Disabled people in disabling settlements

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Introduction

For almost fifty years I have been in charge of organizing events – like the present one in Berlin, and I rarely take advantage of the opportunities offered to all other participants to impose my presence with a specific contribution. Quite frequently, though, I have assumed the role of chairing a meeting or participated on panels and other forms of discussion. In such cases rumor has it that "nobody can stop me!"

This time I am making an exception in order to draw your attention to a theme that is very dear to me and has kept my personal interest unabated for over four decades. The theme is people and particularly people with disabilities in human settlements. On this theme, I never miss any opportunity to intervene with any means available, including, of course, presentations of papers at local, national and international conferences. And I repeat myself, speaking always on disabled people – and disabling settlements.

While I am genuinely interested in the needs of the disabled, I am also interested in improving the living environment of the able-bodied. Understanding the needs of the disabled and recognizing their special problems can show the way to a radical and efficient solution of many universal problems of human settlements.

The disabled population

Information relating to the number of the disabled tends to be confusing and misleading. Reasonably accurate statistics usually exist for people with certain physical disabilities connected with the limbs of the body which help man's movement, the internal organs, the senses, the vocal system and chronic skin diseases. Less accurate figures also exist for disabilities connected with certifiable mental disabilities: mental retardation, schizophrenia, etc. However, a third category – that of the socially disabled – is not reported at all, although it is an important sector of the urban community.

Further, another forgotten category includes a large number of people who though actually sound in mind and body suffer from the same limitations as the technically disabled. Since young children and old people belong to this category, everyone has experience of operating as a disabled person. In addition, all those who are temporarily disabled by ill health, which can include pregnant women and indeed anyone suffering from any kind of mental stress or physical discomfort whether induced by such trivial things as a cold in the head, overwork or a sprained ankle, should be included in the total.

Official statistics indicate that the number of the physically disabled ranges from 15 to 25 percent of the total population, but it would not be an exaggeration to say that at any given moment 50 percent of the total population in the world suffer from some form of disability as regards their performance within human settlements.

Since all categories of human disability (physical, mental, social, actual or "enforced") must have a bearing on human settlements, a systematic approach is needed to select the relevant connections. While all cases of disability are of equal importance from the humanitarian point of view and probably from the medical point of view, not all of them are equally relevant to human settlements, to come to our beloved ekistics jargon.

The disabling settlement

Judging from all our experiences we can safely say that human settlements at all scales and in all parts of the world (and increasingly as we go from poor to rich countries) offer a prohibitive environment to their inhabitants, and that even the able-bodied man is unable to cope with their scale, speed, complexity, and irrationality. Such fundamental human performances as walking, hearing, seeing, sleeping, working, are being hampered – not to mention the physical, emotional, and intellectual development of the individual.

There is every reason to believe that people disabled at birth, or who have been inflicted with a disability at some stage

in their life, feel their handicap very acutely when dealing with the requirements of everyday life. It is a bitter thought that by imposing the additional need to overcome the obstacles of an inhuman environment their lives are made even more difficult and sometimes it is impossible for them to operate at all. This thought is particularly ironic when we consider that implementation of the knowledge already developed by medicine and technology could allow such disabled persons to live normal and healthy lives among their fellow men.

It is for this latter reason that children must be counted among the disabled people in today's urban settlements. The physical structure of the city itself and the way it functions robs them of freedom, initiative, independence and security in a safe environment as well as exposure to all facets of life in the settlements – the very prerequisites for proper development.

Old people meet analogous problems in their built-up environment. They may, in fact, be responsible for creating some of the prevailing conditions in the settlements – while children are not. But, not only because of the decrease of their physical abilities, but also because of the increase in the speed, scale, and complexity of the city, they find themselves completely unable to cope with their surroundings.

The disabled in settlements

To outline the actual problems, all possible connections between the five elements of settlements (nature, man, society, shells, networks), people of all ages and types of disability, and the social, economic, political, administrative, technological and cultural points of view should be analyzed. Such research will require a major effort, but the important thing is to get the process started as it can be approached in incremental steps. I will begin this effort by outlining some aspects of the problems of the disabled related to the basic dimensions of human performance in space.

