Note to Readers/Viewers:

Interview has been edited for clarity. Timestamps correspond to the original, unedited video.

The language and terminology used in these historical materials reflect the context and culture of the interviewee(s), and may include stereotypes in words, phrases, and attitudes that were wrong then and are wrong now. Rather than remove this content, Western Pennsylvania Disability History and Action Consortium wants to acknowledge its harmful impact, learn from it, and spark conversation to create a more inclusive future together.

Jessica Tomko (00:00:00):

My name is Jessica Tomko, and I’m conducting an interview with three former residents of the Memorial Home for Crippled Children in the Squirrel Hill neighborhood of Pittsburgh. Today's date is February 13, 2020. The time is 5:30 PM. We are recording this interview at StudioME in the East Liberty section of Pittsburgh. This interview is part of the Multimedia Histories project of the Western Pennsylvania Disability History and Action Consortium. The project records firsthand accounts of disability history. The story of the Memorial Home for Crippled Children and those who lived there are part of that history.

Jessica Tomko (00:00:41):

The Memorial Home for Crippled Children, also known as the Industrial Home for Crippled Children, was founded in 1902 by Mary Irwin Laughlin. For more than seven decades, the Home provided residential care and therapy to children with polio and other types of physical disabilities. The organization was renamed The Children's Institute in 1998 and continues to provide services to children with disabilities. It is no longer a residential facility.

Jessica Tomko (00:01:12):

Today, we're interviewing Paul O'Hanlon who lived in the Home in the 1950s, Kathleen Peer Kleinmann, who also lived in the Home in the 1950s, and Brenda Dare, who lived in the Home in the 1970s through 1980s.

Jessica Tomko (00:01:28):

It is my pleasure to serve as interviewer today. I am a member of the local disability community. I have degrees in Music Therapy and Psychology. I currently work in higher education, and I'm an advocate for inclusion and accessibility.

Jessica Tomko (00:01:44):

I'll start by asking each of you about your early years before you went to live at the Home. Let's start with you, Paul. When and where were you born? Can you tell us some about your parents, your siblings, where you lived, some of your early history?

Paul O'Hanlon (00:02:01):

Well, I was born in Pittsburgh. I don't know exactly where my family was living when I was born. I remember at some point, when I was really young, we lived in Slippery Rock on a farm. And then I think
that when I was around four, we moved to the Millvale area suburb of Pittsburgh, and then we moved eventually from Millvale to central North Side area of Pittsburgh.

Paul O'Hanlon (00:02:45):
I had a older sister and a younger sister. My younger sister had, I'm assuming, the same disability as I had. Since she was two years younger, and she was a bit more physically involved than I was in terms of the impact of her disability. She was born with two dislocated hips and that set a certain course in her life that had a whole lot more medical involvement than I did. She went to the Home before I did. And then, after she was there for a short time, the decision was that I would go there too.

Jessica Tomko (00:03:41):
So, can you tell me some about your early development and your medical diagnosis?

Paul O'Hanlon (00:03:46):
I have a kind of muscular dystrophy. Right now, they're not sure what it is. They keep changing the name. The last name they called it, they just recently found out it's not that either. But it's a neuromuscular disease that essentially makes my muscles weak and my muscles don't get stronger. Most people's muscles will get stronger with exercise, mine don't.

Paul O'Hanlon (00:04:16):
I was born with one dislocated hip. I was in a cast probably till I was about six months or so old, but since then, I haven't really had much of a issue with my hips and so. But, that was the most early complication of my disability.

Paul O'Hanlon (00:04:46):
But generally speaking, I had a fairly normal childhood up to the point when we went into the Home. I mostly reached physical milestones or approximately the same age as my peers in terms of sort of crawling... Well, crawling, I was set back because I was in a cast, but standing and walking was pretty typical. But, as a kid, what I remember was that I could never quite walk up steps where I would do the usual... People do one foot like that [gestures]. I would always go up one step at a time. And then the other thing that I remember was that I could never reach a run. I would go from a walk to a fast walk, but after that, my coordination would break down and I could never get above a fast walk. So, that's the things I remember.

Jessica Tomko (00:05:50):
Was there any treatment available to you before entering the Home?

Paul O'Hanlon (00:05:54):
No. What I remember was just this vast sense of not knowing, that my parents were wrestling with not knowing what to do, what the best thing would [be] to do. There's this sort of ongoing search for knowledge and expertise is what I would say. And part of the decision, I think, to have me go into the Home was for lack of a better... I mean, “Let's try this,” I think, was the sense I had at the time. Nobody really knew if it would help, but it was worth trying. So, that's why I got sent to the Home.
How old were you when you were sent to the Home?

Paul O'Hanlon (00:06:42):
I think I was about four and a half when I went to the Home. What I remember was going in around September of one year and then I remember going home for Christmas, so I must have gone from fall to probably sometime in the early spring of the next year.

Jessica Tomko (00:07:06):
So, a short amount of time?

Paul O'Hanlon (00:07:07):
Yeah, it was about six months total, I understand.

Jessica Tomko (00:07:11):
Did you overlap with your sister a little bit?

Paul O'Hanlon (00:07:15):
Yeah. During the time I was there, I'm pretty sure my sister, Nancy, was there the entire time. So, she was there before and after.

Jessica Tomko (00:07:25):
Okay. Were there any goals of your attendance other than “Let's try this”? Were there any physical goals?

Paul O'Hanlon (00:07:32):
I don't remember anything specific like that. Yeah, I don't remember... No, I don't think there... I honestly don't think there were. I mean, the goal was to make me more normal.

Jessica Tomko (00:07:46):
So, let's talk about your early life, Kathleen. Can you tell me where you were born, where you grew up, a little bit about your family?

Kathleen Kleinmann (00:07:53):
Yeah, my family, at the time I was born, were in Pitcairn. We were on a chicken farm until I was about three, and then they moved to another house that was not the chicken farm, because there's now three children and we couldn't live with my great-grandma anymore. Too many kids. So, I was in a house in Pitcairn. Eventually, the family got a lot bigger, because I'm one of 11 children, and we were in a big old house in Wilmerding, which is right down the road from Pitcairn. So, I spent most of my life, from about eight years old on, in Wilmerding. It's an industrial-type of a community, and everybody worked hard and lived really close to their work, and going down into the city of Pittsburgh was a big deal. That's where you didn't go unless you really had to. But, my parents had a child that wasn't walking. When I was born, I also had a dislocated hip. The doctors noticed a lot of fat around my thighs and that should have been muscle, but it was just fat. Their projections were that this child has something really awful and will not survive to be more than 12. That's what they told my parents, that there was no use doing...
anything because, "She's not going to survive anyway." My parents would not accept that and they ventured into Pittsburgh, talking to any doctor they could, trying to get me a solution. They found a doctor who agreed, finally, to give me a biopsy to prove whether I had this muscular dystrophy that was going to kill me, or whether I didn't.

Kathleen Kleinmann (00:10:03):
My mother said she had me all ready to go and got to the hospital, and I hadn't had anything to eat because I had to fast--they don't feed babies before surgery--and I was screaming and the doctor said, "We decided not to do the biopsy because there's no reason. We know what this child has and she's not going to survive." I guess my mother threw the equivalent of a "hissy fit" and went home and found another doctor who agreed to do the biopsy, and the biopsy said I didn't have what they thought I had.

Kathleen Kleinmann (00:10:39):
So, my parents, this is back in '52, '53, were beating on all the doors in Pittsburgh, demanding some action, some help, so they were pretty desperate by the time somebody suggested the Home. So they were willing to do anything. So I was about three and a half, four years old when I got admitted to the Home for Crippled Children, and it happened to be a bus ride from Pitcairn. So, I was there and my family was close by, and I ended up being there for three and a half years. So I was just about seven when I was... No, a little over seven, when they finally sent me home saying, "We've done all we can do. She can go home now."

Jessica Tomko (00:11:36):
So similar to Paul, it was a last-case scenario. You tried to access treatment but there wasn't any available?

Kathleen Kleinmann (00:11:45):
There was nothing available and nobody would help them for the longest time. So, when they finally found somebody to say they would work with me, that my family was willing to agree to anything, including allowing me to go to a Home for Crippled Children, if that's what it took to get me some help. My mother had gone through a religious conversion at that point, and it was really important to her. And then one of my brothers, my older brother—I was number two—my older brother was hit by a car and he ended up at the Home for Crippled Children because his injuries were really bad. So, it was a very traumatic thing for the family. They really depended on the Home for Crippled Children to give them their children back eventually in a better shape. So, my parents really invested a lot in the Home for Crippled Children.

Jessica Tomko (00:12:47):
So, the goal was just to be better than you were before?

Kathleen Kleinmann (00:12:51):
Yes, they wanted me to be able to walk. I was crawling up until I went to the Home, and that includes the chicken farm, crawling all over the chicken farm or crawling all over the house. The big innovation, when I went to the Home, was that they put me on a tricycle. I couldn't really push the pedals, but I could use it like a walker and straddle it and pull myself along on a nice even surface. So, it became a mobility device, a tricycle. So that was a new freedom for me that I didn't have to crawl everywhere.
Jessica Tomko (00:13:36):
So, Brenda, we're going to move on to you. But before we start, would you mind telling us a little interesting story about your last name?

Brenda Dare (00:13:45):
My last name of birth is DaRe [PRONOUNCED “DUH-RAY”]. And when I was young, in the family home, it was always spoken that way, always written that way, big D, little A, big R, little E. That was drummed into my head from the time I was old enough to know what letters were. And when I went away to the Home, at the age three and a half—my timeline parallels Kathleen's a little bit, in terms of age—none of the nurses or doctors or caretakers could manage to say it right or see it right when it was written. So I very slowly just started saying, "You know what, it's Brenda Dare." It became easier to be known by that moniker than to have to explain it and spell it time and time and time again.

