

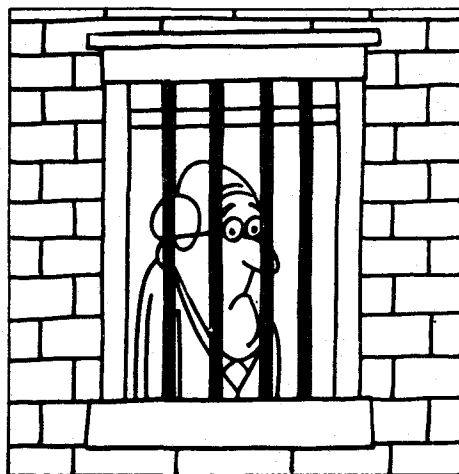
# dehumanization VS DIGNITY

Most persons, no matter how disturbed or disabled, tend to live up to what is expected of them. In planning and programming for the mentally ill and the mentally retarded, it must be assured that the individual retains his rights and his capacity for self-direction insofar as the disease or disorder permits. Any limitations that are imposed should of necessity be due to the particular disease process or condition. Such limitations must be constantly scrutinized and adjusted in the direction of increased self-responsibility, self-control, and adaptability on the part of the patient.

Each patient possesses a sense of individuality and self-worth. He must be treated in a manner that is humane and that honors his dignity and retains his humanity and human attributes. Thus, in treatment programming, staff of the state's mental health and mental retardation facilities must constantly be concerned that what they do and how they do it is always based upon patient needs.

The material presented below reflects the concerns of the staff on the maintenance of humane practices within the various institutions. Permission to reproduce this material was given by the Minnesota Department of Public Welfare.

## dehumanization is:



Being treated as a prisoner—instead of a patient.



Being called "Hey, you."  
Being shouted at when a normal voice would do the job.