dehumanization

VS

DIGNITY

National Association for Retarded Children
INTRODUCTION: Because of the importance of developing and maintaining humane practices in institution work — and the corresponding danger of "dehumanization" when practices deteriorate, it is important for institution staff to constantly study, discuss and examine those systems and practices which adversely affect the dignity of the patient.

The purpose of this booklet is to illustrate a few of the ways which on the one hand lead to the process of dehumanization, and on the other to increased dignity. I hope that the booklet will stimulate further discussion and encourage staff to explore new ways to enhance the self-esteem of patients. No doubt you will have your own ideas about those things which contribute to dehumanization and dignity.

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dehumanization is:

- Being treated as a prisoner—instead of a patient.
- Being called "Hey, you."
- Being shouted at when a normal voice would do the job.
dehumanization is:

Having only certain day for bathing & shaving.

Being behind locked doors. Being subjected to standards set for the least capable patients.

Not being able to obtain dentures, eye glasses or hearing aids.
dehumanization is:

Being expected to "Participate," even in childish games, regardless of your feelings in the matter.

Having "State Hospital" stamped on your clothing.

Being brought to the hospital by a sheriff or police officer.
dehumanization is:

- Having to ask for personal items.
- Being treated & referred to as a diagnosis.
- Having 40 room-mates.
dehumanization is:

Being subjected to the "batch" process.

Having mail & packages opened & censored.

Being discussed as if you were not present.

There seems to be a family history of this sort of thing.
DIGNITY IS:

Privacy in dressing, in the lavatory and the showers.
Receiving encouragement & an occasional word of praise.

Being recognized as an individual—with individual needs.

Having someone care enough to listen to you. Not being ignored or humored.
DIGNITY IS:

Having a place of your own for personal belongings.

Being able to see yourself in a full length mirror & having clothes that look and fit appropriately.

Being told "why" about things affecting your health & welfare.

We're moving you to the new building, Mr. Anderson, the new facilities there will help in your treatment.
DIGNITY IS:

Here’s your pay for the past weeks work, Stan.

What do you think of our new plan, Miss Wilson?

Having money in your pocket for ordinary purchases.

Being paid appropriately for work performed.

Having an opportunity to contribute your ideas or suggestions.
The suggestions for the cartoons in this booklet were contributed by the staff and patients in Minnesota's state hospitals for the mentally ill and the mentally retarded. The Humane Practices Committee, consisting of Central Office and institution staff, also contributed to its development. Miriam Karlins, Director, Public Information, Minnesota Department of Public Welfare

Copies of this booklet are available from: The National Association for Retarded Children
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