# Renewing The Social Model Of Disability

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Barnes, C & Mercer, G (1996) *Disability & Illness: Exploring the Divide*, Disability Press
Nind, M et al (Eds) (2006) *Reader: Inclusive Education: Diverse Perspectives*, Routledge, 2003
Watson, N (Ed) (2007) *Disability: Major Themes in Health and Social Welfare*, Routledge, London, UK. ISBN 9780415410755]

### Discovering the Social Model

My life has two phases: before the social model of Disability, and after it. Discovering the social model was the proverbial raft in stormy seas. It gave me with an understanding of my life, shared with thousands, even millions, of other people around the world, and I clung to it.

The social model was the explanation I had sought for years. Suddenly what I had always known, deep down, was confirmed. It wasn't my body that was responsible for all my difficulties, it was external factors. I was being Dis-abled - my capabilities and opportunities were being restricted - by poor social organisation. Even more important, if all the problems had been created by society, then surely society could un-create them. Revolutionary!

For years now the social model has enabled me to challenge, survive and even surmount countless situations of exclusion and discrimination. It has been my mainstay, in the same way as for the wider Disabled people's movement, enabling a 'vision' of ourselves free from the constraints of Disability and providing a direction for our commitment to change. As a movement the social model has played a central role in determining Disabled people's self-worth, collective identity and political organisation. Gradually, very gradually, its sphere is extending beyond our movement to influence policy and practice in the mainstream. The contribution of the social model, now and in the future, to achieving Disability equality is incalculable.

So how is it that, suddenly, to me the social model doesn't seem so water-tight anymore? In this article I will be discussing where I think we have gone wrong in interpreting and applying the social model and how I believe we need to renew our approach to it.

## Disability is 'All'?

The social model is the Disabled people's movement's key to dismantling the traditional conception of impairment as 'personal tragedy' and the oppression it bequeaths. Ablebodied explanations have centred on impairment as 'all' - impairment as the cause of our experiences and 'disadvantage', and impairment as the focus of intervention. In response, Disabled people's model has centred on Disability as 'all' - Disability as the cause of our experiences of exclusion and discrimination, and Disability as the focus of intervention. We have become so afraid of being drawn back into the 'personal tragedy' mould that we have polarised the social model. Impairment is no longer the total explanation; Disability is. We focus on Disability and pretend that impairment has no part in determining in our experiences.

Are we concerned that 'admitting' there could be a negative side to impairment will undermine the 'professional' (SuperCrip?) image in our campaigns? Or that showing every single problem cannot be solved will inhibit or excuse non-Disabled people from solving anything? Or that we may make the issues so complex that lay-people feel constructive change is outside their grasp? Or even that 'admitting' it can be awful to have impairments may fuel the quality of life/right to death/eugenics debate? Or perhaps we are simply afraid that if we 'admit' just once, to ourselves, how we really feel we may never quite manage to suppress it again?

Instead of tackling the contradictions and complexities head on, we have chosen instead in our campaigns to present impairment as irrelevant, neutral and, sometimes, positive, but never, ever as the quandary it really is.

## Bring Back Impairment!

Impairment is not always irrelevant, neutral or positive. How can it be when it is the very reason used to justify the oppression we are battling against? How can it be when pain, fatigue, depression, chronic illness are a constant part of life for many of us?

We align ourselves with other civil rights movements and we have learnt much from those campaigns. But, we have one fundamental difference from other movements, which we cannot afford to ignore. There is nothing **inherently** unpleasant or difficult about other groups' embodiment: sexuality, sex and skin colour are neutral facts. This does not mean our campaigns against Disability are any less vital than those against heterosexism, sexism or racism. However, we do need to recognise that for other groups, when 'The

Struggle' is over they will simply be allowed to 'be'; for many Disabled people, any personal struggle related to impairment will remain.

Other groups refer to their 'biological states' more readily than most Disabled people; perhaps because all their 'problems' are unequivocally a product of culture. If we once 'admit' that impairment itself carries problems, will we undermine everything we have ever achieved? We try desperately to portray ourselves as invulnerable, to be 'as good as'/'better than' non-Disabled people, because we are so afraid anything else will undermine all our claims to equality.

This fear encourages us to develop a 'conspiracy of silence'. Impairment is safer not mentioned at all; impairment has become a 'dirty word'. Our silence has introduced a whole range of taboos; a whole new series of constraints. Yet many of us are frustrated and disheartened by pain, fatigue, depression and chronic illness, including the way they prevent us from railing fully against Disability; we fear for our futures with non-static or additional impairments; we mourn past activities that are no longer possible for us; we are afraid we may die early or that suicide may seem our only option; we desperately seek some effective medical intervention; we feel ambivalent about the possibilities of our children having impairments; and we are motivated to work for the prevention of impairments. And if we can't talk to other Disabled people about these things, who can we talk to?