Each human settlement has a structure which reflects and facilitates the performance of the various functions within the settlement. People tend to cluster around central facilities according to more or less clear-cut patterns of interdependent communities of various scales. One of the most characteristic scales of community existing in any city is defined by the movements of the inhabitants to satisfy their daily needs. The overlapping kinetic fields of their daily movements can be taken to define the scale of the neighborhood.

Most of the technically disabled do not live in special institutions but are dispersed among the rest of the population. The others live in various kinds of institutions such as mental homes, old people's homes, sanatoriums, etc., or – in the case of the socially disabled – tend to be concentrated in special areas of the city such as slums and special housing projects.

In considering the locations of the institutions in which disabled persons live, it can be concluded that:

- The location of these structures was picked without thought either for the convenience of the disabled or of those associated with them.
- The buildings are excessively forbidding, thus increasing the isolation of the disabled from the outside world.

I will not discuss the nature, size, formation or equipment of specialized centers for the disabled in any detail. Excellent examples exist in the four or five most wealthy countries, but most of the existing institutions – there and elsewhere – leave much to be desired. This is not so much due to apathy and neglect as to the speed of progress in building design and technical equipment, constantly increasing costs and limitations of experience.

Although there are no truly reliable statistics, those that I have examined show a striking gap between the recorded figures of handicapped people who are in need of hospitalization or constant treatment in clinics, etc., and the numbers of available facilities for them. These shortages occur even in the most advanced countries and facilities are totally lacking in most of the developing countries.

On the other hand, there is a steady increase in the number of projects specially designed for the handicapped. Apart from institutions themselves, this includes playgrounds, swimming pools, schools, workshops, etc. This development is still in its infancy and most projects are very specialized, so that there is little as yet that can be said to be ready for universal pplication.

The incorporation of handicapped people in community organizations – whether a kindergarten or a swimming pool – is preferable to a uni-purpose institution. This is not to say that specially designed equipment and facilities do not serve a useful function, but that most disabled people would greatly prefer to participate in the general public places if it was made physically possible for them to do so, and if social prejudices could be overcome.

Special housing projects for the elderly and/or the disabled have been built in a few cities. These are an interesting development even though they still have the defects of segregation. Although this is not so severe as living within an institution, it seems that the majority of the inhabitants resent being cooped up with neighbors all suffering from similar disabilities.

If we assume, as I think we can, that disabled people would like to function as normal individuals, a study of the movement of the ordinary inhabitants to and from their local central facilities could yield helpful results. From it one could estimate the distances disabled people would have to cover, the effort they would have to make, the route they would have to take. Consequently, one could set priorities for new projects and define the equipment needed for adapting existing facilities to more convenient use by the disabled.

There are many other problems such as the difficulties of finding suitable work, social and cultural prejudices, the high costs of equipment and medication, which make life for handicapped people far more frustrating and less rewarding than for their unhandicapped neighbors. This remains true even in the most advanced and liberal societies.

But before going further into my argument and attempting a formulation of some realistic proposals about what one could do to improve conditions in the future, let us be more concrete and illustrate our argument with an example.

Athens – An inaccessible city for the disabled

I would consider it a privilege to draw your attention to a special effort by people with disability to study and describe prevailing conditions in terms of accessibility to central urban facilities in **Central Athens.**

I am borrowing information from two reports published by the Spastics Society, Athens, on two special surveys on the subject in 1984 and ten years later in 1994.

Two surveys in 1984 and in 1994

In 1984, a team from the Spastics Society began to investigate the conditions of accessibility in the central services of the city. The team was comprised of ten people, six of whom were motor-handicapped. There were three volunteers and one social worker. Vital advisory assistance was offered by an architect, town and regional planner, a founding member of the Society.

The areas investigated were those which every citizen inevitably comes into contact with when living in a city:

- Circulation of pedestrians and public transport
- Buildings of public administration

- Hospitals
- Universities and colleges
- Cultural centers
- Recreational centers

The team collected the data by personally visiting and testing each site and service. The report contains extended tabulations of data collected which we do not reproduce here for lack of space. An overall description was made for the sections where classification into tables was not possible.

