Transcript: Disability Community Briefing: What You Can Do to Stop the Attack on Section 504

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CLAUDIA: Welcome, everyone. You are in a community briefing about the attack on Section 504, and what you can do to stop it. Next slide.

Today we are doing a disability community briefing on litigation filed in the Northern District of Texas. That's a federal court. And the case is called *Texas v. Becerra*. The case attacks Section 504 of the Rehabilitation Act.

Next slide. We have an array of all-star presenters today. I'm gonna do a little piece about what is Section 504, and the Section 504 regulations. And then I'm gonna turn the mic over to Alison Barkoff.

Alison was a leader, a Director at the Administration of Community Living, which is part of the Department of Health and Human Services. Alison led and shepherded the updated Section 504 regulations that we're going to talk about today, and that are the target of the harmful litigation that we're talking about today.

Then we're gonna turn it over to Steven Schwartz. Steven has been fighting for community integration, and has been advocating for integration of people with disabilities for decades. The name of his organization, the Center for Public Representation, and his name, appear in many precedent setting cases about integration and deinstitutionalization. And Steve is gonna talk about what's in the complaint that was filed in the district court in Texas, and what it means. Then we are going to hear from

Theo Braddy, who's the Executive Director of the National Council on Independent Living. And Theo's been a leader in the Independent Living Movement for more than 40 years, and Theo's going to talk about what Section 504 and the regulations mean for the Independent Living Movement. Then we're gonna hear from Howard Rosenblum, who is the Chair of the organization, Deaf Equality. Howard has been a deaf leader and advocate and lawyer for decades, and is going to tell us why Section 504 and the updated regulations are critical to the deaf and hard of hearing community. Then after that, we're gonna hear from Chloe Rothschild by video, who is an autistic self-advocate. She lives and works in Ohio, serves as a board member of The Arc, and is gonna talk a little bit about what Section 504 and the regulations mean for self-advocates. Next slide.

So I wanna give you a little bit of a roadmap for what we're gonna cover today in our webinar. We're gonna have a little bit of information about what is Section 504, what is the Spending Clause, which is a legalistic term that is at issue in the litigation we're talking about today. And what are the Section 504 regulations? We're gonna talk about what's in the updated Section 504 regulations issued by the Department of Health and Human Services in May of 2024. We're gonna talk about the litigation *Texas v. Becerra*. We're going to talk about how Section 504 and the updated regulations support independent living and all different groups of disabled people, including deaf and hard of hearing people, and self-advocates. And then we're gonna review the action alert that we've put out as a community, and we're gonna take questions and answers. I understand that one question people have already been asking, is whether a recording will be posted about this webinar. We are gonna, likely, we're recording today, and we're likely gonna post an edited video of the webinar, probably not the questions and answers. So that's what we believe right now. Next slide.

So I wanna do a quick overview of Section 504 of the Rehabilitation Act before I turn the mic over to Alison Barkoff. So you all may know this, this may be a review for everyone here, but Section 504 is a short statute that was first enacted in 1973. And its first iteration was only 46 words. And the statute says that any entity that receives federal financial assistance, so this means federal dollars, any entity that gets money from the federal government cannot discriminate on the basis of disability. And so the fact that the non-discrimination, the rules apply based on getting those federal dollars, that means that Section 504 is called a Spending Clause statute. So that's, like I said, kinda legalese… and Spending Clause… it refers to a section in the U.S. Constitution that governs how Congress can regulate the federal budget, and the strings that attach to federal dollars [pause]. So, that's what it means that 504 is a Spending Clause statute, that it applies to entities receiving federal financial assistance, federal dollars. So there are other Spending Clause statutes that cover race and sex discrimination. So any attack around Spending Clause may affect these other statutes down the road. And because Section 504 is such a short statute, we find all of the detail in the Section 504 regulations. If you watch the "Power of 504," or "Crip Camp," or have read books about the disability rights movement, you know that these were first adopted in 1977 after a massive advocacy campaign by the disability community and the Independent Living Movement. So that's my quick overview of Section 504. And I'm passing the mic to Alison Barkoff. Next slide.