Brenda Dare (00:14:37):
So, people know me professionally today as Brenda Dare, even though it is DaRe. It's a really easy way to tell how long someone has known me if they come up to me and say, "Well, how is Miss DaRe today?" They had to have known me when I was very, very young. So, that's the story of my last name.

Jessica Tomko (00:14:57):
Thank you for sharing that. Can you tell us a little bit about your childhood?

Brenda Dare (00:15:01):
I was born in Washington [PA] Hospital. I was born at 27 weeks, which in 1972 was pretty early in terms of gestation. My mother was in labor for three days and a couple hours. Her water broke at the beginning of that time, so I didn't have much in the way of protection for a slightly underdeveloped brain during that labor, and the assumption is that's what caused my cerebral palsy. She had multiple doses of Pitocin to start labor because it would stop or she would tire, and so they had to restart the contractions. And when I was finally delivered, I wasn't expected to live 72 hours, but my mother tells the story of before they put me in the incubator, she reached out and she touched me, and she knew at that point that I would live. She just didn't know what that would mean.

Brenda Dare (00:16:02):
And when I left the hospital a little more than a month later, she was told, "We don't know, you'll have to wait and see." And I had an uncle who claims that he knew I had cerebral palsy long before the rest of the family did, because he did a reflex test called a Babinski test on the bottom of my foot, and he knew from the way I reacted that cerebral palsy was probably going to be my diagnosis, but he didn't want to be the bearer of bad news. So when I was close to a year, my mother barricaded herself in a doctor's office and said, "I'm not leaving until you tell me why my little girl can talk but she can't sit up." That's when they were told I had cerebral palsy.

Brenda Dare (00:16:50):
When I was first delivered, they were told, "You've had a miscarriage. You've had a stillbirth. This baby's probably going to be very sickly. You should probably surrender it to some sort of institution." And there was discussion about that. When my mother found out what my diagnosis was, she realized that she was probably in over her head. I was the youngest of five, she had my brother who was a toddler at the
time--we're 15 months apart--and three older children, the oldest of whom was, I think, 14 at the time, to deal with. And she did some soul searching. I went to United Cerebral Palsy Preschool in Washington for just a few months, and at that point they told her, "This child needs some serious physical intervention. You're dealing with a kid who's verbal, but who can barely hold her head up." So, I was admitted to the Home in D the fall of... No, late summer of 1976. They say you don't have concrete memories before you're about the age of five [but] I remember very, very clearly the day that I was admitted. It was one of those pivotal moments. I can remember being very excited because they told me that I would have a bunch of kids to play with and there'd be a bunch of toys. So, they took me to the playroom, which was basically the day room, and there were a bunch of toys there and a bunch of kids, so that was kind of neat. But then after they had done some of the paperwork and I guess admission-related things. They took me into this room that had eight or 10 beds in it and a row of lockers along the side, and I started to realize, "Wait a minute, they think I'm going to stay here." I couldn't figure out why there were so many beds in the room because they only needed enough for my brothers and sisters and my parents and I. It had not yet clicked to me that I was going to stay and they were going to leave.

Brenda Dare (00:19:12):
So, they set up my stuff in my little locker and took me back to the playroom, and my parents were told to quickly say their goodbyes and to not make a big fuss out of leaving. My father had a very characteristic whistle, and one of my most ingrained memories of that day is him holding up my very favorite stuffed monkey as he walked around the corner and whistling at me. I just remember dissolving into tears because this wasn't right, I wasn't supposed to stay somewhere away from mom and dad. And that trauma lasted a while. I was very close with my sisters and my mom when I was young and so that was a big, big separation.

Jessica Tomko (00:20:07):
How old were you at that time?

Brenda Dare (00:20:09):
I was three and a half when I was admitted and, just like Kathleen, a little older than seven when I finally went home the first time. But then, I went back for a period of about five years after surgeries and during summers off from school. I can remember asking my second grade teacher if she would please fail me in a class, and she said, "Well, why would you want to fail, you're such a good student?"
"Because I want to stay home. And if I have to go to school, maybe they'll let me stay home and not have to go back." So, I was from almost the very time I was admitted, I was trying to get out of going back, at least for those first couple of years.

Jessica Tomko (00:20:53):
So, it wasn't something that you or your family wanted, it was a necessary-

Brenda Dare (00:20:59):
It was considered a necessary evil. My parents did not have a great marriage, and so with all the turmoil in the home and the other children to raise, the thinking was it would be better for the family if I was somewhere else for a while, but also I might gain some physical capability from it. And walking was, as Kathleen mentioned, that was the penultimate goal.
Jessica Tomko (00:21:29):
What was your physical capability at that time?

Brenda Dare (00:21:35):
I crawled up until the time I was admitted. I got to the point where I was using wooden forearm crutches they made for me [at the Home] for a couple of years, but it was never what I consider a functional skill. I can remember many, many times falling because I scratched my nose or because I sneezed, and so I never really got to the point where my parents thought I would when I was first admitted, not even through all of the surgeries and everything that I had growing up.

Jessica Tomko (00:22:15):
So, we're going to talk a little bit now about your first impressions of the Home, which you went over a little bit, but Paul, would you go first and tell us what you first thought of the Home?

Paul O'Hanlon (00:22:27):
Yeah. Right. I think that, like Brenda, I have a very distinct memory of my first day there. I mean, I was so young, and it's so many years ago, when I think back I only remember so many specific incidents or events, but my first day was a... I know that I arrived in time for lunch, I know that at the point where I was separated from my parents I was put in the lunch room and served lunch. I remember crying over lunch and I remember the kids in my table asking me if they could have my Waldorf salad since I didn't seem to be eating it since I was just crying anyway. And I remember giving my Waldorf salad away, like it was just a very... It's hard to explain the sense that a kid that young has, but it is this sort of very strong sense that "this just isn't right, this isn't the way it's supposed to be." I have a very distinct memory of that first day.

Paul O'Hanlon (00:23:46):
The other thing, and I know this happened not too long after that, again, very distinct memory was that one of my teeth fell out, and I remember putting it under my pillow that night and then the next morning waking up and it was still there, and doing that a few nights. And then it dawned on me that there really wasn't a tooth fairy and that there was nobody really watching out for me. That was sort of a very profound memory that it dawned on me that, A, there was no tooth fairy, B, it was my parents that must have been doing it and that they weren't there and there was nobody watching out for me. I remember that sort of just being a moment where you're really on your own and you're four or five years old, and it's just sort of a very stark realization at that age. I remember that distinctly.

Jessica Tomko (00:25:00):
Kathleen or Brenda, do you have anything to add?

Kathleen Kleinmann (00:25:03):
I don't have any memories of the first day being traumatic because I think I knew I was going somewhere that my parents really wanted me to go. So, I was full of good hopes and agreeable to go where they wanted me to go because they had worked so hard for me to go there.

Kathleen Kleinmann (00:25:27):
I remember being surprised by the fact that there was a rigid routine, everything was done by the clock. I remember that the beds, that were lined up fairly close together, just a little aisle between them, that all the other little girls looked like me. We all had the same haircuts, we all had the same clothes pretty much, and we all had the same routine and you didn't break the routine. You didn't say, "I don't feel like doing that", or "I don't want to take a nap." I remember that was something you didn't do. You just had to wait it out if you didn't like it. So, I remember the little girls all felt like we were all in the same boat and we just had to do it. There was no argument there, because it wasn't going to get you anywhere. So I just remember very early on that there was a routine that was so solidly established that every day seemed to be just like the other day until the weekend came, when visiting hours. That was all you had really to look forward to was visiting hours coming up.

Kathleen Kleinmann (00:26:55):
But, as far as trauma, I was waiting for my parents to have what they wanted. That's what it was. And I would ride the bicycles and go to the therapy, hoping that this would come to an end, but wanting what they wanted.

Jessica Tomko (00:27:14):
Which was?

Kathleen Kleinmann (00:27:15):
Which was their daughter to be like her siblings, could walk. I had a sister Nancy, and she was close to my age, and I had a brother, Gene, [who] eventually got hit by a car and ended up [at the Home] with me. But they were active kids, and [the Home was] going to help me to be like them. That was what the plan was. So, everybody was very hopeful that those early doctors were wrong, and that I could be made to be like my brother and sister. [chuckles] So that's what I had to add.

Jessica Tomko (00:27:59):
[To Brenda] Would you like to add anything?

Brenda Dare (00:28:01):
I can remember being very sad my first few days and very shocked at some specific things, the way the restrooms were set up is that there weren't stalls between the toilets. So, there was a row of toilets along one wall in the restroom-

Kathleen Kleinmann (00:28:26):
No partitions.

Brenda Dare (00:28:27):
Yeah, and they would sit all of us on the toilet in the morning and they wouldn't get anybody off of the toilet until everybody had done what they were there to do. I was the last kid every morning for three and a half years. I just remember that being very uncomfortable.

Brenda Dare (00:28:50):
And there was an overarching sense there that being good was being happy. You were the good kid if you were smiling and laughing a lot. You were a problem kid if you cried. They separated us. If one kid
started crying, they had what they called an isolation room, and they would put you in there by yourself in the dark. I was definitely afraid of the dark as a child, and I can remember being carried there by one of the staff members. This was some months after I was admitted. We referred to her as Fat Laila. And the reason I think a lot of us referred to her in that manner was because she carried us on her hip, and for kids that had limited range of motion, it was painful to be carried on her hip because she wasn't small.

Brenda Dare (00:29:43):
Fat Laila put me in the isolation room, and I remember screaming at her before the door closed because she said, "You can come out when you learn to act your age." And I remember screaming at her, "I'm three." I knew this wasn't right, but I didn't feel like I had a lot of power. Us kids didn't see her again about some short time after that, so I remember being lauded as the kid who chased her away. I don't know the circumstances of her departure, but I do know getting kudos for that, as chasing away one of the mean ladies.

