

Problematics of Understanding Disability: An Overview

Abstract

The research paper attempts to understand disability in the light of diverse dimensions and definitions proposed by agencies. The different defining agencies include World Health Organisation (W.H.O), Persons with Disability Act 1995 (PWD Act 1995), Rights of Persons with Disability Act 2016, International Classification of Impairment, Disability and Handicap (ICIDH), American Disability Act (ADA) 1990, Conventions of Rights of Persons with Disability (CRPD), Union of Physically Impaired Against Segregation (UPIAS 1976). Moreover, the concept of disability is appreciated in the spirit of new insights borrowed from medical science, social science and culture. Eventually, the paper brings forth bio-psycho-social understanding of disability which is more inclusive and acceptable in the current scenario.

Keywords: Disability, Impairment and Handicap.

Introduction

Disability is much contested and debated concept which is defined diversely across cultures and countries. It is an essential feature of human existence which roughly affects almost 15 percent of the world population (World Report on Disability) and 2.11 percent of Indian population (Indian Census 2011). The term disability doesn't hold the same meaning and connotations across all cultures. All the communities and countries look upon disability diversely. There hasn't been so far any definition that is universally accepted and adopted constitutionally. Rather almost all countries have their own notion of disability. However, the definitions proposed by World Health Organisation have positively affected the national definitions and thereby the constitutions of most of the countries like India. The change of definition contributed to the well-being of disabled lives.

Objective of the Study

1. To understand the problematics of understanding disability
2. To understand its definitions in the light of W.H.O, PWD Act 1995 and UPIAS
3. To understand its difference of definitions in the light of medical and social perspective

Problematics of Understanding Disability

Disability is not described in one universal definition which is accepted by all disabled and non-disabled people. There have been given plethora of definitions to it by World Health Organization (WHO), Persons with Disability (PWD) Act 1995, Rights of Persons with Disability Act 2016, International Classification of Impairment, Disability and Handicap (ICIDH) and Union of Physically Impaired Against Segregation (UPIAS) 1976. Disability is also defined by legislative acts and reports bringing out its diverse meanings based on multiple perspectives. In 1976, World Health Organization (WHO) brought out the document of International Classification of Impairment, Disability and Handicap (ICIDH) which categorised human conditions into three types namely impairment, disability and Handicap. The focus is exclusively on disability instead of impairment and handicap. ICIDH interprets disability as, "any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being" (W.H.O 28). It implies that disability is an externalization of functional limitation, that is, the process in which functional limitation expresses itself while engaging with reality of life. Examining the problem of disability proposed by W.H.O critically, it is exclusively based on medical model of disability. The W.H.O definition of disability rules out the role of social system in disabling an individual. Therefore, an individual is blamed upon for his inability to perform an action which reflects its narrow scope.



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Union of Physically Impaired Against Segregation (UPIAS) 1976 also attempts to understand the concept of disability with a difference. UPIAS interprets disability as, "the disadvantage or restriction of activity caused by a contemporary social organisation which takes no or little account of people who have impairments and thus excludes them from participation in the mainstream of social activities" (Hall 21). The definition proposed by UPIAS appears more disabled-friendly in comparison to ICIDH for it accepts the location of impairment inside the body and at the same time nullifying its corporal origin of disability. UPIAS ratiocinates about the social origin of disability. UPIAS argues that it is caused due to the interaction between the impaired individual and non-disabled friendly environment. It holds society responsible for disabling an individual by developing barrier ridden infrastructure. The nature of barrier varies from affective, sensory, physical, speech, visual to learning barrier. UPIAS definition explicitly rejects the medical understanding of disability and gives due space to social understanding. The paradigm shift in thinking about disability made a huge impact on the lives of disabled people. Social contextualization of disability is underpinned by American Disability Act 1990, recognizing that "disability depends upon perception and subjective judgment rather than on objective bodily states... the law concedes that being legally disabled is also a matter of "being regarded as having such an impairment" (Garland Thomson 6). According to American Disability Act (ADA) 1990, a person is privileged as disabled if he suffers from "a physical or mental impairment that substantially limits one or more of the major life activities of such individual; a record of such an impairment or being regarded as having such an impairment" (Kothari 33). The United Kingdom Disability Discrimination Act 1995 almost defines disability on the pattern of ADA 1990. It proposed that a person is said to be disabled if "she has a physical or mental impairment, which has a substantial and a long-term effect on the ability to carry out normal day-to-day activities" (Kothari 33).

In 2006, United Nations framed an international human rights treaty in the form of Conventions of Rights of Persons with Disability (CRPD) in order to safeguard rights of disabled people. In India, it anticipated Rights of Persons with Disability Act 2016. Article 1 of CRPD states that "persons with a disability include those who have long-term physical, mental, intellectual or sensory impairments, which in interaction with various barriers, may hinder their full and effective participation in society on an equal basis with others" (Kothari 34). The CRPD definition is broader in scope as it employs both medical and social model perspective to understand disability. It is inclusive in terms of classifying all the people suffering from long-term impairments such as HIV and AIDS as disabled.

Coming to Indian legislation, it enacted two important documents regarding disability viz. Persons with Disability (PWD) Act 1995 and Rights of Persons with Disability Act 2016. PWD Act 1995 states that "person with a disability means a person suffering

from not less than 40 per-cent of any disability as certified by a medical authority" (Kothari 35). It enlisted only seven types of disabilities namely blindness, low vision, leprosy cured, hearing impairment, locomotor disability, mental retardation and mental illness excluding all those having impairments other than the mentioned above. Moreover, it is a medically oriented act because it mentioned clinical criteria to certify claim of a claimant. It takes no account of social barriers for disabling a person evincing its narrowness with disability recognition and definition. PWD Act 1995 is highly exclusive because it excluded conditions like HIV/AIDS, Cancer, Heart diseases, cerebral palsy etc. And mental illness is also excluded from PWD Act 1995 because there is not such a tool to quantify mental state of an affected person. There is no certification for mental illness depriving them from the benefits of PWD Act 1995.

