Cultural Oppression and Emotional Distress: Finding the Links

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Abstract

Previous analyses of the situation of people who experience emotional distress have focussed on their status as receivers of mental health services, or on the discrimination arising from having been labelled ‘mentally ill’. In contrast to these perspectives, this study explores forms of cultural oppression which have a negative impact on people who experience distress. This includes direct media representations of distress, but also goes beyond these to examine ways in which culture constructs oppressively limited notions of image and identity, in ways which have a negative impact on people who experience distress. It goes beyond previous analyses of culture within disability studies by examining the direct effect of representation on individuals.
The study was a collaborative process of auto-ethnography, involving a group of seven participants, including the researcher. Interviews and discussion were used to explore the issues, together with an element of discourse analysis. Specific cultural artefacts were identified by the participants, in order to identify their oppressive potential and their direct effects on individuals. The concept of psycho-emotional disablism is used to explain these effects.

The research revealed a wide range of ways in which culture can have a disabling effect. Participants also demonstrated that they are not simply passive recipients of oppression, but that they can recognise, negotiate and resist it. The study concludes that the negative effects of culture revealed by the research must be seen in the context of wider social oppression, as the disabling effects of culture have the potential to affect anyone, regardless of impairment.
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Chapter One:

Introduction

The social situation of people who experience emotional distress has, in contrast with broader analyses of disability more generally, focussed largely on people in terms of their status as receivers of mental health services. Sometimes this focus is on the nature of the statutory services offered to (or imposed on) individuals. At other times it is on the stigma and discrimination which arise more widely from having received such services, or having been labelled ‘mentally ill’. Within disability studies the analysis is often in terms of negotiating this problematic relationship, and its implications for identity. Elsewhere the Mad Pride movement takes a more radically political stance, seeking to re-conceptualise the concept of ‘madness’ as a valuable rather than de-valued aspect of identity, and, in doing so, challenge the stranglehold that the relationship with statutory services has over people’s lives. So, whether this relationship is accepted, negotiated, or challenged; whether individuals define themselves as users of services, or survivors of an oppressive system, the
conceptual starting point for analysis remains largely the services themselves, their quality or otherwise, and the status and experience of those who use them.

Valuable though such an analysis is, in that it provides a platform to challenge oppressive social structures, it does not address the disabling aspects of culture which infuse the social world. These are the elements of our culture which might have little or nothing to do with mental health services or direct discrimination against those who use them. They are those elements which so oppressively narrow the general socio-cultural understanding of what constitutes a valid identity that the effects are almost certainly negative for many and diverse individuals throughout society. For those of us who already experience distress and despair about our identity and our value in society, the effect is particularly acute.

**Context and aims of the study**

My desire to address this issue arises from the fact that I have often felt that the focus on services and those who use them
provides only a partial, even inadequate, explanation of my own experience. Despite medical diagnosis, mental health services do not play a major part in my life, and yet I have become increasingly conscious of an acute feeling of disadvantage which cannot be explained simply by the effects of my impairment. Moreover, discussions with friends and acquaintances have revealed similar concerns, suggesting that this is a wider issue than one of my own subjectivity. It would seem that there are issues of widespread cultural oppression at stake.

Put in medical terms, my ‘depressive condition’ is ‘less severe’ than many other forms of ‘mental ill-health’. Despite the inadequacies of the mental health system that I have experienced on occasion, I have never endured the more extreme violations of human rights that many people suffer through contact with the system. Similarly, I have been lucky enough to find employers capable of understanding the need for sensitive and flexible working conditions, and who would be unlikely to discriminate directly on the grounds of impairment. Put simply, I do not experience direct social barriers particularly
acutely. If disability is defined within a social model framework as the barriers and disadvantage created by society (and I will discuss the importance of different models of disability later), then, notwithstanding my impairment and my rights under the Disability Discrimination Act, perhaps it is wrong for me to define myself as a disabled person. I am fully aware of the potential for disablement (for example if I were to get a job with a less understanding employer), but that has little relevance to my current experience.

But such an analysis takes no account of the complex and possibly inseparable relationship between my devalued sense of identity and the culture in which I live. Very bad moments of emotional distress do not, generally speaking, occur at random. They are brought on by contact with certain elements of society and culture which affect me particularly negatively, and on a regular basis. I have discussed this with a number of people who also do not feel that their contact with mental health services is a particularly significant part of their experience or their identity, and who mostly would not define themselves as ‘disabled
people’. Nevertheless, they agree that the unavoidable absorption of images of ‘desirable’ but unobtainable lifestyles, identities and bodies can be an exhausting, devaluing and sometimes devastating experience.

This experience is not dissimilar to that of ‘internalised oppression’, used in the wider context of disability to describe the psychological effects of disablement on the individual (Rieser 1990; Morris 1991). But the experience is perhaps better explained by the more recent concept of ‘psycho-emotional dimensions of disability’ (Reeve 2004), used to describe the negative effects of disablement on an individual’s ‘psycho-emotional well-being’ (Thomas 1999):

These psycho-emotional dimensions of disability can be considered to be the effects of psycho-emotional pathways of oppression which are sustained through imagery, cultural representations and interactions with others (Reeve 2004: 84).

The cultural representations to which Reeve refers are those that directly depict impairment, and my study does explore some of
the effects of direct media representations of emotional distress. However, it also goes beyond these, to explore how cultural depictions of image and identity can construct limited notions of individual value, in ways which have a negative psycho-emotional effect on individuals who experience distress.

So the central question of this research is: ‘are there ways in which culture can have a negative psycho-emotional effect on individuals who experience distress?’ The research aims to find areas of commonality between participants, in terms of their experience of distress and exposure to cultural artefacts, but it does not seek to identify any single psychological effect. The experience of distress is far too complex for this to be possible, and, in any case, the study seeks to examine disabling culture rather than individual psychology. Further, the study will suggest that culture has the potential to be disabling regardless of impairment. The negative psycho-emotional effects explored in this study can therefore be seen as acute instances of oppression which highlight the potential for culture to be disabling on a much wider scale.
Terminology

The terminology around ‘mental health’ has never been discussed with the theoretical rigour that has occurred in other areas of disability (Barton and Oliver 1997). As a result, “there is as yet no agreement among mental health service users/survivors about terminology” (Beresford 2004: 210).

Beresford explains the important difference between the term ‘service user’ and the more political ‘survivor’ (as in, ‘survivor of the mental health system’), and he, in common with many others, chooses to use ‘service user/survivor’. This is entirely valid in many cases, as it provides clear political distance from medical diagnoses and labels. However, as the purpose of this study is to look outside relationships with the mental health system, it is not appropriate in this case. The term ‘depression’ is often used, but refers to a specific medical diagnosis (‘clinical’ or ‘severe’ depression), along with terms for more ‘severe’ conditions such as bipolar disorder or schizophrenia. Therefore, in order to distance myself from medical labeling, I will continue to use the more general term ‘people who experience emotional distress’.
Structure

Before discussing the research and its findings, it is necessary to examine the broader context for the study in further detail. Chapter Two will therefore provide an overview of the diverse range of existing views of both ‘mental health’ and cultural oppression. This will explain further the ways in which the study provides an alternative perspective to the focus on mental health services and those who use them. It will also examine how it differs from previous analyses of culture in disability studies, where the focus has principally been on direct representations of disability and impairment (Barnes 1992a; Shakespeare 1997). Furthermore, while disability studies has not addressed the issue of culture where it does not relate directly to impairment, there are nevertheless large areas of cultural studies and feminism which do examine the way in which culture serves to devalue and undermine identity (Woolf 1990; Wykes and Gunter 2005). These will also be explored.

The qualitative nature of this study also exposes a number of issues about research itself, particularly around differing
approaches to ideology and methodology. Chapter Three will therefore look at some of these issues in detail, by way of explaining how the methodology I have chosen for this study seeks to be collectivising, participatory and empowering (if only on a small scale). The significance of these issues is shown in the context of the ‘emancipatory’ research paradigm within disability studies.

The subsequent chapters explore the findings of the research. Chapter Four looks at direct representations of emotional distress in the media. Chapter Five then broadens the scope to examine ways in which certain elements of culture present oppressively narrow conceptions of valid image and identity, and the ways in which this has a negative psycho-emotional effect on people who experience distress. Finally, Chapter Six explores ways in which these forms of oppression are recognised, negotiated and resisted. Chapter Seven concludes by summarising the findings of the research, highlighting the extent to which the participants are not passive recipients of oppression, but active social actors. It also suggests areas for further
research, in particular the need to link the findings of this study with wider analyses of social oppression.

In focusing attention away from mental health services, I do not wish to deny the vital importance of political struggle against oppressive systems. For many in the Survivors’ movement it is structural discrimination and denial of basic human rights that are the most pertinent issues. However, as a supplement to exposures of direct discrimination, I believe it is also important to examine other ways in which our identities are undermined. Also, my approach does not deny that emotional distress can have physiological causes. Rather, in keeping with a social model understanding of disability more widely (discussed in Chapter Two), it recognises that individual psychology or biology does not in itself constitute disability. Rather, disability is the disadvantage caused by society and culture, and it is this that the study seeks to explore.
Chapter Two:
Approaches to emotional distress and disabling culture

Approaches and responses to emotional distress can be found across a huge variety of disciplines and media, from fictionalised accounts of the experience of distress to political campaigns against discrimination. This chapter will explore some of these, in order to set the context for the research. It will also explore some approaches taken by cultural studies and feminism, as it is the disabling nature of culture which the study seeks to explore.