Brenda Dare (00:30:28):
It was a very different kind of place to grow up. And, before I started thinking about this, I thought, "Well, there was a lot of really happy stuff there too," but in my formative time there, there was a lot of really sort of sad emotions around being there and having to be separated from my siblings and my pets. Even today, I'm the crazy animal lady, so it was a really big deal to be there.

Brenda Dare (00:31:01):
I can remember some of the staff who were less in tune with kids being kids saying, "Well, if you just learned to walk, you can go home. If you just X, you can go home. And if you misbehave, you'll miss a visit. You won't get to go home for the weekend." And as a kid who had a lot of nightmares, that was really tough because waking up screaming was considered misbehaving, even though it wasn't something I could completely control. So, it was a tough adjustment.

Jessica Tomko (00:31:34):
Yeah. I notice a unique sense of awareness from such a young child, from all of you. Your observations are certainly not what one would expect from such a young person, but I guess that's what you get when you're put in a home.

Jessica Tomko (00:31:54):
This is a good transition to talk a little bit more about adjusting to living at the Home, which some of you have started to talk about. Paul, do you want to share anything about what your typical day was like, the layout, the staff, the children?

Paul O'Hanlon (00:32:12):
I don't know what my typical day was like. That's a good question. I remember eating in a auditorium-type dining room, I remember having physical therapy, I remember there was a small swimming pool that we would use more for therapeutic exercise than say, fun. And then I remember those sort of things you see a lot of times in physical therapy rooms that are these wooden things that go up to the wall as if you would climb up them, which I could never really quite do.
Paul O'Hanlon (00:33:03):

So, I remember these snippets of activities and things but I don't really have a clear sense of my day. Like Kathleen, I think the other thing that I remember was that my existence was based on a weekend promise of visitation. And the thinking at the time was that it was better for kids to have this clean break. And so everything was designed to have a very clean break from your family. And the only time they could visit was on weekends and it was only the parents that could visit. I had an older sister at the time, she would occasionally come with my mother, but she couldn't visit me. She had to stay in the library.

Paul O'Hanlon (00:34:08):

And so mostly what I remember was just that cycle of weekends, followed by the week, followed by the next weekend. And the other thing, the one thing I do remember too was there was a point of transition for me. When I first went into the home, I was on the upper floor with kids that seemed to be mostly pre-six year old. At some point, they transferred me to something they called “The House,” and that was down on the floor underneath. And there were two sections of The House for boys, one of which seemed to be from kids about my age--at that time, maybe four—up to about say nine or ten. And then the other side seemed to have kids that were more like ten to sixteen or so. And I remember then, for the last period of time I was at the Home, I was staying in The House.

Jessica Tomko (00:35:30):

Do you remember anything about the layout or about the building itself?

Paul O'Hanlon (00:35:35):

What I say to people, if you've ever seen a movie about a hospital in World War I where there's just this long room where there's a middle aisle and then rows and rows of beds separated by … very short, they were all barracks-style. And that was the thing. Now, I think that oftentimes the beds were modified cribs where there were sides and things like that.

Paul O'Hanlon (00:36:22):

I mean, I have a whole range of just these weird, random memories. The other random memory I have is that … there was an auditorium with a stage. And I remember, one of my vivid memories as a kid was at some point, I got into the area behind the stage. And it was just, I remember being amazed at this honeycomb of little rooms and it's one of those things where as an adult I'd like to, if I could go back to see what was really there, because in my mind it was like this whole world back there that I didn't know.

Paul O'Hanlon (00:37:08):

Those are some of the things I remember, just in terms of daily life stuff. One of the other things that I just remember is that ... I was one of the kids that was ambulatory and then there were the kids that weren't ambulatory and most of them were in these modified--they weren't really wheelchairs, they were like moving beds. So, your feet would be, you were sitting in it and it would have a handle that you could push them in and I'm not sure you could really move yourself though. And the funny thing about the Home for Crippled Children is that there was a flight of stairs to get up to the main entrance and it was a multi-floor building without an elevator.

Paul O'Hanlon (00:38:16):
And so in order to get from one floor to the other, there was this ramp that went down and on the right side of the ramp was an opening to a stairway. And you have all these kids in these wheeled carts. And I remember at the age of about four or five, we were at the top of the ramp waiting for a staff person to get us down and one of the kids was in one of these carts and we made the stupid decision to try to do it ourselves. And I remember we probably got about five feet down the ramp and it was obvious that this was too much for me. And I remember some staff person from the opposite end of the building, I could hear this running and he just charged and fortunately got to us before I ... But it could have been such a disaster.

Paul O'Hanlon (00:39:18):
But yeah, it's sort of like when you think back to the lack of real accessibility in the Home for Crippled Children. It's sort of mind-boggling for me to consider. The liability risk of having this open stairway that's down the ramp. It's interesting to remember what was there in terms of accessibility features and what wasn't.

Jessica Tomko (00:39:52):
Which is interesting because they might have preferred it that way because if it were more accessible it would have given everybody more freedom and that would have-

Brenda Dare (00:40:02):
That's very true. Because by the time I was there, there were some changes made, and we were known to take flight, as it were, from staff from time to time.

Paul O'Hanlon (00:40:15):
But that's a good point because the truth of the matter is that this is back in the '50s. The world was totally inaccessible. The flight of steps up to the entrance didn't even seem odd at the time. In retrospect it seems so odd, but the world was so inaccessible at that point and it was clear that there was absolutely no attention to making the world accessible. Therefore, we were the ones that would have to adapt, and that was totally the thinking at the time, that it was all up to us to manage an inaccessible world.

Jessica Tomko (00:40:55):
On that note, do you recall any therapies or anything to reach that goal?

Paul O'Hanlon (00:41:06):
I remember random physical therapy sessions. But the problem is that my condition doesn't improve with conditioning and treatment so I'm not sure that ... I can't remember a thing that I got out of being in the Home physically, to be honest with you.

Jessica Tomko (00:41:29):
Yeah. Would you like to share anything, Kathleen?

Kathleen Kleinmann (00:41:33):
I remember the therapies. I thought there was a day of intense therapy, actually. And they were trying different therapies that wasn't always the same therapies, and I had sessions doing different types of
therapies. One of the therapies that I really enjoyed, or learned to enjoy, was cryotherapy in which they had a big block of ice that they ran over my body and just relaxing and running it over your body. It’s weird to talk about, because I don’t know if they ever had any success with that, but I remember hours, learning to relax while freezing ice was on your skin. I do remember a lot of sit-ups and a lot of leg movements, and they were working on me to put me in braces. That was the goal. When you’re three and a half, you’re growing pretty fast. I don’t think I got into braces until I was about four or maybe four and a half. And even then, they had to make me new braces like every six months. So there was a lot of attention to bracing.

Kathleen Kleinmann (00:42:49):
They did teach me to walk with wooden crutches and braces. I had a body brace all the way up under my arm. It made the difference, I was walking. I wasn’t always just tricycling. I also remember the same pool and the smell of the chlorine in that pool was really strong to me, when I think about it. And I made a mistake in that one day I said to the therapist – there was some parallel bars that we had to walk and hold the bars -- and one day I said, "I don't need the bars. I can walk up and down without holding on." Well, that turned out to be my last day in the pool because, apparently, I didn’t need to take the swim therapy after that day. And I always asked, "Can I go back to swim therapy?" And they said, “No.” So, that was a big mistake to declare I didn't need the parallel bars to hold on to.

Kathleen Kleinmann (00:43:48):
I do remember that when I got to be about five, that I went to “school” in the mornings. A lot of the kids were in the same class for about three grades or four grades, maybe five grades. And each row was a different grade. The kindergartners were in one row, the first graders in another row, the second graders in a different row. And the teacher would go from row to row to row and give us little assignments or tell us to do something. And normally she had complete obedience. Kids had been trained pretty well to be obedient. You didn’t see too much acting out. I don’t think we did a lot of learning, but we had some exposure to drawing letters and learning numbers. I remember working on little paper sheets and that was half-day things.

Kathleen Kleinmann (00:44:52):
And then the afternoons would be the therapies, learning to walk. I remember very distinctly being taught to fall. And they would say, "I'm going to kick the crutch out from under you, and you have to fall on the mat and not get hurt." And they would tell me what I would have to do to do that. I had to twist my body in a certain way so that when I landed -- by the time I got from upright to down -- I was laying on my back and not falling face first.

Jessica Tomko (00:45:26):
Okay.

Kathleen Kleinmann (00:45:27):
And believe it or not, you can learn to do that. You may be looking like you’re falling on your face, but by the time you hit the ground, you’re on your back.

Jessica Tomko (00:45:37):
Did you have experience with that too, Brenda?
Brenda Dare (00:45:39):
Absolutely. When I would tell those stories, when I would come home on the weekends, everyone thought that was so terrible. But they did. They would kick the crutch out from under you. And sometimes they would tell me and sometimes they wouldn't tell me because they wanted you to really progress in that skill. So, it was fall back and tuck your chin. And to this day, when I fall, you revert to that training because it was very much about if you got hurt it was your responsibility. You did something wrong if you got hurt. And only when I was much, much older did I realize, we don't teach able-bodied children who don't have the experience of being institutionalized that lesson. They fall and get hurt. It's poor, poor baby. That didn't happen for us in the same way when we were in there.

Kathleen Kleinmann (00:46:30):
Most of the time we didn't get hurt. Even as a teenager, when I went to Camp Easter Seal,* I would fall, but I typically did not get hurt. It was very rare I got hurt.

*Note from Kathleen Kleinmann about Camp Easter Seal: The organization now known as “Easter Seals” was called “Easter Seal” at that time. The camp was located in Laurel Hill State Park in Somerset County.

Jessica Tomko (00:46:42):
Do you remember any other therapies? Either of you?

Kathleen Kleinmann (00:46:46):
Well, the tricycle went away as the braces came on. And there was a lot of intenseness about using the braces. I never got to the point where they were showing me how to go up and down steps. That was a big deficit in my learning when I went home because that's what kept me from going to school. I could never go to school because I couldn't do steps, and the whole world had steps in it. The absence of that skill level really made a dent in my future when I left.

