

This Essay will Critically explore Disablism by looking through the lens of Social Interactionism, focussing on societies constructions surrounding disability by using the two models of disability, the medical model and the social model. By following both models, this essay will consider all aspects of disability, including human rights, self-disablism and the dependence on the welfare state. Whilst critically exploring the life of a working adult with disabilities compared to the life of a working adult without disabilities and how discrimination, stigma and dehumanisation play a disappointing role within our society.

Disablism can be described as a negative attitude which can often be based on prejudice and stereotypical assumptions. That individuals with disabilities cannot do things that able-bodied people can do, therefore disabling them from having equal opportunities. These negative assumptions include, that people with a disability cannot work, live independently, have sex or have children (SCOPE, no date). Disablism can be described by two models of disability, the first being the medical model, which defines disability by their impairments or differences. This looks at the medical condition, or what is wrong with the individual person as opposed to what the individual person needs, which can create low expectations and can lead people to lose their independence, choice, control and the agency in their lives (SCOPE, no date). Within the social concept of disability, the social model creates the perception that people are not disabled by their impairment, but by the barriers in society, for example, buildings not having access for wheelchairs. It can also include a person's attitude towards disability, and the negative assumptions described above. This helps us to recognise that barriers can make life much harder for disabled people and opening up the possibilities that by removing the barriers can create equality, by providing disabled people more independence, choice, agency and control (SCOPE, no date)

Lott (2017) suggests that society is the creator, or at the very least, a major contributor to our view on disabilities. Lott explains that many individuals who are deaf do not view their inability to hear as being a disability, as they are still able to communicate through the means of sign language as an alternative form of communication. Lott believes that it is in fact societies reliance on sound and their lack of inclusion towards individuals who are deaf that actually puts society at a disadvantage within certain situations. This is one of many examples that can be found of exclusions regarding people with disabilities, however, Lott (2017) further argues that people are not disabled because of their diagnosis, they are disabled purely by the society in which they live, by not making the environment accessible, or being inclusive of people

within the disabled community. By looking through the lens of symbolic interactionism, it can be seen that with the right changes to social attitudes, people with disabilities do not have to be excluded, and as a society we can make the environment more accessible. It also provides us with the evidence that by looking at the social construction of society, how we interact with each other can have an incredible impact on an individual's life.

The United Nations of Human Rights (UNHR) (2019) explore the barriers and discrimination that people living with a disability face and the restrictions in which they have within society compared to an able-bodied person, by observing the inequalities on a global scale. Recognising that a disproportionate number of people who are living with a disability are living in developing countries which are often marginalised and also in extreme poverty. Furthermore, the UNHR suggests that people with disabilities have often been side lined within the rights debate, unable to benefit from the protection of human rights, even though they should apply to all. However, in recent years the UNHR (2019) reports that there has been a 'revolutionary' change in approach on a global scale, which brings together better equality to those both disabled and able-bodied. The Human Rights Convention on the Rights of Persons with Disabilities (UNCRPD) (2008) signalled a 'Paradigm shift' which suggests that society is moving away from the medical model, which focusses on the inability of a person with a disability, moving towards the social model, which focusses more on the human rights of a person with a disability.

Disability can often be a 'catch-22' situation in terms of policy. Howard (2003) explores the possibility of using both the medical model and the social model, an interactionists perspective would allow for both models to collaborate by focussing on the interactions between the individual and the social, to create a more coherent, friendly policy, that considers all aspects of disability.

Howard (2003) explains that employment with a disability is complex, and by focussing on income distribution, which has been informed on the assumptions that people living with a disability cannot work to the same capability as an able-bodied person, as the medical model emphasises the inability, however, employment policies, including civil rights, implies that many impairments can in fact be accommodated within the workplace.

Claire Tregaskis (2004, p.9) explores the social constructions of disability, focussing specifically on the social model, describing it as a 'crucially important explanatory tool'. Tregaskis explains that the social model creates an explanation of the oppression that a person with disabilities is faced with by referring to a disability as an 'impairment', in which it is not the impairment that makes them un able, but simply society is not organised enough to help the person with the disabilities to achieve their full potential. Tregaski believes that the social model is the welcomed optimistic change to society that is needed to collaborate the able-bodied and the non-abled by learning to act in a more inclusive manner around each other. The social model recognises that in order to achieve change, society should challenge existing oppressive practice, Finkelstein (1980) believes that within contemporary Britain, 'people with impairments are disabled/excluded by a society which is not organised in a way which takes account of their needs'.