The moment Convention of Rights of Persons with Disability (CRPD) was adopted in 2006 by United Nations, India being its signatory was urged to overhaul the outdated PWD Act 1995 in consonance with CRPD. This rethinking gave birth to Rights of Persons with Disability Act (RPD) 2016 in India. RPD Act 2016 states that "person with benchmark disability means a person with not less than forty per cent of a specified disability" (3). This Act increased the number of disabilities from seven to twenty-one enfolding new categories like cerebral palsy, acid victims, speech and language disability, specific learning disabilities, autism spectrum disorders, haemophilia, thalassemia, and sickle cell anaemia. The nomenclature, mental retardation, was replaced with intellectual disability. The Act assures disabled people with the right to equality, life with dignity, no discrimination and respect for integrity (4). Given the discourse on disability by various Acts and Conventions in a holistic manner, it appears that disability is closely associated with impairment. Disability is not only caused by impairment but, at times, it arises out of discrimination at the hands of ablest society. The conventions reflect that disability is not inbuilt within an individual rejecting its individual nature; rather it is rooted in socio-cultural environment. For instance, architectural barriers engender disability substantially. To reduce the degree of disability, immediate steps should be taken to design disabled friendly buildings. In skyscrapers, the facility of elevators should be made available and ramps must run parallel to stairs. For persons with visual impairment, tactile surfaces should be made mandatory part of buildings. It must be underpinned by legislation so that, whenever in future their rights are denied and their space is encroached, the court will work as their constitutional guardian. Moreover, the socio-political campaigns for barrier-free atmosphere and discrimination policy may also bring about positive changes in already established legislative laws. Disable activism has the potential to pressurise state authority for the revision and revisiting of legal discourse regarding disabled people. The legal system must distinguish among disability, impairment and handicap as has been done

by International Classification of Impairment, Disabled and Handicapped (ICIDH) in 1980.

Historically, disability is understood from an essentialist perspective which defines disability in terms of fixed attributes. Anita Ghai states that "essentialism attributes fixed essential characteristics to disability" (226). It identifies disability in the light of certain traits such as dependent, burden, emotional and introvert. These traits or attributes have become first their stereotypes and later became their defining features according to essentialist view. The attributes become the cause of their stigmatisation which in turn excludes and marginalizes them. Essentialism believes disability as an individual tragedy which can be treated only through the medical aid. It denies and denounces the social roots of disability. Disability is given a treatment different from the rest of the social markers like gender, caste, race and sexuality. Since disability is rooted in numerous cultures, therefore, it cannot be understood from a single perspective. There is need of multiple perspectives to look into the problem of disability. There are different cultures based on varied traditions, faiths and different discourses of understanding of disability. It is on these grounds that some cultures trace their roots either within the individual's past deeds or within the person himself. It is hailed as a flaw, lack, want, defect or something unwanted with human bodies. Accordingly, different religions treat disability differently. According to *Karma Theory* perspective, disability is a sort of penance and retribution for the past deeds of the person embodying disability (Ghai 28). This perspective is so judgemental and biased that it rules out its social, cultural, genetic and human causes. The religious stigmatization of disabled people emphasizes the construction of their negative identity further distancing them from social inclusion. In this way, the gulf between non-disabled and disabled community are further widened in societies where perfection is valorised and made a benchmark to describe and measure the degree of deviance of everything. Therefore, disability may be defined as an act of disqualifying abilities of impaired people with the surfacing of at least one impairment of visible or invisible type. It begets the fact that a person with an orthopaedic or mental impairment is also sexually neutral. Likewise, the person with deformed body structure is deprived of many essential attributes like sexuality, leadership competence and gender. The person is socially considered impaired in all aspects despite his single impairment looking at the human body through general perspective (Ghai 66).

Disabled people are generally supposed as non-contributors to the community because state system believes that they may not help in building a healthy nation. Likewise, their family regards them economically dependent and burden and therefore, non-productive in nature. This becomes eventually one of the causes of their social discrimination where they are helped in terms of charity instead of their rights and entitlements. Persons with disability are disqualified even from their self-responsibility and independence. Since the beginning of the universe, there have been differences among human beings in

terms of physical and cognitive status. To ascribe these differences or disabilities to evil has been practised across ages and are still prevailing. Disabled people are believed to be abnormal because they are unable to fit into the hegemonic discourse of normality which is not a standard in itself, but is again a relative term which is defined against deviance and difference. It, thus, excludes and weakens the disabled community from mainstream society. This social disregard denies them their voice, privacy and even their social presence. Instead of making the system conducive for them, they are viewed through the lens of prevailing system and are expected to adapt themselves to adapt to the mainstream parameters.

Conclusion

Having gone through the diverse definitions of disability, it has been found that W.H.O uses an exclusive medical approach to comprehend disability. It doesn't take into account the social model perspective of disability. The same medical perspective is employed by PWD Act 1995 to assess the disability of a person. However, the definition proposed by Conventions of Rights of Persons with Disability (CRPD) and Union of Physically Impaired Against Segregation appear more inclusive because both of them draw on collective medical and social perspective. Thus disability is not personal deficit but it also includes restrictions imposed at the top of impairment. Therefore, disability is somehow social and somehow somatic in nature which brings to the fore bio-psycho-social understanding of disability.

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