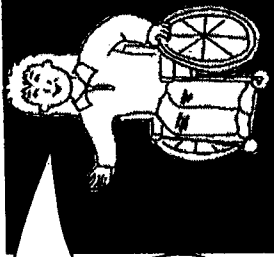
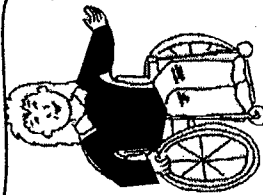


What stops me getting around is my impairment. If they found a cure I could do so much more.

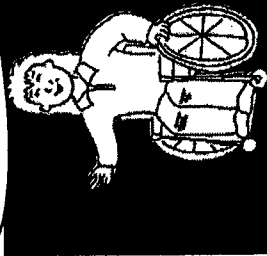
What stops me getting around are all the stairs and things in the way. If people changed their attitude I could do so much more.



But it doesn't necessarily mean I don't want a better society to live in!



But it doesn't necessarily mean I don't want a cure if they find one!



**But the different ways of understanding disability can still cause us problems**

## Medical model of disability

People disabled by their impairments

Solution?



Cure

## Social model of disability

People disabled by negative attitudes, social and environmental barriers

Solution?



Change attitudes and remove the barriers

## Cross over?

Those who embrace the medical model will not always rule out the need for social justice and improved social provision.

Those who embrace the social model will not always rule out the need for impairment prevention and improved medical provision

But...

The basic difference in understanding disability remains and will have a major influence on policy and practice over a wide range of issues

	<b>Medical Model of Disability</b>	<b>Social Model of Disability</b>
<b>Problem Identification</b>	Problem is in the body of the individual	Problem is in the social body, i.e., the physical, political, social, economic, cultural environment
<b>Solution</b>	Elimination of disability: cure disabling conditions, prevent births of disabled children, alter/ameliorate disabilities to conform to norms if possible. (Extreme manifestations: euthanasia, assisted suicide, futile care policies)	Revolutionary change in the physical, political, social, economic, cultural environment
<b>Ideology</b>	Ableism	Justice/Inclusion/Respect for Diversity
<b>Structure</b>	Barrier-filled environment (barriers can be physical, attitudinal, policy, programmatic, etc.)	Full access, support, inclusiveness
<b>Practice</b>	Discrimination, exclusion, segregation	Nondiscrimination, inclusion, integration
<b>Social strategies to improve living conditions</b>	Charity	Social justice, self-determination, community organizing
<b>Outcome</b>	Oppression	Liberation

**DISABILITY, VIOLENCE AND RESISTANCE**  
**SFWAR**  
**MAY 16, 2007**

## The Social Model of Disability

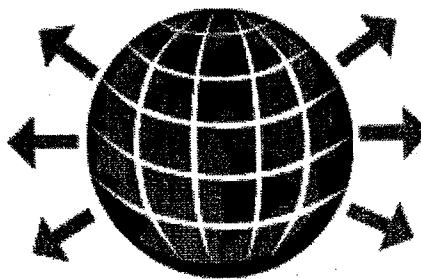
Impairment and chronic illness exist and they sometimes pose real difficulties for us. The disability movement comprises those disabled people and supporters who understand that we are, regardless of our particular impairment, subjected to a common oppression by the non-disabled world. We are of the view that the position of disabled people and the discrimination against us are socially created. This has little to do with our impairments. As disabled people we are often made to feel it's our own fault that we are different. The difference is that some part, or parts, of our body or mind are limited in their functioning. This is an impairment.

This does not make us less suitable to participate in society, but most people have not been brought up to accept us as we are. Through fear, ignorance and prejudice, barriers and discriminatory practices develop which disable us. The understanding of this process of disablement allows us as disabled people to feel good about ourselves and empowers us to fight for our human rights.

The disabled people's movement believes the 'cure' to the problem of disability lies in the restructuring of society. Unlike medically based 'cures', which focus on individuals and their impairment, this is an achievable goal and to the benefit of everyone. This approach, which we refer to as the 'social model of disability' suggests that disabled people's individual and collective disadvantage is due to a complex form of institutional discrimination as fundamental to our society as sexism, racism or heterosexism.

Clearly, this thinking has important implications for our education system - particularly with reference to primary and secondary schools. Prejudicial attitudes toward disabled people and, indeed, against all minority groups are not inherited. They are learned through contact with the prejudice and ignorance of others.

Badly Designed Buildings  
Hypocrisy  
No Parking Spaces  
Segregated Education  
Poverty and low Income  
Lack of Enablers



Inaccessible Transport  
Isolated Families  
No Lifts  
Prejudiced Attitudes  
Poor Job Prospects

## The Medical Model of Disability

The medical model of disability sees the disabled person as the problem. We are to be adapted to fit into the world as it is.

If this is not possible, then we are shut away in some specialized institution or isolated at home, where only our most basic needs are met.

The emphasis is on dependence, backed up by the stereotypes of disability that call forth pity, fear and patronizing attitudes. Usually the focus is on the impairment, rather than the needs of the person. The power to change us seems to lie within the medical and associated professions, with their talk of cures, normalization and science. Often our lives are handed over to them.

Other people's assessments of us, usually non-disabled professionals, are used to determine where we go to school, what support we get and what type of education, where we live, whether or not we can work and what type of work we can do, and indeed whether or not we are born at all, or are even allowed to procreate. Similar control is exercised over us by the design of the built environment presenting us with many barriers, thereby making it difficult or impossible for our needs to be met and limiting our opportunities. Whether it is in work, school, leisure and entertainment facilities, transportation, training, higher education, housing or in personal, family and social life, too many common practices and attitudes disable us.

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