

Dyslexia and the Social Model of Disability

by Dwight Richardson Kelly

You may not know its name but much of how British-American society thinks and acts towards people with disabilities has been shaped by a theory called the Social Model of Disability. For example, there are curb cuts in our sidewalks, Braille signs in our hospitals and legislation like the Equality Act and its U.S. equivalent, the Americans with Disability Act (ADA), in no small part because of this theory. So what makes a relatively obscure academic concept like the Social Model so powerful and widespread in its impact?

Before the Social Model disabilities were thought of primarily in a medical context—as conditions that affected the body and mind of particular individuals—and which could, therefore, only be “fixed” by doctors and other specialists. As a result of this “Medical Model of Disability”, the condition of people with disabilities was considered to be outside the purview of the average citizen and general society. This led to people with disabilities being segregated into medical and educational institutions, many of which became notorious for their poor treatment and egregious conditions. Even when disabled individuals were not institutionalized, they were often neglected by society because their impairments were still seen as strictly medical in nature and therefore, once again, not of the concern of the typical able-bodied individual. In retrospect, we understand that this way of acting towards certain members of our society was wrong on multiple levels and resulted in poor treatment, discrimination, unnecessary isolation, and a significant waste of human potential. Today, while oppression and stigma continue to be obstacles in the lives of people with disabilities, many more disabled citizens are able to enjoy a greater amount of the freedom and opportunity promised by our society. So what changed? Enter the Social Model of Disability.

In the mid 1970's, a group of wheelchair users in the U.K. who organized themselves as the Union of Physically Impaired Against Segregation (UPIAS), articulated a radical new way of understanding disability and its relationship to society that would later become known as the Social Model of Disability. The first aspect of this paradigm-shifting model was the idea that disability and physical impairment were not the same thing: For the UPIAS, physical *impairment* was their medical condition (not being able to move their legs due to paralysis), while *disability* described the much more far-reaching realities of social prejudice, mobility difficulties, isolation and discrimination which were the outcomes of having an impairment in their society.

The distinction between impairment and disability can be hard to understand since even today the two are often perceived as synonymous. But the Social Model helps us to see that there are clear differences. A physical impairment is an untypical bodily difference resulting from injury or development. In contrast, a disability is the potential limitations that *may* result from these differences. The two categories are also different qualitatively. An impairment, as a physical condition, is often relatively constant, while the adverse effects of this condition, or the resulting disability, can vary in severity and manifestation based on many different circumstances. To use the UPIAS members for an example, while their physical paralysis always remained a reality of their physicality, they felt that their experience of disability varied dramatically. They were distinctly disabled when they needed to get to the third floor of a building without a lift or when a taxi refused to pick them up because of their impairments. But while sitting at their desk doing their work or when wheeling down a sidewalk with curb cuts installed, they did not feel disabled at all.

These disparate realities in the experience of having a disability, led the UPIAS to their second radical idea—that disability is really caused not by an individual's impairment but by society's response to a given condition, including both physical and attitudinal barriers. The realization that society has the potential to function positively or negatively toward impaired individuals, either enabling or disabling them respectively, has in turn had a momentous impact on the lives of disabled people. It made the exclusion and isolation of disabled citizens in institutions a civil rights issue and eventually led to the principle that all aspects of life should be made accessible to all, regardless of

bodily and cognitive differences. In real terms, this meant everything from the installation of more lifts in public buildings to the provision of audio books to blind students unable to read regular print.

Despite the obvious direct positive impact that the Social Model has had on the lives of people with disabilities and society at large, the applicability of the Model to all forms of disability remains controversial even within disability circles. Some people feel that the Model goes too far in divorcing impairment from disability and that making the world universally accessible is unrealistic and impossible. Others, question whether the Model could ever apply to cases of more complex impairments, including those that are cognitive rather than physical. Following these arguments, it is interesting to think about whether or not a Specific Learning Difficulty (SpLD) like dyslexia fits within the Social Model of Disability and if it can benefit from it. I would like to argue that it does and can, but that at the same time placing dyslexia within the Social Model also confirms some of the criticisms that we have just heard.

In order to do this experiment, we first need to settle on a definition of dyslexia. As you may know, dyslexia experts differ slightly in their perspective on the condition. Some researchers believe that dyslexia results from a very specific impairment to language processing areas in the brain that concern awareness of speech sounds and thus affect reading and spelling. Other researchers (including those at the Dyslexia Research Trust), believe that these literacy difficulties reflect a more widespread difference in the way that people with dyslexia process all kinds of information across the brain and body. This more holistic theory attempts to explain why some dyslexics have mild hearing deficits, unique visual processing, and difficulty with other non-language-based things like coordination, in addition to reading and spelling. But since all dyslexia specialists generally agree that spelling and reading are the most significant areas of functional disability for dyslexics, regardless of the underlying cause, let us use these two main difficulties to define the condition for the purposes of this essay.

