The 'Social Model of Disability' and the Disability Movement
Vic Finkelstein
March 2007

In their August 2006 *Coalition* article, Mike Oliver and Colin Barnes (11) argue that "pursuit of a single aim or goal in disability politics would be a mistake." If it is *this* mistake that is held to account for the disability movements current problems then I can't agree. Such a view, I think, is too narrow.

It seems to me that there *are* times when a single aim ought to be pursued, times when several aims need to be followed simultaneously, and even times when we may need to withdraw public action and take *time out* to explore ideas about multiple aims (this is what the Union of the Physically Impaired Against Segregation, UPIAS, did when it responded to the failure of the Disablement Income Group, DIG, and withdrew to conduct an internal discussion about a new way of interpreting the problems that we face).

On the other hand, they go on to add "Although we used slightly different language we argued that what has now come to be known as the rights based approach to disability would be counter-productive if pursued as an end in itself rather than as a means to an end." In *this* case I do agree. Pursuing 'the rights based approach' … 'as an end in itself' would mean an exclusive re-direction of the disability movement's limited energy onto parliamentary lobbying leaving no time for grass roots development.

However, I know of no advocate of the rights based approach who would maintain it was the *only* course of action that they followed. Replying to my 1996 '*Disability Now*' article [16] criticising the direction of the disability movement, for example, Jane Campbell wrote to me mentioning a string of activities BCODP pursued *at the same time* as campaigning for rights.

I think the actual concern when an emancipatory movement's survival is threatened should not just be about aims or goals but, firstly, whether the movement has lost, did not use, or does

not have, a tool which enables insight into the aim or goal which *does* provide an effective way forward. The 'social model of disability' functioned as such a tool for the UK disability movement. As I see it the important questions then become: 'didn't the movement's leadership use, or didn't they really understand the social model of disability?'

Disability Models

In 1996 I wrote a paper on different disability models (1). I wrote this at the time because I had become increasingly concerned about the way people were misunderstanding what 'models' are and, more specifically the UPIAS radical interpretation of 'disability' that Mike Oliver had developed as the 'social model of disability'. I wanted to show that social models only really make sense when understood in particular contexts. Change the context and the model may well become inappropriate. I tried to illustrate a whole range of models – all associated with 'disability' but all very different.

For example this is what I mean: a model house for a child living in a very hot climate would be very different if it were modelled for a child living in a very cold climate. The former might depict a light post and canvas construction and the latter a more robust solid brick construction. They look very different but both could be labelled as 'model houses'. The models enable different insights in the different versions.

The point is: (a) if a model is too generalised it covers everything and becomes useless as a 'model', and (b) a model may retain its name even when it has become something notably different because the context (e.g. the 'society') has radically changed.

In 1975 I wrote in the UPIAS 'Fundamental Principles of Disability' document (2) "... it is society which disables physically impaired people. *Disability* is something imposed on top of our impairments ...". In this interpretation it is obvious and clear that if society changes, or there are significant changes in society, then the disability model can also change.

Major upheavals in the world and UK in the 1990s (cheered on by the new Blatcherite Labour Party's privatisation programme for the health and social services) need to be understood as changing the social context for models of disability. These social changes were unleashed by, for e.g., the miners' strike defeat 1985, the Soviet Union collapse 1991 and Labour Party's constitutional change abandoning a socialist platform in 1995 and, later, its election 1997.

In concert with these global changes in society I believe that it was no accident that social models started to change. It was in this decade that the politically centre right in the disability movement became more strident in asserting its demand that the social model of disability had to change! In 1992 Liz Crow launched the attack in her paper 'Renewing The Social Model of Disability' (3). This was followed by Tom Shakespeare with a robust attack demanding that the social model of disability must be 'rectified': "Recent work has begun to rectify this gap" (4). By the year 2000 the 'rectifiers' were secure enough to state: "We need to produce an updated social model of disability that; includes a positive statement about us; recognises our diversity and difference; recognises institutionalised discrimination; talks about choice; recognises that not all the things that exclude us are about society's barriers; and talks about barriers (attitudes and access)." (5).

This statement is generalised enough to cover all human social behaviour and is quite useless as a 'disability' model – a real 'shopping basket' approach which enables people to pick and choose any interpretation which happens to suit their personal ambitions; and it perfectly matches the privatisation programme of new labour for a free market in health and social services.