Traditional approaches to emotional distress
The vast majority of literature about emotional distress is concerned with the ‘condition’ of depression, usually in the form of information and ‘self-help’ books (e.g. Milligan and Clare 1994; Gilbert 1997). An internet search using the word ‘depression’ reveals a wealth of information about the nature of the condition and ways to ‘cope’ with and treat it (e.g. Depression.com 2009;
Healthy Place 2009; NHS 2009), but nothing about the way in which society treats people who have the condition. Whilst there is recognition that distress can have social causes, such as financial problems or bereavement, these are accepted inasmuch as they have an effect on the condition, which remains a 'disorder' to be treated through medicine or psychology (Gilbert 1997). In the wider cultural and literary arena there are also plenty of personal accounts of living with emotional distress (e.g. Wurtzel 1994; Slater 2000). These approaches may be valid, but are not the issue here. To apply a social model framework (Oliver 1990; Thomas 2004), they are principally concerned with impairment, not disability. Before continuing, it is necessary briefly to outline this framework in relation to emotional distress, as it provides the ontological basis for this study.

The traditional approach to disability is to see it as a characteristic of the individual, which causes their disadvantage. This is often referred to as the 'individual' or 'medical' model (Oliver 1990). Under a social model framework, however, 'disability' is defined as the barriers and disadvantage created by
society (UPIAS 1976; Thomas 2004). Individual characteristics (for example, impaired sight, or a ‘mental health condition’) are referred to as ‘impairment’. This distinction between impairment and disability is crucial, as it provides the basis for an explicitly political focus on a discriminatory society which seeks to justify discrimination through an ideology which locates the ‘problem of disability’ within individuals rather than the social and cultural world (Oliver 1990, 1996). Debate about the social model has centred round the issue of the extent to which it fails to account for the potentially negative experience of impairment generally (Morris 1991; French 1993; Crow 1996) and distress in particular:

Mental health service users/survivors have never been central to the social model of disability. The corollary of this has been that for a long time, the social model of disability has not had any particular significance for most mental health service users/survivors (Beresford 2004: 209).

However, Thomas (2004) clarifies the issue in a way which I find particularly helpful in relation to distress:
... once the term ‘disability’ is ring-fenced to mean forms of oppressive social reaction visited upon people with impairments, there is no need to deny that impairments and illness cause *some* restrictions of activity (p. 579, emphasis in the original).

The distinction is therefore clearly made between disadvantage caused by society (disability) and restrictions of activity caused by impairment (impairment effects). Thus, the fact that my brain re-absorbs serotonin too easily is my impairment. The depression that this re-absorption causes is an impairment effect. The negative psycho-emotional effect of a culture which, effectively, tells me that I am worthless, is disability.

Under this framework it can be seen that the many books and websites which provide information about depression are concerned principally with impairment. Where they offer guidance on ‘coping’ with the condition they are concerned with impairment effects. Both these approaches relate more to the traditional model of disability, so can be seen to be complicit in the ideological denial that disability has social causes. It
therefore becomes necessary to look beyond this type of material for anything which starts to resemble disability as it is defined under the social model.

**Social approaches to emotional distress**

A primary concern of the Survivors’ movement is the oppressive (and therefore disabling) nature of many of the treatments for emotional distress. Forced treatments are regularly condemned as barbaric (Caplin 1996; Taylor 1996), and the effects of anti-depressant and anti-psychotic drugs are also criticised (Wurtzel 1994; Breggin 1999; Budd 2000). Opinions on these issues differ hugely and controversially, with some people accepting the potential usefulness of treatments (Kramer 1994; Jameson 1996; Perkins 1996), but it is not necessary to discuss these arguments here, merely to highlight that treatment itself is a potentially disabling process.

A more general, but explicitly political, concern is the oppressive nature of the social systems of psychiatric treatment, which, as well as restricting individual freedoms, are seen to act as a form
of insidious social control. In *Madness and Civilisation*, Foucault (1961) outlines a complex theory of the medicalisation of ‘madness’ as a discourse of power which serves to control and contain those people not deemed useful in western post-enlightenment industrial social structures. More recently this argument has been echoed by the Mad Pride movement, who have argued strongly that “psychiatry is one of the most subtle methods of repression in advanced capitalist society” (Leslie 2000: 67).

So, for many people who experience emotional distress, the relationship with the services supposedly in place to assist is one of powerlessness at best, and oppression at worst. Nevertheless, it is this relationship which continues to characterise the Survivors’ movement:

It is the use or survival of services, rather than the experience of mental distress *per se* which usually provides the starting point for involvement in the [Survivors’] movement (Barnes and Shardlow 1996: 114).
This is in contrast to the wider disability movement, which examines the situation of disabled people in a far wider range of social contexts (although the quality or otherwise of vital services is still a crucial element of this analysis). For the Survivors’ movement, even where the focus is on empowerment and attempts to break the link between the individual and the services they use, it is still the use of services which is the starting point (Sayce 2000; Barnes and Bowl 2001). Mad Pride activist Simon Morris sums the situation up:

Mental health resource users are now actively encouraged by statutory health authorities and by many charities to get involved in improving the psychiatric system… This is all well and good, but it defines us forever as the (ex) ‘patient’ – it defines us only in terms of our involvement with the control system that is institutional psychiatry (Morris 2000: 207).

Where a broader focus can be found is in accounts of the wider social discrimination and prejudice experienced by people as a result of their use of services, or even simply having had a diagnosis of a ‘mental health condition’. The extent of this form of discrimination has been demonstrated by research carried out for
the mental health charity *Mind* (Read and Baker 1996). More recently, Thornicroft (2006) provides a detailed exploration of the various insidious forms of discrimination, in areas such as employment, housing and social life, as well as drawing attention to statistics revealing the generally lower quality of life amongst people classified as having a mental health condition. A further important and related approach considers the negative consequences of ‘labelling’ in relation to an individual’s social status and personal subjectivity (Linnett 2004), which echoes Goffman’s (1963) theories concerning the stigma of *managing a spoiled identity*, applied to impairment more generally.

The worrying extent of social discrimination is an extremely important issue worthy of a great deal more scrutiny and research (Taira 2007), not to mention policy intervention. However, this is not my principal focus in this study. Discrimination and prejudice of this sort retains a link between the individual and their personal status, either as a user of services (past or present), or in dealing with the negative consequences of labelling and revealing a diagnosis. In contrast,
my aim is to examine the effects of aspects of culture which are not aimed directly at individuals, but which nevertheless have a direct negative psycho-emotional effect on people who experience distress.

Within disability studies, analyses of culture have focussed principally on direct representations of impairment, and the cultural response to it. For example, Barnes (1992a) explores the range of stereotypical representations of disabled people in the media, while Shakespeare (1997) examines the oppressive cultural functions served by overwhelmingly negative representations of disabled people. Specific to mental health, there has been discussion of differing cultural responses to emotional distress (Warner 1996) and how understandings of what constitutes ‘sanity’ and ‘insanity’ are socially constructed (Rosenhan 1996). However, there has been no analysis of how aspects of culture (whether they are representations of impairment or not) directly affect individuals, and neither has there been consideration of the disabling aspects of culture beyond those directly related to impairment.
Identity and disabling culture

The kind of analysis that examines culture (and by implication the effects of culture on individuals in society) can be found within the interlinked disciplines of cultural studies and feminist sociology. These are huge areas of study containing a multiplicity of contrasting views and theories, so a summary here would be impossible. However, two studies which are of particular relevance to this research are Naomi Woolf’s *The Beauty Myth* (1990), and Wykes and Gunter’s *Media and Body Image* (2005). These texts exemplify how, in cultural studies and feminism, the focus is not initially on the individual within a culture, but on the nature of the culture itself; an approach which is particularly pertinent to a social model of disability and to this study.

However, notwithstanding discussion about the potentially inseparable and reflexive relationship between the individual and society (Kendall and Wickham 2001; McRobbie 2005), the implication must be that criticism of culture is of use inasmuch as culture has potentially negative effects on individuals within it, and studies of culture have sometimes been criticised for not
accounting for these individual effects (Wykes and Gunter 2005).
My study seeks to address this by taking the understandings and
opinions of individuals as its principle source of data
(methodology is discussed in Chapter Three).

The area of discussion in cultural studies and feminist sociology
that is most pertinent to this study, as it deals with the ways in
which culture serves to undermine and devalue identity, is that
which deals with culturally constructed body image. Woolf (1990)
examines in detail how images of beauty are used to affect
women negatively, to the benefit of a capitalist system that can
then sell them the products it tells them they need to restore their
feelings of value. This is a strong theme running through much
feminist writing and is supported by an analysis highlighting the
oppressive nature of social constructions of gender (De Beauvoir
1973; Butler 1999). Woolf supports her analysis by citing
statistical research pointing to an epidemic of anorexia,
mutilation, self-harm and general mental ill-health amongst
women. The link between media representation and effect is
strongly suggested, but not explicitly explored. By contrast,
Wykes and Gunter (2005) recognise that “any account of media meanings is necessarily partial without concern for the audience” (p. 11), and that there is a need to explore the ways in which audiences interpret media representations. They seek to do this through qualitative research with individuals, to explore the direct effects on individuals of media representations of body image.

So the areas covered by Woolf (1990) and Wykes and Gunter (2005) are close to those in my own study. However, there are two important differences to state. Firstly, the forms of cultural oppression as typified by Woolf are highly gendered. This does not mean that only women experience oppression; rather, that representation and its negative effects follow culturally constructed gender lines. Ideal body shapes are different for men and women, but femininity and masculinity are both social constructs. This is not to say that the power balance in gender construction is equal, simply that there is potential for oppression along gender lines for both men and women (Henwood et al 1999). Woolf points out that deliberately making people feel bad about themselves is an advertising ploy that works just as well for
men as for women, and that “advertising has begun to portray
the male body in a beauty myth of its own” (1990: 289).
Nevertheless, it is women who are the principle focus of her
analysis, and Wykes and Gunter take a similar approach. By
contrast, my principle area of interest is the interaction between
culture and emotional distress. Whilst recognising the inherently
gendered ways in which oppression can manifest itself, the focus
is not specifically on the gendered nature of the oppression, and
both male and female participants are involved in this research.

