

Introduction

This is an investigation of a public policy's effects on the people who encountered it. It is customary to frame such studies within analyses of partisan politics and interest groups, and we will attend to these subjects. We are primarily concerned, however, with the impact of ideas on experience.

One cornerstone of this book is an analysis of the disabilities presented by veterans of the Union army as they negotiated the federal government's system of military benefits. This cornerstone, comprising tangible evidence such as amputations and hospital confinements, would appear to have little to do with any form of ideas, but the reverse is true.

Benefits for Civil War veterans were primarily shaped by American society's dominant attitude toward

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disability, which has been termed the “medical model.” In this conception, which persists today, disabling conditions signify deviation from “normality,” and the first obligation of the worthy individual with a disability is to obtain a “cure” or rehabilitation. Discussions of this paradigm typically locate its origins in the rise of the modern concept of normality and in the medical profession’s crusade for respectability, both of which took place in the nineteenth century. Common parlance, however, indicates a longer history of identifying individuals by their disabilities: “deaf,” “blind,” “cripple,” and “lunatic” were used as nouns well before the nineteenth century, implicitly employing the medical model’s equation of personhood and disability.¹

The alternative understanding of disability has been called the “social” (or “rights-based”) model, which redirects attention from the individual and his or her disabilities to the medical model’s intolerance of them. Viewed in this way, disability is essentially the product of society’s preoccupation with “normality.” In a host of ways, from viewing impairments as defects to restricting public policies and physical facilities to the “able-bodied,” “normal” society has employed the medical model to turn *disability* into *inability*; it is society that should be rehabilitated, not just the individual. Although this study is about the effects rather than the formation of public policies, we point out ways in which disability models informed policies on veterans’ benefits.²

Perceptions have affected Americans’ experience of disability in another way. Scholars have likened disabilities to

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stigmata, focusing on the strategies adopted by individuals to cope with social and institutional reactions to a disabling condition. Because virtually all empirical studies of the subject have focused on our own time, there is considerable scope for exploring stigmatization in the past.³

Military benefits may appear to be an ill-fitting framework for studying stigmatization. Much of the strategy for coping with stigmatized conditions consists of concealment to pass for “normal,” yet applicants for military benefits were required to make public presentation of potentially stigmatizing disabilities. Because it offered compensation to those who “sacrificed health, competence, ... and the certainties of a comfortable old age, all for the sake of battling for the old flag and the perpetuity of republican institutions,” the federal government seemed to view veterans’ disabilities not as signs of “shameful differentness” but as “prestige symbols.”⁴

Nonetheless, exploration of these benefits offers unique opportunities for assessing stigmatization of people with disabilities. We cannot assume that veterans always understood their own disabilities as prestige symbols. For example, though most amputees in a penmanship competition described their wounds as “honorable scars,” one veteran admitted that “to be a permanent cripple for life” meant losing “our place in society,” and another wrote that he “might as well be black.” And if a missing arm did signify patriotic sacrifice, what about chronic diarrhea resulting from army food, or a former prisoner of war’s “spells of melancholy”? Disabling conditions were not necessarily equivalent, and

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Private Samuel H. Decker, 9th U.S. Artillery, and his “honorable scars.” (Library of Congress)

we therefore examine patterns in the presentation of disabilities and official responses to them as clues to veterans’ attitude toward their disabilities.⁵

This investigation’s second cornerstone offers another reason to investigate stigmatization. Analysts acknowledge

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“Result of Appointing a Veteran as Postmaster.” Not everyone saw veterans’ disabilities as “prestige symbols.” Cartoon from *Frank Leslie’s Illustrated Newspaper*, Feb. 11, 1865. (Musselman Library, Gettysburg College)

that membership in a racial or ethnic group can itself constitute a stigma, thereby compounding the effects of disability. An African-American penmanship competitor, for example, wrote that “I don[’]t expect to secure a position as *clerk*, that being proscribed on account of my *color*.” Because this book is concerned with the implications of race and ethnicity in

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the veterans' benefits system, we also search for distinctive responses to being an African American or an immigrant *and* having a disability.⁶

We have chosen race and ethnicity as our second cornerstone because these were especially potent ideas in post-Civil War America. Convictions about essential differences between whites and other races inevitably extended to the veterans' benefits system. African Americans who applied for a pension or admission to a soldiers' home brought perceived differences to the forefront; likewise, applicants with names such as Colobarzo or Gapczenski, though they had lived in America for decades, were reminders of a gathering threat to the nation's "racial integrity." We examine the experience of African Americans and immigrants in the Civil War benefits system, to identify tangible consequences of friction between whites and "other" groups.

