

British Society Fails the Vulnerable?

Background notes for a 10 minute verbal presentation in support of the motion 'This House believes that British Society Fails the Vulnerable' at the Oxford Union, Oxford University, 21st February 2008.

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This House believes that British Society Fails the Vulnerable?

To be vulnerable means to be unprotected and exposed to various forms of physical and emotional abuse and deprivations. Although we are all vulnerable at various points in our lives, it's unequivocal that some sections of the population are more vulnerable than others; notably, small children, women, old people and disabled people. Although many disabled people would balk at the assertion that they are more vulnerable than others, our vulnerability is exacerbated significantly if we happen to have an impairment, whether physical, sensory or cognitive and considered disabled.

This may be explained by the fact that throughout recorded history in western cultures disabled people have been set apart from the ordinary or mainstream because they represent a direct challenge to commonly held social values. To varying degrees they have been viewed as different, useless, oppressed and sick; a burden to themselves, their families, their communities and society as a whole.

As a consequence they have been subject to all manner of abuse and deprivations. Disabled people with the label learning difficulties, 'mental health' problems, disabled lesbians and gay men, older disabled people and those from minority ethnic groups are especially vulnerable.

Antipathy toward people with perceived impairments is endemic to western cultures and finds expression in the ancient world of Greece and Rome, religious teachings, enlightenment thought, and capitalist development.

The idealisation of the human form and the emphasis on physical and intellectual fitness in the ancient world led to the widespread practice of infanticide for weak and sickly infants and societal ambivalence toward the long term sick and disabled.

Many religions link impairment and disability to sin and wrong doing. Religious leaders such as Martin Luther endorsed the killing of disabled children as they were the work of Satan.

Post enlightenment ideologies: liberal utilitarianism, scientific rationality, Social Darwinism and the Eugenics movements, coupled with rapid industrialisation and urbanisation compounded ancient fears and prejudices. In turn they generated a host of policies for the social exclusion of disabled people in the modern world. These included incarceration, sterilization, infanticide and euthanasia.

However, since the Second World War several policies and laws have been introduced that have acknowledged and set out to address these injustices. These were fuelled by various factors including: an awareness of the atrocities of the

German death camps in which 270,000 disabled people were murdered by Nazi doctors, the large numbers of war injured people, the need for post-conflict economic rejuvenation and political activism amongst disabled people and their allies.

But despite the avowed good intentions, none have been enthusiastically endorsed or enforced by a succession of British governments.

Hence, improvements have been marginal and the legacy of oppression remains with us today. It is evident in post millennium Britain in a range of economic, environmental and cultural barriers that deny disabled people the same rights and opportunities as non disabled peers that compounds their vulnerability.

These barriers are evident in our:

a/ Abortion laws which deny the right to life of infants with impairments.

Abortion up to 24 weeks is legal in the UK unless the unborn child is likely to have a 'serious handicap'. Infants so diagnosed may be aborted right up to the point of delivery. There is a growing tendency to abort babies with relatively minor and easily treatable conditions such as cleft palate, club foot and webbed fingers (Rogers 2006: 15).

b/ Medical practises that allow doctors to deny or withdraw life saving treatments to people

with impairments on spurious assumptions about the 'quality of life' of disable people.

In 2004 Leslie Burke, a man with a degenerative condition known as cerebella ataxia challenged doctors' right to withdraw treatment in the law courts to avoid the horror of dehydration whilst still fully conscious. Cerebella ataxia usually leads to a situation where the individual concerned will become unable to do anything for themselves, including the ability to communicate, but still remain cognitively fully aware until death. Initially the court ruled in Burke's favour. However this ruling was overturned following a later appeal by the General Medical Council (McLean and Williams 2007: 124).

c/ Legal judgements that are particularly lenient for those responsible for the involuntary 'mercy killing' of disabled relatives.

In 2004 a former SAS soldier killed his 10 year old son by smothering him with a pillow. The boy was a wheelchair user with Hunter syndrome. His father received a two year suspended sentence for manslaughter due to diminished responsibility (RADAR. 2006: 13).

d/ An education system that is not inclusive and fails up to 20 percent of children and students who have 'special educational needs' many of whom are disabled;

An education system that is based on selection by ability inevitably discriminates on grounds of 'disability'. Special educational provision has consistently failed to provide the majority of children with SEN with the qualifications and skills for adulthood. Twenty five percent of disabled people of working age have no qualifications whatsoever (DRC 2007: unpagged).

e/ Government policies that fail to address the barriers – physical and cultural – encountered within the workplace by disabled people;

Since the 1940s government policy has centred almost exclusively on policies to improve the employability of disabled individuals without success, but failed to address the very real environmental and cultural barriers discriminate against people with impairments within the workplace. Recent estimates suggest that as many as 50 percent of disabled people of working age are unemployed (DRC 2007: unpagged)

d/ A benefit system that is discriminatory and does not cover the full cost of living with impairment in a society geared almost exclusively to able-bodied lifestyles.

The present disability benefit system is complex and difficult to negotiate. What people are entitled to receive is determined by the type and severity of impairment and fiscal and family resources. Disabled people are twice as likely to live in poverty than non disabled peers. When the additional costs

of living with impairment and disability are included, well over half of disabled people in Britain live on less than 60 percent of median national income as opposed to the unadjusted figure of 30 percent (Leonard Cheshire 2008: 3)

f/ A social support services that are nothing less than a post code lottery, do not provide the majority of service users with the necessary resources to achieve choice and control over the services they use, and exploits the good will of family and friends.

Disabled people and their families are dependent upon various support services provided by various statutory and voluntary agencies. Assessments of need are based on type and severity of impairment and fiscal and family resources. The support provided varies considerably from area to area and is determined by the policies and practices of local authority social services departments and health services. Most of the support provided to disabled people is provided by 'informal carers': family members and friends: usually women. Such a policy not only disables further the person with impairment as it denies them the opportunity to run their own services, but also their 'carers' because the caring role often prohibits other forms of economic and social activity (Glendinning, C. 1992).

g. A physical infrastructure; housing, public buildings and transport systems that remains

generally inaccessible or difficult to negotiate for disabled and older people.

Although there has been some improvement since the 1980s disabled people still have difficulty negotiating public spaces due to inaccessible amenities, transport systems and housing. Despite legislation to the contrary developers and planners have consistently failed to adopt optimum access standards as standard (Prideaux 2006). The situation is especially acute in housing. Recent estimates suggest that over a quarter of those who need accessible homes are living in accommodation that is unsuitable for their needs (Leonard Cheshire 2008: 5).

All of which takes place in cultural environment that is increasingly clustered around the marketization of welfare, materialism, competitive individualism and the body beautiful fuelled by a largely unfettered media (Barnes and Mercer 2003).

Conclusion

To conclude it is important to remember that impairment is a human constant, disability need not be. Like vulnerability we are all subject to impairment/s at some stage in the life course. The failure of British society to secure equal opportunities and full human rights for disabled citizens has implications for us all.

I urge the House to support this motion.

Thank you.

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