From this discussion we can already see that the first claim of the Social Model—that a distinction can and should be made between disability and underlying impairment—seems to be valid for dyslexia. The very fact that experts agree about the disability but not the underlying impairment which leads to dyslexia, shows that a distinction between the two is primary. But even more convincingly, the fact that the processing differences or “impairments” in the dyslexic brain do not always result in disability argues persuasively for using the Social Model to understand the condition. As you are probably aware, people with dyslexia are often very clever and capable in many ways, and some evidence even suggests that dyslexia is correlated with creativity in addition to reading difficulty. A recent example of this is an article published this past autumn by the Daily Mail. It reports that many of the top spies in the U.K. are dyslexics because for some reason they are particularly good at code breaking. Along with similar findings, this information suggests that the differences or “impairments” of the dyslexic brain can be both advantageous and disabling depending on the circumstances. While the dyslexic spies discussed in the article are clearly not disabled while doing their work at GCHQ, they very likely struggle to read difficult words or did at some point in their schooling. This begs the question, does society play a role in determining these outcomes? We saw how mobility disabilities can be caused by physical and social barriers; but is this also true for a reading disability? Can a book that does not come in audio be the equivalent of a building without a lift?

To answer this question, try to imagine a world in which there is no written language—no spelling, no reading, just spoken language. Next, ask yourself how the dyslexic in your life would function in this world. Would they be disabled? Considering what we know about dyslexia including its potential advantageousness, it is hard to imagine that dyslexics would find a world without reading and writing all that difficult to navigate. Keep in mind that many dyslexics excel in school before reading and spelling become the primary means of instruction, and that in adulthood dyslexics who enter careers where reading is less emphasized, or who find strategies to get around their literacy difficulties, often do very well. While dyslexics might continue to have certain subtle difficulties in a world without written language—perhaps mispronouncing the odd word in speech or maybe being a little uncoordinated—it seems very unlikely that they would experience true disability. Indeed, freed from the requirement to read and write, their creative advantages might make them particularly successful members of such a society.

You may agree with all of this but still question whether it is fair to say that written language is social in origin. But in fact, what we know about written language suggests that it is a unique social creation. Unlike spoken language, which developed over thousands of years of evolution and has its own processing center in the human brain, written language is a relatively recent invention of certain cultures and is only possible through the combined training and utilization of multiple brain regions. For this reason, linguists call reading a “cultural invention” and note that unlike spoken language,

which almost all children are able to learn independently, reading is only possible after years of development and instruction in school.

As you are also aware, many cultures around the world do not have written language, and literacy has only become widespread in the West over the past two centuries. Before this time, a large percentage of the populations of countries like the U.K. and U.S. did not know how to spell or read, and more importantly in light of the Social Model, did not require these skills to function well in their daily lives. Therefore, not only is written language by definition a social product, but it is also culturally and socially determined.

Similarly, it has been social forces that have driven spelling systems to become standardized, something which ostensibly made reading easier and certainly supports information technology today, but which also resulted in less tolerance for those (including dyslexics) who used more unique or phonetic approaches to spelling. This is particularly relevant to the English spelling system which is of course notorious for its inconsistent and illogical approach. Once again, imagine how the dyslexic in your life might be perceived differently if spelling rules were more flexible and everyone practiced creative non-normed spelling. I'm not arguing that written language and standardized spelling are bad things or that we should or can go back to an oral culture. But I think it is important to understand that the dominance of written language in our culture is the product of social choices which have had wide-reaching implications for everyone but especially those who process language in untypical ways due to conditions like dyslexia.

Hopefully this discussion argues persuasively for the inclusion of dyslexia within a social disability model. Dyslexia appears to meet both definitions of disability laid out by the Social Model. Firstly, we have seen that a distinction exists in dyslexia between the underlying "impairment" and the disability that can result from this. Secondly, it is clear that social factors like written language and standardized spelling are one of the main causes for this impairment to become a disability in the contemporary Western world. It is my hope that this understanding can also change our perspective and response to the phenomenon of dyslexia, which incidentally affects upwards of 20% of English speakers worldwide.

In many ways, dyslexia is a disability which is still largely approached using the old Medical Model. When school children struggle to learn to read for example, these problems are often perceived as less the responsibility of the school than that of the parents and their struggling child. Indeed, rather than adapting to the needs of dyslexic learners, our education system at large generally provides support to dyslexic children outside of the regular education classroom, either through special education or private tutoring. These two options are currently among the best paths to receive appropriate and high quality support for dyslexia. But the Social Model of Disability suggests that perhaps we should question this course of action. Would it not be better if regular education teachers were provided with the knowledge and training they need to support dyslexic learners along side their peers in the much more inclusive, unsegregated environment of the regular education classroom?

Thankfully, this approach is slowly becoming more common. Legislative efforts in both the U.K. and U.S. are beginning to mandate that all school teachers receive dyslexia specific education. There are also signs of progress in higher education and the workplace. Increasingly, rather than perceiving dyslexia-related difficulties as outside the scope of reasonable adjustment, Universities and employers alike are changing policies and procedures so that SpLD's are less disabling in these environments. I want all dyslexics and their allies to continue this progress by understanding that dyslexia is a phenomenon that does not have to be disabling and which can even become an advantage under the right conditions.

Dwight Richardson Kelly is a proud dyslexic who was diagnosed as a young child. He does almost all his reading through audio sources and continues to struggle with spelling on a daily basis. A student of psychology, disability studies, and the creative arts, he is now completing his final year at Sarah Lawrence College in NY, USA. He spent last year studying dyslexia under John Stein while completing an international exchange program at Wadham College, Oxford.