# Critical Texts in Social Work and the Welfare State The Politics of Disablement

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To Joy Melinda

For Eleanor, William, Dan and Jemma, without whom the book might never have been finished

'The wind, the wind is blowing Through the graves the wind is blowing Freedom soon will come Then we'll come from the shadows.'

Hy Zaret and Anna Many, THE PARTISAN

#### **Contents**

Acknowledgements, Introduction,

1. Disability Definitions: The Politics of Meaning,

The importance of definitions Criticisms of official definitions The politics of meaning A way forward

2. The Cultural Production of Impairment and Disability

Impairment: A structured account
Cultural considerations of disability
Disability: A structured account
Implicit theories of disability
Towards a social theory of disability

3. Disability and the Rise of Capitalism

The mode of production and historical change
The mode of thought and historical change
State intervention in the lives of disabled people
Explanations - back to Comte and Marx
Rationalisation - disability as an administrative category

4. The Ideological Construction of Disability

Individualism and ideology
The individualisation and medicalisation of
Disability
Theories of medicalisation
Core and peripheral ideologies

# 5. The Structuring of Disabled Identities

Culture and disability
Adjustment - a psychological approach
Stigma - a social psychological approach
Social adjustment - a sociological approach
Women and disability
Black people and disability
Race and gender and disability

# 6. The Social Construction of the Disability Problem

Social policy and disability
The idea of dependency
An economic basis for the creation of
dependency
A political basis for the creation of dependency
A professional basis for the creation of
Dependency
The creation of the dependent individual

# 7. The Politics of Disablement - Existing Possibilities

The restructuring of the welfare state - the elimination of dependency?
The political participation of disabled people
The politics of pressure-group activity
A national disability income

# 8. The Politics of Disablement - New Social Movements

The emergence of new social movements
The history of the disability movement
A typology of disability organisations
The disability movement as a new social movement

New directions for the future Counter-hegemonic politics

Postscript: The Wind is Blowing

Bibliography Index

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MICHAEL OLIVER

#### Introduction

The issue of disability and the experiences of disabled people have been given scant consideration in academic circles. Both the issue and the experience have been marginalised and only in the disciplines of medicine and psychology has disability been afforded an important place. Unfortunately this has, itself, been counterproductive because it has resulted in the issue of disability being seen as essentially a medical one and the experience of disability as being contingent upon a variety of psychological adjustment processes. Hence there is an urgent need for other disciplines such as sociology, anthropology, history, politics and social administration to take these matters seriously rather than to merely offer descriptive and atheoretical accounts which leave medical and psychological approaches unchallenged.

In order to counter the medical and psychological dominance in this area, ultimately nothing less than a 'social theory of disability' will be necessary, but such a theory cannot be produced until the various academic disciplines begin to take both the issue of disability and the experiences of disabled people seriously in their own right rather than as marginal to both theoretical developments and empirical work.

In the introduction to a book on the work of the Italian sociologist Antonio Gramsci, Peter Hamilton claims

Like many a sociologist his understanding of the underpinnings of his society was formed through a marginalising experience. (Bocock, 1986, p. 7)

As a disabled sociologist, my own experience of marginalisation has been more from the sociological community than from society at large.

A sociologist having either a personal or a professional interest in disability will not find disability occupies a central or even a marginal place on the sociological agenda. And even where it does appear, sociology has done little except reproduce the medical approach to the issue. In recent years medical sociology has grown faster than most other areas, but even within this sub-division, medical sociologists have been unable to distinguish between illness and disability and have proceeded as if they are the same thing.

A similar situation is found within the sister discipline of social anthropology. The anthropology of health and illness has attracted much attention in recent years but again, anthropologists working in this area have not even questioned the dominance of the medical framework, let alone begun to provide experiential accounts of disability within other cultures.

In emphasising my own marginalisation within the sociological community, I am not seeking to deny that marginalisation is a significant experience for disabled people within society as a whole. Indeed, a central aim of this book is to begin to explain why this marginalisation of disabled people within society has been made much harder precisely because of the marginalisation of disability within sociology, social anthropology and a variety of other academic disciplines.

Anyone interested in the history of disability will encounter exactly the same problem. On the experience of disability, history is largely silent, and when it is discussed at all, it is within the context of the history of medical advances. Just as women and black people have discovered that they must write their own histories, so too with disabled people. Only then will we have an adequate framework in which to locate our present discussions.

The point of this preamble is to indicate the magnitude of the task involved in attempting to produce a sociology, anthropology or history of disability. In the context of this book, I am certainly not attempting to write the sociology of disability because, for the reasons indicated above, this is an impossible task at present. My aim is much more limited; to begin to apply sociological perspectives to the issue of disability as the basis for ultimately producing nothing less than a social theory of disability.