A second survey identical with the above was organized by the Spastics Society ten years later in 1994. In the following we summarize only selected parts of the report.

Criteria and method of evaluation

● **The aspects examined** in detail and the reasons behind this choice were the following:

- Stairs: Stairs are an insurmountable barrier for a person in a wheelchair. Sharp inclines, worn conditions, as well as the depth and height of steps, cause problems to the elderly and to any person who walks with difficulty.
- Ramps: If a building has stairs, a ramp is indispensable for anybody in a wheelchair or for those unable to climb stairs.
- Handrails: A handrail is indispensable for persons walking with difficulty.
- Elevators: The access of a person with disability to the interior of a many-storeyed building is possible only if there are elevators. International specifications provide an entrance door of 90 cm. Actually, most elevators have an entrance of only 70 cm. A further problem is the size of the elevator itself, as well as the double doors, which (where they exist) reduce the capacity and create difficulties for people in wheelchairs.

● **The grading of building accessibility** in five categories were based on the following:

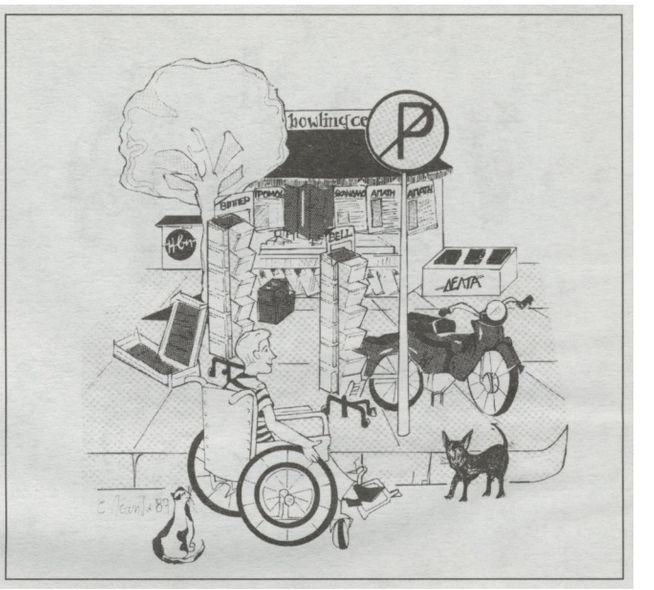
Very good	: no stairs, normal size elevator, ramp, handrail
Good	: not more than 4 steps, normal size elevator
Medium	: steps from 5 to 8, normal size elevator
Bad	: existing steps from 9 to 14, small elevator
Very bad	: over 15 steps, no elevator or small elevator in many-storeyed buildings.

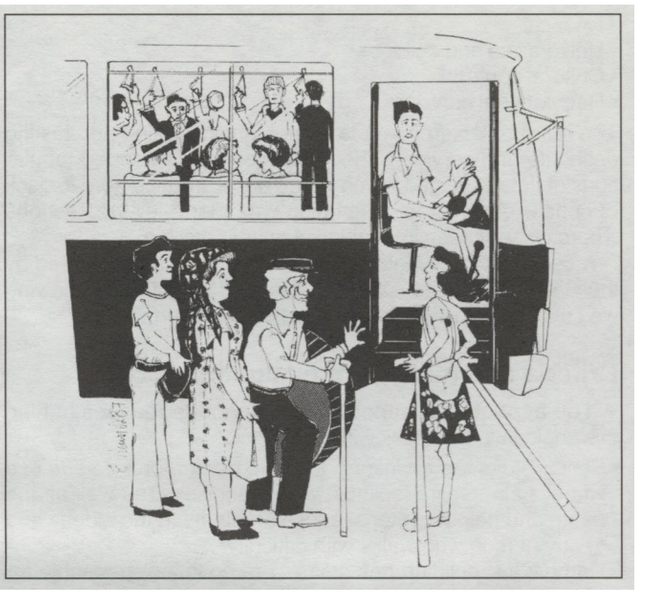
Circulation of pedestrians and public transport

● **Pedestrians** use the "so-called" pavement. The main problem encountered by people walking with difficulty, on crutches or in a wheelchair, is the faulty construction of the pavements, i.e.:

- Pavements often differ in width at one point or another, steps protrude at the entrances of houses, kiosks with their merchandise on display or stacked on the pavement, greengrocers' crates and even trees, can become traps for any person walking with difficulty. Often there is no room at all for the passage of a wheelchair.
- Traps on the surface of pavements, caused by holes, cracks and protrusions, the dissimilar material used in their construction and the high step-down from pavements with steep inclinations, render the movement of a handicapped person very hard indeed.
- Cars and motorbikes illegally parked on the pavements totally obstruct passage and render yet harder the already problematic circulation of people with disabilities.
- At crossings handicapped persons, especially those in wheelchairs, face another major problem: with no inclined level at the juncture of the pavement and the road, the wheelchair has to turn around and descend backwards, which necessitates outside assistance.

Other obstacles which seriously impede circulation of people





with disabilities are:

- empty spaces between pavement and road (probably for drainage);
- sharp slopes where wheelchairs risk going off course or moving with dangerous acceleration;
- inadequate or insufficient road lighting;
- cramped pedestrian traffic islands;
- underground passageways;
- short duration of green traffic lights at pedestrian crossings.

In 1994, conditions remain unchanged.

- **Public transport:** Persons with motor difficulties are excluded from the public means of transport, not because they do not wish to use them, but because the means of transport themselves raise insurmountable barriers.

Buses and trolley-buses: High and narrow steps make the entrance and descent from buses and trolleys extremely problematic. The first step is usually very high from the road surface and the next ones, though lower than the first, are still very narrow. This makes the use of buses and trolley-buses very difficult for people on crutches and makes them dependent on outside help.

Standing inside the vehicle until a seat is available also constitutes a major problem. Support handles are too high and of no use whatsoever for people with problems of balance or of shorter stature. Low horizontal handbars would solve the problem for everyone.

Very serious problems are also caused by erratic driving, sudden acceleration and the often inconsiderate behavior of many bus drivers. A special recommendation during their training course would do no harm.

When the time comes for the passenger to descend, he discovers, after searching around for the "stop" button, that he cannot reach it because it is too high!

These observations are repeated in the 1994 report.

The subway: The subway is one of the most convenient means of transport. But for the motor-handicapped person the underground station is usually an unattainable experience.

Of the 21 underground stations with 40 entrances and exits, surveyed in 1994:

2 entrances and exits have Very Good access
2 entrances and exits have Good access
5 entrances and exits have Medium access
5 entrances and exits have Bad access
26 entrances and exits have Very Bad access

Furthermore,

– of the total 40 entrances/exits to the underground stations not one of them has a ramp
– 31 station entrances/exits have handrails, but
– only 4 are accessible to the motor-handicapped.

Other data resulting from the on–the-spot survey are:

- in most stations, transit from entrance to exit is over an elevated bridge or through an underground crossing; this means that passengers must ascend or descend over 30 steps;
- the height of the ticket booth is such that a person in a wheelchair cannot reach it;
- the installation of the new ticket-punching machines is another disappointment, since the width of the passageways is prohibitive for the disabled;
- in many stations there is a gap between platform and train, which is also a source of danger for entrance and descent;
- the new carriages – recently acquired – have worsened rather than improved accessibility to the subway, for four reasons ranging from the increased height from platform to carriage, the gap between platform and train, to the interior design of the carriage.

In 1994 the situation remained unchanged.

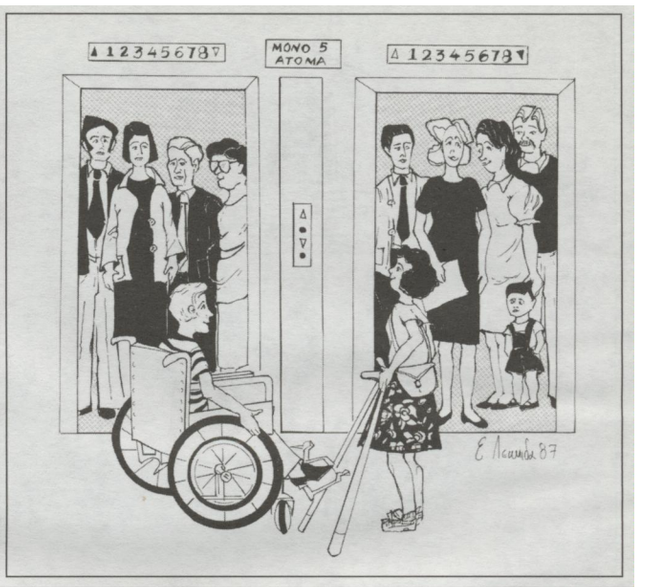
Means of long distance travel: It is unnecessary to mention long distance buses, ships and trains, since everyone is aware that these are inaccessible to a person with disability without an escort. The attitude of the staff toward passengers with disability differs from one company to another, and conditions depend on their personal susceptibility and conscientiousness.