Secondly, both Woolf and Wykes and Gunter cite high instances
of impairment, such as anorexia, bulimia, addictive-compulsive
behaviours, low self-esteem, anxiety and depression, as
symptoms of particular forms of culturally oppressive
representation. Impairment is therefore characterised as
necessarily and wholly negative. By contrast, I prefer to take a
view of impairment similar to Abberley (1987), who, as well as
recognising that impairment itself can have social causes (as
opposed to disability, which is by definition socially caused),
advocates “essentially an attitude of ambivalence towards
impairment” (p. 164). This means that, without denying that many aspects of impairment or impairment effect can be negative, there are also ways in which impairment can be regarded positively as an integral part of an individual. Similarly, Swain and French (2000) argue for an ‘affirmative model of disability’, in which one’s identity as a disabled person is something to value and celebrate, rather than to be viewed negatively as is traditionally held to be the case. These models allow room for an understanding of emotional distress which, whilst recognising that it can be a negative experience, also accepts that it is integral to the individual. Distress may cause people who experience it to be particularly susceptible to oppressive discourses, but it is far more than a medical manifestation of oppression. For many it is simply a way of understanding the world that society does not value (Morris 2000).

It is necessary to acknowledge here that this viewpoint raises potentially complex psychological issues, given that the negative psycho-emotional effects that this study seeks to explore are characterised as an element of social oppression. It would
perhaps be necessary to distinguish those experiences of distress defined as disability, as they are caused by oppressive culture, from those which are integral to the individual and are therefore impairment effects (Thomas 2004). However, the experience of distress is exceedingly complex and there is not space to discuss these arguments here. This study is not intended to be an investigation into psychology, and the focus must remain on the disabling nature and effects of culture.

**Conclusion**

This chapter has highlighted some of the gaps in existing approaches to emotional distress. It has argued that analyses of culture in disability studies have not looked beyond direct representations of impairment, and that where other disciplines have done so, they have viewed impairment solely as a negative symptom of cultural oppression. Largely absent from the approach within disability studies has been any attempt to identify a direct link between disabling cultural artefacts and their negative psycho-emotional effects on individuals. The next
chapter will explain how the research in this study has attempted to fill these gaps.
Chapter Three:  
Methodology

This qualitative study took place within a group of seven people of which I am a member, so the overall approach was one of auto-ethnography; that is “the study of people in naturally occurring settings” (Becker and Bryman 2004: 393), where the research is carried out by one or more of these people, rather than by an external researcher. The study aimed to be as collaborative as possible, guided by the principles of emancipatory research (Oliver 1992).

In this chapter I will describe these guiding principles, and evaluate the extent to which they have been followed. I will then explore the research methods in more detail. I will highlight how the methods have been influenced by emancipatory research principles, with emphasis on the fluidity of method made possible by the collaborative auto-ethnographic approach. I will then consider some of the drawbacks and potential criticisms of this
approach, and suggest that these should be responded to in the context of emancipatory research principles.

**Emancipatory research**

The emancipatory research paradigm has been developed from a social model understanding of disability, in response to the failure of traditional research paradigms to improve the lives of disabled people. The traditional positivist paradigm has been shown to be based on an oppressive individual/medical model of disability, and to have treated disabled people as passive objects of study rather than active social actors (Hunt 1981; Abberley 1991; Barnes and Mercer 1997). It has also, with an emphasis on quantitative methodology, made claims to ‘objectivity’ which have in fact been used to privilege and maintain oppressive power structures (Barnes 1997). The emerging interpretive paradigm, by contrast, abandons claims to objectivity, and recognises that knowledge is historically and culturally contingent. Despite this, however, and despite its association with more qualitative methods, the interpretive paradigm has failed to do anything to change the ‘social relations of research’ (Oliver 1992). Disabled
people remain in positions of powerlessness compared to researchers, and research therefore continues to reinforce oppressive power structures. So not only have the traditional paradigms failed to improve disabled people’s lives, they have in fact made their situation worse (Abberley 1991). In short, research has been a tool of oppression, rather than a means to overcome it.

The emancipatory paradigm therefore seeks to challenge this oppression by fundamentally reversing the social relations of research. Researchers, rather than controlling the process, should hand over power to the research subjects, putting their skills at the disposal of people who wish to use social research to improve their own situation. Emancipatory research should therefore arise from the lived experiences of the research subjects (Oliver 1997).

This reversal of power relations brings with it some important implications for how research is subsequently carried out, and an important principle of emancipatory research is to adopt a
pragmatic approach to methodology (Barnes 1992b). Notwithstanding criticisms of how various methods can be disempowering (Oliver 1992), different techniques are not to be used or abandoned on purely ideological grounds. Rather, the researcher should use whichever methodology is best suited to the process of emancipation given the specific circumstances. Sometimes it may be necessary to demonstrate a case using quantitative research statistics (e.g. Barnes 1991); at other times more reflexive qualitative research would be more appropriate. In addition, the research methods themselves should not be disempowering. Rather than the process being shrouded in mystery, accessible only to the researcher, the methods used should be transparent and debateable between participants. The researcher must therefore allow the research subjects to control the research throughout the process (Zarb 1992).

A further important element of emancipatory research is the explicit rejection of ‘methodological individualism’, that is, methodology which focuses on the individual, rather than on social structures, as the source of meaning and understanding.
For Oliver (1992), this approach is associated with oppressive individual and medical understandings of disability, where the problem is located within the individual and it is the individual who must be studied and altered. By contrast, emancipatory research seeks to turn the focus onto disabling social structures, so that “It is not disabled people who need to be examined but able-bodied [sic] society” (Oliver 1992: 112).

This study cannot claim to be true emancipatory research, because, as Oliver (1997) points out, the question of whether research has proved to be emancipatory can only be judged from outcomes. Also, as Zarb (1992) points out, genuine emancipatory research is practically impossible within existing social structures, with ‘participatory’ research being the best we can expect for the moment. However, it is possible to say that this study has attempted to follow the principles of emancipatory research.

Firstly, it has follows the principle that research should arise from the lived experience of its subjects. The development of the
ideas for the study did not take place in isolation, but through informal discussion with friends and acquaintances, some of whom subsequently participated in the research. So the research has developed from the outset through an organic understanding amongst a group of people who wish to speak out against a form of oppression. Secondly, as I explain in more detail below, the research methods arose organically from the situation, based on maximising reciprocity and empowerment. Thirdly, as discussed above, the research has followed the social model principle of focussing on the disabling nature of culture, rather than on individual psychology.

With these principles in mind, I will now discuss the specific methods used during the study.

Research methods: the design
The qualitative methods used in this research can be defined as: unstructured interviewing, semi-structured interviewing and discourse analysis. Underlying all of these is an element of auto-observation. These definitions are best thought of as descriptive
of elements in a fluid, reflexive process of collaborative auto-
ethnography, rather than as prescriptive methods to be imposed
onto a research scenario. Nevertheless, the original research
design was more structured than this suggests. I will first
describe this design, and discuss the elements of interviewing
and discourse analysis which are central to it, before discussing
how the design was applied in practice.

I intended to conduct an initial unstructured interview with each of
the six participants, during which I would explain the purpose and
aims of the study, and ascertain how much they would like to be
involved beyond the interviews, and what arrangements would
suit them best. I would then ask them to identify one or two
cultural artefacts that had a negative effect on them in relation to
their own experience of distress. Having conducted these
interviews I would then carry out a discourse analysis on the
artefacts the participants had identified, including one I had
identified myself. The findings from the discourse analysis (which
was to constitute a chapter of the write-up) would then inform the
second stage of interviews. These would be semi-structured, in
which I would share the artefacts identified and ask the participants to respond, with the aim of identifying a commonality of experience amongst the participants in terms of the negative psycho-emotional effects of the artefacts. I would add my own experience to the analysis, as a form of auto-observation.

Interviews were therefore a key source of data in this research. Traditional ‘textbook’ methods make a distinction between structured, semi-structured and unstructured interviews, with each having a number of pros and cons (Punch 1998, Blaikie 2000). The more structured the interview, the more easily quantifiable the data collected. However, it is not always possible or desirable to be prescriptive about interview techniques. As Punch (1998) points out, the interview “is a data collection tool of great flexibility, which can be adapted to suit a wide variety of research situations” (p. 176), and I found this to be a good guiding principle.

