THE SOCIAL MODEL OF DISABILITY REPOSSESSED

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I've called this paper *The Social Model of Disability Repossessed* for reasons that will be obvious at the end!

1   Assertions

I'll start my presentation with two **negative** assertions.

(i)   the social interpretation of disability does **not** provide an '*explanation*' of disability, and

(ii)   disabled people are **not** the *subject matter* of the social interpretation of disability.

These assertions are fundamental to my beliefs, and these two assumptions are where I begin my understanding of 'disability':

2   Interpretations, models and theories

I have used the term 'interpretation' rather than 'model' or 'theory' because this is where we, in the Union of the Physically Impaired Against Segregation (UPIAS), started trying to make sense of the *meaning* of disability.

At the earliest stage in forming UPIAS, and in my long discussions with Paul Hunt prior to his call for a new type of organisation of disabled people, we explored different interpretations of disability and we saw this as the beginning of a new theory:

> '... the Union from its inception spent much time reconsidering the prevailing **interpretations** of the nature of disability. The result of this groundwork was that ... [we] were able to state unequivocally that, "our own position on disability is quite clear . . . In our view, it is society which disables physically impaired people. Disability is something imposed on top of our impairments by the way we are unnecessarily isolated and excluded from full participation in society. Disabled people are therefore an oppressed group in society".' (My emphasis. UPIAS *Fundamental Principles of Disability* 1975)

Because this was early days in grappling with a new interpretation of disability we also, in the same *Fundamental Principles* document, rather loosely referred to our interpretation as providing us with a social theory of disability which could guide our struggle against oppression:

> 'the ... struggle proposed by the Union is logically developed from a social theory of disability.' (UPIAS *Fundamental Principles of Disability* 1975)

What was consistent in our view, however, was that our interpretation of 'disability' led us to focus on the nature and workings of society, **not** (I emphasise) our personal or individual attributes (which we saw as related to impairments). We had started to redefine the meaning of disability.

> '... it is society which disables physically impaired people. Disability is something imposed on top of our impairments ...' (UPIAS *Fundamental Principles of Disability* 1975)

So, let's be clear – there are important differences between 'interpretations', 'models' and 'theories' and their precise focus of attention.

(i) *Interpretations*

At an early stage in re-thinking the meaning of disability, when members of UPIAS began debating our socially inferior situation and asking why we found ourselves in this situation, we confronted a crude, but fundamental choice:

- either our tragedy is that the impairments we possess make us incapable of social functioning, or

- our society is constructed *by* people with capabilities *for* people with capabilities and it is **this** that makes people with impairments incapable of functioning.

The agreed UPIAS interpretation was that, although it may be a *tragedy* to have an impairment, it is *oppression* that characterises the way our society is organised so that we are prevented from functioning. In other words, at the personal level we may talk about acquiring an impairment being a personal tragedy, but at the social level we should talk about the restrictions that we face are, and should be interpreted as, a crime. It is society that disables us and disabled people are an oppressed social group. The central issue in our campaigns for a better life, therefore, ought to be concerned with issues around *emancipation* and this requires struggles for social change rather than concentrating on individual experiences, 'rehabilitation', etc.

At that time (early 1970s) there were no dissenting opinions that the '*problems*' disabled people faced were caused by our impaired individual bodies. Sympathetic professionals loved talking about, and encouraged us to talk about, our awful experiences (an approach the 'rectifiers' of the social model of disability now promote as if this was something new!). The problem has *never* been a lack of concern or interest by disabled people in the effects of 'impairment' but our unwillingness to tenaciously focus on the way society disables us – i.e. to concentrate on 'disability; as socially interpreted by UPIAS. This is why we, in UPIAS, realised that there was an urgent need to promote the new and different interpretation of disability which focussed on changing society. We tried different ways of doing this within the disability and wider community. With this in mind I first mentioned an imaginary disabled village in an article I wrote for a disability journal where people with capabilities became disabled and disabled people were 'normal' (Vic Finkelstein (1975) *Phase 2: Discovering the person in 'disability' and 'rehabilitation'*. The Magic Carpet (New Year 1975) Vol. XXVII (1) pp. 31-38) and later I turned this into a TV cartoon, *Very Cross Roads*, in 1985.

Interpretations, then, are simply a very early stage in trying to *make sense* of a complex situation.