Hyde (2006 p.251) indicates that over seven million people, of working age, are people living and working with a disability, however, these seven million people are marginalised and excluded from the same employment opportunities, and in turn people with a disability experience higher levels of poverty and can often be dependent on the state social services and on benefits. Hyde explains that disabled people are disadvantaged because 'they belong to a social group that is the object of pervasive institutionalised discrimination'. Hyde (2006 p.257) considers the social construction of disability, particularly the impact that the social environment has in preventing people with disabilities from participating in the mainstream social situations, giving them a disadvantage. This however is coined an old-fashioned view, stemming from the manual work within the heavy industry in the nineteenth century, that people with a disability would not perhaps of physically been able to do so because of physical restrictions. Disability however does not only take the shape of physical disability; mental disability must be considered. Hyde (2006 p.254) explains that people who suffer with severe debilitating mental impairments may struggle with the social aspect of society, and should therefore be treated differently to those with a physical disability, for example, a mental impairment may prevent the individual from participating in social activities, irrespective of how the activities have been planned and organised. Hyde suggests that these two different definitions of disability, mental and physical, have radically different areas in which need to be addressed, and create two distinct implications for the nature of social policy. Hyde describes disability, following the social model, as 'the inability of the individual to perform normal social activities' which is the view held widely by the public, and has also been the

main influence of government policy and disability research. However, both mental and physical disabilities have very different social outcomes and should therefore be addressed separately within social policy.

It is also important to consider the restrictions that those with a disability place on themselves, as they are, within their own actions, responsible for their own circumstances. Saunders (2000) argues that because of individualism, many people are put into unfair categories when employment is considered, where it is questioned whether having a disability creates inequality within the workplace, creating a discriminating environment, or perhaps it is because the individual is themselves unmotivated, and therefore a welfare dependent. Saunders further argues that due to an unequal distribution of abilities, meritocracy has overtaken equality within the workplace, creating a hierarchy and the creation of discrimination within the workplace. The Office of National Statistics (2018) provided an annual population survey, which includes individuals in employment in the UK between 2017 and 2018 and distinguishes between those with a disability and those without. Their survey found that 10.5% of the working population were in full time employment with a disability, and 89.5% of the working population were in full time employment without a disability. This suggests that there is a vast difference between the disabled and abled working population, further suggesting that disabled people are a part of an underclass within society, which Hyde (2006 p.256) describes as a 'polarisation' between highly motivated households whose members are employed, and the underclass, a vastly expanding segment of society which is increasingly isolated, unemployed and morally impoverished. Hyde expands his argument by suggesting that it is in fact disability benefits that have changed society as a whole, for those who are in receipt of disability benefits, perhaps not all are 'deserving' of the benefit. Marsland (1999) distinguishes this between the deserving poor and the undeserving poor suggesting that the disability benefit system has been made easier to claim because of the cohesion between doctor and patient, and broader margins on the disability categories which potentially entitles more people to be able to claim.

'The uptake of invalidity benefit and the prevalence of sickness absence from work is a function of the accessibility and generosity of benefits, entirely regardless of the objective condition of the population (Marsland 1996 p.124).'

Louise Warwick-Booth (2013 p.42) studies social inequality, in the terms of social divisions within disability and argues that those who appear to be severely disabled may seem to have a poor quality of life, however these individuals report that their quality of life is excellent or good, which in turn shows a lack of understanding of the general public perceptions and

constructions of disability. Warwick-Booth suggests that the dependency of the disabled is constructed by a society that is not adapting itself to the specific needs of those disabled, however, the UK is heavily criticised for its approach towards disabled people within society, despite the laws that are in place. Warwick-Booth suggests that the public's attitude towards people with disabilities is largely to blame and no matter what legislation is passed, it is the public's attitude that creates discrimination and inequality, and unfortunately, attitudes take time to change. Priestly (2003) argues that within society we follow a generational system, which leans towards dependency upon one another, where typically a child and the elderly would depend on an adult, however, should that adult have a disability, that person then becomes an equal dependent on a non-disabled adult. Contrasting to this, adults are constructed as independent contributors to the social relations of production and reproduction in the terms of employment, which marginalises people with disabilities because they are excluded from the responsibility of having a dependent (Priestly, 2003). Priestly further suggests that independence is a key factor within adulthood and disability, as it is often associated with the physical and cognitive functions of an individual, which are perceived to make an individual better at the job role. This creates an assumption that a physical or cognitive impairment would hinder a person with a disability within the workplace and suggest that that person would then be dependent on an able-bodied individual to ensure that the task is completed sufficiently.

It is because of these assumptions that the UK is experiencing these high levels of unemployment within the disabled community, which in turn creates a close link between dependency and independence which adopts a 'child like' approach to the term disablism (Hockey and James 1993). It is because of societies symbolic approach on the exclusion of those with disabilities that creates a parallel in construction between old age, childhood and disability, as these parallel categories are marginal to the superiority of the able-bodied adult (Priestly, 2003). Priestly furthermore links these categories to human rights, explaining that within society, those not in the able-bodied categories do not experience the same human rights as those who are able-bodied, providing evidence that those who are disabled are discriminated against in today's society. The Equality Act 2010 came into force in order to protect people from discrimination within society, collaborating over 116 separate pieces of legislation providing a legal framework in order to protect the rights of individuals and provide equality for all (Equality and Human Rights Commission, 2019). Within the Equality Act 2010, disability discrimination is very well considered, providing clear guidelines on all issues surrounding disability, and the rights in which people who have a disability can expect from

the modern society today. The British Institute of Human Rights (BIHR)(2006) provides a guide in which can be followed by those with a disability, creating an easy to read explanatory version of how, in the UK, we should be interact with each other, by reinforcing the basic principles of fairness, equality, dignity and respect. This includes how services provided by public authorities; the Government, Local Authorities and Hospitals should treat you, and how Human Rights provide those with a disability, specific protection from authorities, providing protection from degrading treatment, and forcing the Local Authorities to take certain action when needed, for example, taking steps to protect the life of the individual (BIHR, 2006).