ALISON: Great, thank you so much, Claudia. Again, my name is Alison Barkoff, and I'll give a quick visual description. I'm a middle-aged, White woman, with curly brown hair, with a purple top on and a necklace. And I have behind me a blue background that says the George Washington University. I'm a long time disability legal and policy advocate, and I've had a chance to work with many of you, in roles inside and outside of government. And as Claudia mentioned, I was privileged to lead the Administration for Community Living during the Biden administration, where I and my team worked together with the HHS Office for Civil Rights on the regulations that we're talking about today. And I've recently just joined George Washington University, where I'm a Health Law and Policy Professor. Claudia described what the Section 504 statute is. And many federal agencies have their own regulations that implement Section 504 with respect to all of the funding that their agency puts out. So when you think about Section 504, a lot of people think about education. And the Department of Education has their own regulations that relate to federal funding in the education space. But 504 also covers other areas too. And for the US Department of Health and Human Services, our regulations cover all health and human services that the department funds. It is a very, very broad reach. So it includes, for example, private doctor's offices, hospitals, medical facilities that take Medicaid or Medicare, which is the vast majority of the medical field. It includes state Medicaid, disability, and aging programs. It includes, for example, clinical research, things that the National Institutes for Health, and Food and Drug Administration, for example, fund. And it includes child welfare systems. So that's just a sense of how broad the reach is. As Claudia mentioned, the first regulations came out in the late 1970s. And for more than 40 years, these regulations and the statute have been really critical to fighting discrimination in access to healthcare and human services. I know I don't need to tell this group that of course, discrimination has continued to exist, and so many disabled people over the years have really shared the continued barriers. Things like people with mobility disabilities, unable to get basic preventative healthcare like a mammogram, pap smear, because of inaccessible equipment. Or people who are blind or have low vision, being unable to use an inaccessible kiosk, or website at a doctor's office. People with intellectual disabilities. Having their children removed by child welfare, solely because of their disability. Could go on and on. And in the COVID-19 pandemic, this longstanding discrimination was really, really, became visible. And we saw what happens with the discrimination and inaccessibility and bias and stereotypes in our healthcare and human services. So for example, disabled people were denied life-saving treatment like ventilators, with hospitals and states that had discriminatory crisis standards of care. We saw people losing services, community services, and forced into institutions, where there were the highest rates of death and COVID infections. And we saw the barriers that people faced in being able to access vaccines and other types of information because of inaccessible websites and vaccination sites. And that truly created a momentum and urgency for change. Next slide.

So many of you pushed HHS to make it a top priority to update these regulations for the first time in more than 50 years. And I can speak as a former HHS official, that it became a top priority for us too. I really wanna emphasize how much the community shaped these regulations. We started the process by meeting with disability organizations and advocates, and other stakeholders to hear about the issues that you thought needed to be covered in an updated regulation. And then we went through a formal process to update the rule. It's called a notice and comment process. So we first put out a rule in September of 2023 that was a proposal. It's called a Notice of Proposed Rulemaking. And it was detailed with the proposals that what we wanted to change, why, and the evidence to support it. And we asked for the public's feedback through this formal comment process on what the proposal got right, and what should change. And more than 5,000 stakeholders, people with disabilities and organizations provided input. We took that input, and we came up with a final Section 504 rule that was issued in May of 2025. It's hundreds of pages long, responding to all of the comments, explaining what the rule did and didn't change in response to those comments. And when Steven talks about the litigation, I just wanna make sure people understand how strong this record is. There's more than 2,300 pages of evidence, of studies, of comments from all of you, supporting this rule. And that's what the judge, if this case moves forward, will look at the very strong record supporting this rule. Next slide.