(ii) *Models*

It was Mike Oliver, however, who was most successful in promoting a clearly expressed version of the UPIAS interpretation in the public arena. Being a sociologist familiar with the academic debates of the time and committed to the growth of the disability movement Mike was able to publish a detailed exploration and elaboration of the UPIAS social interpretation of disability (see for example Mike Oliver (1981) *A New Model of the Social Work Role in Relation to Disability*. Published in Jo Campling (ed.) (1981) *The Handicapped Person: a New Perspective for Social Workers?* London, RADAR; and Mike Oliver (1983) *Social Work With Disabled People*, London, Macmillan). This interpretation of disability he identified as a *social model of disability.* Mike's model (to be accurate) gained a wide readership and general acceptance over a lengthy period of time. While the British disability movement is indebted to Mike for this work his model is quite specific and nowadays most people probably refer to the social model of disability in a much more vague, confused and

sometimes totally alien way to the radical version that Mike developed. In recent times the social model of disability has even been so bent out of shape that it is confused with the 'rights' campaign agenda for legal safeguards – e.g. Rachel Hurst refers to the 'social or rights model of disability' and confuses the social model of disability with a *legalistic model of disability* (Rachel Hurst 'International Classification of Functioning, Disability and Health'. *Disability Tribune*, September 2001).

Models are constructed so that an object can be looked at in different ways and under different conditions. Models are artificial and do not *explain* anything. Model airplanes, for example, are constructed to see how they might behave in a wind-tunnel. The model airplane will not explain the laws governing flight, although they might provide the insight from which laws of fight are inspired. A good model can enable us to see something which we do not understand because in the model it can be seen from different viewpoints (not available to us in reality) and it is this multi-dimensioned replica of reality that can trigger insights which we might not otherwise develop. Mike's social model of disability has provided the disability movement with an invaluable tool which has strengthened our insight into the struggle for emancipation.

Models, then, are the next stage in gaining *insight* into a complex situation.

(iii) *Theories*

In UPIAS we felt that our struggle for emancipation needed to be informed by theory. We had always hoped that we would have time to develop and debate such a theory. But it was not to be. The disability movement still awaits an explanation of the social laws that make, or transform, people with impairments into disabled people. Such a theory will be built on a clear hypothesis. I'll come back to this point.

Theories, then, are a later stage in trying to provide an *explanation* of a complex situation.

3   Reclaiming whose social model of disability?

In February 2000 Greater London Action on Disability (GLAD) held a conference '*Reclaiming the Social Model of Disability*'. Amongst the *Key points from the conference* we are told that:

> 'We need to produce an updated social model of disability that; includes a positive statement about us; recognises our diversity and difference; recognises institutionalised discrimination; talks about choice; recognises that not all the things that exclude us are about society's barriers; and talks about barriers (attitudes and access).'

And

> 'We need to consult widely on this new definition'

Apart from the confusion between *models* and *definitions* I cannot accept that this conference was about *reclaiming* the social model of disability when a key point is to produce an *updated* version. This is not **reclaiming**. This is **revising** (or in Tom Shakespeare's wonderful phrase **rectifying** the social model of disability). Who is reclaiming? Have the conference speakers lost something that they created? Not one of the speakers at the conference helped create the social model so how can they reclaim it? Certainly Mike Oliver could make a case for reclaiming the social model of disability from those who are now trying to rectify it; but he was not a speaker. I have no objection to people devising and promoting new social models of disability in their own name; but I do object when they try to insinuate that they can legitimately *reclaim* the social model of disability rooted in the ideas of UPIAS. In the absence of speakers who can promote, defend and develop the original

radical version of the social model of disability the GLAD conference has presented the disability movement with a one-sided, and in my view, ineffectual return to the narrative case file approach to disability that historically has always held back progress towards emancipation.

Jenny Morris, one of the speakers, for e.g. says:

> 'The social model of disability gives us the words to describe our experiences of inequality.'

In fact the radical social model of disability gave us the words to describe the way society is constructed so that we become disabled. It was an *outside-in* approach to our situation; words to describe our experiences of inequality is an *inside-out* approach (i.e. a case file approach). The former is a materialist approach and the latter an idealist approach. The idealist approach is perfectly at home with the 'rights' approach that is increasingly dominating the British disability movement and characterises the USA movement. In Jenny's words:

> 'The social model helps us to understand what needs to happen in order that we can access our human and civil rights.'

I don't agree. Models provide insight rather than understanding and the radical social model of disability has to do with the creation of a society which enables us to be 'human' – not just access our 'rights' within an existing competitive market society.