Jessica Tomko (00:47:28):
Were you able to walk when you left?

Kathleen Kleinmann (00:47:31):
In braces and crutches, yeah. I had underarm crutches, the wooden ones that they give out to people with casts on their leg. Or used to, anyway. And your underarms toughen up quite a bit. You get some calluses. And the braces were significantly heavy because they were made of heavy steels. They didn't have those lightweight-

Paul O'Hanlon (00:47:54):
Stainless steel.

Kathleen Kleinmann (00:47:56):
Yeah. I eventually developed allergies to the rivets that were in the braces. It persists to this day. I have to watch what metal touches my body because of the allergies I've developed. But, I mean [the Home] did equip me, by the time I left, for the next stage. And I do remember, I have a lot of memories at that
time, and I think part of the reason the memories are so vivid and easy to recall are because you had a lot of time to think. Because you were, as Brenda said, waiting, but you also, like Paul said, recognizing you're on your own, and you better figure this out. Because even though Mommy and Daddies aren't outside, survival meant “you think.” And so the brain was very active, even in this kind of robotic world. And you began to recognize that nobody was going to help you except yourself.

Kathleen Kleinmann (00:49:11):
I do remember that there were a lot of nice people, but most of the nice people had jobs to do. They didn't have time to just sit and talk to you. I do remember that outside groups would come in with lots of presents and parties for us. And, I mentioned that one day, someone gave us a television set, and that was a really big deal, to actually see a television set back in 1955. And to recognize that we could see other people and other people could see us. And people would come in and take pictures, and once in a while we would be in the newspaper, and the parties were typically people who were making donations to the home. And we were all told to be really nice to these people and smile and be polite. And they prepared us. That seemed to happen a lot.

Kathleen Kleinmann (00:50:20):
And I also remember, like Brenda did, sitting on the toilet, and they would make sure we did our bowel movements on a routine schedule. They would chart them all, and if you missed what their expectation was, they would come around with the enemas. And you had to sit still for that. Because there was no argument. There's nothing you could do to get out. Eventually, the conformity was definitely there and the aspiration of, “When is this going to end? When am I going to go home? Will it be different when I get home?” I somehow had the expectation that I would always be happy if I got home. Which, again, is probably unrealistic but that became ... I remember “The Ward” and going down to “The House.” That was kind of a graduation thing when you got to go down to “The House.” I think maybe the patient ratio was different, probably because there was the assumption you were a little more independent when you went down to “The House.”

Kathleen Kleinmann (00:51:41):
So, that was kind of momentum, at least, that something was happening. You were graduating a little bit here, making progress that some day they might come and let you go home. I know my siblings were able to come, but they had to sit in the car. And I could look across the grass and see children playing in the back of the car, even though I couldn't talk to them. Therapies were important. Sometimes there was a breakdown in the discipline, and we got into mischief. Maybe we were making too much noise after quiet hour, too much giggling. Maybe you didn't go to where you wanted to go or showed some resistance. Then they would be heavy handed, in terms of putting you in a wicker wheelchair and sitting us in a corner, is what I remember, more than a dark room. It was just a corner. There was no physical abuse or anything like that, but you had lots of time to think. And that's why I think so many of the memories are so strong, is because it was a puzzle: “How to get out of here.” And so your brain was always working, “What do I got to do to get out of here?” And so things became really seared in the brain, in terms of what you were doing and what your goal was. The goal was to get out and, again, to have the unrealistic expectation that by the time you got out you were going to be just like your sibling was. And when that wasn't happening, after three and a half years, they told me and they told my parents that there was nothing more they could do, that I wasn't making any further progress that they had any expectation for. And, still, I didn't have a diagnosis. I actually never got a diagnosis until I was 29 years old. Things were better studied, there was more literature and muscular dystrophy was now
known to be many diseases and not just one. So that's kind of what's happened is that now they understand that just having muscle weakness doesn't mean only one thing can go wrong. Many different things can go wrong. And I think they're having that same evolution with cancers and things like that. Now it can be many diseases and not just one disease.

Paul O'Hanlon (00:54:45):
Yeah. Autism I think is-

Kathleen Kleinmann (00:54:46):
Same thing. It's many diseases.

Paul O'Hanlon (00:54:49):
This huge general thing, and we gradually realize it's all kind of individual things.

Kathleen Kleinmann (00:54:58):
And I guess there was a big rally in the '50s around polio, but the kids with the muscular dystrophy kind of got less attention. Then, muscular dystrophy had their day, and then they moved on to other disabilities. I'm about to turn 70, and I've seen cycles where different disability groups get the spotlight, and there's a push for more action. And, there's a breakthrough. But, one of the things you learn eventually is that you are on your own, and you've got to figure this out, and you've got to take back control, and start putting your life together the way that you want it. So, eventually, we evolve to that but having that early experience, I think, steeled me, at least, to starting to work on the bigger puzzles in my life and not just the little puzzle of how to get out of the Home.

Brenda Dare (00:56:00):
I remember therapy feeling very much like a job. I started preschool almost as soon as I was admitted. But school was where I got to go to get away from therapy. Because even in living quarters, therapy started as soon as my eyes opened in the morning because I needed to learn how to dress myself the right way. And I needed to learn how to push around a wheelchair that weighed 101 pounds. I remember that it weighed 101 pounds because my parents often talked about having to maneuver it any time they had to take me anywhere. It was a really big thing to feel like I had this job to do. But it was bigger than I could get my brain around.

Brenda Dare (00:56:53):
For instance, one of the very unique things about me that we found out while I was there is that I was born left handed. But, most of the damage in my brain affects control of the left side of my body. So when they were teaching me to feed myself, to button and snap and all those things, they would sometimes have to restrain my left arm because I would attempt to use it in ways that weren't very effective. I remember I stabbed somebody with a fork trying to pick up a bite with my left hand. And I remember being very much admonished for that because they thought I was doing it on purpose to get attention. Which was really how they saw anything that was non-conformity at the time. You must be attention-seeking. There can't really be a reason behind behavior that's out of the norm other than to set yourself apart or inconvenience the adults.

Brenda Dare (00:57:50):
Which I understand is part of taking care of that many kids, but it really led me to be much more of a conformist than I think I would have been otherwise, and to really dislike any kind of individual recognition. And as a kid who had a very high set of verbal skills, and that was uncommon, I was oftentimes the one people wanted to talk to, but I didn’t want to talk to anybody. People who know me now would have a difficult time realizing that I had this little, teeny, tiny voice and I didn’t really want to talk to you so, “Yes, please, would you please go away over there, I’d like to read my book.” Because I didn’t like that individual recognition because so much of it had been, "You must be showing off, you must be trying to get attention." And that was a very negative thing.

Brenda Dare (00:58:42):
You asked about layout of the building. I remember by the time I was there, there were no stairs to get in the front entrance. The parking lot on Northumberland Avenue was where the main entrance was and that’s still a main entrance to the building. The doors that are there now, the white steel doors, were there from I think the second year that I was there. And I remember hating the sound of those doors when they open and closed. And when I would go in on a weekend that I’d been home and those doors would close behind my father, I would just instantly freeze like it was time to enter into that mode. And I’ve been back a few times as an adult, one of them was to speak at the dedication of, I think they call it the Founder’s Terrace. And I needed to leave through those doors because that’s where my ride was waiting and those doors had been locked. So, I was stuck, as a 46-year-old adult, on the inside of those doors. And I started to sort of feel a rising panic because I didn’t want to be stuck inside those doors, even as an adult who knew perfectly well I would get out, they would solve the puzzle, that was a really, really tough thing to experience.

Jessica Tomko (01:00:09):
Yeah. Do you remember any other experiences from your time there?

Brenda Dare (01:00:14):
I mean there were some very, very typical childhood experiences. The children that I was there with formed some very tight bonds. We talked a lot amongst ourselves about what we wanted life to be like, and we would tell stories between all of us, between the six or eight of us in the room, we probably had one fully functioning body out of all of us. And if we could just get, "Well, gee, we could all live in a house and it wouldn't matter if we couldn't do all these things because between all of us we could probably get most of everything we wanted done." So there was a lot of that kind of time. And some of that was resisted by the staff because there wasn't a lot of attention paid to our emotional development. And when somebody would be discharged, oftentimes it would just be that you came back from therapy and Susie wasn't there anymore. There was no preparing. There was no, "Well, gee, you might want to find out her address so you can connect and stay in touch." That just wasn't paid attention to. So, there was a lot of fear and anxiety around that, are your friends going to be there tonight after dinner? Those kind of things.

Brenda Dare (01:01:32):
But, like Paul and Kathleen, I remember the parties and the times that we put our public faces on. And if you misbehaved or were perceived to have misbehaved in any of those things, that was really a cardinal sin. You could get sent to bed early for a week if you were rude to a visitor. I can remember, I was probably six when Mister Rogers came to visit. And he was going down the row of us kids in a classroom saying hello and giving hugs and he asked me if he could give me a hug. And I said, "You’re very nice, but
I don't know you." And he respected that and didn't hug me, he shook my hand. The staff in that room couldn't wait to tell me how rude I had been because I refused a hug from an adult.

Paul O'Hanlon (01:02:29):
Mister Rogers.

Brenda Dare (01:02:30):
Yes, Paul, it is a great regret that I told Mister Rogers I didn't want a hug. And I don't remember meeting him after that. So, probably the one person in Pittsburgh who has a story like that to tell. But, any time any transgression was committed in front of somebody who was from the outside, that was all the much more a cardinal sin. I think I got sent to bed early for a week for being rude to Mister Rogers when I didn't really realize it was rude. He asked me, and I told the truth.