Rights

It was in the 1990s, too, that alongside the attack undermining the social model of disability the BCODP turned its energy from grass roots-work to parliamentary lobbying and made "the campaign for comprehensive anti-discrimination its top priority", Richard Wood *Disability Now* (6). Quite simply, if all major

political parties are now in favour of a free market to sort out problems in the health and social services rather than finding better ways for users to exercise democratic control over these services upon which they depend, then many disabled people will conclude that they have no choice other than to suck up to parliament in the hope that we will not be forgotten. With never enough personal income to buy-in services, or merit attention from significant sectors of the market to solicit our custom, all we can do is beg that our human 'rights' are recognised and policed. The changes of the 1990s, then, led to the emergence of meaningless social models of disability coupled with a shifting focus on 'social rights'. Thereafter it was only the next simple step to interpret the social model of disability as a 'rights' model.

For me, then, 1996 was the crunch year. At this time I never saw, and cannot recall, any robust criticism of what was happening in the disability movement. This was when I made my concerns public. Having previously been prevented from speaking at a BCODP Council meeting (when Dick Leaman and I travelled to Derbyshire to speak at a BCODP meeting about our worries regarding developments in the movement) my concerns became so strong that I sent a paper to '*Disability Now'* for publication! The full version was published in Coalition.

"The adoption of Anti-Discrimination Legislation (ADL) is about to drive a wedge through the heart of the disabled community as the artificial alliance promoting ADL predictably falls apart. The disability movement with its adoption of pressure group politics campaigning for this legislation not only followed all the mistakes of yesterday's DIG but is threatening to end up the same way, having started full of enthusiasm and ending up as, in the words of the DAIL Magazine editorial [referring to their AGM meeting], 'a disappointing affair'." (7).

Apart from Anne Rae's support my views were met in public by – 'silence' – and the unified core of the disability movement merrily continued its political journey into fragmentation. It

gives me no pleasure in seeing this foreboding anticipation realised.

In 2001 I tried again and in my presentation to the Greater Manchester Coalition of Disabled People September open meeting I said: "Civil Rights are about individual people or groups of people – this is a legalistic approach to emancipation. … the campaign for 'disability rights' does not depend on, nor is it a reflection of, the social model [or, to avoid confusion, the radical UPIAS *interpretation*] of disability". In the 'rights' approach parliament grants legal rights to those *it defines* as 'disabled'. The focus is on identifying characteristics of the individual, rather than the nature of society, and then making selected 'concessions' to those so defined. I then added: "It's not just that the liberal right wants to inherit the ideological underpinnings of the social model of disability, but they want also to rewrite (reclaim) the past. The left may lose this battle, but at least let's be clear about what is being done to the social model of disability." Further on in this paper I wrote: "… what happens to disabled people is an integral part of the way our society is organised and structured … I believe that we cannot understand or deal with disability without dealing with the essential nature of society itself". (8).

This is a comprehensive approach to addressing our oppression and has always been fundamental to UPIAS. In my 2004 revised Lancaster University paper (10) I wrote:

"UPIAS was founded in response to the failing *Disablement Income Group* and the frustrated aspirations of disabled residents in institutions. Its main focus was the campaign for full participation in all sectors of society." I then quoted from the UPIAS Constitution:

"The Union aims to have all segregated facilities for physically impaired people replaced by arrangements for us to participate fully in society. These arrangements must include the necessary financial, medical, technical, educational and other help required from the State to enable us to gain the maximum possible independence in daily living activities, to achieve

mobility, to undertake productive work, and to live where and how we choose with full control over our lives." (9).

And I added:

"It is clear that the Aims are comprehensive, embrace the requirements of *all* disabled people and, unlike many other organisations at that time, avoids single issue campaigning." (10).

One underlying theme has remained the same throughout all my writing on 'disability' since I came to the UK – 'disability' should be understood and addressed as a social (i.e. comprehensive) and not as a personal (i.e. individual) phenomenon. Even when a single approach is emphasised for a given period, the UPIAS 'interpretation' of disability (and logically the 'radical' social model of disability) makes no sense if a *one* component (or attribute) is selected as providing the *only* route to emancipation, . The 'radical' social model of disability provides an overarching view of disability and cannot be placed alongside selected elements **as if they were of equal value**.

The Troika

In the 1990s Mike Oliver's view, on the other hand, was and has remained, that the 'social model of disability' and 'civil rights', alongside with 'independent living' are harmonious components in our struggle for emancipation.

