirely.

The 1924 Act built on the 1917 Literacy—or “Asiatic Barred Zone”—Act. Concerns regarding the number of immigrants who populated factories, coal mines, and the industrial economy at large fueled the federal plan to cap immigration numbers. The 1917 Act, widely approved by members of the House of Representatives and Senate, created caps based on one’s ability to read (in any language), political affiliation, and disability. People with epilepsy were deemed “undesirable,” and all immigrants from the

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210 Baynton, 48.
“ Asiatic zone” were banned from entry. Despite President Wilson’s attempt to veto the bill, Congress moved forward with its passage.²¹¹

The 1917 Act was also not the first of its kind; rather, prejudice against Asian peoples has had a longstanding history in the United States. The Chinese Exclusion Act of 1882 was repealed in 1952, although caps on Chinese entry to the U.S. remained. The Gentlemen’s Agreement of 1907, meanwhile, did not formally create restrictions to Japanese entry, but the Japanese also agreed to discourage emigration to the U.S. The 1924 Immigration Act violated the Gentleman’s Agreement, when a provision excluded “who by virtue of race or nationality was ineligible for citizenship.” This provision offended the Japanese and heightened tensions between the two nations.²¹² Throughout the 1910s and 1920s as the Great War threatened American economy and security, a fear of “yellow peril” spread across the United States, a subject which concerned FDR especially during his years as Assistant Secretary of the Navy. In 1923, he published an essay in Asia magazine titled “Shall We Trust Japan?” While visiting Warm Springs, Georgia, he wrote columns for the local Macon Telegraph. One such article in 1925 explored the “Japanese question” regarding American defense and racial concerns toward the Japanese.²¹³ Barriers to entry, for Asians and non-Asians like, and the forced internment of Japanese American citizens during World War II cannot be untethered from the influence of eugenics in early twentieth-century America.

These prejudices infused Roosevelt’s perceptions of disability, and it is likely he would not have perceived his own illness or the paralysis that followed as akin to the supposed inferiority of nonwhite groups. However, he would have been well aware of the second-class status of many white physically and intellectually disabled peoples. During his lifetime, people with significant physical, sensory, and intellectual disabilities were frequently portrayed in popular media as public charges sent to psychiatric institutions or on display as spectacles at freak shows or aforementioned World’s Fairs.\(^{214}\) Disability was something to entertain or be feared, and, despite the increased presence of peoples diagnosed with polio in the early twentieth century, physical disability often brought shame, financial burden, and the perception of weakness upon families across the U.S.\(^{215}\)


\(^{215}\) While FDR may have attempted to hide his disability, his administration introduced economic benefits for certain populations with the 1935 Social Security Act. Its passage, however, is complicated by the fact that the original Social Security Act did not offer provisions for disabled peoples. When the Social Security Act passed in 1935, the Social Security Board (later the Social Security Administration) created programs to support elderly populations. These benefit and assistance programs covered only certain populations based on profession and ultimately excluded many African Americans and women. While its impacts were initially limited in scope, “the Social Security Act, along with other New Deal social support and labor programs, launched a transformation in the nation’s political culture. Security had gained cardinal political legitimacy. It legitimized working-class demands for economic security and advanced workers’ ability to make a greater claim on national resources.” (Jennifer Klein, *All These Rights: Business, Labor, and the Shaping of America’s Public-Private Welfare State* (Princeton: Princeton University Press, 2003), 136.) Not until 1956 did President Eisenhower add such provisions with the Amendments to the Social Security Act. In 1974, the Nixon administration introduced Supplementary Security Income, where one’s qualifications was not based on prior work.