Buildings of public administration

This sector includes the Ministries. The motor-handicapped have to visit a Ministry as often as any other citizen.

The concentration of services in the center of the city, the lack of parking facilities, pedestrian problems, the non-existence of building specifications, chiefly in the numerous old buildings, cause serious problems of access to the motor-handicapped.

Of the 20 Ministries surveyed in 1984:



- 7 have Very Good accessibility;
- 5 have Good accessibility;
- 2 have Medium accessibility;
- 3 have Bad accessibility;
- 3 have Very Bad accessibility.

The 1994 survey showed an improvement. Of the 20 Ministries

- 10 have Very Good accessibility;
- 3 have Good accessibility;
- 5 have Medium accessibility;
- 2 have Bad accessibility;
- None have Very Bad accessibility.

However, both surveys reveal that of the total of 20 Ministries:

- 3 have ramps
- 3 have handrails
- 18 have normal-sized elevators while 2 have medium-sized ones,

and confirm that revolving doors remain an insurmountable barrier to the motor-handicapped person.

Hospitals

Of the 34 hospitals surveyed in 1984

- 13 have Very Good accessibility;
- 9 have Good accessibility;
- 3 have Medium accessibility;
- 1 has Bad accessibility;
- 8 have Very Bad accessibility.

Further, from the total of 34 hospitals:

- 6 have ramps
- 2 have handrails
- 2 have no elevator

In 1994 the situation remained unchanged.

Education buildings

Of the 12 universities and colleges surveyed in 1984:

- None have Very Good accessibility
- None have Good accessibility
- 1 has Medium accessibility
- 4 have Bad accessibility
- 7 have Very Bad accessibility

Further, of the total 12 universities and colleges:

- None have a ramp
- 3 have handrails
- 8 have no elevator

In 1994 the situation remained unchanged.

Cultural centers

Of the 12 museums surveyed in 1984:

- 2 have Very Good accessibility;
- 1 has Good accessibility;
- 1 has Medium accessibility;
- 3 have Bad accessibility; and,
- 5 have Very Bad accessibility;

Furthermore, of the total 12 museums:

- No museum has a ramp;
- 2 museums only have handrails; and,
- 2 museums only have elevators.

In 1994 the situation remained unchanged.

Entertainment: Theaters and cinemas

Toilets with no adaptations for the disabled are a major prohibitive factor to the visit of entertainment halls.

Of the 38 theaters surveyed in 1984:

- 7 have Very Good accessibility;
- 5 have Good accessibility;
- 2 have Medium accessibility;
- 6 have Bad accessibility; and,
- 18 have Very Bad accessibility.

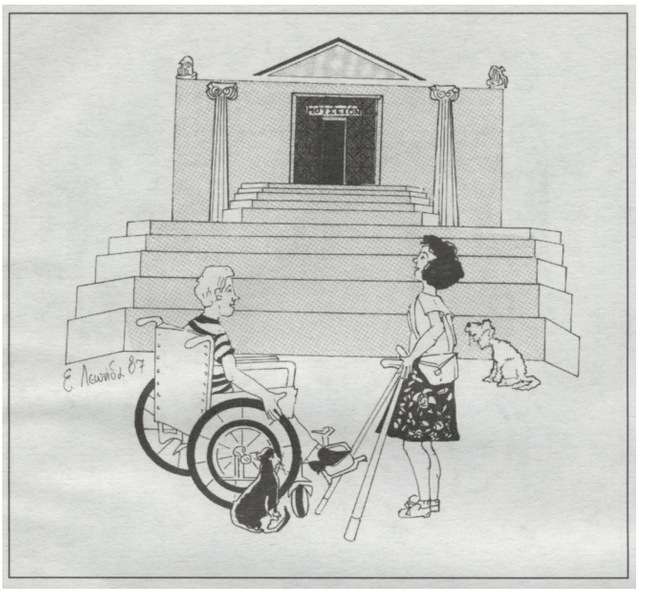
Of the total 38 theaters:

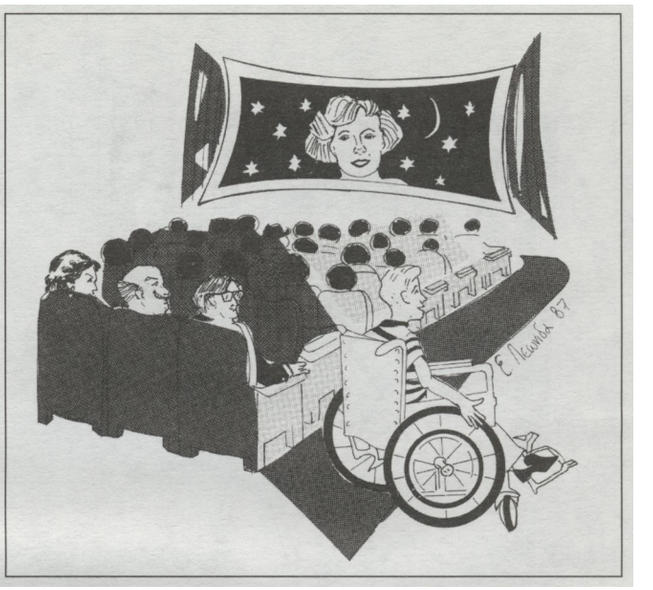
- Not one has a ramp;
- 15 have a handrail; and,
- 5 have an elevator.

In 1994 the situation remained unchanged.

Of the 31 cinemas surveyed in 1984:

- 6 have Very Good accessibility;
- 7 have Good accessibility;
- 8 have Medium accessibility;
- 1 has Bad accessibility; and,





• 9 have Very Bad accessibility.

Furthermore of the total 31 cinemas:

• None has a ramp;
• 3 have handrails.

In 1994 the situation remained unchanged.

Surveys of this kind carried out by people with disabilities themselves and the fact that conditions have not improved within a decade, leave no doubt that the situation is stagnating, in spite of the fact that substantial steps forward have been made by Central Government agencies, local authorities and a large number of NGOs.

More recent data are not available. Maybe between now and the year 2004, when Athens hosts the Olympic Games, things may improve. At least the "Special Olympics" which will follow the general ones will force authorities to make the necessary installations accessible.

But whatever the case with Central Athens, the problems remain in the broader capital area and the thousands of other settlements in Greek territory.

Things to put right

Although the problems of settlements are due to an imbalanced relationship of all the elements, exacerbated by their unexpected and rapid growth, there are other more immediate causes pertinent to rehabilitating human settlements both for the fit and the unfit.

One major cause of disabling settlements is that they are built for a non-existent population. Buildings, roads and open spaces cater for a fictitious model of the human being – exclusively for a man (not a woman) in the prime of life, and at the peak of his physical fitness. Statistically speaking, only a small minority of the population fall into this category, even among the fit. There is no thought for the handicapped.

This approach is not peculiar to the physical structure of the settlement. Industry and public services do the same. Consider the inconvenience regularly suffered even by the non-average adult – such as very short or very tall people – who have to commute in private cars that are too low or in buses and trains that have very high steps.

Further, decisions are taken and plans are almost always made for a static human condition and not for a dynamic and evolving one. The majority of the houses, whether built by private initiative or the public sector, are designed for young couples with two children. Provision is seldom made for adjustment. Yet the needs of a family change with time.

Man's attitude towards technological progress and the machine is a phenomenon directly related to the problems of settlements. Man tends to consider that whatever is technologically feasible is also socially desirable. This is wrong. Moreover, he readily accepts the limitations inherent in the machine, and he fashions his environment to accommodate such limitations. Think of the car that we can call a disabled machine because, although built for movement, it cannot go up and down stairs. However, the whole city is now conditioned by this disabled machine as city streets are, by definition, nothing but ramps.