I just wanna emphasize, everyone should feel ownership over this rule. This reflects the lived experience across all types of people with disabilities, and all types of discrimination. You truly helped shape this rule. Next slide.

So I'm gonna take a couple minutes to highlight some of the major updates in the Section 504 regulations. There's a lot in there, but I'm just gonna touch on the major issues. So the first thing really coming out of COVID, seeing the insidious discrimination that so many disabled people faced in the healthcare system, being denied lifesaving treatment, we thought it was critical to be able to put out a very clear regulation that the lives of disabled people are as valuable as the lives of people without disabilities. And there's a provision in these new regulations that prohibit discrimination based on stereotypes and bias. These are things like denying an organ transplant to a person with a disability, based on the stereotype that they can't follow postoperative instructions. This is about denying life-saving treatment based on a belief that disabled people are worth less, as we saw in COVID. It's about the ways that disabled people have been screened out of participating in important clinical trials by unnecessary criteria. And it's also about value assessment measures like qualities, Quality Adjusted Life Years, that value the lives of people with disabilities less, and are used to deny access to benefits and services. This rule makes clear that all of those things are illegal disability discrimination. Next slide.

The second thing we often talk about is the fact that disabled people face so many health disparities. People have less access to preventative healthcare, more chronic health conditions, and shorter lifespans. And one of the biggest barriers is the lack of accessible healthcare. This rule tries to address those types of discrimination. It creates, for the first time, enforceable standards that require medical equipment to be accessible. And by medical equipment, that's things like exam tables, scales, mammogram machines, and dentist chairs. And it sets very specific standards that are also aligned with a rule that the Department of Justice put out around the same time as our rule, that their rule applies to public entities. Ours applies even more broadly, to all healthcare providers. It's not just inaccessible medical equipment. As I mentioned, for many people, the fact that healthcare has gone online with websites and apps and kiosk have created barriers. And the regulation sets specific enforceable standards, what's called WCAG 2.1 as the specific standards. And aligns again, with the web access rule that the Department of Justice put out for public entities. Next slide.

Both the Americans with Disabilities Act and Section 504 have an integration mandate that requires covered entities to provide services to people in the most integrated setting appropriate to their needs. And this is the law that the Supreme Court was interpreting in the decision *Olmstead v. L.C.*, where Lois Curtis and Elaine Wilson won, and the court held that people have a civil right to live and participate in their communities, instead of being forced into institutions. And since 1999, courts have interpreted *Olmstead* in many, many cases, that are either brought by the Department of Justice, or private lawyers like protection and advocacy organizations. And the reach of the integration mandate has been clear that it doesn't just apply to things like state-operated institutions, but all types of segregated facilities like nursing homes, and adult care homes. Day settings, like sheltered workshops and educational settings. It also has expanded to people not just in segregated settings, but those who are at serious risk of entering them, like people with urgent needs on waiting lists, or facing cuts to community services. All this case law was put into these regulations. Next slide.

Because the Section 504 regulations hadn't been updated in more than 50 years, it hadn't been updated since the Americans with Disabilities Act was passed, and regulations were put out. So in many ways the 504 regulations align with the ADA and Department of Justice regulations implementing it. So two important examples include effective communication, which is obviously critical in the medical context. And it is aligned with the Department of Justice standards for public entities, and gives primary consideration to the requests of disabled people about how best to communicate with them. That includes examples like sign language, captions, alternative formats, and plain language. In addition, a real centerpiece of disability rights law is the requirement that covered entities may have to make a whole range of reasonable modifications, meaning changes to their policies, or practices, so people can have equal access to the benefits of their programs. This aligns with the many examples of reasonable accommodations that the Department of Justice has put out in their regulations, and adds, based on your feedback, the fact that supported decision-making, which is an alternative to guardianship, is an important type of reasonable modification. Next slide.