It is difficult to imagine Roosevelt’s position on economic and health insurance for people with disabilities, but such coverage was highly controversial for business interests and insurance companies that worried about managing program costs. The push for disability benefits among political figures, disability rights activists, and welfare reformers increased during and after World War II as more disabled veterans returned home. For more information on the history of the Social Security Act and provision of disability benefits, see John R. Kearney, “Social Security and the ‘D’in OASDI: The History of a Federal Program Insuring Earners Against Disability,” *Social Security Bulletin* 66, no. 3 (2005/2006).
2.2.3 Interpreting Difficult History at the Home of FDR, and a Review of Accessibility Recommendations

In reflecting on FDR’s lived experience as a disabled person and understandings of disability throughout his lifetime, interpretive staff at HOFR—and other sites contemplating how best to interpret place-based disability history—might consult with Julia Rose’s *Interpreting Difficult Histories at Historic Sites and Museums*. This practical guide provides case studies and delineates tools for historic sites to grapple with their own difficult histories. Rose’s methodology is informed by cognitive learning and emotional learning, and she has developed the strategy of “Commemorative Museum Pedagogy” (CMP) through research and fieldwork. CMP aims to “sensitively engage learners in working through their audiences’ anxious moments and resistance to the difficult histories.”216 In describing this strategy, Rose also describes the tools for developing ethical representation essential for crafting a nuanced, thoughtful interpretation of FDR’s disability for the public. Three building blocks act as scaffolding toward developing ethical representations, what Julia Rose calls the “Face,” the “Real,” and the “Narrative.” Developing the “Face” means emphasizing the humanity of the site or the historic actor being interpreted, depicting the subject as multidimensional and finding ways to make connections between these historic actors and visitors to the historic site.217 At the Home of FDR, this effort could take the shape of telling not only stories about FDR’s experience with polio, but how his family and friends responded to

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his diagnosis. How did his diagnosis change their lives, and how did they respond to the new conditions with which their father/husband/son/friend lived? Whether the visitor is disabled or has friends and family who have a disability, this form of interpretation has the potential to create bridges between past and present experiences.

In addition to the “Face,” Julia Rose calls for introducing the “Real” to difficult history interpretation. By this she means including “artifacts, images, documents, numbers, dates, and a variety of other rich empirical evidence to construct the Face and build Narratives to ethically recall difficult histories.” Integrating the material culture of the site adds to the multidimensionality of understanding FDR as a disabled person. Disability historian and Smithsonian curator Katherine Ott refers to this material culture as “disability things,” or “the artifacts owned and used by people with disabilities and those that are used upon them” that give a “tactile, sensory dimension” to the past. These disability things both inform and require visitors to question “other issues, such as stereotypes, scapegoating, stigmatizing language, discrimination, patient rights, and state power.” HOFR contains several objects pertaining to his disability, although many of them do not receive thoughtful interpretation. When visitors enter Springwood, they freely roam the house while the interpretive guide is available to answer questions that emerge. The wheelchair and ramp on display in the sunken living room are two opportunities for interpretation. Although there are current barriers for full viewing, the railing on the second-floor landing, as well as the railing beside the toilet neighboring the secretary’s study, provide two other such opportunities. These wheelchairs, ramps, and

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railings all indicate the accommodations FDR created to enhance his own accessibility through the home. Due to the large number of tourists in the house, it is difficult to implement this form of interpretation, but museum visitors and interpretive staff can explore the “Real” more deeply at Top Cottage. Top Cottage, a ten-minute drive from Springwood and part of the ticket to HOFR, was Roosevelt’s get-away when he returned to Hyde Park. As tours to Top Cottage reach capacity at eleven visitors, interpretive staff have the chance to tether apart the physical accommodations of the home in a more intimate setting. With a smaller tour group, HOFR staff encourage a safe space where visitors can settle into replica FDR-era couches and ask questions about how FDR navigated the world around him.