I found an even more useful principle in feminist approaches to interviewing which emphasise participation and reciprocity.
Oakley (1981) challenges the ‘textbook’ prescriptions of distance and neutrality in interviewing, concluding that the interview itself is essentially a “masculine fiction” (p. 55), in which oppressive power relations are upheld. In its place she advocates a process of achieving rapport with the interviewee, with the aim of establishing a non-hierarchical relationship based on trust and reciprocity. As well as this being an end in its own right, this reflexive process is a far more effective tool for gathering information. This approach is not without its critics; for example, Lyons and Chipperfield (2000) argue that there are times when a distanced relationship can work better. However, in the light of the emancipatory research principles outlined above, these debates about appropriate methods are more useful as ways of discussing which methods are most appropriate to which circumstances, rather than as prescriptive ‘dos and don’ts’ in research. The overriding point is that no single ‘approach’ should be prescribed. This, then, ties in neatly with the pragmatic approach to method advocated by emancipatory research principles.
The other important element of this research is that of discourse analysis. Discourse is defined as “the general framework or perspective within which ideas are formulated” (Punch 1998: 226). Cultural artefacts are specific elements of this framework (for example, the television programmes and adverts used in my study). They are created from, and exist within, our culture. Analysis of them can therefore demonstrate how they both reflect and perpetuate the values of that culture, on the basis that “discourse reflects human experience and, at the same time, constitutes important parts of that experience” (Punch 1998: 227). Woolf (1990) performs an extensive discourse analysis on adverts for beauty products, and demonstrates how they both reflect and construct oppressive cultural concepts of femininity. Similarly, the use of artefacts in my research is intended to demonstrate how they both reflect and construct oppressive concepts of valued image and identity. Selecting very specific artefacts provides a focus for the study given limited space. They are used on the basis that they are single examples which represent part of a wider picture, and as a useful starting point for discussion. The artefacts selected were all from television, but
fall into two categories: programmes and adverts. Of the programmes, one was a drama (BBC 2009a), one was a documentary (BBC 2009b) and two were talent shows (ITV 2009a; ITV 2009b). All these gain particular relevance by virtue of being extremely well-known. As well as their direct effect on individuals, they therefore have significance by virtue of their potential effect on a wider audience. The drama and the documentary both contain direct representations of emotional distress, while the talent shows and adverts were chosen because of their potential to represent and reproduce oppressive cultural values. The adverts were for a shampoo, a hair dye, a brand of lager, and a multi-media computer games console (see Appendices for transcripts and reproductions of these). I would suggest that adverts are particularly useful in demonstrating oppressive cultural effects, because they consciously attempt to appeal to cultural values which are perceived to be widespread, and to do so with a high impact in a very short space of time. Their reflection of oppressive values is therefore particularly distinct, and their potential to reproduce them particularly acute.
Once I had examined the artefacts along these lines, the interviews were to be used to test the hypothesis that the artefacts have direct negative effects on individuals, in relation to their experiences of emotional distress. Although this did, in effect, occur, I will now discuss how the reality of the process proved to be far less structured.

**Research methods: the reality**

Although the initial research design was a useful conceptual framework, in reality the process proved far more reflexive. The various elements described above became interwoven to the extent that it ceased to be useful to think of them as distinct components of the research design. Instead, it became clear that the whole framework for the process was in fact one of auto-ethnography. The principle reason for this was that my status as a member of the group being studied was more than simply theoretical; in fact it had several important (and often useful) implications for the methodology.
Firstly, the non-hierarchical relationship of rapport and friendship between researcher and subject identified by Oakley (1981) as a goal to be attained in interviewing was already firmly established between me and the participants. To put this in emancipatory research terms, the social relations were already non-oppressive. This allowed for discussion at every stage of the process, including outside what might be deemed the research process if it was not an auto-ethnographic study.

Secondly, just as I was able to gather data at any point during the study, so the participants were able to get information from me. The sharing of information was therefore reciprocal throughout the process. A clear practical advantage of this was that the initial unstructured interviews proved to be far more important sources of data than I had anticipated, because participants were, for the most part, already familiar with the context of the study. Participants therefore readily took this first opportunity to discuss their own experiences of distress and disabling culture.
The third advantage relates to the element of discourse analysis. The sophistication of the participants’ own understandings of the artefacts meant that it was both unnecessary and unhelpful for the discourse analysis to be an isolated component of the research. Rather, elements of discourse analysis weaved themselves into every stage. This effect arose from the collaborative nature of the process, specifically because I asked participants to identify relevant artefacts themselves, rather than choosing them myself (with one exception). So when participants identified the artefacts during the initial interviews they naturally discussed why they had chosen them. Discussion of the artefacts continued in this way throughout the subsequent interviews, in a way that can perhaps be thought of as a form of collaborative discourse analysis. This is therefore reflected in the structure of the write-up (Chapters Four, Five and Six), in which the precise nature and significance of the artefacts is interwoven with the analysis of their impact.

So the process that developed from my initial, structured, research design was far more reflexive and less structured than
intended, and this was a clear advantage in terms of following
the emancipatory principles of reciprocity and collaboration.
However, there a number of potential disadvantages and
criticisms of this approach, which I will now discuss.

**Potential disadvantages and criticisms**

The main problem of the less structured auto-ethnographic
approach was simply that it resulted in a very large amount of
data. Blaikie (2000) points out that a risk for unstructured
interviews is that the resulting data will be too broad, and there
will be too much of it, and this criticism could potentially apply to
the whole process of this research. The interviews consisted of
wide ranging discussions which went well beyond the scope of
the research, and included the element of collaborative discourse
analysis described above. In addition, many highly relevant
points were made in conversations with participants outside the
interviews. Potentially, then, I had the problem of a very large
amount of data which would take a great deal of time and effort
to interpret.
However, this did not prove to be a problem at all because, in effect, participants themselves assisted the process of analysing the data. The clearly important points were identified as they arose throughout the process, rather than me having to deduce it alone from hours of recorded interviews and reams of notes. The initial stage of the analysis therefore took place during the interviews, in collaboration with the participants. In effect, I came away from the interviews with the data already organised and interpreted, and subsequent discussion served to clarify and prioritise the relevant points.

Further potential criticisms relate to the qualitative nature of the methodology. The use of qualitative techniques was necessary due to the highly subjective nature of the subject being studied, as research of this kind requires a subtlety of method that is not available in quantitative techniques such as questionnaires and structured interviews. It is necessary, however, to recognise and respond to potential criticisms of the qualitative methods I have used, in order to establish the validity of the study.
As Dingwall points out, qualitative research has experienced “far less systematic refinement” than other methods (1997: 53). For qualitative research to be socially useful, therefore, it must be persuasive, to avoid being easily dismissed as a situation where “the researcher is simply looking for some good quotes to illustrate a previously determined position on some personal or political issue” (Dingwall 1997: 52). For proponents of emancipatory research, of course, it is the emphasis on systematic refinement that has been used to validate the disabling nature of much social research (Barnes 1997). A qualitative study such as this one must therefore achieve validity in other ways. For Barnes (1992b), this is best achieved by full participation of the research subjects, and he outlines a number of practical “interactionist methodologies” (p. 122) to achieve this. These include preliminary meetings with participants to discuss the direction of the research and how they wish to participate, followed by discussions after the interviews about the findings, and the direction of the final write-up. As outlined above, all of these elements were present in my research, so that participants had every opportunity to contribute as much as they wanted.
Most importantly, if there was an issue which the participants felt I had not addressed properly, or if they felt I had misrepresented them, they had the opportunity to correct this before the final write-up. The finished report therefore gains the credibility of consensus between the participants.

A further potential criticism of the validity of this study relates to the method of selecting ‘subjects’, which would be defined as ‘convenience sampling’. This is “a type of sampling where the researcher uses cases that are most convenient or available” (Becker and Bryman 2004: 391). This type of sampling is often criticised in the context of qualitative research, because it weakens the ability to generalise from the findings (Becker and Bryman 2004). It is certainly true to say that this study is limited in this regard, and that it cannot make any claims to complete representativeness. However, the obvious advantages of the collaborative approach outlined above would not have been possible with a more ‘scientific’ form of sampling, given the limited scope of the study. It is not really accurate to say that the
participants were ‘selected’, rather that their participation arose naturally by virtue of their interest in the issue.

Indeed, this raises a more general point about emancipatory research. If the social relations of research are truly to be overturned, and groups of people are to use research for their own emancipation, then it is not only likely but also highly desirable that research should arise from within oppressed groups, rather than being determined by external researchers, and sampling methods would need to reflect this. Indeed, the emancipatory research paradigm has a number of important implications for methodology, as many of the prescribed textbook methods stem from a situation where the researcher is assumed to be in control over a separate and relatively powerless group of subjects; a messy conglomerate of raw data onto which some type of order must be imposed. With the social relations reversed, however, many of these methodological issues are resolved naturally, with less need for prescriptive pre-determined methods which may in fact restrict the reflexivity of the process. This is not to say that research should not use whatever
persuasive methods it can to combat oppression, simply that the principles of reciprocity and empowerment should be recognised as crucial elements of non-disabling research.

**Conclusion**

This chapter has explored how the methodology of the research stems from a desire to follow emancipatory principles of collaboration and reciprocity. Although there are disadvantages and criticisms of this approach, it has suggested that these can be responded to with reference back to the original principles of emancipatory research.

The next three chapters explore the findings that arose from the research. Representations of emotional distress in the media are discussed in Chapter Four, before the scope is broadened in Chapter Five to include cultural elements not directly connected to emotional distress, or ‘mental health’. Chapter Seven then explores ways in which disabling culture is rejected and resisted, and the implications of doing this.
The focus throughout is to examine the ways in which elements of our culture have a disabling effect on individuals who experience distress. In addition to myself, these individuals are Kate, Scarlett, Rose, Johnny, Frances and Emmy (some names have been changed to protect confidentiality). Collectively they demonstrated a diverse range of insights, views and experiences, all of which form the basis of the following chapters.
Chapter Four:

Emotional Distress in the Media

Although the scope of this research is broader than cultural representation directly related to ‘mental health’, it became apparent during the research process that representations of emotional distress in the media were of real concern to many of the participants. This area is relevant to the research, specifically because of the negative psycho-emotional effects of certain forms of representation.