"In the last 30 years we have begun to shake off the dead hand of charity … In so doing we have built a political and social movement that does offer us the very real possibility of 'changing our futures' …" (Campbell and Oliver 1996). Mike maintains that these advances were founded on three *big ideas*: "the social model of disability, independent living and civil rights". (17)

I don't agree. I don't see how 'components' of a model can be given equal value to the model itself! This is like suggesting, in my model house analogy, that we can say 'we have built a new house founded on three big ideas: the model (of the house),

doors (a component, attribute, or element of a house) and a roof (another component of a house)'. Not only are the 'door' and 'roof' components of the overarching house 'model' but there is no particular reason to select these components rather than other attributes (such as 'windows' and 'floors') to put alongside the overarching 'model'. You could just as well replace the components 'independent living and civil rights' in your "three big ideas" with 'disability culture' and 'direct payments' (perhaps even making a better case!): but you can't remove or replace the social model of disability 'big idea' without undermining the modern UK disability movement's political and social history.

My points is that 'independent living', 'civil rights', 'disability culture' and 'direct payments', etc., are *internal components*, or elements, of the 'social model of disability'. **In other words these are 'insights' that are revealed by exploring the model!** If we believe that over-emphasising a component of the model "would be counter-productive if pursued as an end in itself rather than as a means to an end" (as Mike Oliver and Colin Barnes argue) then we are interpreting current problems in the disability movement from an "inside out" (*internal*) rather than an "outside in" viewpoint:

"… the pursuit of a single aim or goal in disability politics would be a mistake ..." (11).

Inside Out?

The result is that Mike and Colin do not offer a *single* interpretation of what happened in the 1990s structures of society, 'outside' there, which facilitated the rising dominance of the 'rights based approach' in the disability movement, 'inside' here. Far from making a credible criticism of the disability movement's misleading over-emphasis on 'civil rights' they adopt the same "inside out" approach in their analysis! This is not helped at all by their studious avoidance of naming anyone whose views may be identified, read, analysed and praised or criticised for leading or influencing the movement into its

present situation. Both Mike and Colin, after all, were in the forefront championing civil rights.

Its only in the last paragraph that Mike and Colin put forward a comprehensive social (socialist?) connection with the disability movement's emancipatory struggle:

"We still believe that the only viable long-term political strategy for disabled people is to be part of a far wider struggle to create a better society for all. It is a struggle that must take on board the fact that twenty first century Britain is a society near the top of world league tables for illiteracy, teenage pregnancy, childhood obesity, school exclusions and relative poverty. All of this must be contextualised within a global society characterised by an exploding human population, growing cultural conflict, climatic change and environmental degradation. These are the issues that today's generation will almost certainly have to address if the struggle for a society fit for all is to be achieved." (11).

However, its all very well saying that we need "to be part of a far wider struggle to create a better society for all", but these remain empty words when unbacked with any suggestion of how and what the disability movement ought to do. And why pass on responsibility to "today's generation" for addressing the "long-term political strategy for disabled people" when these issues were clearly emerging in the 1990s and were precisely what we (yesterday's generation?) ought to have addressed, at the very least, in developing the movements strategy? I think adding a wider perspective in the last paragraph, of the struggle disabled people need to face, with no suggestions is a 'cop out'

CILs – What Are They?

At least I made several attempts from the 1990s onwards for a route to get "to be part of a far wider struggle to create a better society for all". I argued that CILs should be developed so as to facilitate our own community based services and profession. My view was that such an action flows from the social model of disability and has the potential of transforming ourselves and

our place in society by making our own contribution to its development:

"First, the development of our own approaches to assistance not only requires an unpacking of the version imposed on us by people with abilities, but the creation of our own "normal" forms of assistance. Our constructing of systematic forms of help according to our own social model of disability will generate new services and service providers – professions allied to the community (PACs), as distinct from professions allied to medicine (PAMs). I believe that these workers will constitute our own trade union. It is these trade unionists, truly immersed in a disability culture, who will be a vital engine for social change. They will have a crucial role in promoting the national and international criticism of the dominant health and community care ideology that is not wanted by disabled people." (12).

And in 2000:

"Centres for Integrated Living (CILs) are one structure created by disabled people to service such aspirations and, in my view, workers in these centres are an embryonic profession allied to the community (PAC). This professionalisation process exactly replicates the progress made by women when they created their own midwifery service, rather than see themselves as woMEN with support needs wholly defined by males. User-generated support services create opportunities for harmonising user and provider needs and, at the very least, help to avoid the trap of disabled people being seen as disABLED, with support needs wholly defined by people with abilities. The allying of service development with community-based aspirations requires substantially different worker attitudes and guidelines for providing professional assistance. Setting up CIL services transforms the way disabled people think about themselves and the public identity they wish to cultivate. In my view this is the beginning of a journey in which a whole new cultural matrix of human relationships is waiting to be discovered." (13)

And then again:

"Our experiences in the emancipatory struggle, and in our development of CILs, have already thrown light on the kind of community based worker that we want, need and have to create. Inspired by insights from the radical social model of disability we must develop our own community based profession. This will provide an opening for disabled people and disenchanted professionals (especially OTs) to truly work together in creating a more appropriate nationalised service which allies itself with the community and responds to what people want." (8).