Another really important area is in child welfare systems. And I see it in the chat, I'm sorry, I don't know when I said the final regulations came out. They came out in May of 2024. So last spring. If I said a different time, I'm sorry. The proposed rules were in September, 2023, and then we put the final rules out in May of 2024. The next area is around child welfare systems. And there's a long history of discrimination against parents with disabilities. Maybe some of you are familiar with the famous report from the National Council on Disability, called "Rocking the Cradle." And many state laws presume disabled people are not capable of taking care of their children, or there's failures to provide accommodations, so disabled people can participate in child welfare services. And we've seen discrimination against disabled children in child welfare, including placing them in restrictive out-of-home settings instead of supporting them in their own homes or another home. And those types of discrimination are prohibited. And then finally, as I mentioned, the 504 rules align with the ADA. Everything from service animals, to accessibility of buildings, mobility devices, et cetera. Next slide.

So just to update people on the current status. These regulations went into effect 60 days after it was published. So that was in July of 2024. And I will just mention there are some specific provisions that have a longer timeframe, like the medical equipment and the websites. Section 504 is enforced both by HHS' Office for Civil Rights, and it can be enforced by private lawyers, including protection and advocacy agencies. And one thing I just really wanna make clear is that these rules are now the law. And they are, unless and until, either a court issues a final decision saying otherwise, or HHS could go through formal rulemaking to change the regulations. None of those things have happened yet. And if HHS attempts to change the rule, they will again have to give opportunities for the public to give input. And we will work with all of you on building a very strong record on why the changes are not justified. I put links on the slide to information on both HHS' Office for Civil Rights and Administration for Community Living websites, at least as of yesterday, they were still accessible. And before I turn it over to Steven, I just wanna give a few comments in summary. These regs are really, really important. And you helped shape them. We will be working with all of you on the many ways we might need you to engage to protect them. As you'll hear from Steven, it's not clear what the path is right now. At the same time, I just wanna recognize that we know there are many, many things happening, at the same time, that are impacting the disability community. And today's webinar is mostly about educating people about the lawsuit, making sure that you know that disability legal advocates are engaging and tracking, and that we will be keeping you up to date. At this point, there are really only limited specific ask that Claudia will walk through. And I just wanna flag, as a national advocate, that many or most of you are engaged in other advocacy that is happening right now, including with Congress, related to threats to Medicaid, which is critical for disabled people. And that threat is moving. And just this morning, the House put out a bill to start the process. So please, we are working to update you on this. Do not take your energy off that important issue too. And with that, I will turn it over to Steven.

STEVEN: Thanks, Alison. So my name is, next slide. My name is Steven Schwartz, I'm at the Center for Public Representation, as Claudia mentioned. I'm a White, older man, white hair, I'm wearing a blue shirt. And the background of my downstairs, where I spend most of my time living, working, and playing, is behind me. As Alison said, there are a lot of attacks that are coming at us as disabled people and representatives and advocates for disabled people. One of them, which is gonna talk about today, is deeply threatening, but in limbo. So I wanna be able to both talk about the deep threat, but also about the status. So in September of 2024, Texas and 16 other states, which are listed in the action alert that went out with the webinar, filed a lawsuit in the Northern district of Texas. Not surprisingly, Texas picked a favorable form, a place where it thought it might have a judge who would side with them. And the case is sweeping in its scope. It first challenges the new 504 rule that Alison described. And I'll go through a little bit what those challenges are. But at the end of the day, what it asks the judge to do is eliminate the rule altogether. And second, it challenges the constitutionality of the statute itself. The civil rights statute that Claudia described that was enacted almost 50 years ago, is under attack as well. Now there's two parts when the Department of Health and Human Services put out the rule that published the final rule, there's two parts to it. One is called the preamble, and the other is called the rule itself. The preamble's a description of what the agency intended to do, the comments that came in, the agency's consideration of those comments, as well as what its final thinking was that led to the second part, the rule itself. In the preamble, there is a reference to gender dysphoria, that gender dysphoria may be a disability. That statement is in the preamble, not in the rule. But it's that statement that is at the center point, center focus of this case. It is not all that's in the case, but it was clearly what sort of triggered Texas and many other states to initiate this challenge. Next slide.