Brenda Dare (01:03:06):
But there were a lot of nice people, like Kathleen says. There was a lady in housekeeping who was always very nice to us and would bring us toys that her children were done playing with. There was a foster grandmothers program where, I think they were probably mostly Jewish, given the neighborhood. Women would volunteer to spend time with us and they would read us stories in the evening. And Grandma Helga, who lived nearby, was oftentimes there when I went to bed and she would bring us candy. Well, that was the bee's knees because you didn't get much candy as a kid who lived in a place like that. So, she would bring chocolate-covered ants and grasshoppers that were imported. And I remember going to the grocery store on a weekend visit with my mom. She said, "You can have anything you want." [I said], "I want some chocolate-covered grasshoppers." And they didn't have them at the grocery store. I was devastated.

Brenda Dare (01:04:04):
So, a lot of really unique experiences like that. But the real reason you were there was definitely about therapy. It was from the time your eyes were open until they were closed. What did you gain today?

Kathleen Kleinmann (01:04:21):
One of the interesting things is that there's a 20-year gap between when Paul and I were there and Brenda was there and there's so much the same. But, there's been some differences too. We didn't have friendly neighbors in the community coming in and bringing us candy. Everything was very formal in the '50s.

Brenda Dare (01:04:43):
And it's amazing to me that things were so much the same. That row of toilets, I thought there's no way. That must have been a construction mishap.

Kathleen Kleinmann (01:04:53):
No, that was real. That was real.

Paul O'Hanlon (01:04:59):
One of the things that I remember, it's interesting to think back to what you could get a bad name for, so to speak. I was always the last to complete eating a meal in the cafeteria. Always. And that became
sort of like one of the things that I was known for, which was a problem. So, I just remember that somehow I was always the last to eat and it was always an issue for them, that they had to wait so long to take my tray or something. The other thing I remember, and since I was so young, I only occasionally remember what I was thinking. But, I remember doing things. And I try to figure out what the hell was going on with me. So, one of the things I remember at the time, it doesn't surprise me now that I would do it, but it was the only time in my life where I would sit in my bed under the blanket-

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Paul O'Hanlon (01:06:03):
sitting up like a tent and play because it was the only way I could really have any privacy in the Home to just sort of play. And I remember that, just sitting in my bed with my blanket over my head. And it was just those kinds of things that, as a little kid, you sort of remember that you stuck out in some way. I don't remember any incidences that I would term abuse, and yet the whole experience was very brutal, and that's sort of a little bit hard for me to kind of reconcile, but I remember it as being a brutal experience.

Jessica Tomko (01:07:02):
Yeah. So, how do you think it affected your emotional development? Any of you?

Paul O'Hanlon (01:07:10):
It's really hard for me. I don't know. I have a suspicion that that crystallized moment where I realized, “You're on your own, kid. There's nobody watching out for you.” I think that that was a life-altering awareness that probably changed the rest of my life, but I can't really say how. It's just that I've always been a very, mostly sort of “Do it on my own” kind of a person. I don't resist help, but I usually don't know how I can use it because I don't think in terms of using help. It was sort of like, I just remember this sense that it was all up to me.

Kathleen Kleinmann (01:08:10):
Well, I also... It's up to me, but I'm also... And I have a reputation for this. I'm a long-term planner. I typically will plant seeds that only bloom three years, four years, five years down the road, and everybody says, well, how did that happen? You were just lucky. No. There was no luck there. The pieces for what I wanted from five years from now, I carefully put in place.

Kathleen Kleinmann (01:08:42):
And I use this at my job too, quite a bit actually. When people say, "How did you get there?" It was very carefully plotted and planned and maneuvered. I learned to bide my time, basically, that things will develop later that I can exploit and take full advantage of if I do the right things today and know the right people, do the right things, learn the right skills so that later on, I'll have what I need. And the opportunity will present itself, and I'll grab it and hold on with both hands.

Kathleen Kleinmann (01:09:30):
But I think that... when I look around to cousins and brothers and sisters, they lack that skill. And I think I learned that skill by the institutional experience that taught me to bide my time and plan and plot and keep my own counsel.
Kathleen Kleinmann (01:09:53):
People were nice, but they weren't warm. People were at a job, and there was not a lot of informal time with staff. The relationships with my peer group, the other disabled children, were strong, really, really strong. I really, really liked the other girls.

Kathleen Kleinmann (01:10:17):
Eventually, I went to school with able-bodied children. When I was finally 13 years old, I went to public school, and I tried really hard to make friends with able-bodied children. And that didn't go so well, because for one thing, they didn't really like being friends of a disabled child. And for another thing, I tried too hard. I would bring them treats and I would bring them... Whatever my mother would give to me, I would save, hoard, and share with some girl I would like or somebody in my class. And then I would discover that they were only friends with me because they wanted that treat. But those were important lessons to learn.

Kathleen Kleinmann (01:11:09):
But, when I went to public school, I felt eventually that I was isolated because who wants to be friends with the crippled kid? But, eventually, I learned “not to give a rat's ass.” And that was the best thing that could have happened because when you don't try so hard, then you actually do find friends.

Jessica Tomko (01:11:37):
Yeah.

Kathleen Kleinmann (01:11:37):
Because you're not so worried about finding friends. And so learning to relax and like myself, I had to go through those experiences as an adolescent. And somehow I figured out that education would be the key to getting what I wanted and what I needed out of the future. My mother, who had fought so hard to get me help and had done whatever she had to do, in my mind, became the bad guy because she put me in that place. And I couldn't understand how a mother could put a daughter in a place like that. So, I kind of resented that a lot.

Kathleen Kleinmann (01:12:27):
I had a lot of brothers and sisters. Like I said, I was one of 11 in the end, that I was the oldest girl, and there was a lot of work to be done. And so, my mother herself didn't have a lot of time for individual relationships with her children. She loved all her children together and kept them all together, and there wasn't a strong connection over time with my mother in particular, who had fought so hard for me. That became a real barrier with me in terms of my... Your feelings with your mother are really complex, and to be mad at your mother for something that she did to help you is kind of sad. But, I found myself there.

Kathleen Kleinmann (01:13:13):
On the other hand, my dad was always the hero. So, that was part of the growing experience. And my dad was always very encouraging. And my mother was always very sheltering and-

Paul O'Hanlon (01:13:29):
Worried.
Kathleen Kleinmann (01:13:30):
"Do the work and you're never leaving home because, for one thing, I need your help, for number two is I won't let you out of my sight because the men of the world will exploit you and other people will exploit you. Nobody will ever give you a fair deal. And so you always have to stay home." Somebody told me that if you did really well at school... but, when I started at age 13 in public school, I was several years behind everybody else. And they just threw me into fifth grade just to start me somewhere. And I was way, way behind. I was probably the equivalent of third grade in fifth grade. So, I had a lot of catch-up to do. I managed to do it. And then, I hung on for dear life to try to stay ahead. And I ultimately got an opportunity to go to Penn State University because [with] the state of Pennsylvania vocational rehab program, if you can get into the college, they would help you.

Kathleen Kleinmann (01:14:46):
And back in 1970, for families who were in poverty, they would pay a hundred percent. They wouldn't make you take even a student loan. And that was such a golden opportunity. And I managed to be a freshman at Penn State when I was 20. The OVR [Office of Vocational Rehabilitation] sent me to see a doctor before they would authorize payment, of course, and for whatever fluky reasons they sent me to the same doctor I had seen when I was three.

Jessica Tomko (01:15:20):
Oh, wow.

Kathleen Kleinmann (01:15:21):
And the name seemed familiar to me, but I didn't recognize him. And at the end of the exam, the doctor said to me, "I saw you when you were little. Everything I ever said about you was wrong. So, what do you want from me today? I'll say anything you want." I said, "I want you to say I can go to Penn State University." He said, "Fine, you got it." I said, "Fine. Great. That's terrific."

Kathleen Kleinmann (01:15:53):
So, I got admitted, but I called my therapist, who had seen me when I was a teenager and all that, and I said, "Guess what? The doctor said I can go to Penn State University." And my therapist who knew me far better than this doctor who hadn't seen me since I was four or five said, "You can't possibly go to Penn State. That campus is much too rough." There was no accessibility back then, even in the seventies, 1970 there was no accessibility.

Kathleen Kleinmann (01:16:26):
So, it was really hard. But since I didn't want to go back with my mother, I found a way to succeed. And then that became the key to never going back home except for a visit. Eventually, my self-reliance got me through, but I learned those skills, which my counterparts, cousins, and siblings don't necessarily have. I learned those skills from that experience of thinking my way through things, through problems and issues.

Jessica Tomko (01:17:30):
Okay. So it seems like a common thread is that you all got into a little bit of mischief. Paul, do you want to start with your story? And then we can hear from the others?
Paul O'Hanlon (01:17:44):
I guess that I remember three kind of distinct kind of mischief-related things. And for me, what I see is that they span what I would call “stupid kid things” to kind of like acting out. The time that I started going down that ramp with my friend in that cart, I wasn't being bad. It was just a stupid kid thing. But, I remember they all got treated the same.

Paul O'Hanlon (01:18:20):
And the second kind of stupid kid thing was, I remember that in the bathroom, I'm assuming this was in The House, that it was a very kind of industrial style bathroom, long sink, rows of toilets, and all that. And I don't remember why, but they had rows of paper cups, and it was like everybody had a cup or something. And I don't remember if it was for drinking or medication, but there were just these empty paper cups. And when I was a kid, I had a fascination with toilets and flushing, and it just was sort of like, I don't know, the idea of things disappearing, the nowhere, where would it go?

Paul O'Hanlon (01:19:09):
And I remember one day getting all these paper cups and putting them into the toilet and then flushing and being surprised that all those paper cups didn't go down, because they were floating on top of the water. And all of a sudden I realized that I could get in trouble because people could see that it wasn't going to disappear. And in fact, I think it might've clogged the toilet. And I remember getting in trouble for that.

