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I. INTRODUCTION

As we approach the twentieth anniversary of the Americans with Disabilities Act (ADA),¹ the disability community finds itself facing new challenges and opportunities. The ADA has been amended to strengthen its protections through the ADA Amendments Act (ADAAA);² the Obama Administration has expressed a renewed commitment to disability rights;³ and disability civil rights have been recognized internationally through the UN Convention on the Rights of Persons with Disabilities.⁴ However, barriers to enforcement of disability rights persist, negative public perceptions of disability rights linger, and many courts remain committed to the old charity and medical models of disability.⁵

The Second Jacobus tenBroek Disability Law Symposium, held on April 17, 2009 in Baltimore, Maryland, brought disability advocates together from around the world to discuss "New Perspectives on

for individuals with disabilities.²²

Ten years after *Olmstead*, concerns remain about the states' capacities to provide community-living services to beneficiaries that need and want such support. Many states are working to reform their existing long-term care delivery systems to build the community-based

infrastructure needed to deliver these services. To appropriately allocate the resources essential to respond to needs, the federal government should facilitate a uniform functional assessment of need across the existing institutionalized populations in each state rather than simply relying on medical diagnoses.

Furthermore, it is essential that people with disabilities living in the community have access to competent assistance. The federal government should encourage states to invest in their community-based-services workforces and ensure access to competency-based training, living wages, and benefits. Federal and state governments should also invest in moving people from institutions to communities and in helping people to continue living in their communities. Deinstitutionalization is not as simple as opening doors and letting people out. Individuals need community services and supports to assist them before and after they leave an institution.

Federal and state governments can facilitate successful transition by developing a cadre of community-living coordinators knowledgeable in housing, personal assistance, transportation, employment, social, and other services and programs that help people remain in, or successfully transition to, their communities. These programs and services could be based on "community village" models currently in place in a variety of neighborhoods.²³ However, the need for additional infrastructure of needs assessment, workforce development, and care coordination cannot be used as an excuse to keep people in institutions. Many people inappropriately remain in institutions and have been waiting ten years for

unlikely to pursue a legislative strategy to change the requirements of the

disability rights laws because of the recent passage of the ADAAA. The

in the past, such as reaching, sitting, and interacting with others.⁸⁰ The EEOC has previously issued guidance indicating that these are major life activities, but regulations will be given greater deference by courts than

substantive transformation of disability rights law and policy across the globe.

Espousing the concept of freedom is a primary interest of the United States. The United States has been a leader in the development of the civil rights perspective of disability issues, but it has room to improve its disability rights perspective. By joining the Convention, the United States may internalize the best international disability-related values and externalize its own disability-related values. By joining and participating actively in the Conference of States Parties and the Commission on the Rights of Persons with Disabilities, the United States may ensure the