The suppression of natural concerns does not mean they cease to exist or suddenly become more bearable. What it does is undermine individuals' power to 'cope' and, ultimately, the whole Disabled people's movement. As individuals, most of us simply cannot pretend with any conviction that our impairments are irrelevant because they influence every aspect of our lives. We must find a way to integrate them into our whole experience and identity for the sake of our own physical and emotional well-being, and, subsequently, for our capacity to work against Disability.

As a movement, we need to be informed about Disability and impairment in all their diversity if our campaigns are to be open to all Disabled people. If our structures and strategies - **how** we organise and offer support in our debates, consultation and demonstrations - cannot integrate all Disabled people, then our campaigns lose the contributions of many people. If our movement excludes many Disabled people or refuses to discuss certain issues then our understanding is partial: our collective ability to conceive of, and achieve, a world which does not Disable is diminished. What we risk is a world which includes an 'elite' of Disabled people, but which for many more of us contains no promise of civil rights, equality or belonging. Can we expect anyone to take seriously a 'radical' movement which replicates some of the worst exclusionary aspects of the society it purports to change?

Our current approach to the social model is the ultimate irony: in tackling only one side of our situation we Disable ourselves.

## The Disability-Impairment Equation

What we need to do is take a fresh look at the social model and learn to integrate all its complexities. The social model has never suggested impairment doesn't count - that has been our (mis)interpretation.

We need to focus on Disability **and** impairment: on the external and internal constituents they bring to our experiences. One cannot be fully understood, within the Disabled people's movement, without attention to the other, because whilst they can act separately from each other, they also exist independently and interact.

Our current approach generally claims that Disability and impairment exist **separately**: once the struggle against Disability is complete, only the impairment remains for the individual. When Disability comes to an end there will be no socially-created barriers to transport, housing, education and so on for people with impairments. Impairment, however, may well be unaltered and whether this creates any disadvantage depends on the nature of individuals' impairments. Equally true, but rarely discussed, is that should an individual's impairment cease, they may well continue to be Disabled. Past discrimination in education, for example, is likely to affect future employment opportunities regardless of whether impairment still exists.

When Disability and impairment act **independently**, change in one does not affect the other. Impairment may be static, yet Disability can dramatically ease or worsen with changes to environment or activity. Leaving a purpose-built home to go on holiday may give rise to a range of access difficulties not usually encountered, even though impairment remains the same. Where impairment changes, Disability does not follow suit if adequate and appropriate resources are readily available to meet changes in need. New impairment, a fluctuating condition or a progressive impairment may means that an individual needs additional personal assistance, but levels of Disability will remain constant if that resource is easily accessed.

Disability and impairment also **interact**. Impairment must be present in the first instance for Disability to be triggered. This does not mean that impairment causes Disability, but that it is a 'biological precondition' for that particular oppression. However, impairment can also be triggered or compounded by Disability (and other inequalities). An excessively-steep ramp can cause new impairment or exacerbate pain, an inaccessible health centre can preclude the benefits of preventative measures such as screening, and discrimination can cause mounting emotional stress. Our reluctance to discuss impairment obscures this aspect of Disability and so diminishes our campaigns. In addition, the scale of impairment is relative to Disability, and vice versa. Sometimes, lost opportunities arising thorough discrimination may be paramount, whilst at other times an impairment such as pain or chronic illness may curtail an individual's activities so much that the restrictions of the outside world become irrelevant.

Integrating all the external and internal factors into our use of the social model is vital if we are to understand fully the Disability-impairment equation. This does not in any way undermine the social model. It does not disregard the tremendous weight of oppression, nor does it undermine our alignment with other civil rights movements. Certainly, it should not weaken our resolve for change. What it does is broaden and strengthen the social model, taking it beyond Grand Theory and into real life, because it allows us to incorporate a wholistic understanding of our experiences and potential for change. The 'Disability pride' so central to our movement becomes pride in the way we confront or transcend the difficulties we face, from both Disability and impairment.

Now that Disabled people's politics are established within a credible social movement, it is time to renew our approach to the social model, moving away from an 'instant interpretation' towards applying it in all its complexities and power for change. Disability is still socially-created, still unacceptable, and still there to be changed; but integrating impairment into the equation gives us the best route to that change, the only route to creating a world which includes us all.