Finally, Rose’s third building block for ethical representation is that of the Narrative, which ties together both components of the “Face” and the “Real.” According to Rose, “[n]arratives explain how the experiences of the historical Others were the results of ideologies and organized actions in a historical context.” Narrative presents the opportunity for interpretive staff to discuss perceptions and medical understandings of disability in the 1920s and 1930s, and how this shaped FDR’s perceptions of himself. Why did FDR reject the use of wheelchairs and crutches, and what purpose did it serve to appear strong and independent? How did his experience with disability relate to and differ from others”? Asking these questions will inevitably make visitors uncomfortable, as it requires addressing the outdated and false perceptions of disabled peoples as weak, dependent, and subject to becoming “public charges.” For this reason, interpretive staff must not stop there. Rather, they must also address how, despite FDR’s own struggle to

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220 Rose, Interpreting Difficult Histories, 117.
identify as a person with a disability, disabled activists in the decades following FDR’s
death and the passage of disability rights laws (explored in Chapter One) have paved the
way for inclusion, citizenship rights, and the rejection of stigma. While these efforts are
ongoing, this kind of interpretation will serve to complicate the understandings of FDR’s
disability and the progress Americans have made toward enhancing inclusion for people
with disabilities in the public realm since Roosevelt’s death in 1945.

These suggestions are only a handful of possibilities that HOFR could explore
further. In describing above the history of FDR’s polio diagnosis in relation to early
twentieth-century conceptions of disability, eugenics, and racial science, I have attempted
to complicate the portrayal as FDR as a one-dimensional person—not as the man who,
despite all odds, overcame his disability and became President of the United States.
Rather, he is a man, born into wealth, handed tremendous privileges, and carried the
“price of the ticket” with his white skin. He, unlike thousands of other diagnosed with
polio in the early 1920s, had the opportunity to find the best care, travel great distances to
receive treatment, and all the while dissociate himself from the lived experiences of
others with physical, intellectual, and sensory disabilities across the United States.

If interpretive staff present the one-dimensional view of FDR as the “only
President who served four terms… and he was disabled!”, then HOFR risks framing
Roosevelt as a supercrip. This term refers to the depiction of a disabled person intended
as inspiring, but often results in framing disability as something to be conquered or
defeated and people with disabilities as tragic victims.221 The word first emerged

221 Jeffrey J. Martin, “Supercrip Identity,” Handbook of Disability Sport and Exercise Psychology (Oxford
Scholarship Online: October 2017).
http://www.oxfordscholarship.com/view/10.1093/oso/9780190638054.001.0001/oso-9780190638054-
chapter-15.
informally among the disability community in the late 1970s and was later adopted as a formal term among disability studies scholars. As Sami Schalk writes,

> Several disability studies scholars have claimed that we must study representations of disability because these are the images of disability with which people most often engage and which most impact individuals’ perceptions and treatment of real people with disabilities. If we take such arguments to heart, then nuanced engagement with supercrip representations is critical to the rigor and vitality of the field.\(^{222}\)

Schalk and other disability studies scholars explain how images of the supercrip and other heroic representations of disabled peoples often frame the disability experience as one based “on individual attitude, work, and perseverance rather than on social barriers.”\(^{223}\) This imagery is not only harmful to people with disabilities but also perpetuates an ableist culture that frames disabled people as “other” and that it is their responsibility to accommodate to a nondisabled world. By “supercriping” Roosevelt, interpretive staff may unintentionally victimize and isolate visitors with disabilities to HOFR today.

This is not to suggest that Roosevelt did not accomplish great feats during his lifetime. It is, indeed, remarkable that he served four terms as president and is known as having led the United States through the Great Depression and World War II. However, this image of the heroic American with a disability must be complicated by the reality of Roosevelt’s unique situation and inherent privileges. By incorporating the strategies presented by Julia Rose in *Interpreting Difficult History*, as well as the recommendations I have described above, staff at the Home of Franklin D. Roosevelt National Historic Site have the potential to create a more welcoming, inclusive, and diverse museum space.