Paul O'Hanlon (01:19:39):
And then the third thing I remember getting in trouble for, and this was what I would call the acting out kind of thing. I remember there was an older kid in the other half of The House, and he had some kind of these religious kind of figurines. And I remember stealing them from him, and for the life of me, I don't remember why or what I was thinking, that there was something about just not having anything there. It was really a sense that there was nothing that was mine. And for some reason I stole that poor kid’s stuff, and I don't remember what I was thinking or what my rationalization was. But, I just remember doing it.

Jessica Tomko (01:20:27):
Were you punished for any of this?

Paul O'Hanlon (01:20:29):
I don't think they found out about that. I don't know how I escaped, but, yeah, I'm still paying for it. I still regret that.

Jessica Tomko (01:20:38):
Kathleen, did you have a story you wanted to share?

Kathleen Kleinmann (01:20:41):
One time that I remember that stands out, seemed to be pretty dramatic, not just to me, but to the other little girls in the room. We were down in The House and somehow we hatched a plan to run away. And I don't think I was the instigator so much as one of the ones who had to do the carrying out. And I was eager to do that. And the plan was, is after they turned out the lights and left us alone, we would
take sheets off the bed, tie them together, open the window and put the sheets out and then go down
the sheets and maybe go to the first bus stop we could find and get on a bus. That was as far as we had
it planned. And I was, I was very eager to get this plan in motion because that's how my mother and dad
came to see me was on the bus lots of times. So, the buses took us somewhere important or they could
take me home even.

Kathleen Kleinmann (01:21:48):
So, I was out of bed first, on the floor, crawling around trying to get a sheet off of somebody else's bed
in the dark. And wouldn't you know it, somebody came in. They must have heard us making noise. We
must've been making some noises, but everybody was involved, but I was the one out of bed. And so as
the nurse was looking around to make sure everybody was in bed, I crawled across to get to my bed
because my bed was on the other side of the aisle. And she saw me and I was the only one to get
thrown in the wicker chair and dragged out screaming and sat in the corner for the rest of the night until
I exhausted myself crying.

Kathleen Kleinmann (01:22:37):
What is really interesting about that is when I'm 45 years old, the Home for Crippled Children had a
reunion. And I anticipated going to that reunion and they sent out little postcards, asking us to fill in the
postcard with a memory of our experience at the Home. And I wrote about this experience of running
away, the plan, and getting busted. And I sent my postcard in, and then I came to the reunion and
picked up the little newsletter that had all these memories and started going through it. And four girls
wrote that memory.

Jessica Tomko (01:23:27):
Oh wow.

Kathleen Kleinmann (01:23:28):
There were four of us. And I did not know girls' names, but now, because they wrote on that postcard,
this is now in the ‘90s, they remembered that shocking experience of we were going to run away and
they put it down in print too, that that was their strongest memory, that night. Then I was able to find
some of them [after the reunion] and actually say, "Hey, it's me. I remember it too." I did track them
down and have one conversation with two of the three. So, it's kind of fun.

Jessica Tomko (01:24:04):
So, speaking of running away, there came a time where all of you left. Paul, did you want to tell me how
the transition of you leaving went, if you remember?

Paul O'Hanlon (01:24:17):
Well, what I remember was going home for Christmas, and I believe that that means that I kind of went
back after Christmas, but I have no recollection of going back. But, I remember my mother came to get
me on the bus, and I remember going home on the bus with her. And I remember her taking me home. I
remember arriving at home. I remember lying down on her bed, and it was Christmas time, and there
was a light fixture, and there was a kind of aluminum foil star that... like brightly-colored star that was
on a string and it would twirl. And I remember lying in bed, just watching that thing twirl and being so
glad I was home and afraid to just move. I didn't want to move. I just wanted to just sort of lay there and never have to move. And just the sense of being home was just overwhelming.

Paul O'Hanlon (01:25:36):
So, this would have been probably the Christmas before I started first grade in the following September. So, the following September, I know I would've been out of the home. I started first grade in September of 1960 at Pioneer School. One of the interesting things about my life is that I have a series of experiences where I was the initial class of some accessibility kind of thing. So, Pioneer was the bright, new accessible school, segregated for handicapped kids in Brookline. And it had opened the spring before. They finished up that [school] year at Pioneer, but I was the first class to begin at Pioneer for the first grade. And I went to Pioneer through the 11th grade. And, again, this was considered at the time sort of like the cutting edge, best education that they could offer kids with disabilities, but--kind of like what Kathleen was saying--each classroom had multiple grades.

Paul O'Hanlon (01:27:02):
So, for example, at the time that I finished going to Pioneer, which was the 11th grade, my classroom would have been 8, 9, 10, 11, and 12th graders. And we all would be, kind of like the teacher would serially go to each group, subgroup of us, to give us assignments and all that.

Jessica Tomko (01:27:32):
Were you grouped by care needs or academic ability?

Paul O'Hanlon (01:27:36):
Academic ability. There were always two parallel classes, one that had kids that had probably some intellectual involvement with their disability and then the kids that I was always in classrooms with, were all kids with just physical disabilities.

Paul O'Hanlon (01:27:56):
And then during the summer between my 11th and 12th grade, somebody called my parents and said that a decision had been made and that the following year I would go to Mount Lebanon High School, which was outside the Pittsburgh School District. It required some kind of arrangement that I had no idea what was going on or why. But, as it was explained to me, essentially their thinking was that they wanted to provide me with some bridge between Pioneer--which was a school with a total of about a hundred kids, and my 11th grade probably had three or four kids--and they wanted to give me some bridge between that very limited kind of experience and knowing that I was likely to go to college.

Paul O'Hanlon (01:28:54):
So, my senior year, I went to Mount Lebanon High School and just did one year there, which was fine. I mean, it's kind of hard to go to a high school in the senior year. I discovered that everybody already had their friends. They weren't trying to make new friends. I was shocked when I went to college the next year and everybody was trying to make friends. It was like, I'd never really experienced that before. It was a great time for me.
And then eventually I went to law school, and interestingly enough, I went to Pitt Law School and started law school in 1976. And that law school was brand new. It had just opened the spring before, and I was the first class to start that law school. And at the time, this being 1976, what I remember was that the law school was considered to be state-of-the-art accessible. And I remember going there and thinking that it was, but it was only later when I went back as an attorney to teach that I discovered that it was only accessible for students, that most of the teaching locations required the teacher to be down a flight of steps or in some kind of pit. And it was interesting, it was just one of those things that I consider to be the evolution in the thinking of accessibility... that it was never, apparently, in the paradigm of accessibility at the time... that it would be the professors that would have disabilities. But, anyway, so that was kind of my course.

Jessica Tomko (01:30:49):
Before we talk about your transition out, I want to talk to Brenda first about, you had lived at the Home many years later, and I know that visiting wasn't much of an option for Paul and Kathleen, but did you have any experiences with visiting with your family?

Brenda Dare (01:31:09):
We were allowed to go home most weekends if you met your behavioral goals. And so I went home, most weekends I was there, but it wasn't the happy experience you would think because that two days of transition were very jarring. I can remember several times just being absolutely dissolved in tears in the parking lot on Friday afternoon because my mom would ask, "What do you want to do?" And I couldn't make a decision because I knew I only had roughly 48 hours before I had to be back. And I was worried about coming back before I ever got out of the parking lot. And my mother tells the story of several weekends where I would almost have sort of an emotional breakdown. And I would say to her, "I'm not Brenda, you left Brenda upstairs. I'm a witch and I hate you." And I think that was my way of emotionally coping with that transition being too much for me.

Brenda Dare (01:32:11):
And she says, those entire weekends, I would be an absolute bear to deal with and I didn't want to cooperate with anything. And the only thing I can think of is that was my attempt to cope with the fact that transitions were so hard. Sunday nights, to this day, I despise Sundays. It just feels like the worst thing ever, to go into Sunday evening and realize Monday's coming. And there's no logical reason for that now, but I hate Sundays because... Sunday evening I used to pay the neighborhood kids to steal one of my shoes, because if I lost both shoes, my parents would get frustrated and they would stop somewhere and buy me a pair. But my parents were very frugal. And if only one of those shoes was lost, well, move heaven and earth, they were going to find it.

Brenda Dare (01:33:03):
So, I would bribe the neighborhood kids when I was home on a good weekend to steal one shoe so I'd have a couple more hours at home where they had to find it. And eventually they learned what kids' houses you looked into and what candy bars did I promise and what lengths did I go to to have somebody steal one of my shoes. So, you might look at it and think, well, going home on weekends was a wonderful thing, but it really wasn't. It was very, very difficult.

Jessica Tomko (01:33:36):
Do you think it affected your adjustment to living in the home?
Brenda Dare (01:33:42):
I think it galvanized my relationships with the kids because when we would all get back on Sunday nights, we were kind of all in that state of upset, and we found ways to comfort one another. We used to tell ghost stories, because it was better to be scared than sad. We would come up with strategies like that. But I think it made my relationship with my siblings that much harder because when they did see me, I was always in some sort of emotional turmoil. And so it was really hard to build the kind of relationship that they had amongst themselves, the other four of them.

Jessica Tomko (01:34:19):
You had the unique experience of going back to the home after surgeries, correct?

Brenda Dare (01:34:23):
Yes.

Jessica Tomko (01:34:24):
So, how was that?

Brenda Dare (01:34:25):
Most summers up until I was about 12, 13, I remember asking--I said this earlier--teachers to send me to summer school, but my first transition home, I want to tell a little story about that because I think it's unique, it was very planned. I knew that I was going to go to public school. So, there was a lot of investigation to what school would meet my physical needs. And I remember going on several day trip visits with my physical therapist, who I'd learned later was a polio survivor herself. So, she had been through some of the same trials and tribulations, but I didn't know that as a child.