A clear consensus amongst participants was that ‘mental health issues’ are now more publically recognised than they used to be, and that they are, to an extent, more normalised. There was also agreement that cultural representations of distress are generally more balanced and positive than they used to be. Kate referred to several examples of characters in soap operas who have been specifically identified as having ‘mental health problems’, and focused in particular on a storyline running at the time on EastEnders (BBC 2009a), in which the erratic behaviour of one
of the show’s most popular characters is revealed to be a result of bipolar disorder. For the purposes of this research I located a trailer containing key clips of this story. It shows the character engaged in arguments, inappropriate sexual promiscuity, violent outbursts, and finally staring at herself in the mirror, repeating “I am normal” (BBC 2009a). The show’s writers have consulted a mental health charity in an attempt to give a balanced representation (MDF 2009), although opinion differs about whether they have achieved this (Contactmusic.com 2009).

Another popular programme that was mentioned independently by three of the participants was the documentary *The Secret Life of the Manic Depressive* (BBC 2009b), presented by actor and comedian Stephen Fry, in which he discusses his own experience of the condition, and interviews other well-known people who have had similar experiences, such as pop star Robbie Williams and actor Carrie Fisher. Fry also appears in a high-profile mental health awareness campaign (Time to Change 2009), and the promotion of the issue by such well-known individuals has probably done a great deal to raise the public awareness of ‘mental health issues’, as Rose recognises:
It's funny how much more bipolar is in the media; more people know the term because of the media (Interview, 26 June 2009).

Although this was seen as a generally positive development, it became clear that it also has negative effects, both directly and indirectly. Scarlett felt quite strongly that the *EastEnders* clip portrays a stereotype which, whilst it may contain elements of truth about bipolar disorder, nevertheless fails to properly reflect the reality. She feels that by adopting pre-understood clichés about emotional distress in order to sensationalise the story, the show is perpetuating a social situation in which it is difficult for people who experience distress to be accepted.

Kate identified an even more direct negative effect of increased public awareness of ‘mental health issues’, by pointing out that if increased awareness is not accompanied by increased understanding, then this can have negative consequences. She supported this through her own experience in employment, during a disciplinary hearing due to sickness absence:
Two or three people in the course of this investigation went on to the internet... and now they think they’re experts; you know [as if to say]: ‘I think that everyone with depression is affected on a long-term basis, so you’re making it up aren’t you?’ (Interview, 6 June 2009).

I asked what she felt were the cultural and social conditions that cause people to have these views, which then impact badly on her:

[Bipolar is] no longer an unheard-of illness, so people know a little bit about it, and that’s almost more dangerous... People don’t understand that mental health conditions are very, very personal (Interview, 6 June 2009).

So a clear link can be made between the increased media representation of distress and a direct effect on public attitudes, which, in Kate’s case, has also had a direct negative effect on her. This seems to be the case despite attempts at balanced and positive representation, and I would contend that this may be because the representation remains focused on the individual. What is lacking is any mention of the disabling effects of society,
beyond recognising that “it can be set off by bad things happening” (BBC 2009a: unpaged). As Kate pointed out, “The burden of proof seems to be on the person who has got the condition”.

Participants also demonstrated evidence of a more subtle, indirect psycho-emotional effect of this increased representation. Specifically, a good deal of representation associates emotional distress (and bipolar disorder specifically) with creativity, glamour and success. As BBC Ouch! columnist Liz Main explains:

> It's now positively desirable. Somewhere along the line, saying "I'm bipolar" has become tantamount to hinting at being a temperamental creative genius (Main 2008: unpaged).

Her article highlights how many celebrities seem to have this desirable “sexy diagnosis” and points out that the problem with this is that it ignores the unpleasant effects of the impairment. However, my research revealed a more specific negative psycho-emotional effect. For those of us who feel unable to match, or are prevented from matching, the success, creativity,
or ‘sexiness’ associated with distress, such representation can have a decidedly isolating effect. Frances explained this clearly in relation to the Stephen Fry documentary:

The fact that his mind is working in a different way is what enables him to be funny, and my problem is that I have the mind that works in a different way without the funny… People will say “ah yes, but it doesn’t matter because he [Fry] can do this.” But it does matter because if you don’t happen to be funny as well then you’re a bit buggered (Interview, 15 July 2009).

For Kate, this effect is exemplified by the approach taken by a campaigning organisation called *Stand to Reason*. Although this organisation is “committed to fighting discrimination and stigma, challenging stereotypes and changing attitudes” and claims to be “for all … grass roots activists and ‘hard-to-reach’ members of the establishment alike” (Stand to Reason 2009: unpaged), she found that, in practice, they focus too much on high-achieving, successful people; specifically lawyers and bankers. Whilst recognising the value of highlighting how distress can affect successful individuals, in terms of challenging attitudes, she also
drew attention to the alienating potential of this rhetoric. She works as a secretary for a large law firm in the City of London, and described a talk given at her work by the organisation’s founder (a lawyer and mental health service user):

It is about rights, but it’s about rights for people at the top. He [the organisation’s founder] talked about stress a lot, and he’s right to… but my problem with him is that he was talking about lawyers all the time… If you’re talking about equality it should be about everyone in the company; everyone in the country. I feel like he’s almost creating a problem whilst solving a different one, and I think it’s dangerous (Interview, 6 June 2009).

The association of distress with successful individuals has a clear alienating effect on Kate. She feels excluded from the rhetoric by virtue of her perceived low-ranking position in the company. Importantly, she suggested a clear connection between this situation and the representation of distress in the media, typified by the Stephen Fry documentary:
It trades on the idea that it only happens to fantastic, intelligent people. I really liked it [the documentary], but why didn’t he speak to other people, not famous people? … It’s almost glamorising it (Interview 6 June 2009).

Kate also made the link between the alienation she feels as a result of this kind of representation and the situation of people with more ‘severe’ conditions, who are unable to work at all (whether through impairment effect or disability). Referring back to *Stand to Reason*, she described a conference at which the founder was on the panel, and which was attended by a number of people who experience far greater social isolation than herself. She felt quite strongly that his approach was inappropriate:

… and I’m sorry that all these people [lawyers and bankers] are suffering from it, and I’m sure that it’s equally difficult - although money I’m sure helps - but the people that I met at this conference… were amazed that I could work full time at all. I’d forgotten that I’m quite high functioning; but these are the people who are caught up in problems that affect other groups of people as well, like the benefits trap (ibid).
So the kind of representation which focuses on individuals who have achieved a perceived level of success, either in employment, or through wide recognition of their creative abilities, was identified by the participants as having negative effects in two ways. Firstly, it is alienating for people who perceive themselves to be unsuccessful by these criteria, and, secondly, it draws attention away from the barriers that deny them the opportunity to succeed, and trap them in positions of social isolation.

There is a clear parallel here with a heavily criticised social perception of disability more widely, known as ‘the supercrip model’ (Fritsch 2004), which focuses on, and supposedly celebrates, high-achieving disabled people. Although seemingly positive, this form of representation in fact reinforces disabling cultural understandings and social structures, as highlighted by Fritsch:

Thus, disability is reaffirmed as a tragedy that can be overcome through individual strong will and advancing medical funding for cures. Disability is taken for granted; it is
not deconstructed as a historically arising social construction based on power relations (2004: 4).

This argument highlights the drawing away of attention from socially constructed disability and onto individuals generally, to the detriment of necessary social change. In keeping with the focus of my research, however, the interviews highlighted the more direct psycho-emotional effect of this representation on individuals specifically.

In addition to the focus on success and popularity highlighted (above) by Kate and Scarlett, I also raised the association of distress with creativity (Main 2008), as this is an area that particularly affects me personally. My own creative instincts (specifically as a musician) have usually come up short of my expectations, confounded by a lack of talent as well as by the external difficulties of establishing myself as a song-writer and performer. Subsequently I have found that the praise and recognition afforded to song-writers such as Nick Drake, Ian Curtis and Kurt Cobain, in direct response to the creative expression of their emotional distress, has had a significant
negative effect on me. I have felt that these artists’ experiences have been valued, whereas my own cannot be, due to my inability to express myself in culturally valued ways.

Participants responded to this idea in different ways. Scarlett spoke about the creative impulses she experiences:

I get the urge to do these extreme things… things I want to do which aren’t going to hurt anybody, but are extremely creative ideas; ideas of eccentric proportions, that I think would be very good ideas, but I know people will just look at me and go, ‘that’s a bit weird’ (Interview, 6 July 2009).

So Scarlett agrees with the hypothesis that the ‘temperamental creative genius’ stereotype is not particularly useful if your creativity expresses itself in ways that fall outside that which is deemed culturally and socially acceptable. The perpetuation of this stereotype in the media therefore has a negative effect on those of us for whom this is the case.
These negative effects were also suggested during an interview with Johnny, although he raised the issue in a much broader cultural and social context. A specific element of culture which he identified as having a negative effect on him are television shows such as *The X-Factor* (ITV 2009a), and *Britain’s Got Talent* (ITV 2009b). These programmes are essentially talent competitions judged by public vote, in which the popular contestants can achieve extraordinary levels of fame and success. They are extremely popular, to the extent that they are publically endorsed by the Prime Minister:

> And that particularly annoys me because it enforces the idea of a meritocracy in which everyone has the opportunity to fulfill their potential and succeed, but what it actually does is that it justifies a system in which almost nobody has a chance to succeed in any way that they consider meaningful (Johnny, interview, 7 June 2009).

So for Johnny these representations of success in the media are bound up with disabling social structures which they appear to deny but in fact reinforce. The glamorised success of one individual according to a prescribed set of values (in this case
popular recognition) conveniently draws attention away from the extent to which many others are prevented from succeeding according to their own values. Importantly, these representations have a direct negative effect on Johnny:

It’s sort of mocking me in the sense that it’s reinforcing the fact that things that I might consider signs of success… are completely unvalued… So I find it’s mocking in that way, it’s rubbing it in (ibid).

