

## **BORN AGAIN**

*A personal journey towards the SOCIAL MODEL of disabilityL*

*Lecture Notes/ Presentation by J.M. Camilleri (September, 2003)*

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### **'Conscientization'**

- **Labelling people** leads to feelings of shame, sinfulness, diminishment, dehumanisation
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### **Labelling**

leads to feelings of shame, sinfulness, diminishment, dehumanisation

<ul style="list-style-type: none"><li>• <i>Handicapped</i></li><li>• <i>Invalid</i></li><li>• <i>Cripple</i></li><li>• <i>Less fortunate</i></li><li>• <i>Angels</i></li><li>• <i>Heroes/ brave</i></li></ul>	<ul style="list-style-type: none"><li>• <i>'The' disabled</i></li><li>• <i>'Those'/ 'these' people</i></li><li>• <i>People with 'special' needs</i></li><li>• <i>Confined to a wheelchair</i></li><li>• <i>Differently challenged</i></li></ul>
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### **Freaks: burdens on society**

- Physical and, or, mental difference are the permanent cause of all our problems
  - Daily hope for a miracle
  - Need to expiate some vague wrong
  - Families develop sense of sin, shame, stigma, pollution, failure, a sense of physical and moral bankruptcy
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### **Achievement Syndrome**

- Living as a non-disabled person in a non-disabled world
- Avoid other disabled persons (not to be associated with failure, weakness, with 'otherness'.)

- Never really belonging to either the disabled, or non-disabled worlds
  - Living a lie (the disabled person as 'hero')
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## **Why define 'Disability'?**

"How disability is defined is of crucial importance. The presuppositions informing particular definitions can be offensive and provide the basis of stereotyping and stigmatisation."

(Barton, 1993)

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## **Disability as a medical condition**

was enshrined in the United Nations' World Health Organisation's *International Classification of Impairment, Disability and Handicap* published in 1981, the International Year of Persons with Disability.

By 1981 politically conscious disabled activists *discredit and reject Medical Model* attacking the very foundations upon which the U.N. was building its disability policies.

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## **The Medical Model I**

- Disabled people are the problem
  - Disabled people need to be adapted to fit into the world as it is
  - Extensive use of specialised institutions, or isolation at home where only the most basic needs are met
  - Emphasises dependence on part of disabled person
  - Reinforces stereotypes of disability, encourages feelings of pity, fear and patronising attitudes in society
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## The Medical Model II

- Focus on the impairment (not the needs of the person)
  - Only medical and associated professions have the power to change disabled people
  - Talk is of 'cures', 'normalisation' and 'science'
  - Disabled people's lives are handed over to professionals
  - Professionals' decisions effect where disabled people go to school, what support they receive, where they live, what benefits they are entitled to, whether they can work and even, at times, whether they are born at all, or allowed to have children themselves.
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## The Medical Model III



this Includes Impairment-driven NGOs

[\[http://www.bfi.org.uk/education/teaching/disability/thinking/medical.html\]](http://www.bfi.org.uk/education/teaching/disability/thinking/medical.html)

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## Abnormal people?

“We are seen as ‘abnormal’ because we are different, we are problem people, lacking the equipment for social integration. But the truth is, like everybody else, we have a range of things we **can** and **cannot** do, a range of abilities both mental and physical that are unique to us as individuals. The only difference between us and other people is that we are viewed through spectacles that only focus on our inabilities ...”  
(Brisenden, 1986)

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## UPIAS Declaration

‘We as a Union are not interested in descriptions of how awful it is to be disabled. What we are interested in is the ways of changing our conditions of life, and thus overcoming the disabilities which are imposed on top of our physical impairments by the way society is organised to exclude us’

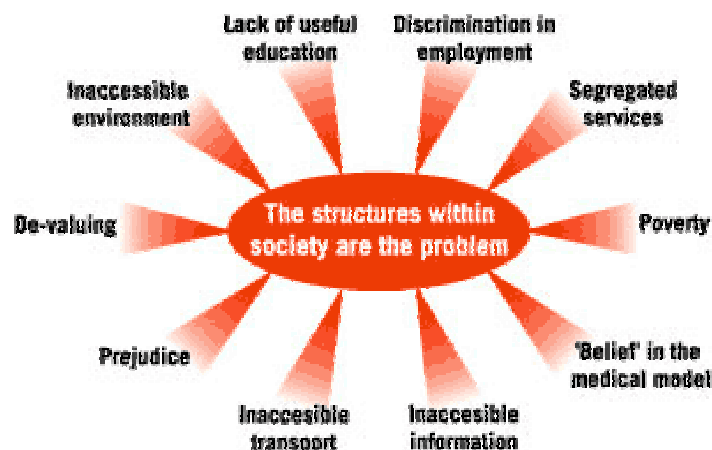
(UPIAS, 1976, pp. 4-5)

