

Justin M. Salisbury  
PO Box 212  
Willington, CT 06279  
[Justin.Salisbury@earthlink.net](mailto:Justin.Salisbury@earthlink.net)

Thursday, February 18, 2016

To the Insurance and Real Estate Committee of the Connecticut General Assembly:

I write to oppose the current language of Raised Bill 35, which requires health insurance companies to purchase service and assistance dogs for people with disabilities or related medical conditions, such as sudden seizures, autism, or post-traumatic stress disorder. Please remove all mentions of blindness or guide dogs for the blind from this bill. Some people with disabilities other than blindness want these service animals in order to fulfill their medical needs, and some of them have requested that this bill be introduced. Without consulting the organized blind community, guide dogs have been added into this bill. Some of the legislative staff in our state government decided that they did not want to leave out any type of service animals when writing this legislation so that they could extend this benefit to all users of service animals. Their hearts were in the right place, but they are missing some critical information about the nature of blindness, the function of a guide dog, and how guide dog schools are currently funded. Regardless of the positive intent, this bill language will threaten the guide dog industry as we know it.

The real problem of blindness is not the lack of eyesight; it is the low expectations and misinformation which exist in our society. Given the proper rehabilitation services and opportunity to achieve, blind people can lead normal and productive lives. There is a common misperception that the problem of blindness is contained within the eye conditions that cause the lack of eyesight. If this were true, there would be no point in providing blind people with rehabilitation services and very little point in having an organized blind movement. Blindness would lead to unavoidable and permanent peril, and the only relief for that peril would be the restoration of eyesight. In the National Federation of the Blind, we know from our own life experiences that blind people can raise families, succeed in our careers, and live the lives we want. The connection between blindness and healthcare is tangential at the most. If rehabilitation services become entangled in health insurance and other medical systems, it will change who controls rehabilitation services and how they are administered. It will institutionalize and perpetuate the misperceptions in society which oppress us and contribute to our 70 percent unemployment rate.

In the United States of America, funding for rehabilitation services is rightfully kept separate from funding for medical treatment. The Rehabilitation Services Administration, for example, is housed within the United States Department of Education. This is done for a reason. While an eye condition is still being treated and the restoration of eyesight is still being actively and realistically pursued, that eye condition is an illness and falls within the domain of healthcare. Once the restoration of that person's eyesight is no longer a realistic and active pursuit by medical treatment, a blind person can begin to move on with his or her life, and he or she transitions from medical

treatment to blindness rehabilitation. An individual may properly be said to be "blind" or a "blind person" when he or she must employ enough alternative techniques in order to function efficiently that his or her pattern of daily living is substantially altered. When vision is not functioning, it does not affect other body systems; it is a sensory issue, which is not an illness.

Rehabilitation services include the provision of training in the alternative techniques used by blind people and the equipment to make independence and gainful employment possible. Some blind people choose to use guide dogs to navigate their environment, enabling them to pursue gainful employment. Guide dogs and guide dog schools do not contribute to the restoration of eyesight or the management of any health condition. In fact, potential guide dog puppies who demonstrate any tendency to do anything other than guide their users, such as those which display protective instincts, are dismissed from the guide dog schools. A contrasting example could be a service dog which is trained to smell a hormone that a person secretes before having a seizure and alert that person so that he or she can take a medication to prevent the seizure. That service dog is providing a medical service; however, a guide dog is specifically and exclusively a mobility tool like a long white cane.

Currently, the acquisition of guide dogs from guide dog schools is governed by the guide dog schools themselves. Nobody but the guide dog school gets to decide if a blind person can obtain a guide dog. Raised Bill 35 will shift the acquisition of guide dogs to being governed by a medical model so that medical service providers will be making decisions about what types of rehabilitation services blind people need, which they are absolutely not trained to do. The professionals at the guide dog schools can handle their own intake, and many other rehabilitation professionals exist to offer consultation. Involving healthcare providers in these decisions is unnecessary and inappropriate.

Guide dog schools currently benefit from a great deal of autonomy because they are currently funded philanthropically. Guide dog schools have fundraising or "donor relations" departments instead of billing departments. Guide dog schools have been able to fund themselves since the 1920s, and they answer predominantly to their consumers, fundraising alumni, and generous donors. If a blind person wants a guide dog, he or she typically pays an optional fee of about 60 dollars and receives multiple weeks of free room and board at the guide dog school while training with their new dog. The cost of the dog is already covered by philanthropic contributions and any received grants. We all know that philanthropists want their contributions to make a difference. If Raised Bill 35 is passed as written, a prospective donor will then look at guide dog schools as entities whose expenses are already covered by health insurance companies under the legal mandate. Rational philanthropists can be expected to shift their contributions to other causes that are not already guaranteed funding from other sources by legal mandate so that their donations will actually make a difference. Guide dog schools will become dependent upon the funding from health insurance companies, and their success will be based upon the number of guide dogs produced instead of the proper provision of rehabilitation services. Sometimes, guide dog schools reject students who would be best-served by rehabilitation services other than guide dogs, thus encouraging them to seek those types of services that will suit them best. If Raised Bill 35 strips guide dog schools

of the financial autonomy that currently allows them to do that, blind people who should be receiving other blindness training are going to end up receiving guide dogs.

Raised Bill 35 requires that guide dogs come from an accredited, non-profit organization, but no accreditation standards have been developed with sufficient consumer participation. The guide dog schools themselves have formed alliances to issue accreditations. The accreditations that do exist are currently inconsequential to guide dog schools and blind consumers. It is no surprise that guide dog school accreditations have thus not been a focal point of the organized blind movement.

We, the blind consumers, are the only ones that can speak for ourselves when it comes to guide dogs. The National Federation of the Blind of Connecticut, an affiliate of the oldest and largest organization of blind people in the United States, has been the voice of Connecticut's blind since 1971. We work to achieve equality, opportunity, and security for the blind at the state and federal levels in active consultation with 50,000 colleagues nationwide. It is our right and responsibility to urge the Connecticut General Assembly to remove any and all inclusion of blind persons or guide dogs from Raised Bill 35. We can and will use every media outlet possible to educate the public about the danger posed by Raised Bill 35. We must clarify and emphasize that guide dogs used by blind persons are a tool of independent travel given and trained for in a model of education and rehabilitation and not in a model of medical services nor by medical professionals. The distinction between guide dogs on the one hand and assistance dogs given by medical professionals, for medical necessity, and paid for by health insurance on the other hand should not be considered illegal or harmful discrimination. The National Federation of the Blind fully respects the right of organizations of persons with disabilities other than blindness to succeed in legislating for services to which they believe they should be entitled so long as they do not infringe upon the rights of the blind. All mention of guide dogs and blind people must be removed from Raised Bill 35.

Thank you in advance for your partnership in our work to raise the expectations of blind people and overcome the misperceptions that hold us back.

Sincerely,

Justin M. Salisbury, NOMC, NCUEB  
Legislative Coordinator  
National Federation of the Blind of Connecticut  
477 Connecticut Boulevard  
Suite 217  
East Hartford, CT 06108  
860-289-1971  
[www.nfbct.org](http://www.nfbct.org)