So it is not that he is jealous of the success of the individuals on these shows. This would imply that he ascribes to the same conceptions of success that the shows promote. What angers him is that they demonstrate the extent to which his own conceptions of success are devalued by society.

With this last example we have clearly moved beyond cultural elements related directly to emotional distress. However, we have seen that they can affect people negatively in ways that are strikingly similar to specific representations of distress. The example given by Johnny also suggests that this negative
psycho-emotional effect is connected to individuals’ direct experience of distress. The next chapter will look more closely at this phenomenon, exploring further cultural elements identified by participants as having a direct negative effect.
Chapter Five:

Image and identity

We have seen how cultural representations of successful individuals (whether or not they are labelled ‘mentally ill’) can have negative psycho-emotional effects on the participants in this research. This is not simply because the participants measure themselves against successful individuals using the same conceptions of ‘success’, but also because this process devalues their own conceptions of meaningful success, and therefore has a devaluing effect on their identity. This chapter will explore further ways in which culture constructs narrow conceptions of valuable identity, and how this has direct negative psycho-emotional effects on the participants.

Image

My starting point for investigating this area is my own experience of emotional distress caused by exposure to idealised representations of body image and social and sexual success. Our culture is full of images that depict certain ways of looking
and behaving as highly valuable, and I generally perceive myself as unable to emulate these standards. Their representation in culture therefore has a direct negative psycho-emotional effect on me which intensifies my experience of distress. Regardless of impairment, I am clearly not alone in feeling this way:

Last month a survey revealed a generation of men befuddled with feelings of inadequacy, emasculated by images of David Beckham and Daniel Craig in the buff (Observer Woman Magazine 2009: 33).

It is the overwhelming consistency of these images which causes this effect, rather than any single artefact, but it is exemplified by an advert for a shampoo which I have chosen to use in this research (see Appendix 1). It depicts a conventionally attractive male character (Mickey), for whom “hair is not just hair… it’s a weapon to be used to devastating effect.” It proceeds to depict him in a series of situations in which his many sexual encounters with conventionally attractive women are explicitly linked to the different ways in which he styles his hair. The advert ends with his favourite ‘look’: “morning hair”, depicting him in bed the
morning after a successful sexual encounter. The intention is clearly to present the (male) viewer with a highly desirable image and to suggest that buying the product might help him achieve it. Kate’s response describes the advert nicely:

… it concentrates on how to attract lots of fit birds merely by spending £1.99 on something in Boots. The voiceover… suggests that if you’re not concerned about how you look then you can’t complain when women don’t gravitate towards you four times a day (Email, 14 July 2009).

My own reaction, however, is simply one of intensified despair that I will never be able to achieve such perceived success. This is the case despite the fact that I know how unrealistic the advert is, and regardless of the extent to which I reject the values on which it is based. On an intellectual level I can dismiss it as nonsense, but on an emotional level it has profoundly negative effects.

Johnny described a similarly negative response to the advert, although his was more to do with the social value ascribed to the
behaviour it portrays than to any perceived inadequacy in himself:

… the fact that he is promiscuous, and that this is being put forward as a valuable trait; ‘seduce and sleep with lots of different women’ is what it’s saying … It’s implying that that’s a good thing; sleep around as much as you like and just seduce people based on your appearance. I find that more offensive than I am offended by it trying to make me depressed about my own self-image (Interview, 11 July 2009).

Johnny also pointed out that the advert typifies women as well as men, in that each of Mickey’s ‘looks’ appears designed to attract a particular ‘type’ of woman whose supposed interest in that ‘look’ is taken for granted. This is itself offensive; and Kate highlighted the inequalities that still exist between cultural representations of women and men:

What amuses me is that if the situation were reversed and Mickey was a girl, then the bit at the end about the morning hair still wouldn’t be acceptable, or at least wouldn’t be expected to sell something (Email, 14 July 2009).
As discussed previously, ideals of body-image are highly gendered, and, as Kate’s response to the shampoo advert suggests, there are inequalities inherent in this distinction. However, there are also similarities, and female participants echoed my initial assertion that a culturally constructed acceptable body-image is an important source of psycho-emotional disablism, regardless of gender.

An advert that was identified independently by two of the participants as exemplifying this is for a hair dye product (see Appendix 2), and features a conversation between television presenter Davina McCall and her mother, who we never see. McCall is preparing for an evening out and praises the qualities of the hair dye. Her mother asks “will it do my bit of grey,” to which McCall replies “all your grey, Mum”. The implication is clearly that to have grey hair is an ‘unacceptable’ look for women (even for older women). All the participants picked up on this point, which was generally recognised as insulting, as Emmy explained:
Obviously there’s something deeply profoundly offensive about having grey hair, just like there’s something wrong with having natural breasts or having cellulite, which wasn’t even a word until about fifteen years ago. It suddenly appeared [and people went], “oh no, there’s something horribly wrong with you”. But it’s just fat that people have (Interview, 15 July 2009).

So for Emmy, the issue of grey hair is just one of a number of image-related concerns which are not natural, but socially constructed. This point was echoed by Scarlett:

The emphasis is on getting rid of the grey, as if you can’t be a valid person with grey hair… I just find it bizarre that there is such an emphasis on getting rid of any signs of ageing… erasing anything that happens naturally (Interview, 6 July 2009).

Scarlett is a professional singer, specialising in jazz, and she described the negative experience of negotiating the constraints of image as a female performer. This included a number of occasions on which she had been asked to change her appearance to fit a more ‘conventional’ or ‘sexy’ image, or when
her appearance has been commented on rather than the quality of her voice. This is clearly a disabling experience regardless of impairment, but for Scarlett there are also negative psycho-emotional effects relating to her experience of distress:

It’s a massive pressure. People comment on my image all the time and it’s extremely tiring. People say “grow your hair long”; but this is how I want my hair. I want it like this for myself, not for an audience or for somebody else (Interview, 6 July 2009).

These constraints of image have direct implications for Scarlett as a self-employed singer, particularly in relation to signs of ageing:

I don’t want to colour my hair, but I know that if I let my hair go completely grey that I’ll become invisible in society, or I will be sidelined for other people, so even if I’ve got a better voice than somebody else... somebody with non-grey hair, younger features, fewer wrinkles, then they will be given the opportunities that I’ll stop getting (ibid).

This is effectively a description of both sexism and ageism in the music industry, and these are important areas of study. The
relevant point here is that she is also describing a clear link between the cultural oppression exemplified by the hair dye advert and her own experience of emotional distress.

Identity

Frances made a further point about both the shampoo and the hair dye adverts:

It’s this image that everyone has to go out in evening, which is something that a lot of people with emotional problems can’t do, because either the going out is too difficult, or they have to go to places they wouldn’t feel comfortable in, or there is a financial barrier. So it’s all reinforcing this image that you have to have lots of friends, and see them, and be beautiful, and be young, and not have any kind of impairment (Interview, 15 July 2009).

So culture does not just oppressively narrow what constitutes an acceptable image, it also narrows what constitutes an acceptable identity, typified by youth, happiness, and a lifestyle that involves ‘going out’ with your friends.
Again, this process of oppression lies in the consistency of this representation across a range of media, rather than in any single example. However, it is exemplified by an advert for a brand of lager (see Appendix 3), identified by Emmy, in which a group of young men are huddled in a tent in a freezing blizzard, on a polar expedition. They discuss “going out”, and decide it is too dangerous, until it turns out to be the birthday of one of them, at which point they agree that, of course, they must “go out”; presumably to a night club (they discuss the dress code to imply this). The advert closes with the line “you know who your mates are.” The implication is that there are certain things which ‘should be done’ in relation to friendship, like going clubbing for someone’s birthday, and that to not do these things is indicative of an invalid identity. Emmy highlighted the alienating nature of this suggestion:

It’s the notion that going out and partying is what friendship is; that that’s what you do if you care about somebody. And if you don’t go out on your birthday you’ve failed… It’s particularly difficult for somebody who doesn’t want to spend a lot of time around a lot of other people. I’m actually a lot happier now that
I tend not to bother with this stuff, and I’ve started challenging these notions… but it’s something that I struggled with for a long time when I was younger (Interview, 15 July 2009).

This is a very clear example of the negative psycho-emotional effect of an element of culture. Not only does the advert itself suggest to Emmy that her identity is invalid, but her comments also describe how the cultural attitude which it represents has had a direct impact, by making her behave in ways that she has found distressing.

This effect was also described by Rose, who talked about going to popular bars in central London:

It’s the most depressing thing in the world, going to places like that. I can’t bear it. But you don’t want to be totally isolated either (Interview, 26 June 2009).