The Joseph Rowntree Foundation (2011) argues that no matter how far we have come within society, including the constructions that we, as a society, have created, not enough is being done for those with a disability. They suggest that disability policy should be reviewed expressing concerns that as a society we are going backwards, reporting that few disabled people are optimistic about what the future holds with the main concerns being welfare benefits and public services. The Joseph Rowntree Foundation (2011) enforce the importance of the disability movement, arguing for the welfare state to include user controlled, pro-active services to be delivered within an equitable framework. Oliver and Barnes (2009) emphasise the importance of the welfare state, by describing it as an essential ingredient for the successful collaboration of society, in which both disabled and non-disabled people can participate together to overcome the deprivations and limitations within society and move forward in unison. Further-more the Joseph Rowntree Foundation (2011) suggest that ‘discriminatory attitudes, inaccessible environments, and lack of enabling supports’ should be the focus of social policy, following the social model of disability, removing the stigma that those with a disability face and provide the help in which they need. The Joseph Rowntree Foundation envisage a society in which ‘disability’ is no longer an oppression, where the barriers are broken down, suggesting that this would benefit society as a whole.

The social model approach is also a critical element of the benefits system, with the Disability Living Allowance (DLA) being introduced in 1992 (replaced by Personal Independent Payment (PIP) in 2013) it provided a cash payment in recognition of the costs that were incurred because of an impairment, with the main feature of the benefit being that it was not means tested, which treated all individuals with a disability the same, creating an equal distribution between all who were entitled to the benefit (Joseph Rowntree Foundation, 2011). Personal Independent Payment has now surpassed DLA and although it still boasts its inclusion

of the social model, it has come under scrutiny because of the assessment process, which gives more focus to the level of an impairment, as opposed to the disabling barriers in which the individual has, and continues to face, which can be argued as a greater focus on the medical model, as opposed to the social model. Action for me (2016) produced a report specifically looking at individuals with M.E/CFS in Scotland. The report describes the journey through the PIP claim process, concluding that is a 'deeply dehumanising experience', claiming that the application was 'stressful and demoralising', and producing their key findings to include emotional distress, with the forms being designed to be as difficult as possible with a failure to receive the benefit inevitable. Furthermore, the process consisted of an individual assessment, which Action for me detail was more than often too far away from the individual's home, and the quality of the assessments were poor, often rushed and reports distorted by assessors' irrelevant observations specifically on appearance or manner. The report offers key conclusions and recommendations from the evidence that was gathered within their study, giving confirmation of how the PIP assessment process creates another barrier to having a disability, claiming that key stages of the process are not accessible, the criteria is not being fairly or consistently applied, and the eligibility criteria does not capture the specific functional limitations within particular disabilities (Action for me, 2016). With reports such as Action for Me (2016) providing the public with such an in depth, X-Ray view of the benefits system, and the intensity of which it takes to complete the application process, it comes as no surprise that those with a disability are experiencing increased anxiety and emotional distress, in turn resulting in fewer people believing in the welfare system, increased people living in poverty, and an even bigger barrier placed within the disabled community.

In conclusion, discrimination, stigmatization and dehumanisation are still three very relevant words when critically exploring disablism, considering the legislative changes over the past thirty years has initiated a 'clean up' of the discrimination those with a disability face, it would appear that although the public's perceptions of those with a disability have been widely influenced by disability rights activists, it is clear that certain interactions continue to create a stigma to those with a disability. Social interactionism is a construct in which us, as humans, have developed and although society has come a long way from the stigma in which was received from those with disabilities, due to lack of understanding, and a number of models, resulting in a difference of opinion, Disablism is confusing, and at times it is essential to question if society is evolving, or if it is simply putting on an appearance and in fact morals and values have not changed. Disablism is however becoming recognised, with a multitude of

individuals advocating on behalf of people with disabilities. Stephen Hawking, a theoretical physicist who suffered from a rare form of Motor Neuron disease, advocated strongly for an inclusive society focussing on those with a disability, as he himself was a man who saw no limit, he wouldn't allow his disability to stop his brilliant mind, and ultimately he challenged the stigma, by using his position to highlight Disablism, encouraging those with disabilities to stand up strong, and focus on what they can do, as opposed to what they can-not. (European Disability Forum, 2018).

‘Remember to look up at the stars and not down at your feet... Try to make sense of what you see and about what makes the universe exist. Be Curious. And however difficult like may seem, there is always something you can do and succeed at. It matters that you don't just give up’ (Hawking, S., no date)

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