Brenda Dare (01:35:09):
To visit certain schools in the Washington [Pennsylvania] area, I remember visiting St. Hilary School where my brother was a student and was the very first time I ever crawled up and sat down on a chair by myself. And my mother was so moved that she asked the head nun of the school if we could take that chair home with us, and I still have it. But I couldn't go to school there because there were too many steps to get in. So, I ended up going to ... Washington Elementary Educational Park, because there were no steps to get in the front entrance. There was, however, a ramp, not a ramp, but ramped concrete in the courtyard there that I remember learning to manage in my wheelchair to get down. And the doors were so heavy, and they insisted that I be able to do that myself before I could go to school there. So, there was a lot of planning that went into that. And I remember being very, very excited that I was going to get to go home and go to school.

Brenda Dare (01:36:16):
The first time I visited the school, I remember just being gobsmacked. Where do these kids, where do they sleep? And everybody explained to me, "Well, they go home. That's what the buses are for." "You mean they go home every day?" That was such a foreign concept to me. Even though I knew my siblings lived at home, the fact that most kids were home every night and had to go somewhere else during the day was just very strange to me because my schooling had taken place in the same building where I slept. So it was a unique experience to be a kid who had more connection with the outside world while I was there.
Jessica Tomko (01:36:57):
And what about your final transition?

Brenda Dare (01:37:00):
I didn't know my final transition was my final transition because they were all kind of, “after surgery you'd be back,” and it just so happened that was the last one, but there was some trauma involved in that. Cases were assigned to, now we would call them caseworkers, but they were coordinators back then. And I had the same coordinator through all of my experiences, a woman by the name of Helen Paytok, who was, we called her, “The Great Witch.” She was not well liked. She was very much about formal institutional living. And I remember asking her, "Are you sure when I go home for good this time," which is what they called it. If you're going home for more than a weekend, you were going home for good. "Are you sure I'm leaving?" And it was a weekend in June, I think. "Yes. Yes." And I don't know why I asked.

Brenda Dare (01:37:59):
And I went on a five day camping trip with my father and my brother and his girlfriend. And on the last day of the camping trip, my father informed me that there had been some discussion and I wasn't ready to come home yet and I had to go back the next morning. I was so angry because I was told I was coming home for good. I was so mad. And I remember seeing Paytok in the cafeteria a couple of days later. And she came over with this very syrupy sweet sort of smile. "Hi Brenda, I know you weren't expecting to come back, but we're so happy to see you." And one of the very first times I really remember (after screaming at Fat Laila), standing up for myself, was I looked at her and I said, "I don't want to talk to you. You're a liar." And she was very upset, but she knew she didn't want to cause a scene in front of other children. So, she backed away.

**PART 3 OF 4 ENDS [01:39:04]**

Brenda Dare (01:39:03):
And I left probably about four months after that for the last time. And I remember being very determined just in my own head that I didn't ever want to go back. And it just so happened that that was the end of my surgical adventures that necessitated rehab afterwards.

Jessica Tomko (01:39:22):
So, it happened after that?

Brenda Dare (01:39:24):
I went through a period. I was in seventh grade and I went through a period of, "Oh, I never want to go to college." Even though I knew education was the ticket out of little Washington, I was so determined that I wanted to stay home. I wanted to be a kid, but then I lived with my parents for a couple of years and I decided that wasn't such a good idea. So, I went to Edinboro University, which at that point I graduated public high school from Trinity in 1990, the first fully mainstreamed kid to go through my elementary school and then graduate from high school.

Brenda Dare (01:40:09):
I had to transfer districts because Trinity was willing to move all my classes to one floor. And when I graduated, by that point I was ready to go away. And I had 26 days between graduation and the summer program at Edinboro University that you had to go to, to prove you were worth OVR’s [Office of Vocational Rehabilitation’s] money to go to college. And I only spent 27 nights in my mother's house after that. I found a roommate and moved into my first apartment and started working very shortly after I came home from college. And it was those experiences in the Home that had me convinced I really wanted to work to help other families and other kids with disabilities have different experiences. And I had a very fanciful plan for what that was going to be. I was going to teach special education and I was going to teach all of these families in my off time, that they didn't have to send their children away and I was going to help build the accessible world they needed to stay at home with their families.

Brenda Dare (01:41:23):
Looking back now as a person in middle-age, I've kind of accomplished some of that goal. Even if I didn't do it by having this wonderful school I was going to open. And these families following me as the person who was going to shape the world. I know, but I craved that sense of community and being able to help my peers be included. And I'm happy to say I've accomplished that.

Jessica Tomko (01:41:52):
What about you, Kathleen? How was your transition out? And what happened next?

Kathleen Kleinmann (01:42:01):
Going home, I felt it was something that I had longed for, and it was like that phrase, “time to exhale.” And I felt like that's what I was able to do, was just [exhales audibly], finally. When I got home there was no plan, and I ended up being at home with nowhere to go for about three years. There was a tutor sent a couple of times a week to work with me. And back in fifties, you didn't have a right to education as a disabled child. And my mother saw no reason to worry about it since I wasn't going to ever work anyway, and I wasn't ever going to leave home anyway, because I was there to stay. So, she wasn't having any incentives at all. And it was only eventually other people started putting pressure on the family to do something different.

Kathleen Kleinmann (01:43:10):
So when I was about nine years old, ten years old, I was sent to Electric Heights in Turtle Creek, which was a four-room classroom that had mostly kids with cognitive disabilities and a couple kids with just very severe physical disabilities, and I was one of those. And the teacher would try to give us some time, but mostly it was activities like singing and maybe some arts and crafts and parties. It wasn't very serious education. I was there for three years and I had different teachers and the last teacher I got, got very upset that there was some kids there that should be taught something. And we were obviously operating at a level much lower than our age. And he raised a big fuss and demanded that the families agree to sending us to public school or some other school, or at least a higher level.

Kathleen Kleinmann (01:44:27):
I'm talking about some of the kids who had cognitive disabilities also were still sent to a higher level of schooling and they fired him, but we got out because he was a troublemaker. And I'm forever grateful to that teacher for doing that because there was... Life would've just continued because I didn't, at that point, have a vision that the world could change for me or that I needed an education. I hadn't learned
that yet. So I was about to turn 13 when I went to school for the first time. And then I began to realize that maybe I should take advantage of this. Maybe this is “the next ticket.”

Brenda Dare (01:45:17):
Wow. What a difference. Because when I got to public school, it was a big thing that I was going to go to regular public school. And I was always very bright and loved to read. And when I went to my first day of second grade, I came home and I was absolutely in tears and angry. And my mother said, "Well, why are you so upset?" I said, "Mom, you said I was going to school with kids who were smart and they can't read!" And it totally blew me away. I learned to read reading street signs on the trip from Pittsburgh to Washington. And so I was reading pretty well by the time I got to that second grade classroom. And these kids were just learning basic letter blends and I was absolutely beside myself. [To Kathleen] But, I'm sure you had more to say about your transition and how you got from that first schooling at 13 to what came next.

Kathleen Kleinmann (01:46:22):
Well, I mean, I continued to go to Camp Easter Seal every summer. And so I was with other disabled children for a couple of weeks out of every year. And I clung to that. Those were real relationships. Those were when I could be myself and not try to be what other people wanted me to be, or didn't like me at all, and I didn't know “what to be” with a lot of people. When I was with other disabled kids I could just be “me” and some of them liked me and some of them didn't. And I was able to have what I would call normal experiences. Although somebody might look at that and say, that's not normal, but it was normal. It was very normal.

Kathleen Kleinmann (01:47:11):
There were cliques. And there were fights and there were boyfriends and there were dreams and there were secrets and there were practical jokes and everything was really real at Camp Easter Seal. I think there's a movie out now called Crip Camp, and I think it just won a whole bunch of awards. I can't wait to see it, but that those camping experiences for disabled-

Jessica Tomko (01:47:38):
Was that the same camp that you went to?

Kathleen Kleinmann (01:47:40):
No, but some kid somewhere got a movie made about how important that experience is. And actually, it wasn't just with the other disabled kids. There were the camp counselors who were teenagers sent to take care of us or hired to take care of us who became us, too. Became one of us. And there was a peer sensation, and they were an affiliation and there were very strong relationships between these exceptional able-bodied teenagers who wanted to be with disabled kids.

Kathleen Kleinmann (01:48:20):
And I don't know, that was very enriching. And it gave me all the confidence that really helped me break out of a shell as an adolescent and began to set my ambitions and form other healthy relationships with people who weren't disabled. I don't know, there was a continuity there, but I do think disabled kids need to be somewhat with disabled kids. And I think some of this -- all the time being mainstreamed -- has some drawbacks to it. I think there needs to be a blend. I think Centers for Independent Living
provide the possible link to help that. But, that's not the only one. There are other ways that disabled people need to find “their peers” and need to affiliate with -- like other groups do -- to draw strength from each other and support from each other and to speak a language that each other understands for common experiences that we're discovering here in this conversation.

Kathleen Kleinmann (01:49:31):
And those relationships really help us form our futures and strive towards our goals. And I think that learning from the institutional sessions and staying with the kids and learning to work with people who didn't have disabilities, that continuity really is enriching. And I’m about to turn 70. I think I've had a really good life. I think there were some hardships, and I think it was really hard starting out. And I will never forget the experiences I had at the Home for Crippled Children. I think that a lot of their policies were wrong. On the other hand, when I hear the trauma that Brenda expressed about the coming and going and how traumatic that was for her, that kind of validates some of their rationale for not letting us go [home]. And that’s a surprise to me to hear, but good, because I always felt being punished for not being able to go [home]. Maybe punished is a little harsh, I felt it was not good to not be able to go home. And I resented it, not being allowed to go home, but maybe there was some rationale behind it. I don't know.

Brenda Dare (01:51:00):
I still think they were wrong to say that you could never go home. I think it needed to be structured differently, but I think that that “clean break” philosophy is not healthy.

Kathleen Kleinmann (01:51:12):
And I just think that there just needs to be different. Maybe one size doesn't fit all. Maybe that's the answer. There needs to be alternatives. And some people will adapt to one setting better than another. And maybe there needs to be that kind of examination.