\(^{223}\) Schalk, “Reevaluating the Supercrip,” 73.
2.2.4 Closing Thoughts

As guests settle in the wicker furniture on the west-facing porch, they look out toward the forest, sensing the slope of the Hudson Valley ahead of them. They cannot see the river, but their gaze travels through the thicket of deciduous trees, scanning for signs of the water’s reflection. They know how important this property was for Franklin D. Roosevelt, and the eventual cottage he built to perch on this hillside. Top Cottage was Roosevelt’s retreat, not only from the White House, but from the crowds that lingered outside his childhood home, Springwood, and his nagging mother and the rest of his family. Today, visitors to the Home of Franklin D. Roosevelt National Historic Site feel transported on the winding ten-minute shuttle ride to this oasis of sorts. They grasp at the physical surroundings and landscape of Top Cottage, seeking the relief Roosevelt must have felt upon arriving. An interpretive guide leads a small group, no larger than eleven, into the house—constructed by Roosevelt and his longtime friend and architect Henry Toombs—and points out the subtle ways the architecture minimized physical barriers. There is no lip in doorways that would have obstructed entry, the windows are set at a lower height that would have allowed easy viewing access to the Hudson Valley, and everything would have been within reach for a wheelchair user on the first floor. On this sprawling back porch, as the interpretive guide and visitors chat about the guests Roosevelt entertained here, they may not notice the earthen mound that descends from the northern end of the porch. It is not immediately obvious, but this small lane of compacted soil was a path for Roosevelt to descend from the porch into the woods around him. This was his ramp. Today, there is only a trace of the eroding earth he once rolled his wheels over, but these traces mean everything. They connect the past with the
present, the subtle indications of how FDR made the world around him accessible. And today these traces allow us to reflect on both the dismantled and enduring barriers embedded in our landscape.
CONCLUSION

NEW DIRECTIONS IN NPS ACCESSIBILITY

The current inventory [of national park units] does not adequately reflect the full breadth of the American experience, or offer opportunities to forge lasting connections with a changing population.224

Our cultural heritage is diverse and complex. NPS programs continue to make advances in reflecting social, economic, and cultural trends and themes, not just politics and war, and embrace the experiences and perspectives of all Americans, considering race and ethnicity, class, and gender.225

We believe that grassroots-driven initiatives must be given a much greater role, especially in cultural and historical interpretation. If the gaps in history and culture are going to be filled in, such as Latino history, then the people whose history is being interpreted need to have a greater part in determining their nationally significant stories. This will require improved communication between the NPS and grassroots organizations as well as engagement of scholars.226

In 2012, the National Park Service System Advisory Board made the above statements in “Planning for a Future National Park System: A Foundation for the 21st Century.” The creation of this document followed a 2010 request from then-NPS director Jonathan Jarvis to meet two particular needs for the agency: identify and expand upon all natural and cultural resources that convey the American experience, and create new partnerships to ensure the protection and interpretation of “ecological regions, cultural themes, and stories of diverse communities.”227 The excerpts above outline the particular challenges and goals for diversifying community partnerships and the stories that are told at national parks across the nation. When drafting this document, the NPS System Advisory Board focused on developing interpretation on the cultures and heritage of people of color,

women, and LGBTQ communities. Since publishing this document, the National Park Service has striven to meet these goals through initiating theme studies and identifying new national park sites that more accurately represent the breadth of American experiences. These themes of inclusion and diversification, with regard to race, ethnicity, and gender, follow a trend of similar scholarship that emerged especially near the one-hundredth anniversary of the National Park Service in 2016. However, absent from much of this scholarship, as well as “Planning for a Future National Park System,” are stories of people with disabilities in the United States.

As I have illustrated in this thesis, the National Park Service has successfully developed physical and programmatic accessibility across many of their sites. Dismantling architectural and interpretive barriers through partnership and collaboration has allowed for the inclusion of broader audiences. But it is not enough to make places accessible. Places must also include the stories of people with disabilities, in the past and the present. When people “see” themselves in the histories depicted, they sense a greater connection with the past and feel welcomed into the space. When marginalized groups are excluded from narratives at historic sites and house museums, the representation of their stories is often dictated by people outside of these groups. As the authors of

*Rethinking Disability*, write

> In a society pervaded by stereotypes and unrepresentative images, it is virtually impossible not to absorb the prevailing perceptions and attitudes. The result of this is that in arenas where society is depicted (television, radio, film, newspapers, magazines, advertisements—and museums) most minority groups have been invisible. Where representation has occurred the depictions have been stereotyped or cliched.228

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For museums—including national parks and historic sites—committed to social justice and civic engagement, it therefore becomes their responsibility to tackle these stereotypes and offer more accurate presentations of historically marginalized peoples. This is best achieved through collaborating with organizations by and for people with disabilities and developing more nuanced interpretation and representation.