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## DPI Definitions (1981) - based on the Social Model

- “Impairment is the loss or limitation of physical, mental or sensory function on a long-term or permanent basis.”
  - “Disablement is the loss or limitation of opportunities to take part in the ordinary life of the community on an equal level with others due to physical and social barriers.”
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## The Social Model of Disability



**Disabled people as active fighters for equality  
working in partnership with allies.**

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## The Medical vs the Social Model of Disability

MEDICAL MODEL	SOCIAL MODEL
<ul style="list-style-type: none"><li>• Individual is faulty</li><li>• Diagnosis</li><li>• Labelling</li><li>• Impairment is focus of attention</li><li>• Assessment, monitoring, programmes of therapy imposed</li><li>• Segregation and alternative services</li><li>• Ordinary needs put on hold</li><li>• Re-entry if normal enough OR permanent exclusion</li><li>• Society remains unchanged</li></ul>	<ul style="list-style-type: none"><li>• Individual is valued</li><li>• Strengths and needs defined by self and others</li><li>• Identify barriers and develop solutions</li><li>• Outcome-based programme designed</li><li>• Resources are made available to ordinary services</li><li>• Training for parents &amp; professionals</li><li>• Relationships nurtured</li><li>• Diversity welcomed, child is included</li><li>• Society evolves</li></ul>

*Adapted from Micheline Mason 1994, R. Rieser 2000). Cited in: Oliver, Michael (1996): Understanding Disability from Theory to Practice. Macmillan. London. UK.*

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## Disability activism: tracing roots

- 1950s-60s**
  - Black-American Civil Rights Movement (USA)
  - Consumer Movement (Intl)
- 1960s - 70s**
  - the Women's Movement (Intl)
  - Vietnam Veterans (USA)
  - Independent Living Movement (USA/ Intl)
  - UPIAS (UK)
- 1980s - 90s**
  - United Nations (*World Programme of Action & Standard Rules*)

- Disability rights
  - 1990ff**
    - Anti-discriminatory legislation
  - 200?**
    - Universal Declaration of the Rights of Persons with Disability
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## **Disability Activism - I**

### **Black American Civil Rights Movement**

- NO to segregationist/ apartheid mentality
- NO to systematic policies of exclusion & inequality

### **Consumer Movement**

- YES to issues of choice
  - YES to consumer rights
  - NO to passive recipient of services
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## **Disability Activism - II**

### **Women's Movement**

- NO to collective value based on body image
- YES to personal empowerment

### **Vietnam Veterans**

- NO to a life of dependency
  - YES to equal rights
  - NO to discrimination
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## **Disability Activism - III**

### **Independent Living Movement**

- YES to self-help
- YES to a *Center for Independent Living*
- YES to management by DPs for DPs

### **UPIAS**

- YES to self-determination

- NO to segregation
  - NO to disabling barriers
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## **Disability Activism - IV**

- **United Nations**
    - World Programme of Action (1988)
    - Standard Rules on the Equalisation of Opportunities for Persons with Disability (1994)
    - Disability as social oppression and infringement of human and civil rights.
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## **Disability: a rights-based issue**

- Americans with Disabilities Act (1990)
  - Canadians with Disabilities Act (1990)
  - Australians with Disabilities Act
  - Disability Discrimination Act (1995, UK)
  - Equal Opportunities (Persons with Disability) Act (2000, Malta)
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## **Educating risk-takers**

- Major breakthroughs are generally made by creative thinkers and risk takers.
  - A major factor in producing such people is often an education giving them high expectations and a sense of their own worth.
  - Segregated education does not provide such an education. Segregated education is a good preparation for a life of further segregation.
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## **Education in the mainstream, or educating the mainstream?**

- The single most powerful tool I have in my life is my education
- An education in the mainstream

- An education which prepared me for a life of risk-taking
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### **Rebirth: ‘... a painful business’**

- As a child, I did not feel any different from my non-disabled friends.
  - Later, society’s negative attitudes taught me to be ashamed of my impairments, and either to become ‘normal’, or to disappear from sight.
  - Later still, I would come to the realisation that I needed to change society, not myself.
  - Freire is right, rebirth is ‘a painful business’.
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