But the single sentence in the preamble on gender dysphoria is in the lawsuit, followed by a much broader attack. And it lays out, Texas lays out attacks that are directed to the integration provisions that Alison mentioned, both the requirement to provide services in the most integrated settings, and the provision that describes the scope of the integration mandate, as covering people who are at risk. The lawsuit says that the integration provisions are themselves illegal and improper, and they're not consistent with the *Olmstead* decision that Claudia described. In other words, the lawsuit says that the entire rule, everything that Alison covered, is in legal terms, what's called "arbitrary and capricious." What it really means is the entire rule is invalid. It never should have been enacted in the first place, because it interferes with the state's discretion to provide disability services the way it wants to provide them. Mostly, when you read the whole case, what you see underneath is, states are concerned about costs, and the cost of compliance to do many of the things that Alison described. But of course the cost of compliance to ensure that disabled people are given equal access to medical treatment, or a fair shake, when it comes to being able to read and use a kiosk is a cost that the Congress already decided is appropriate and should be borne. Next slide.

So if you look at the complaint itself, at the very end, there's what lawyers call the "demand for relief." It's what Texas and the 16 other states want to see happen. And what they really want to happen is to hold the whole rule invalid. To say that it's unlawful, that it never should have been enacted, and to set aside or vacate the final rule. Next slide.

In addition to the challenge to the rules, in the provisions that Alison described, the lawsuit says that even though this statute Section 504 was enacted 50 years ago, and it was then, and always was, oh, and still is unconstitutional. So this lawsuit says, "Judge, we want you to declare the entire Section 504, that's 50 years old, declare that provision unconstitutional because it improperly directs the use of federal funding, both in terms of how much funding, and where it is applies." This part of the lawsuit is frightening. Because if the judge were to adopt it, and actually declare the statute unconstitutional, it could portend that other anti-discrimination statutes based on race and sex and ethnicity are also unconstitutional for the same reason. And because there's provisions in the regulations that tie together, that link 504 and the ADA, and prohibitions on race and sex discrimination, it links them all in how they're enforced. Striking down the rule might imperil the ADA as well. So there's aspects of this lawsuit, particularly the challenge to the statute, that is simply frightening. Next slide.

And you can see from, again, that demand for the relief, you can see that what the lawsuit is seeking is to declare Section 504 unconstitutional, and issue an injunction. That means you tell the federal government and everyone else that they cannot enforce this statute anywhere, anyhow. Next slide.

So where are we? Initially, when the lawsuit was filed back in September, the Department of Justice was planning to aggressively defend the rule, and the statute, and they negotiated with Texas for a fairly tight timeline to go through the whole litigation process. Recently, with the new administration, the parties have asked the judge to pause this timeline, put it on hold for a while, while they confer about the status of the rule, and of the case. And they have to issue a status report back to the judge later this month, February 25th, 2025. So for now, right today, there's just a lot of uncertainty. We don't know what and whether DOJ will defend the rule, or the statute, or the case. We don't know whether DOJ will seek to promise that the rule will be reconsidered. We don't know what Texas is going to do. And the other states, whether they would dismiss the case. If DOJ and everyone simply promised that the one preamble sentence which is not enforceable concerning gender dysphoria were to be eliminated. So there's a lot of uncertainty. And because there is a lot of uncertainty, I think our best action right now is to wait and see where we are in the next two weeks, and we will provide you some update. Next slide.