Independent Living

I think uncoupling the social model of disability and its constituent elements undermined the UK innovatory road to emancipation. Encouraging informed opinion in the disability movement's body politic and clarifying possible ways to progress our emancipation through the dissemination of information, debate and educative material in a BCODP journal, identity building by supporting disability arts and cultural development and supporting more graduates in disability studies were all sidelined in favour of USA 'privatisation' solutions (focus on 'independent living' and 'civil rights') that aren't working even for them!

The rights based approach wasn't counter-productive simply because it was "pursued as an end in itself rather than as a means to an end" – it was freed-up to become, and be pursued, as an end in itself *because* it was uncoupled from the social model of disability as one of the three 'big ideas'.

To my mind the same criticism holds for the way the USA approach to personal support, 'independent living', was assigned particular significance in the UK disability movement's progress to emancipation.

Following the BCODP and NCIL split in 2002 both Colin and Mike attached their names to the letter addressed to "BCODP member organisations" which includes this assertion: "a

principal foundation of disabled people's freedom – the right to independent living" (14). Elevating 'independent living' into a *principal* (rather than seeing it as an *element* within a model) in my view avoids in-depth debates about campaigning aims – for example: should we aim at the right (civil rights law) to be independent (independent living services) or should it be for the nationalisation of appropriate social services **under our control** (integrated living services)?

It, surely, is only by emphasising that 'rights' and 'independent living' are no more than 'components' of the social model of disability that makes clarity in the dynamics of our quest possible. One way or the other I think 'independent living' was given a green light for its independence (as NCIL) and as a direct challenge to BCODP.

The UK community support alternative?

Since the 1990s I made several attempts to highlight, not the dangers of promoting CILs, but the importance of understanding the difference between 'independent' and' integrated' living. I wrote for example:

"In addition to the pioneering 'Centres for *Integrated* Living' there were also 'Centres for *Independent* Living' in the UK more closely modelled on the USA CIL brand. The fundamental difference between 'Centres for *Integrated* Living' and 'Centres for *Independent* Living' was sharply highlighted in the 1990s when the weight of national party politics shifted and the centre left Labour Party jumped over the central Liberal Democratic Party to occupy a centre right position, pushing the Conservative Party further to the right. This changed the political balance leaving no major national party with a 'socialist' agenda. Both the Derbyshire and Lambeth 'Centres for Integrated Living' were soon in crisis – the former became a "Centre for *Inclusive* Living" and the latter was dismantled. On the other hand 'Centres for *Independent* Living', facing a greatly weakened ideological opposition within the 'disability movement' were now free to develop, rewrite history, and

present their approach as the originator of CILs in the UK!" (10).

Apart from the substantial literature from Ken Davis, and others in Derbyshire, and Dick Leaman, and others in Lambeth, on the distinction between 'independent' and 'integrated' living services backed by myself, I know of no attempt to question the USA model for community based services for disabled people.

I find it extraordinary that people who campaigned so vigorously for the USA style of independent living services to be created in the expanding UK competitive market are now complaining that they are losing the government support upon which they are dependent!

"Organisations of Disabled People are being made to close because of a lack of money and support … We will be dressed in rags and chains to show that it is still very hard to live independently because we do not have enough support to have freedom and choice"   Flyer (15) announcing demonstration on 2 September 2006 about new Independent Living Bill.

So, after all, disabled people cannot be 'independent' without state 'support' – disabled people's 'independence' is 'dependent'!!! I don't think you have to be a psychologist to recognise the dominant message this demonstration will feed the 'non-disabled' public.

The promoters of 'independent living' in a market economy can't complain that they get what they wanted (to the delight of privateers in the new Blatcherite Labour Party). When disability groups became 'independent' they needed to get on with the job and *compete* against other 'independent living' service providers. If the competition happens to be well-established charities – well so be it – let the most competitive win! That's what 'independence' means in the capitalist system. Its all about 'efficient' service provision (meaning who has the cheapest product to sell). The market has no need for non-productive groups such as 'political' organisations of disabled people. How can we complain when some people from the disability movement, even former leaders, take top jobs in

charities, or when Rachel Hurst goes public saying we should cooperate with charities rather than oppose them? After all we're all the same now – 'independent' competitors in the same service providers' market. In short, the disability movement is no longer setting the agenda for our emancipation – instead, we've become prisoners of a market that sets the agenda for our movement!