On this front, the National Park Service has a wealth of interpretive opportunities that it has not yet endeavored to explore. The Home of Franklin D. Roosevelt in many ways has an obligation to tell disability stories, as these stories are deeply embedded in the former president’s lived experience across the museum’s physical landscape. Working with this site has revealed both the accomplishments and ongoing challenges to making the built environment accessible and how to interpret the history of disability and accessibility. However, there are sites across the U.S. with disability stories that, while less obvious than at the Home of FDR, could reach new audiences and build partnerships with local organizations. As there are few examples that have explicitly collaborated with people with disabilities, it is useful to draw from case studies that engage other traditionally underrepresented visitors to parks.

The essay “Engaging New and Diverse Audiences in the National Parks: An Exploratory Study of Current Knowledge and Learning Needs” describes the various challenges as well as possible keys to success in diversifying visitors. Contributing authors Rebecca Stanfield McCown, Daniel Laven, Robert Manning, and Nora Mitchell explain how one’s race and ethnicity can inform park visitation, and barriers “can include transportation, knowledge, expense (both internal to parks and external), and the
interpretative themes of parks.” While this article focuses predominantly on visitation from people of color, it models how parks can attract other nontraditional visitors, such as people with disabilities. To make such changes, the authors recommend six themes for successful diversification:

- Community Involvement
- Program Sustainability
- Inclusive Interpretation and Histories
- Workforce Diversity
- Supportive National Park Service Climate
- Media and Communication

These six tools require authentic and ongoing commitment from parks, museums, and historic sites to engaging with people with disabilities. The National Park Service has, in many ways, already committed to many of these initiatives. In 2015, the National Park Service Accessibility Task Force published All In! Accessibility in the National Park Service: 2015-2020. This booklet outlines the list of challenges, opportunities, and recommendations for implementing an accessibility plan. This is the most concise and comprehensive guide to meeting accessibility goals to date, and, with one year left to go, the National Park Service has met these strategies with varying degrees of success. Some of the strategies include developing “a multipronged training plan aimed at sparking organizational change,” partnering “with national advocacy groups and disability organizations to assure new projects are universally designed,” and creating “a process for parks to self-assess at a high level the accessibility of key park visitor experiences.”

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As described in Chapter One, many of the goals remain in progress and struggle due to oversight and funding limitations.

Meanwhile, in fall 2018, the NPS launched the Employees for the Advancement of People with Disabilities Employee Resource Group. This systemwide community allows employees to interact and build connections with one another, thus further enhancing accessibility and inclusion awareness and educational opportunities. While the NPS Accessibility Program faces challenges due to funding and oversight (as described in Chapter One), it annually trains hundreds of NPS employees scattered across the nation to meet accessibility compliance standards. Chapter Two described other keys to success, including “Media and Communication” and “Community Involvement.” The Home of Franklin D. Roosevelt National Historic Site has initiated various methods for inclusive access initiatives, including an array of services like American Sign Language interpreters and a Braille interpretive guide, as well as partnerships with the local independent living center. However, the NPS at large still lacks meaningful inclusive interpretation and histories of people with disabilities.

To develop such interpretation on the history of people with disabilities, historic sites and museums can turn to NPS-produced theme studies and public history scholarship as models for their own work. The 2006 anthology *Slavery and Public History: The Tough Stuff of American History* provides lessons for interpreting “difficult histories” for public audiences through a lens of the history of slavery in the United States. The book’s contributors include NPS historians, museum professionals, academic historians, and consultants; together, their work addresses the challenges of highlighting complex and nuanced history both in the classroom and site-based work. To make these
changes in the museum setting, historian Joanne Melish outlines that staff must be persuaded to “recast their interpretation to incorporate” an array of perspectives and experiences, the museum’s board and its donors must accept these changes, and the front-facing interpretive staff need retraining “to tell a new story that is less celebratory.”\textsuperscript{231} Museums, perhaps uncomfortable with acknowledging their “difficult histories,” will likely face resistances to these changes from both the staff and visitors, but the inclusion of the history of slavery—as well as that of other subjugated communities throughout American history—ultimately achieves “a more textured and balance account” of the American experience.\textsuperscript{232}