Participants identified a number of different ways in which the narrow cultural understanding of identity can have negative effects in relation to emotional distress. Firstly, for those of us for whom feelings of loneliness and isolation are significant
impairment effects, it is extremely disabling to exist in a culture that insists that if you don’t have a lot of friends you have failed as a person. Secondly, it also devalues our experiences of friendship itself, as Emmy described, by narrowing the accepted ways in which friendship can be expressed, to the exclusion of our personal ways of engaging in friendships (which may be partly determined by impairment effects). Thirdly, as Frances explained, the implication that ‘going out’ is the only way to have fun is particularly alienating for those who can’t ‘go out’ all the time, whether because of impairment effects, or because of the disabling nature of a culture that suggests you have failed if you can’t be part of it. Frances also mentioned the financial aspect, which echoes the point made in Chapter Four about the representation of successful people who experience distress. For people such as Frances who are unable to work full-time (regardless of whether this is because of impairment effect or disabling employment conditions), the implication that valid identity can only be found in activities which cost money (such as drinking in night clubs) is extremely alienating.
Conclusion

This chapter has explored ways in which oppressively narrow constructs of image and identity are typified and recycled by the artefacts chosen for discussion, and it has shown the direct negative effect that this can have on individuals who experience distress. However, the participants have demonstrated that they are not simply passive recipients of these disabling effects. In the next chapter I will explore how this form of disability can be recognised, negotiated and resisted.
Chapter 6:

Recognition, negotiation and resistance

Despite describing direct links between the artefacts discussed and their negative effects, participants displayed a sophisticated level of awareness of the artefacts’ manipulative qualities. For example, Kate described how she does not currently own a television, and how “it has been very nice not to have all these social constructs beamed into my living room” (Interview, 6 June 2009). So we are not simply puppets manipulated by the media, and we have the ability to recognise and reject these forms of manipulation. This raises the question: how can the artefacts still have negative effects? Surely if individuals are aware that the artefacts are not accurate depictions of reality, and can recognise their potential for disablement, then they lose their power to cause distress? Clearly there are more complex and subtle ways in which culture creates negative psycho-emotional effects. This chapter will explore these, and will discuss ways in which disabling culture is negotiated and can be resisted.
Negotiation

Once recognised, disabling culture must still be negotiated, and this negotiation can itself be a disabling experience. This is best described by Scarlett. As a female performer, it is not an option for her to ignore the pressures of culturally constructed concepts of image. It is necessary for her to negotiate these pressures constantly, not simply as a performer, but also as a self-employed artist concerned for her future career. She will often refuse to conform to other people’s ideas of how she should look, but the pressure of this clearly has its own negative psycho-emotional effect:

It can make you angry and bitter. It can make you feel like giving up sometimes... because you see other people with less ability getting the opportunities that you know you can do, but because you’ve got a strong sense of self, that is often perceived as being difficult (Interview, 15 June 2009)

She also explained the pressure from promoters and radio stations for her to perform more ‘commercially acceptable’ songs, in preference to her own material. She is aware that her material
is sidelined for reasons of ‘image’ rather than musical quality, but this recognition doesn’t make the negotiation any easier. The rejection of her material therefore has direct negative psycho-emotional effects that are ultimately caused by narrow social conceptions of image and identity.

Whilst Scarlett negotiates disabling elements of culture by necessity, Emmy is glad to be able to distance herself from them:

If I go to bed at ten o’clock on New Year’s Eve ... is my life going to cease to have any meaning? No, it’s going to make me happy because that’s what I do, that’s my routine, that’s how I function (Interview, 15 July 2009).

This rejection of oppressive culture is clearly a positive way for Emmy to negotiate it, but, as we have already seen, it has not always been this way for her. Rose also described a similarly conscious choice to withdraw from a culture that she dislikes, but explained that this brings with it an element of isolation. She also described how it is not always possible to maintain this withdrawal:
If I go out in London... I will always feel on the periphery and end up getting more and more inward and depressed... That’s why I’ve never chosen a job where you have to be part of all that... But I might have to soon, so then maybe I will have a breakdown (Interview, 26 June 2009).

So, despite the potentially positive aspects of consciously rejecting oppressive culture, the knowledge that this culture remains dominant is in itself a source of isolation and psycho-emotional disablement.

Johnny described the negative experience of negotiating oppressive constructs of image and identity in more psychological terms:

It’s anything that sets up a set of values that implies you’re failing if you don’t live up to them. And it’s always more emotionally affecting if it’s something you are actually concerned about, if it hits a nerve. So you always have a joint contradiction, whereby you say “I know I don’t value those things”, but at the same time you feel bad for not living up to those values. And when you feel that contradiction, that’s
what’s frustrating depressing and angering (Interview, 11 July 2009).

I found this description personally extremely useful in explaining some of my own experiences of distress, and it explains how culture can be disabling even for those of us who fully recognise it as such. Not only must we negotiate oppressive cultural constructs in a social sense, as Rose, Scarlett and Emmy described, but we must also negotiate the contradictions that these constructs engender in ourselves, and this too has negative psycho-emotional effects.

However, as Johnny’s comments demonstrate, these contradictions should not be reduced to the status of personal emotional problems. He was clear in his response to the shampoo advert (above) that the real issue for him was how it represents wider cultural oppression. The offense that it causes him is not to do with distress about his own image and identity (as is the case with me). Instead it is the implication of what is considered valuable by our culture. As with Emmy’s response to the lager advert, the disabling potential lies in drawing attention
to the oppressive constructs that are hegemonic within our culture, and anger at the way in which the adverts recycle and perpetuate that oppression.

It is this same effect that Johnny identified with reference to television talent shows (above). Referring back to his feeling that these shows contain an element of mocking the fact that “things I might consider signs of success are completely unvalued”, he identified a similar effect in an advert for a computer games console which can also be used to download films (see Appendix 4). Here, a woman’s face is shown in a slow-motion expression of rapturous delight, as the camera pans round to reveal that the back of her head is cut away to represent a cinema auditorium, with herself and her partner sitting on a sofa enjoying the film which is playing in front of them. The effect of this seems to be to directly suggest that the company selling the product is controlling people:

[The message] seems to be that “we can make you so happy with our new media technology” but it seems to be directly saying also that “we have direct control over your brain”, and it
pisses me off that they’re not even being subtle anymore (Johnny, interview, 7 June 2009).

Johnny pointed out that the idea that the media can directly control people is “a bit old hat”, as it implies a passive audience rather than an active, critical population. However, it is this very fact that Johnny feels the advert is playing with, almost as if the company is “revelling” in the fact that they can freely reference it:

[The adverts] aren’t controlling my thoughts, but they are alienating me, and they’re knowingly alienating me and laughing at me because they know I can’t do anything about it (ibid).

So it is precisely the fact that the advert’s manipulative qualities are recognisable that causes a negative emotional effect; in Johnny’s case feelings of anger, frustration and powerlessness:

And what’s upsetting for me is that they really do have a certain amount of control over my life, in that they dominate a certain number of images that are available to me in my world, and they reflect and/or constrain dominant cultural perspectives which I am constantly having to negotiate (ibid).
It is with this reference to the wider context of cultural oppression that the value of this study must be seen. Participants’ personal responses to the artefacts are important as they highlight the very real negative impact of aspects of our culture. However, in keeping with the social model approach of the study, it is crucial that the value of this is seen in the context of drawing attention to the disabling nature of culture which the artefacts exemplify, and to the broader social context in which this occurs. To do otherwise would be to return to the oppressive ideology of individualism which supports so many of the disabling processes and structures which I am aiming to draw attention to and challenge. It is in this context that resistance to the disabling effects of culture must be discussed.

**Resistance**

There are many traditional medical ways to resist emotional distress, such as various forms of therapy and the development of a stronger sense of self and wellbeing (Gilbert 1997), and these approaches may well be valuable for individuals. However,
in the wider social context these approaches are inadequate, as they leave the disabling constructs of culture completely unchallenged. Participants' views throughout this study have demonstrated that this individual medical approach is a far from sufficient response to an oppressive culture. Johnny made this point very clearly, whilst discussing the experiences of emotional distress identified during the research:

These [experiences] constitute emotional distress, sure, but the real depression for me comes from the larger capitalist and neo-liberalist ethos that they are a tiny part of, in which far more destructive physical, mental and emotional suffering [is] occurring on a massive scale... If [the negative effects described by participants] are socially disabling processes, then they ought to be challenged and resisted socially (Email, 3 August 2009).

There is not space here to discuss in any depth how the findings in this research can, and should, be matched up with wider critiques of society. Such a task is beyond the scope of the study, which has focussed on the direct negative effects of elements of culture on individuals. However, it is crucial to remember the
wider social context in which these direct effects occur, which suggests that further research into this area would be valuable. Johnny explicitly suggested a Marxist critique of capitalism and neo-liberal ideology, and this would be one potential area for study. This would link with materialist analyses of the social construction of disability which explicitly identify disability as a function of capitalism in industrial and post-industrial society (Finkelstein 1980; Oliver 1990). Similarly, it is not possible to explore in any detail some of the forms of social resistance that would stem from these critiques, and this too would be a valuable area for further study. I will, however, make some initial suggestions for ways in which the cultural oppression we have explored in this study could be resisted socially.

One method would be along similar lines to political campaigns against restrictive body image that arise logically from the critiques in cultural studies and feminist sociology which I explored in Chapter Two. For example, Wykes and Gunter (2005) describe the organisation About Face, an internet campaigning site which lists companies guilty of promoting
extreme slenderness in women, and encourages site-users to complain by email. Given that this study's critique of socially constructed image and identity (in Chapter Five) owes a great deal to feminist critiques of body image, it is possible to suggest that social resistance to the disabling effects identified by participants could follow similar lines.

A specific element of this type of campaign (which leads logically from the critique of disabling imagery in adverts explored above) could be that of 'subvertising'; a form of direct action in which adverts are altered to draw attention to oppressive imagery (The F word 2008). As well as arising from feminist critiques of body image, subvertising campaigns are widely used by the anti-capitalist movement (Subvertising.org 2009). Given Johnny's suggestion that the findings of this study should be seen in the context of a Marxist critique of capitalism, this too suggests fruitful avenues for protest.