In beginning to apply these perspectives, I started with the basic question; why is disability individualised and medicalised within capitalist society? This gives rise to a number of other questions, the first of which is whether disability is individualised and medicalised in all societies. If the answer to this is no, then it raises two further questions; how did individualisation and medicalisation come about within capitalism and further, what are the chances of mounting challenges to this individualisation and medicalisation within this type of society? These then are the basic issues to be addressed and they will be done in the following way.

The first chapter will raise as a central concern the issue of meaning. It will look at the meaning of disability by focusing on the debate that has gone on in recent years over how disability should be defined for official purposes and, indeed, the purpose and function of official definitions. Finally, it will consider the arguments of disabled people themselves, who suggest that the meaning of disability is distorted rather than captured by these official definitions.

The second chapter will consider whether the current dominant conception of disability as an individual or medical problem is universal or whether other societies perceive and define disability differently. Drawing upon anthropological material it will be suggested that definitions of disability, as with definitions of other social problems, are related both to economic and social structures and to the central values of particular societies.

The issue of why disability is viewed as an individual problem in capitalist society will be discussed in the third chapter. The functional needs of capital for a particular kind of work force, the relationship between supply and demand for labour and the role of disabled people in the economy will be discussed. It will be suggested that this view of disability is ultimately produced by the functional needs of capital for a particular kind of work force.

The fourth chapter will consider the role of ideology as central to a proper understanding of disability within capitalist society. The influence of particular groups upon these ideological constructions will be discussed, both in historical and current context. The links between ideologies of individualism and medicalisation will be analysed as being contingent upon the rise of the medical profession and the powerful position it currently occupies within capitalism. The implications for the particular kind of discourse this has created about disability will then be examined.

The personal responses of disabled people within this ideological climate will be considered in the next chapter. Adjustment is usually conceived as the process of the individual coming to terms with his disability, rather than one in which society adjusts to the changed requirements of the individual. It will be suggested that there is no

universal process but rather that adjustment is an interactive process related, not just to personal biography or stigma, but to structural features as well, notably race and gender.

Chapter 6 will suggest that the responses of disabled people to disability need to be placed within the policy context within which they occur. The influence of social policy responses to disability will analysed and it will be argued that these responses create rather than reduce dependency. This has facilitated discussions about crisis in the welfare state and its subsequent restructuring because of the perceived economic burdens of dependency-creating policies.

Partly as a response to this restructuring, as well as to a growing awareness of the inadequacies of service provision for disabled people, there has arisen what might be called the politics of disablement. Chapter 7 will consider this from the position of traditional political activities; that is, through the participation of disabled people in party politics and traditional pressure group activities. The final chapter will then consider the rise of the disability movement as part of the broader phenomenon of new social movements which characterise capitalism in the late twentieth century.

Before proceeding with the detail of the analysis to be presented, there are a number of disclaimers that need to be made.

The first disclaimer concerns the use of language in this book. Throughout, the term 'disabled people' is used in preference to 'people with disabilities'. It is sometimes argued, often by able-bodied professionals and some disabled people, that 'people with disabilities' is the preferred term, for it asserts the value of the person first

and the disability then becomes merely an appendage. This liberal and humanist view flies in the face of reality as it is experienced by disabled people themselves who argue that far from being an appendage, disability is an essential part of the self. In this view it is nonsensical to talk about the person and the disability separately and consequently disabled people are demanding acceptance as they are, as disabled people.

The second disclaimer concerns precisely what is meant by the term 'disabled people'. Is mental handicap included, and blindness and deafness and non-visible disabilities like epilepsy? An adequate social theory of disability as social restriction must reject the categories based upon medical or social scientific constructions and divorced from the direct experience of disabled people. All disabled people experience disability as social restriction, whether those restrictions occur as a consequence of inaccessible built environments, questionable notions of intelligence and social competence, the inability of the general population to use sign language, the lack of reading material in braille or hostile public attitudes to people with non-visible disabilities.

The third disclaimer concerns the use of the term capitalist society in preference to industrial, modern or other such terminology. There are obviously many differences in the ways capitalism has developed, not just between the east and the west, but also within the west itself. This has produced many varieties of social policies and welfare states which have their effects on definitions and experiences of disability. However, it will be argued later that there is an underlying logic to the development of capitalism which creates disability as an individual and medical problem. Unfortunately not enough empirical material exists to undertake an adequate comparative study of disability within various capitalist countries, and

this book will have to be judged on the coherence of the argument advanced rather than the evidence it marshals. If a coherent argument and framework does emerge, then it could, of course, provide the framework for a proper comparative study.

One final disclaimer concerns the style of the book and the audience to which it is addressed. My aim has been to write a book which will both encourage academics to take disability seriously as an analytical category, and to develop a theoretically informed understanding of disablement in society amongst disabled people. The dangers of such an approach are obvious: a book which is regarded as over-simplistic by academics or a book which is regarded as over-complex and mystifying by disabled people. All I can say is that in writing this book, I have fulfilled a personal need to bring my own discipline of sociology and my own experience of disability closer together; whether I have succeeded in rendering disability relevant to sociology and sociology intelligible to disabled people is another question.