Similarly, Nasa Begum, also speaking at the conference, focuses on *inside-out* experiences and says:

> '... it is vital we claim the social model as a tool for understanding the discrimination and prejudice we face, and for helping to explain our experiences in society.'

No, I don't agree; a social model of disability should assist us in gaining insight into the disabling nature of the market system.

Civil Rights are about individual people or groups of people – this is a legalistic approach to emancipation. Therefore, if my two negatives at the beginning of my paper are correct, then the campaign for 'disability rights' does not depend on, nor is it a reflection of, the social model of disability. This is why the USA law 'Americans with Disability' Act is not informed by a radical social model of disability. The fact that the social interpretation of disability embraces civil rights does not make it dependent on rights – it is not a rights model.

It's not just that the liberal right wants to inherit the ideological underpinnings of the social model of disability, but they want also to rewrite (reclaim) the past. The left may lose this battle, but at least let's be clear about what is being done to the social model of disability.

4   Changing society

Our society is built on a competitive market foundation and it is this social system that disables us. From this point of view disabled people are forced to live in a social prison. While no one can object to campaigning for 'rights' so that the prison in which we live is made more humane it is only a political buffoon who believes that exploring prisoner experiences can lead to emancipation! Nothing less than dismantling the prison and replacing it with a non-competitive form of society can break-down the doors which bar our emancipation.

From this point of view what happens to disabled people is an integral part of the way our society is organised and structured. *In fact we can argue that what happens to disabled people exactly mirrors where humanity is going wrong.*

Human beings are by nature, weak, vulnerable and physically imperfect. But throughout history people with capabilities have striven for perfection and the more they have managed to intervene in our body structure the more people with impairments have been marginalised. It is as if people with capabilities have deposited their own natural vulnerability, and genuine social dependency, into us so that these attributes of being human are unique to being disabled. Our vulnerability is then seen as a condition that separates us from what is regarded as normal. This transference of vulnerability and consequent dependency into disabled people has not freed people with capabilities from their own dependency upon support systems to ameliorate their essential vulnerability but created a dangerous illusion about the meaning of normality. This is no less than an able-bodied knowledge, learning and educational barrier which is inhibiting the development of comprehensive understanding about being human. In this respect we might regard able-bodied people as disabled; and the status of disabled people is merely a grand reflection of what people with capabilities have been doing to their own lifestyles.

I think this interpretation can be summarised as a general hypothesis on disability:

> Disabled people have been abstracted from society and as an abstraction we embody the essence of social relationships at a particular point in historical time. (Vic Finkelstein *From Enabling to Disabling an Open University?* Valedictory Lecture December 1997, The Open University, Walton Hall, Milton Keynes.)

In this sense, then, I believe that we cannot understand or deal with disability without dealing with the essential nature of society itself. To do this disabled people must find ways of engaging in the class struggle where the historical direction of society is fought, won or lost. It is in this arena that the boundaries of knowledge that have put disabled people aside from the 'normal' can and have to be openly questioned. For me *repossessing* the social model of disability means searching for openings in the structures of society where we might effectively contribute with others in the restructuring of society so that it is neither competitive nor disabling for all people.

I believe the radical social model of disability can inspire initiatives to guide our struggle for emancipation in entirely new ways. The responsibility is on us to pursue such initiatives even when fiercely resisted by people with capabilities, or when the insight into the struggle ahead looks very daunting, or when the champions of 'rights' in the disability movement lead us astray into pressure group politics that feed futile demonstrations and sterile parliamentary lobbying. In my view we can enter the class struggle *in our own right* only when our needs and views are legitimately reflected in a section of the working class. The professions, such as OT, Physiotherapy or Social Work, cannot perform this function because they were created by people with capabilities from the perspective of people with capabilities about what is appropriate for us. Our experiences in the emancipatory struggle, and in our development of CILs, have already thrown light on the kind of community based worker that we want, need and have to create. Inspired by insights from the radical social model of disability we must develop our own community based profession (Vic Finkelstein (7 February 2001) *A Personal Journey into Disability Politics*. Centre for Disability Studies, Leeds University). This will provide an opening for disabled people and disenchanted professionals (especially OTs) to truly work together in creating a more appropriate nationalised service which allies itself with the community and responds to what people want.

While disability organisations can be viewed as the *vehicles* for change I see the creation of our own community based profession (a profession allied to the community) as the *engine* for change.