This is a capitalist dream come true – every single disabled person becomes an employer, pays personal assistants for their labour, is responsible for working conditions, ensures annual leave is provided, does the obligatory paperwork and checks taxes, etc. The only trouble is – capitalism doesn't stop here – competition means successful companies gobble up weaker groups, companies merge forming larger groups and those that fail, well, they go bankrupt and disappear. No surprise, surely, that entrepreneurs are setting up companies to relieve stressed disabled people from managing their 'direct payments' funding. How can we carp about individuals or charities advertising their management services to disabled people getting 'direct payments'? If these new service providers are better able to advise disabled people and supply 'carers' then organisations of disabled people, such as CILs, they are only doing what people do in the market – competing!

All I can say is that perhaps one day (when it dawns on people that a market in 'care' is not without stress for the recipients, the most efficient, or civilised) then the few successful monopolies in 'care' services will be nationalised and disabled people will be back where they started – with social services providing 'care' over which we have no control!

Can we believe that people with capabilities would welcome being treated like an individual company when they use personal services? Imagine going to a restaurant and having to employ the waiter to 'care' for our needs (pay the person directly and do all the paperwork), then employ the cook to 'care' for food needs, etc. Well … perhaps people once did

have to do this until entrepreneurs started doing this for the customers and set up restaurants. Oh dear …

Goodbye Social Model of Disability?

The ideological problem facing the disability movement in the UK from the 1990s onwards was whether the social model of disability was still relevant in guiding our struggle or whether social changes had advanced so far that the original model no longer reflected the social context in which it had been created? Is the 'rights', or 'potpourri', model of disability now more in tune with the market economy expanding into the health and social services sector of society? Was the social model of disability really understood?

Well … as I wrote in 1996: "The adoption of Anti-Discrimination Legislation (ADL) is about to drive a wedge through the heart of the disabled community …" (7).

References

1. Vic Finkelstein "Modelling Disability" (1996) Centre for Disability Studies, Leeds University web site
2. UPIAS "Fundamental Principles of Disability" (1975)
3. Liz Crow "Renewing The Social Model of Disability" *Coalition News*. GMCDP (1992)
4. Tom Shakespeare "Disabled People's Self-organisation: a new social movement?" *Disability, Handicap and Society* (1993) Vol.8 No.3, page 257
5. GLAD "Reclaiming the Social Model of Disability" Greater London Action on Disability conference (February 2000)
6. Richard Wood in *Disability Now* (April 1996)
7. Vic Finkelstein "Outside, 'Inside Out'" *Coalition* GMCDP (April 1996) pp.30-36). Has the following note: An edited version appeared in Disability Now
8. Vic Finkelstein "The Social Model Repossessed" *Coalition* (February 2002) p.10-16.

9. UPIAS "Constitution, Aims and Objects" (Adopted: 03.12.1974. Amended: 09.08.1976).

10. Vic Finkelstein "Phase 3: Conceptualising New Services" (26-28 July 2004), Conference: Disability Studies: Putting Theory Into Practice, Lancaster University (Has the following note: This is a revised and expanded version of the presented paper).

11. Mike Oliver and Colin Barnes "Disability Politics and the Disability Movement in Britain: Where Did It All Go Wrong?" *Coalition* (August 2006) pp 8-13.

12. Finkelstein, V. (1999) "A Profession Allied to the Community: the Disabled People's Trade Union". In STONE, Emma (Ed)(1999) Disability and Development: Learning from action and research on disability in the majority world. Leeds: The Disability Press. ISBN 0-9528450-3-2 Pbk.

13. Vic Finkelstein "No OTs, you can't make me 'able'..." *Therapy Weekly*, (May 18, 2000) Vol.26 No.44 page 12. [published in full as: Vic Finkelstein "Professions Allied to the Community (PACs)" *Manchester Coalition* (March 2000) pp 26-28]

14. "Letter to BCODP member organisations" (13th September 2002) Signed by Colin Barnes, Mike Oliver, Sian Vasey, Alice Maynard, Michelline Mason, Roy Webb, Dave Morris, Jane Campbell.

15. "Our Lives R4 Living!" Flyer (circulated August 2006, not dated)

16. Vic Finkelstein "The disability movement has run out of steam" (*Disability Now*, 1996)

17. Mike Oliver "Disabled People and the Inclusive Society: or The Times They Really Are Changing". Public Lecture on Behalf of Strathclyde Centre for Disability Research and Glasgow City Council (27 April 1999).