Two recent NPS theme studies depict successful initiatives to make history more representative of diverse populations. In 2011, a series of federal committees emerged to support the formation of an American Latino Heritage Theme Study—including the White House Forum on American Latino Heritage, the NPS Advisory Board’s American Latino Scholars Panel, and the NPS-led American Latino Heritage Initiative. Former Secretary of the Interior Ken Salazar, himself of Hispanic descent, oversaw these committees and programs. These committees selected Latinx scholars and subject matter experts, commissioning them to write on the myriad of American Latinx experiences that shape and contribute to the United States. The resulting NPS theme study \textit{American Latinos and the Making of the United States: A Theme Study}, published in 2013, features essays on “Empires, War, Revolutions,” “Sports,” “Science and Medicine,” and


“Struggles for Inclusion.” In writing these essays, the authors have helped the National Park Service to identify sites of cultural and historical significance.233

One year later, the National Park Service announced its LGBTQ Heritage Initiative in 2014. Megan Springate, editor of the 2016 publication LGBTQ America: A Theme Study of Lesbian, Gay, Bisexual, Transgender, and Queer History, reflected on the process of developing this study in the 2017 article “The National Park Service LGBTQ Heritage Initiative: One Year Out.” Springate explained how this theme study (along with the American Latino Heritage theme study) emerged from NPS efforts beginning in the 2000s to heighten awareness of civil rights-focused sites across the U.S.234 In creating the LGBTQ theme study, Springate and her collaborators—who included NPS staff, historians, archeologists, and the public at large—identified sites of LGBTQ importance and weighed important questions about the project’s goals. The process to developing such a theme study was slow, deliberate, and highly participatory. Those involved decided that the publication must be thematically organized, inclusive and intersectional, and, “[w]hile most theme studies focus on properties where historic events took place more than 50 years ago, the LGBTQ theme study needed to include more recent history.”235 This last point is especially critical, as the criteria to designate a site to the National Register of Historic Places dictates that properties less than fifty years

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234 Other theme studies that explore civil rights-focused sites include Civil Rights in America: Racial Desegregation in Public Education in the United States (2004), Civil Rights in America: Racial Desegregation of Public Accommodations (2009), and Civil Rights in America: Racial Voting Rights (2009). The full list of NPS theme studies can be accessed at https://www.nps.gov/subjects/nationalhistoriclandmarks/full-list-of-theme-studies.htm.

are typically ineligible for consideration.”236 However, many sites significant to LGBTQ communities—as well as other historically marginalized groups—have only formed in the last fifty years. Since the 2016 publication of LGBTQ America, the National Park Service has made concessions regarding the fifty-year mark criteria with the creation of Stonewall National Monument, commemorating the former bar where in 1969 a protest of LGBTQ community members and activists broke out against a police raid. Other changes to the NPS have included exhibits on historic LGBTQ experiences at both Rosie the Riveter/WWII Home Front National Historical Park and Independence National Historical Park.237

Through learning from the American Latino and LGBTQ heritage theme studies, as well as from scholarship on interpreting slavery at historic sites, the National Park Service can deepen its interpretation of disability history. Not only is there a wealth of national park sites—including battlefields, wilderness areas, mineral springs, monuments and memorials, and historic sites—with disability history embedded within their very fabric, there are also sites across the United States that have either not yet been identified by the NPS or do not receive substantial interpretation as having national significance to the history of people with disabilities. For example, how might the National Park Service interpret 50 United Nations Plaza Federal Office Building in San Francisco, former home to the Department of Health, Education, and Welfare, where disability rights activists staged a sit-in in 1977 until the secretary of HEW agreed to sign the Section 504 regulations? Or what about the steps of the Capitol, where in 1990 disability rights

237 Springate, 400.
activists descended the stairs to convey the extensive barriers they endured? Both of these sites, while listed on the National Register of Historic Places, do not weave in the history of disability rights activism.