Jessica Tomko (01:51:32):
Sounds like that directly affected your career. Can you tell me a little bit more about that?

Kathleen Kleinmann (01:51:37):
Yeah. Since I decided I wanted the education, I wanted to get away from my mother. At the same time, I wanted to have children like my mother. I love my brothers and sisters very, very, very much, and I wanted to have my own children. And so I decided that education was the way to do that. And so I went to Penn State and the reason I went to Penn State, because the ratio was four to one -- four men to every woman. And I figured I'd come out with a husband. That plan turned out to be valid. And I did come out with a husband, and I ended up having two children, and they’re now young adults with families. Like I said, I learned to put long-range goals in place and to follow through, and it's kind of working out.

Kathleen Kleinmann (01:52:34):
But, it's the memories from the past [that] still form the foundation of the goal-setting process. I was set up through the help of the therapies to work out the issues that were limiting me. I was able to be a part of the accessibility change that Paul is talking about here. I was able to be part of the push for the [Americans with Disabilities Act] and the lifts on buses, and to watch a lot of the obstacles melt away. I
think the fact that we saw this story in our lifetime is very exciting, and to be able to be a part of it from some angle. And I don't think we'll ever quit, but to be part of that, to see the changes that society has had in our lifetime. And maybe a lot of it has to do with the fact that we had a TV in 1955.

Kathleen Kleinmann (01:53:44):
Maybe that was the start of that, that we could see other ways of things and other people could see us too. That there's some transparency that begins to formulate in our society. And people are always evaluating ways to do things and making things better and not going backwards, but going forward and changing policies and changing the environment and offering choices and giving people options.

Kathleen Kleinmann (01:54:18):
I think that wasn't happening in the ‘50s. And maybe we were part of the process that made that possible in our going through the Home for Crippled Children, maybe that was part of what's happened to society and going to these Camp Easter Seal and learning to affiliate with other disabled children, and then learning to relate to people who didn't have these disabilities and engaging them in our process. Maybe that's why we were able to accomplish as much as we've done in our society.

Jessica Tomko (01:54:51):
Do you have any take-aways, Brenda?

Brenda Dare (01:54:54):
Some similar themes to Kathleen. I do think that I didn't have the camp experience [that Kathleen had] because when I left the Home for the last time I went to Girl Scout Camp with my troop the summer I came home. And that was a lot of fun. That was a very sort of Lord of the Flies experience. I got to do a lot of things that my mother still doesn't know about to this day. And that's probably a very good thing, including kissing lifeguards behind the pool supply shack. But, I think that the sense of community I built with other kids with disabilities [at the Home] is something that has really followed me through my life.

Brenda Dare (01:55:34):
And I want to see that blend that Kathleen spoke of between inclusion and integration of kids with disabilities, with their non-disabled peers, but also their opportunity to develop that sense of freedom and identity that comes when you're within a peer group where you have some of the same struggles and you don’t have to perform in order to be normal enough for other kids to like you or to not be so different. Because I think there's value in that difference and that sense of being able to be yourself.

Brenda Dare (01:56:08):
And I think we’re kind of on the cusp of losing that if we don’t pay attention to creating those experiences for kids with different disabilities. And I’m concerned about that, but when I reflect on what it was like to come up through sort of the last generation of people who had the institutional experience I think there are a lot of things happening in my life that I never would’ve thought of when I was trembling in that parking lot on Northumberland Avenue on Sunday nights, I never would’ve thought that I would be working full time, because that’s not something my parents would expect. Never would’ve thought that I would be a parent to a six year old because I was flat out told you'll never have children because relationships don’t happen for people like you, by my parents.
Brenda Dare (01:57:04):
And I think that the confidence I gained from those early years is a lot of what made that able to happen and being able to plan for those things and really make them goals and make things happen on my own timeline and really develop my own definition of success, which I think is a very powerful thing. And I think that we need to make sure all children have that, but especially children who struggled to be integrated with their typical peers.

Kathleen Kleinmann (01:57:39):
I will mention I married a man who was a Ph.D student, and I ended up getting a master's in Social Work and a master's in Public Health. So, education was always very important in my early twenties and pursuing educational goals and that set me up for a career that was very meaningful.

Brenda Dare (01:58:04):
And I don't think you've stopped learning yet.

Kathleen Kleinmann (01:58:06):
No. And then Paul's the attorney.

Jessica Tomko (01:58:11):
Any reflections on living in the Home?

Paul O'Hanlon (01:58:14):
Well, I mean the one thing that I remember just as a distinct kind of thing is that there was exactly one staff person. I remember a woman who I had the sense that when she related to me, it's sort of like she would mother me and I remember that being so unlike everyone else, that there was no one else that seemed to have a relationship to me as a child as if I was a child. I mean it just stood out as being the one. And I think that that's part of what made the Home kind of brutal was that there was no attention to your intellectual, I mean, your emotional development. It was sort of like a pure physical kind of relationship and just no attention, I think, to the emotional development of kids.

Paul O'Hanlon (01:59:24):
I think some of the things that are different are hard for me to tease out, because I think some of it might be gender-related. I mean, I know that as a boy my parents had no idea. They just had no idea. They had no idea how I was going to be able to do anything. They had no idea how I was going to go to school and no idea what I would do, but they kind of held the space like that their commitment was I'd get an education and I'd get a job or I'd do something. I mean, I remember one of the stories that kind of kept being retold was that there was a doctor somewhere that I saw when I was a little kid and the doctor said something along the lines of, "He ain't going to make a living being a ditch-digger, so he better get a good education." And that was sort of like the thinking that my parents always had, that I wasn't going to dig ditches for a living, so I better get a good education.

Paul O'Hanlon (02:00:31):
I started college in 1972, so I kind of came of age in the '60s. One of my memories of Camp Easter Seals was this relationship with the counselors. The counselors would mostly be the ones who would decide what got played on the public kind of system that would blare music usually throughout the camp. And I
think ’69 was the first year I went and what was playing was Woodstock. And it was just sort of like this experience of being a teenager being in a space with older kids, people who were really in their early, late teens and early twenties as counselors and kind of sharing the culture of the day.

Paul O'Hanlon (02:01:33):
I remember Jimmy Hendrix’s Star Spangled Banner blaring through the PA system throughout the camp. And that was really a very interesting experience. So, I went to University of Pittsburgh, undergrad, and I was never involved with the disability group. And I don’t know what even existed at the day. I remember reading the Pitt News and there was an article about it. And the article addressed kind of like why there was so little interest. This would have been in the mid-’70s. And essentially what somebody said was that, "Well most of the kids with disabilities who are coming for college are really interested in an immersive experience rather than kind of like focusing on people who are like each other." And I know that for me, it was just, I went to Pioneer grades one through eleven, most of the kids that I was in the 11th grade with, I was in the first grade with as well.

Paul O'Hanlon (02:02:54):
And so we were so totally sick of each other and on each other's the last nerve at the point of the 11th grade. And just the sense that we were isolated, it was sort of, it was not a good situation. And then I went to high school, 12th grade in Mount Lebanon. It wasn't really until I started Pitt that I had this experience of kind of making friends. So, for me, college was this explosion of relationships and for the first time in my life kind of being able to do normal things. Yeah. And so that was so amazing but because, I think, I grew up in the ’60s, I was a person who had a mission in life. And my mission in life was to eliminate poverty in a land of plenty.

Paul O'Hanlon (02:03:55):
Because I grew up during the War on Poverty in the sense that poverty was this terrible trap that we needed to kind of get people out of, that it wasn't fair, it wasn't right. And most of my life, I was sort of fighting the war against poverty and the ADA kind of passed almost, I just had no attention to it. I mean, I think back and don't know why, but I just had no attention. And it really wasn’t until 1992, when I was going about my life, minding my own business. And I started seeing these buses going by with these little blue wheelchair insignias, and I thought, man, I want to get on one of those buses someday and just kind of like ride a few blocks because I had never been able to ride buses, at least in Pittsburgh.

Paul O'Hanlon (02:04:52):
I remember once I went to California and got on a bus and thought, boy, they really know how to live here. And that's really what started my transition toward being a disability advocate. So, it just sort of started in the early ’90s where I just found myself more and more interested in disability issues. And I think that one of the things that I really learned in the Home, or there's a few things. Number one is I have a daily appreciation for how close I came to not having the life I have, like that truth is had I been born with two dislocated hips it could have made the difference in the course of my life. There's so many things that I see in retrospect that I kind of came so close to just not having the life I have.

Paul O'Hanlon (02:05:59):
And so that's kind of informed me about kind of not discounting what people were capable of because so often it's just one small thing put them on a different kind of trajectory. The other thing I learned in the Home was that institutions aren't good places. It's just, I think there's no good institution. I think
that it brings out the worst in people. I think that it's a inhuman model and it's pretty brutal. So, it's sort of, every time I go into something that might be an institution, there's sort of like the smell test. Most of them have a smell. And when I smell that smell, it's like, "Oh God, I know what's here." The other thing is an appreciation for you don't know what it's like there until you spend the night, and it's a whole different world at night. So, I've always been sort of decidedly anti-institution and very suspicious of why we need these special places and who they really benefit.

Jessica Tomko (02:07:24):
Yeah. I think that brings us to a close. Does anybody else have anything that they want to add?

Kathleen Kleinmann (02:07:35):
No, thank you for letting us share.

Jessica Tomko (02:07:37):
Thank you.

Kathleen Kleinmann (02:07:38):
This was interesting, to go back through these memories.

Brenda Dare (02:07:43):
And this is the first time I've ever talked to other people who've been through the same experiences kind of after the fact. And it's been really interesting.

Paul O'Hanlon (02:07:49):
Yeah. I knew one other person who was in the Home, but she was around 16 and she had a very different experience because for her, it was kind of like my experience going to college. It was a freedom that she had experienced for the first time. And I think it's probably a more appropriate age to be going someplace like that than five or three.

PART 4 OF 4 ENDS [02:08:28]