If disabled people are able to benefit from urban technological facilities, it is almost certainly by accident. We have only to consider the ramps instituted in any luxurious hotel that were not installed for the benefit of disabled clients but for the luggage trolleys. Only in a few central buildings (concert halls, etc.) do we find certain specific facilities designed for handicapped people.

Technology is supposed to release humans from their constant physical effort and to multiply human capacity. In some areas it does this quite successfully. But it has not always had such good results in settlements. Machines tend to change human settlements into mechanical settlements. Man pays dearly in comfort, well-being, time and development for what the machine has offered to him. Disabled people tend to pay more and gain less, especially as almost all machines are designed for use by adults in full possession of the physical, mental and psychical abilities attributed to the normal adult. Time, effort and human energy are scarcely even considered as direct costs, resulting in a false understanding of costs.

What of the future

In recent years the seriousness of the accumulated problems of human settlements (urban and rural) has aroused public interest on all levels. Efforts are being made to gain a clearer knowledge of the function of settlements, and of ways to improve the quality of life.

The same applies to the problem of the disabled. There is

an increasing awareness of the acuteness of the problem on all levels, from the local community to the earth as a whole. Individual solutions have been developed related to local conditions and requirements, and many of these could well be adapted to the needs of the world at large. The interdisciplinary nature of the various conferences on this subject has emphasized the need to expand our knowledge of the problems, to introduce legislation, to create centers for implementation, and to establish the proper machinery for the feedback process from whatever experiments take place. But little has yet been accomplished, even in the advanced countries. On a world scale one could almost say nothing has been done.

Although medicine, architecture, and human engineering each offer a plethora of information on the basic principles of life and the needs of people, the pertinent data are neither adequate nor interrelated.

In spite of this limited communication, and the fact that the field of design in cities and the field of rehabilitation of the disabled have worked in almost complete isolation, both have laid out and implemented principles which are completely identical. This is all the more significant as each field has a decisive difference of approach. Those involved in rehabilitation focus their attention on the individual man, his abilities and disabilities, and the necessity for his full participation in life. Those involved with design have abstract ideals and concern themselves with averages.

Proper planning is planning for the fullest development of people of all ages in a way that encompasses the dynamic evolution and the peculiarities of the life of each individual, offering the maximum number of opportunities with the minimum effort in a safe and stimulating environment. Such a program would meet almost all the needs of the many varieties of disabled people. This principle goes hand in hand with present social attitudes towards disabled persons. With the support of medicine and technology, the so-called disabled have now developed the ability and the need for full participation in community life, which is both feasible and desirable. Thus, when planning for disabled people of all kinds, one should be guided by the same principles which appear to guide the behavior of all human beings in settlements. To quote C.A. Doxiadis (1972):

- Man tries to maximize his potential contacts: he tries to connect.
- Man also tries to minimize his effort measured in terms of energy, time and cost. In his attempt to maximize his contacts, Man tries to bring everything close to him but he selects the course requiring his minimum effort.
- Man always tries to optimize his protective space at every moment and in every locality, whether he is alone or part of a group.
- Man tries to optimize relationship with the other elements of his system of life, which consist of Nature, Society, Shells (buildings and houses of all sorts) and Networks (from roads to telecommunications).
- Man tries to establish an optimum synthesis of the previous four principles and this depends on time and space, actual conditions, and Man's ability to create such a synthesis.

The idea of segregating the disabled in settlements of any scale should be rejected outright. This stance should be rigorously defended, even if economic conditions, land availability, administrative insufficiency, and the seriousness of the case, appear to make segregation the only possibility. The only exceptions may be some extreme clinical cases.

As large numbers of disabled people will continue to live dispersed all over the settlement, planning for the disabled should be considered throughout its whole area. We continue to stress that proper planning is the only logical guide to planning for the disabled. If the guiding principles and their implementation are correct, a large number of problems of the disabled are automatically solved with the existing means. Thus, although present conditions may leave much to be desired, future settlements present a hopeful challenge if we develop the proper perspectives, accept the proper standards and define and allocate the necessary means for their implementation.