The history of disability rights activism can potentially drive this research in place-based disability history, as it would serve to depict grassroots efforts to increase equity and access across the United States. Currently, the majority of existing sites on the National Register of Historic Places that weave in disability history do not necessarily reflect rights-based cultural and social histories. A handful of National Register sites highlight the significance of former psychiatric hospitals, rehabilitative centers, and National Homes for Disabled Volunteer Soldiers—all of which pertain to care, treatment, and traditionally medical models of disability. Other sites may inadvertently support the “supercrip” mythology surrounding significant persons in American disability history. Franklin D. Roosevelt’s Little White House in Warm Springs, Georgia, and Helen Keller’s birthplace, Ivy Green, in Tuscumbia, Alabama are today state historic sites and National Historic Landmarks. Without counterbalancing these narratives with the stories of social movements and ordinary people with disabilities, the interpretation at these sites affiliated with famous disabled peoples may uphold the “tragic victim” and “hero” statuses while silencing more grassroots efforts. While it is important to preserve sites affiliated with Helen Keller, Franklin D. Roosevelt, and other famous Americans with disabilities, the National Park Service—as well as non-federal sites that interpret American history—must draw out the histories of everyday actions.238

238 A full list of National Register sites that have “disability stories” can be found at https://www.nps.gov/media/article-search.htm&q=Disability+History&fq%5B%5D=Type%3A%22Place%22.
It is for this reason that the National Park Service should invest in a theme study or an initiative of similar depth and impact to identify and expand the history and interpretations of sites that contain “disability stories.” To my knowledge, the only example of a systemwide National Park Service effort to convey these stories is through the “Telling All Americans’ Stories: Disability History” series, which I researched and wrote in 2017. This series utilized place-based studies in addressing critical themes in the history of disability in the United States, including education, military, treatment, and disability rights. I identified sites of historical and national significance across the nation, which vary in their degree of disability history interpretation.

While these “Telling All Americans’ Stories” essays may serve as a launching pad to learn more about American disability history, the series has multiple shortcomings and is insufficient in illustrating the complexities and nuances of the array of disability experiences, past and present. Firstly, the essays did not exceed 1000 words. While this is useful for a public and online audience, the essays are too brief to deeply examine important people, sites, and their intersections with social movements, political processes, and citizenship rights. Additionally, the series does not address topics as they relate to classism, racism, and sexism. Due to the brevity of this work, my supervisors, colleagues, and I decided we did “not want to do injustice by simply skimming the surface of [these subjects’] complexities.”239 As a result, these essays are absent of the ways that gender, race and ethnicity, and class inform disability experiences. A theme study would assist in drawing out these nuanced histories. Possible questions may include: How can we more

effectively interpret the Home of the Aged at Harriet Tubman National Historical Park to understand the ways in which race shaped the lived experiences of people with disabilities—and how people of color were perceived as disabled—in the late nineteenth and early twentieth centuries? At Women’s Rights National Historical Park, staff could ask: A persistent fear of those against women’s suffrage in the early twentieth century argued that women were predisposed to mania and hysteria; how did perceptions of mental illness shape women’s experiences in the fight for suffrage? At Stonewall National Monument, NPS employees could grapple with the former American Psychiatric Association’s designation of homosexuality as a mental illness; how has the LGBTQ community intersected with disability communities in the past and present? And, for the National Park Service at large, what sites have we not identified that help illustrate the experiences of past and present people with disabilities across the United States?

These are only a handful of questions with which an NPS theme study or similar project could explore. In so doing, the NPS has the opportunity to engage new audiences, build meaningful partnerships, and continue to create an equitable experience for all visitors. Wherever, however, and whenever this work commences, the National Park Service must lead with the guiding disability rights slogan, “Nothing about us without us.”
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