And so just to finish, although there is uncertainty, we cannot sit and do nothing. So as disability advocates, we are trying to prepare for all the options that could occur. The case might go away. The case might continue. The case might focus on the rule, but not the statute. So organizations from around the country, organizations of disabled people, have indicated a willingness to join the case, or present briefs as friends of the court, if necessary. Maybe members of Congress and progressive attorney generals will be helping as well. There is no doubt a clear threat to the rights of disabled people everywhere, and even to the basic longstanding laws which we have fought so hard to pass. But for today, we don't know exactly how that is gonna play out. We will know that soon. And it may be that we'll need to take action on February 26th, and it may well be that this administration delays any action on the case for months. But we'll keep you updated, and after this webinar, through the list of everyone who's registered, we will send you updates as soon as we know about them. Thanks very much. And I'll pass it on, I think, to Theo.

THEO: All right, sorry about that. I had to come back on camera. Hopefully everybody could hear me well. Again, my name is Theo Braddy. I'm Executive Director of the National Council on Independent Living. I'm a Black male, baldheaded, I have salt and pepper beard, and wearing glasses. And I have a black and white checkered shirt. Let me try to personalize some of this. Put a face to it, in other words. How it affects people living with disabilities, like myself. I was with Alison in D.C. when Secretary Becerra announced the Section 504 final rules. I remember boldly stating that ableism had just got punched in the face. I also stated that I hoped it would be a knockout punch, and that it wouldn't get back up again. But if it got back up again, it was going to be up to us, to do what we need to do to ensure that it don't continue. And this is what I meant, right? It's trying to get back up again. And we cannot lose this fight. Again, I feel the need to remind all of us what we are fighting for. Section 504, final rules. Really, it it is a game changer. They know it, right? See, it deals with, and Alison did such a great job, and Steven did such a great job on this. It deals with discrimination based on disability and medical treatment decisions, that addresses and eliminate biases or stereotypes about individual disabilities. And this is what's so great about it. We get to the crest of ableism and how we are treated. And Alison mentioned this, it eliminate value assessment method that places more value on people without disability than people living with disabilities. And so when it comes to life-sustaining medical treatment, it goes to the able-bodied person. We saw this with COVID. And I'm afraid it's going to happen again. It's gonna get worse. And it is not a matter of if, but a matter of when we experience another pandemic. So when it comes time, and you will be notified, a major part will be to share your real life stories to decision-makers. And I wanted to share mine. I don't talk about this with anybody, but I wanted to give you something that, when it comes time, you can share your story.

Many of you may not know, but I'm a C4 quadriplegic since age 15, where I broke my neck playing high school football. I'm paralyzed from the neck down. I used a wheelchair, all my life, since age 15. All four of my limbs are paralyzed. This is important because a few years ago, maybe about 12, 13 years since this happened, I had a lump in my inner thigh, and I went to the doctor. They did a biopsy. It wasn't cancerous. So they did this surgery, and they took it out. And I thought it was over. It wasn't. Two years later, it came back, right? So I went to the doctor again, they did another biopsy. This time I got called in to the doctor's office with my wife. They told me it was an aggressive cancer. But that wasn't all. As I sat there listening in shock, the doctor told me that the best option I had was to amputate my leg. And they had to take it from the hip socket. Now this hit me like a ton of bricks, I'm not gonna lie to you, I was in shock. And the surgeon saw it. And this is what he said to me. "It shouldn't be much of a big deal for you, since you don't use your leg anyway." Let me say that again. This professional doctor said to me, "It shouldn't be a big deal to you since you don't use your leg anyway." I immediately forgot all about the cancer, and my advocacy kicked in. I left angry, thinking about what he had just said to me. Not the cancer, but what he just said to me. I didn't want to get the surgery anymore. I completely took my mind off of it. I was angry. And that went on for about a week. Fortunately, my wife and my pastor sat me down and helped me work through it. And I decided to have the surgery, and I did. And I was laying in there, in bed, after he removed my leg. The doctor came in and said he did the biopsy, and said to me, "We took it out just in the nick of time." The cancerous tumor had wrapped around a cluster of nerves, veins and was getting ready to spread throughout my body. So this is my point. Because of what that professional medical doctor said to me, it caused me to delay my surgery. And if I had stayed in that mindset, I probably wouldn't be here today. He wasn't intentionally trying to cause me harm, right? He just had bought into that misconception that many professionals have about people with disabilities, that ableism. That Section 504 final rules try to get to.

