

Deathmaking of Unwanted and Devalued People

One of the most controversial elements of Dr. Wolfensberger's teaching and writing was on the topic of "deathmaking," a word that he coined in the late 1970s to reflect all the many ways, from the direct to the indirect, in which people's lives could be abbreviated--in other words, the many ways in which people could be "made dead." Dr. Wolfensberger noticed that the legalization of abortion in the US in 1973 led very quickly to admissions of infanticide of impaired newborns, by medical personnel in prestigious hospitals, and that these admissions were accompanied by calls to legitimize such infanticide as well. At about the same time, there began the first open calls for the legalization of some form of so-called "euthanasia" for impaired people. Dr. Wolfensberger perceived all these developments as signs of decadence from societal values that had once upheld the sanctity of all human life, to ones where concern with individualism (what any given person wants), sensualism (what is convenient and feels good), and utilitarianism (what yields the most benefits and brings the least costs) trumped higher values of altruism, concern for others and the common good, an acceptance of the inevitability of hardship and suffering in each human life, and moral absolutes such as the prohibition of killing.

He also began to see that apart from direct ways of killing such as abortion, infanticide, and so-called "euthanasia," there were many other things that could be done, and were being done, to societally devalued people that indirectly brought an early end to their lives. Here are two examples of these indirect deathmaking measures. One is "dumping" impaired people out of services into so-called "independence," and so many of these dumped people ended up near the bottom rung of society, in the street culture, in abject poverty, homeless or nearly homeless, with multiple untreated medical conditions, even in jail and prison where they were very likely to be violated. Another indirect measure of shortening people's lives is the widespread use of psychoactive drugs that have very harmful effects on virtually every bodily system, especially over the long run. These drugs are widely given to devalued people; in some classes of devalued people, almost 100% of them are on one or more of these drugs.

Dr. Wolfensberger further perceived that many of the progressive people in human services, and many of those who had supported earlier service reforms such as deinstitutionalization and normalization, were now giving their support to at least some of these deathmakings, most especially abortion and so-called "euthanasia." His initial teaching and writing on the topic of deathmaking was to alert people to the fact that it was happening. But as time went on, he found that he had to shift to try-

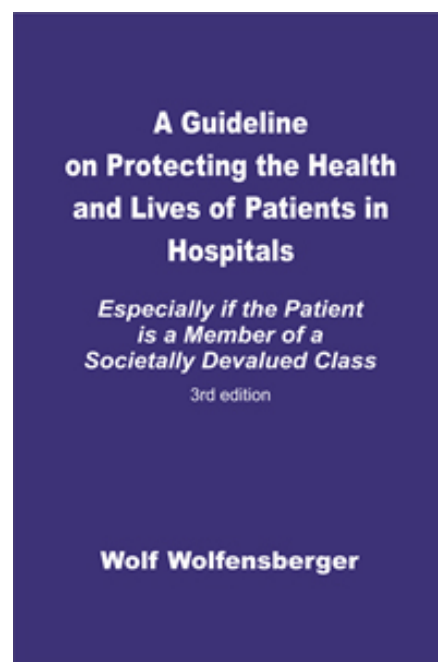
ing to convince them not to support it but instead to protect and defend the lives of all devalued people. However, as various forms of deathmaking gained wide societal acceptance, his became very much a minority voice. And people who had once supported and embraced his earlier teaching now began to reject him, to reject this cry against deathmaking, and even to reject his other teachings on normalization, Social Role Valorization, Citizen Advocacy, cautions against dangers associated with the new community services, and virtually anything he said or wrote. As he put it, he could have “done Normalization the favor of dying when [he] was at the peak of [his] reputation and effectiveness.” (Wolfensberger, 1999, p. 97)

Dr. Wolfensberger self-published a small monograph on the topic entitled *The New Genocide of Handicapped & Afflicted People*--self-published because no other publisher would take it on.



He also recognized that hospitals had become very risky places for devalued people, for several reasons: sickness reduces one's capacities and competence, the complexity of contemporary medicine leads to many medical errors, and medical personnel often hold negative attitudes about the value of the lives of impaired people, all of which endangers devalued people when they are in hospital. He therefore wrote (and again self-published) a

book of instruction and advice for those who want to protect devalued people in hospital, to insure that they would come out alive, entitled *A Guideline for Protecting the Health and Lives of Patients in Hospitals, Especially if the Patient is a Member of a Societally Devalued Class*.



Though teaching about deathmaking, and the broader topic of societal decay and its implications for devalued people and for services to them, cost Dr. Wolfensberger a great deal of respect and prestige from human service circles that had previously listened to his teaching, nonetheless a small

group of his associates and former students have continued to teach and write on these same topics--of course, always to relatively small audiences.

Susan Thomas (April 2017)

References

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