Proceeding from these cornerstones, this book concentrates on administration rather than formulation of policies on veterans' benefits for two reasons. First, a number of thorough studies have traced the rise and development of benefits for Civil War veterans. Second, a focus on race and ethnicity finds little to examine in veterans' policy creation. Laws and regulations regarding veterans' benefits dwell on documenting military service and ascertaining disabilities rather than on beneficiaries' characteristics; the policies are on their face largely race neutral.⁷

This *de jure* neutrality did not perforce extend to policy administration. The Pension Bureau employed its own army

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of reviewers, referees, and clerks, yet it was part of a federal bureaucracy that was only beginning to evolve into a fourth branch of government. Functioning primarily as a clerical workforce, executive-branch agencies had developed mere rudiments of the expertise and independent authority needed to plan, manage, and regulate the activities of a national state.⁸

The Pension Bureau occupied a complex place in this evolution. On the one hand, the Bureau's complement was largely clerical, with employment based on veteran preference: as late as 1904, though it had developed a middle-management cadre of deputies and chiefs, more than three-quarters of the Bureau's 1,690 workers were clerks, and one-quarter of all employees were veterans (supplemented by ex-soldiers' survivors, who also received hiring preference). Moreover, in Chapter 2 we acknowledge Congressional intervention in decision making and the Bureau's failure to gain direct control over physical examinations for pensions.⁹

Yet we also argue that the Pension Bureau strove to carve out a discretionary authority in the face of powerful outside forces such as veterans' organizations and pension attorneys. The Bureau attempted to impose order on an unruly benefits system by reviewing all and rejecting some pension applications, including many that had been tailored by pension attorneys' "claim houses" and endorsed by examining physicians. Patterns in these rejections, especially those reflecting applicants' race or ethnicity, are telltale

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signs of these attempts at order; we highlight such patterns and discuss their consequences for the nature of subsequent social-insurance programs and more recent shifts in attitudes and laws regarding disability.

We have also limited our empirical investigation to benefits for Civil War veterans themselves. The Union army pension system actually comprised multiple programs, one for veterans and others for their widows, children, and dependent parents. This book focuses on race and ethnicity in a system of *disability* benefits; dependents participated in programs of *survivors'* benefits, with their own premises and procedures. The latter programs have begun to receive the scholarly attention that is warranted by their distinctive character.¹⁰

Though this study centers on race, ethnicity, and social perceptions of disability, we adduce other concepts such as assumptions about masculinity to assist in understanding veterans' reactions to their treatment by government officials. We hasten to add that this is not a brief for cultural determinism, and we will give other forces their due as our sources permit. We seek above all a balanced analysis of the circumstances that shaped veterans' experience with a public program, the influences on their response to this experience, and the implications of the experience and the response for the development of public policies down to our own time.

1

The Winding Path of the Self and the Other

Just as formal disciplines have terms for relationships – the plus sign, the conjunction, and the like – everyday life has its own relational terms, including race, ethnicity, and disability. These concepts do more than classify people: they delineate one's own group as well as "other" groups, and they specify relationships of status and power among those they categorize. Such concepts are meant to convey fundamental truths that lend coherence to an otherwise bewildering world of human behavior.

Unlike the formal relational terms, however, race, ethnicity, and disability are far from fixed or universal. Historians have pointed to the malleability of race and similar concepts – they fluctuate not only over time, but also among groups and places. To take only one example, skin color, the reflexive signifier of race, was relatively

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unimportant in late-nineteenth-century African Americans' appraisal of whites. Indeed, a recent assertion about gender applies equally to other relational concepts: gender categories are simultaneously empty and overfilled, meaning that they lack tangible referents yet encompass a host of understandings and assumptions, some compatible and some contradictory. A key achievement of recent scholarship is its demonstration that the formation and functioning of race and related inventions must be investigated rather than assumed.¹

This book focuses on the role of race and ethnicity in a federal program designed to assist veterans of the Union armed forces. The task for this chapter then is to sketch the contours of the key concepts as they stood in the late nineteenth and early twentieth centuries; doing so will set the stage for the exploration of the Civil War pension system in Chapter 2.

Beneath the shifting sands of racial and ethnic distinctions in the Gilded Age lay the more stable notion of "self-government." Matthew Frye Jacobson makes the insightful observation that the naturalization law of 1790, which opened the way to citizenship for "free white" immigrants, rested on an equation of race and responsibility. White men (with white women presumably exerting influence as wives and mothers) were deemed capable of governing their passions, and they could be full members of "the people" who held ultimate authority in a republic; people of color, allegedly susceptible to emotion and impulse, were judged unfit to be