So why am I telling you all that? The 17 states cannot have the last word on this. We must have the last word. Our real life stories must be the last word. So right now, it's all about educating you. But stay tuned. There's come a time when we gonna need to hear your stories. Thank you for listening.

HOWARD: Right. Hello, thank you for inviting me. This is Howard. I am a White, bald man with glasses, a beard and a blue suit. I'm signing here today. That's why you hear a female sign language interpreter's voice. Today is an important topic. There is a serious attack on our rights as people with disabilities. Looking at what's been happening, it looks like there is a trickle down discrimination effect that's happening from the top. The federal government that is now breaking down a lot of reasonable accommodation systems for employees without any substitute or alternative plan about what is gonna be happening. This kind of trickles down to the state level, about what's happening and how Section 504 is really protecting the rights and it's being taken away. We're removing away the rights of people with disabilities that we have been fighting for. An example of this can be seen as the new rule that has been established, that really makes sure we have communication access at all levels. In the 50-plus years of the Rehabilitation Act, and the 32 years of the ADA Act, there are still many areas where communication access is still being denied, especially within the medical field. This rule really emphasize the fact that we need to make sure that we include the deaf and hard of hearing community and other people with disabilities to make sure that communication is accessible within the medical setting. And if that is a fail, then that's a failure of that new rule. This is at risk. This also includes the use of technology within the medical field. Like telehealth and mental health services that are done online. That needs to be accessible with either sign language services or captioning services. All technology, not just telehealth or mental health, but all technology websites, mobile devices, have to be accessible with caption and ASL services, as well as other ways to make sure that it maintains compliance with rules and the standards of the WCAG standards, the web accessibility requirements 2.1. We need to make sure that is also included. There's a lot of impact on other areas as well. For example, child welfare. That's part of the new rule that requires that to be accessible to make sure that appropriate services are given to families with disabilities, that impacts parents who are deaf or hard of hearing, with hearing children. Or hearing parents with deaf or hard of hearing children. Thinking about reunification after something has happened with a family, child welfare programs are not accessible to deaf and hard of hearing parents. They don't have training classes that are offered in ASL. They don't have information that is accessible to help those relationships improve. Often, with deaf and hard of hearing children, they're placed in homes that do not have access to their own language. And when a child is brought back into their home, often, language is at a point where they cannot communicate with their family. That is true also for parents that are deaf with hearing children. So a lot of these new rules really emphasize the need to have full access within the system for these families with disabilities. There are so many new things, but in the last, historically, 504 is really important for communication access for deaf and hard of hearing individuals. For example, in 2020, four years ago, we were part of a lawsuit against the White House for the failure to provide sign language interpreting services for COVID press conferences, press briefing. They failed to provide sign language interpreters and that was a denial of information on important issues that were impacting community members that relied on that information. If 504 was not there, we would not have the right to fight for that failure to provide communication access. We can see now the interpretation services have been stopped and we need to continue that fight. The same is true for access to other federal agencies like SSA. We need access to that. FEMA, for emergency services. Immigration services. They need interpreting communication access. The FCC. They need to have access to a lot of the programs that impact their deaf and hard of hearing constituents. USDA, transportation. USDA was actually part of a lawsuit for a failure to provide reasonable accommodations for their employees. There's so many things out there that's important based on the rights that we currently have that are at risk currently. Schools are required to have 504 plans as well. And that is also at risk. Private companies should have their programs and services, if funded by the federal government, serve all individuals, not just some of us. We need to fight for our rights. And we will not retreat. We will not surrender. We must continue to keep fighting for our rights. As Alison said, this is our rule, this is our right. We need to keep this fight up. Please don't give up. Thank you.

CLAUDIA: This is Claudia. We are now going to turn to a video from Chloe Rothschild in Ohio.