Immediate action

Finally, here are some thoughts for action concerning structures and settlements of various scales:

The room is the most intimate part of man's shell. On the average, people spend more than 70 percent of their time in the house, and a substantial part of this in their private room. In the room personal taste – special design of furniture, material, and other auxiliary commodities – makes for a cosy atmosphere. In it we can provide many means for coping with basic disability.

The house is a place in which a number of people have to live together. Thus it is necessary to accommodate different patterns of ability and disability (old people, children, adults) and this results in a dilemma. To what extent must individual comfort be sacrificed for the sake of group satisfaction? It is nec-

essary to consider basic dimensions for the satisfaction of different kinetic fields. A flexibility of space arrangement is strongly recommended. Margins in fixed installations for future adjustments of the spaces are also desirable. The prevailing standards, especially in low-income houses, need to be reviewed. High-income dwellings, where private initiative is the dominating factor, may be the key as to how certain facilities can usefully be provided.

Multi-storey dwellings should have provision for basic facilities on each floor with easy access from the street to the main floor.

Neighborhoods: All houses and apartment buildings should be located within neighborhoods where pedestrian circulation prevails and where the circulation of vehicles is restricted. These neighborhoods should include services for most everyday requirements, plus the special facilities needed by the disabled. All dwellings should be within a 10-minute walking distance of such services. From the point of view of social structure, no neighborhood should consist of a single income group or a single minority group, nor should it contain an exceptionally high ratio of disabled persons. Ideally personal choice should provide the criterion of the distribution of the inhabitants.

Communities: Neighborhoods should be grouped hierarchically into communities of a higher order, and accessibility should be guaranteed to the activities which seem to be the characteristic focuses of scale of communities, until we reach the central community of the major settlement. The hierarchy of communities is a concept which derives from patterns developed over centuries by human beings in settlements. This pattern is based on economy – of human resources and energy as well as in the financial sense of the word.

All public and private buildings which are constantly used by people living in the settlement or in neighboring communities should be required to incorporate up-to-date technological means for facilitating their use by people with various kinds of disability.

One major aspect of planning for the cities of the future is the separation of pedestrians from the machine in all central areas. Circulation is almost invariably on two different levels: vehicles on one level (preferably below the surface of the earth) and pedestrians on another, the two linked by stairways, ramps, and elevators. In existing settlements the existing patterns involve vested interests that often resist sudden and drastic changes. Also serious technological reasons (capacity of existing networks, pattern of roads, width of streets, etc.) may not allow for the easy adoption of new standards. However, efforts are being made in many cities. Commercial centers in a number of existing cities have been turned over to the pedestrians and access by ramps to all public buildings has been imposed by law in major cities in several advanced countries.

Conclusion

The quality of life in today's urban settlements is poor both for the able and the disabled. The settlements themselves are obstructive and are responsible for forcing even the able-bodied to behave as disabled persons. The technically disabled suffer even more because they have to cope with their particular limitations in addition to those induced by their environment.

Thus human settlements, in which almost all of our time is spent throughout our life, must be built for the comfort and safety of all their members, giving equal rights and equal choices to all.

If present trends and present attitudes continue to prevail, the future is threatening, with a constant decay in the quality of life for everyone.

The only solution is for the public authorities to insist on the implementation of valid and humane standards and principles in the development of all human settlements. This may mean lowering of some technological standards (such as permitted road speeds in cities) to meet the needs of the less able members of society. But this will result in raising the standards of the quality of life for the whole of society.

A general change of attitude in all aspects of society, social, economic, political, technological and cultural, is needed. It means that humanity must develop the ability to face reality and accept that we must create a human environment in which Man will be Master.

Finally, able-bodied and disabled are terms of relative significance and importance. The majority of the members of a society, anywhere in the world, are always disabled in one way or another. Our tasks are to push for public acceptance of the fact that human nature and human life is closely associated with disability and to accept that all members of society have equal rights to life. Individual peculiarities – physical or other -- can make people interesting, useful members of society, provided they are helped to find their proper role.

Could not we, in the World Society for Ekistics, contribute to this task?

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