A final point to make is that social resistance of this kind brings into focus an important implication of the social model ontology
on which this study is based. In rejecting oppressive ideologies of individualism (Oliver 1992) and turning the focus on disabling society, we arrive at the understanding that society and culture can be disabling for anyone, regardless of impairment. Participants’ experiences in relation to emotional distress are useful in highlighting acute instances of disability, but if we are to make a wider social challenge we must recognise that these disabling experiences are not limited to people who have been labelled ‘mentally ill’. Oppressive constructs of image and identity are interwoven with similarly disabling constructs of gender, race, age, class, sexuality and many others, all of which can affect people negatively regardless of whether they experience emotional distress. This study must therefore be seen in the context of these wider forms of oppression, and it is with reference to these wider forms of disability that further study would be valuable.
Chapter Seven:

Conclusion

This research has sought to examine a previously neglected form of disability in relation to people who experience emotional distress. Where previous analyses have focussed on the discrimination people experience in respect of their status as receivers of mental health services, this study has drawn attention to the disabling nature of our culture, which can affect individuals regardless of their status as users of services. Where previous analyses of culture within disability studies have focussed on direct representations of impairment, this study has sought to examine those aspects of culture which can be disabling despite not being concerned with ‘mental health issues’. It has also gone further than many previous studies of culture by seeking to demonstrate the direct negative effect that culture can have on individuals.

The research aimed to test the hypothesis that there are elements of our culture which have a negative psycho-emotional
effect on individuals who experience distress. It has sought to identify these effects through a collaborative process of autoethnography, involving elements of interviewing, discussion and collective discourse analysis. The seven participants in the study have identified a selection of cultural artefacts which have a negative effect on them, and these artefacts have been used in interviews to discuss the nature of these negative psycho-emotional effects. The study did not aim to identify any single effect, but to find areas of commonality between participants’ responses.

The strong conclusion from this process is to confirm that elements of our culture can have a profoundly disabling effect on the participants in relation to their experiences of distress. Participants’ responses were diverse and wide-ranging, but within these was significant agreement that acute feelings of disadvantage can be brought on through exposure to aspects of culture. As well as the adverse effects of certain types of direct media representations of distress, the research has revealed a range of ways in which culture serves to restrict notions of valid
image and identity, and shown that this has a strong disabling effect on the participants.

However, this effect is not simply to do with participants feeling a personal lack compared with culturally constructed notions of valuable image and identity. In fact, participants demonstrated a sophisticated understanding of the oppressive nature of such constructs, and a strong ability to reject them. This does not mean that these constructs cease to be disabling; rather, it is the understanding that wider society upholds values that we recognise as oppressive which can have a powerfully negative psycho-emotional effect.

This leads to the other important conclusion of this study, which is that the oppressive effects of culture highlighted by the participants should be seen in the context of wider social oppression, and not reduced to issues of personal problems or psychology. Individual experiences of distress brought on by exposure to the artefacts discussed in this study can perhaps be tackled through individual interventions such as therapy or
medication, and this may be of valid benefit to individuals.

However, this approach does nothing to challenge the wider social oppression of which the negative psycho-emotional effects revealed by this study are a small component. Linked to this conclusion is the understanding that culture is potentially disabling for everyone, regardless of impairment. This study has highlighted ways in which culture can have an acute impact on people who experience emotional distress, but this does not mean that there is no negative impact on people without perceived impairment. The issues raised in this study are not minority concerns; they are indicative of issues that effect society as a whole.

Linking the findings of this research to wider analyses of social oppression is beyond the scope of the study, but it suggests ways in which this could be progressed in further research. In particular (and leading from the significance given to advertising in this study), links with critiques of capitalism and neo-liberal ideologies of individualism would be valuable. This approach would explore how these ideologies create oppression on many
social and cultural levels, including those explored in this research. It would also make links between associated ways of resisting these oppressions socially.

Such an analysis could include any number of a range of issues raised by participants during this research which there was not space to explore, but which can all be seen in the broad context of a disabling society. For example, Johnny’s comments about the oppressive power relations inherent in capitalism were echoed by Rose, who discussed the negative impact of apparent choice within consumerism. Scarlett’s experiences of negotiating the pressures of image as a female performer would be a fascinating study in itself, as would the issues around cultural representations of distress that particularly interested Kate. Emmy spoke of her experiences of distress within the context of having autism, and Frances made the point that her experiences of discrimination should be seen within the context of her sexuality. All of these areas would be fruitful avenues for further study.
There are also a number of useful conclusions to be drawn from the methodology used in this research. In aiming for a collaborative process of auto-ethnography, based on emancipatory research principles of reciprocity and empowerment, the study has encountered a number of implications for how research of this nature is carried out. The original structure of the research design was a useful conceptual tool, but the reality of the process was far less structured, which raised the difficulty of how to analyse and validate the large amount of data which this produced. However, it was precisely the collaborative nature of the process which solved these problems, firstly through the on-going discussion with participants, which identified and prioritised the important data, and secondly in terms of validation of the findings through consensus. This is, perhaps, a useful lesson for research arising from within oppressed groups, rather than imposed on them by external researchers.

In terms of evaluating the extent to which this study has followed the principles of emancipatory research, this is not for me to
decide, as it can only be judged to be truly emancipatory after the event (Oliver 1997). However, it is possible to conclude that the process itself has at least been one in which those involved have been glad to participate, and have developed their understanding of the issues at stake. Kate mentioned that it was a process she was proud to be part of, and she is keen to explore a lot of the issues further through her own study. Similarly, Scarlett commented that taking part had been extremely enlightening, and that it had made her think about a lot of issues in a new way, particularly around the social model of disability and understandings of culturally constructed oppression. She said after one of the interviews that it had helped her “to struggle through the mire of the judgemental society that we exist in.” So I can conclude that the study has been a reciprocal process in which both I and the other participants have learnt a great deal about our situation in an oppressive culture.

Significantly, Rose referred to the study itself while we were discussing ways to negotiate and resist oppression:
I feel that it [society] has all gone very wrong and that we’re all very dysfunctional… and I just wish more people could be aware and have conversations like this, because it seems so hard just to scratch the surface a lot of the time (Interview, 26 June 2009).

So, returning to the issue of resistance against the oppressive culture that this research has sought to explore, there is a sense in which this study itself contains a small element of resistance. It has developed our collective understanding that we are subject to a form of culturally constructed disability, and it has done this in a way which demonstrates how research itself can be non-oppressive. However, it is crucial to recognise that collective understanding cannot be an end in itself. To do so would simply reduce the issues to personal problems, regardless of the extent to which they are shared. Instead, the collective understanding developed in this study must be seen as leading towards social resistance against the oppressions that it has explored.
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Appendix 1

Advert for *Head and Shoulders* Shampoo

Available at: [http://www.youtube.com/watch?v=nT Gh03kFV6I](http://www.youtube.com/watch?v=nT Gh03kFV6I)

[Scene: A montage of split-screen shots featuring Mickey in a variety of situations; styling his hair, adopting a range of poses and with a number of women, heavily suggestive of mutual sexual attraction.]

**Voice-over:** Everyone knows a bloke like Mickey. With Mickey, hair isn’t just hair – oh no! It’s a weapon to be used to devastating effect. And he’s got a look for every occasion.

[Scene: As above, but each situation relates to the styles of hair in the voice-over.]

**Voice-over:** There’s the fluffy puppy; windswept and interesting; the intellectual; plain gorgeous; and his personal favourite – morning hair.
Mickey is seen in bed with tousled hair, with a woman. They frolic suggestively.

**Voice-over:** Mickey’s a bloke who knows, and blokes who know voted Head and Shoulders ‘number one’ in FHM’s readers poll.
Appendix 2

Advert for Garnier Nutrisse Hair Dye

Available at: http://www.youtube.com/watch?v=qdb3dSk-nb4&feature=PlayList&p=CF9A27CA3915F7F7&playnext=1&playnext_from=PL&index=14

[Scene: Television presenter Davina McCall is preparing for a night out, and is talking to her Mum, who is off-camera in the other room.]

Davina: Look Mum, this colour’s perfect.

Mum: Oh, it is very you.

Davina: It’s so silky, and it feels so nourished.

Mum: Your dress?!

Davina: No Mum, my hair! Its new Garnier Nutrisse cream [cut to shot of the hair dye in use]. Nourished hair means better colour, now with double the avocado oil [cut back to Davina]. My colour stays looking so rich for so long.

Mum: Will it do my bit of grey?

Davina: All your grey, Mum!
Mum: What *are* you wearing tonight?

Davina [emerging from her room]: Ta da!


better colour.

Davina [to camera]: Take care.
Appendix 3

Advert for *Carling* lager

Available at: [http://www.youtube.com/watch?v=YJy9nMjqm7g](http://www.youtube.com/watch?v=YJy9nMjqm7g)

[Scene: A group of men are huddled in a tent, suggestive of an extreme polar expedition.]

**Man 1**: Are we going out then?

**Man 2**: Go out there? In the freezing wastes? You must be mad.

**Man 1**: But it’s my birthday.

**Man 3**: It is his birthday. It is his birthday!

**Man 2**: Well why didn’t you say so? Of course we’re going out. Is it smart?

**Man 3**: Smart casual, probably.

**Man 2**: Right, come on then guys, let’s go.

[They begin to prepare to leave. General chattering]

**Man 4** [Looking out of the tent]: It’s brightening up!

[They leave the tent. Caption reads “You know who your mates are”. Shot of a pint of Carling.]
Appendix 4

Advert for X-Box computer games console

Available at:
http://www.youtube.com/watch?v=WF_gkEsXqYc&feature=Playlist&list=p=E386C7A0FF4D26C2&index=0

Still 1: A side view of a woman’s head. She is staring forward with a delighted expression. The back of her head is cut away, and light is streaming out from it, projecting an image onto a screen behind her, as if in a cinema.
Still 2: A view of the back of the woman’s head. It is cut away and resembles a cinema, with the woman and her partner on a sofa watching a film. The words ‘now showing’ are displayed above them.