CHLOE: My name is Chloe Rothschild. I'm 32 years old, and I have autism. And for the past two years, I've been able to live independently with a roommate in a townhouse in my local community, thanks to my Medicaid home and community-based services waiver. I really enjoy being a part of my local community. I like having the same opportunities as everyone else does. I like to be able to go places and participate in life, the same way everyone else does. Regardless of if they have a disability or not. It's important to me to have good medical care and to be able to go to a doctor and not have them say, "I'm sorry. Because you have autism, we can't treat you." That just doesn't seem fair to me. I need Section 504. And so do other individuals with intellectual and developmental disabilities. The civil rights law is very important to me and others with IDD, who really wanna be a part of our local communities. We want to do what everyone else does. I like to go to the movies, go work out at my local YMCA, go to work. I have a job I love. I also like to hang out with friends. I like to go to the movies, bowling. I like to go just out, like everyone else, and have the world accepting of that. And not having Section 504, I feel like that would change, and that's not okay. Having the civil rights law is really important to me. Thank you.

CLAUDIA: Thank you. We are now going to turn to the action item of our presentation, which will require the slides to come back up. We have been getting a lot of questions about how this case might affect education. And education is generally not the subject of the final rules from Health and Human Services that were finalized in May of 2024. There are other regulations that apply more directly to the sector of education, and those are the regulations issued by the Department of Education. But if this case were to succeed in its request that the court declare Section 504 unconstitutional, that ruling would potentially apply across the board to all sectors covered by Section 504, including education. So we believe, or I believe, that we can stop this case before it gets there. I hope that's true. But that is what the case is asking for. So I hope that clarifies the questions about education and this litigation. So let me go through the action items that we're asking for about this litigation. Next slide.

We want to focus our action item. I'm seeing a funny visual on my end. But we wanna focus our action item on communicating to the 17 Attorneys General that joining a case that says that the Rehabilitation Act is not constitutional under the Spending Clause that are updated, important strong federal regulations from Health and Human Services that we all participated in, saying that those regulations are unconstitutional or unlawful, that this is not okay. We wanna get that message to the 17 Attorneys General that started this litigation. Next slide.

So how can you do that? You can do that by sending an email, or calling your state Attorney General if you live in one of the 17 states. We have example emails or scripts on our website. And the scripts or emails kind of follow what would be good to include in your communication. So the first thing is to explain who you are, where you live, how you're connected to the disability community, and a little bit about yourself. Say who you are. Then the next piece would be to say why you care about Section 504. How Section 504 makes a difference in your life, why it's important. Next slide.

And I'll just finish, and then in your email you would say, "Please stop attacking Section 504. Please drop out of this litigation. Please support Section 504." We've gotten a lot of questions about what people should do if they don't live in the 17 states. And we do have contact information for all 50 AGs on our website. And you can reach out to your state AG, particularly if you think they're friendly to disability rights, and say that you're concerned about this lawsuit, and you hope that if the lawsuit proceeds, and we don't convince the 17 states to drop it through our actions, that the friendly state AGs do what they can to defend Section 504. And there are things that the friendly AGs can do. For example, they could file an amicus brief, or they could take other steps. So you could reach out to your friendly AG, and urge them to keep an eye on this litigation and make sure that a pro-disability rights perspective is provided to the court. It's also really good to have strong relationships with your state AGs, including because state AGs will be playing an important role going forward, as we navigate the new administration and the policies, proposals and executive orders that are coming out on a daily and many times a day, in some cases, basis. And so those friendly AGs may play a role in that. And so, this is a very large group that joined today to hear about this specific threat. And I'm glad that we will be communicating with the 17 AGs that attacking 504 is not acceptable to us. But we're gonna have to come together in coalition again and again, in the near future. And so this is one community briefing to talk about one threat and one action item. But we're gonna be coming again together again in order to do lots of other group action, including, for example, defend Medicaid, as Alison mentioned earlier.

[End of transcript]