**PMG book review.**

Mallett R; Runswick-Cole K (2014). Approaching Disability: Critical Issues and Perspectives. London, Routledge, Taylor & Francis Group.

‘In a lift, I was asked that question…”I hope you don’t mind me asking but..what’s wrong with you?” I replied, “Nothing”’. (p125. Author’s personal encounter)

As recipient of a PMG bursary I was offered the choice of writing a book review. I selected this book from those on offer as it focussed on an area that I was interested in, but have never had the chance to explore more deeply – the social model of disability and the disabled rights movement. In this review all quotes and page numbers are from the text.

This book is an introduction to various approaches to understanding disability starting with the Social Model of Disability.

It describes how this model developed in the UK, in the 1980s, in reaction to the United Nations International Year of Disabled Persons (p90) and to the work of charities which were seen to be paternalistic in nature and to pursue an agenda that ignored and side-lined disabled people. The resulting groups of disabled people that formed then began to campaign for rights and equality and this radicalism established the basic theories and terminology for disability studies. Through their experience the Social Model was formulated to explore the distinction between Impairment – the functional effects of the medical condition – and Disability - ‘difficulties caused for disabled people by disabling environments, barriers, attitudes and cultures’(p10). This would then provide a practical and theoretical base to study and give voice to their concerns.

After this outline we are told about various different critiques and alternatives to the Social Model from feminist and multi-cultural perspectives, the latter presented in the form of a ‘world tour’. These all tend to hold to the central tenet – that disability is a social construct – but add further depth by questioning its Eurocentric bias and introducing greater breadth to the study of disabilities – such as the need to include the effects of religion in the way disabled people are treated in India, or the concept of *Ubuntu*, (loosely translated as ‘interrelatedness’) from Africa (p33). We are presented with further criticisms that are made of its theoretical base - that it fails to take into account the experience of all groups of disabled people (i.e. disabled children, people with learning disabilities) or of the impact (‘intersectionality’ p99) of multiple discriminations – such as race, class, and gender. For the authors these critiques are to be embraced to help increase the inclusiveness of disability studies, freeing it from the bias of ‘white, middle class, professional, physically disabled men’ (p98).

Using subjects as diverse as the holocaust, faeces, pain and freak shows they show how disability is something that is socially created not the necessary concomitant of having an impairment. We are offered the results of studies of the historical experience and cultural representations of disabled people. We are also introduced to the tools to analyse the treatment of disabled people in film, TV and other media using various different approaches and methodologies – from quantitative content analysis to transgressive resignification which seeks a way of ‘reclaiming potentially harmful and hurtful depictions’ (p61).

Each of the studies give further evidence to support the author’s central argument that it is the way in which society seeks to define disabled people that creates the disability. They cite many illuminating – and chilling –instances of how this social act serves to disempower and oppress disabled people. Some of the more powerful sections focus on the mass slaughter of disabled people in the holocaust, and the individual tragedies such as the killing of ‘Brent Martin kicked to death for a £5 bet’ ( quoted from Quarmby, 2011 on p70).

For the authors it is crucial to understand that disability is cultural and social in nature as this helps to explain why events such as these happen. They use further historical studies to support this thesis, as they describe how the medically defined ‘patient’ with ‘impairments’ emerges from a time when ‘normality was a hodge podge’ (quoted from Stiker, 1999 on p72). Indeed many parts of the book show the impact that the ‘medical gaze’ (p81) has on disabled people, and how the development of medicine has acted as a tool that all too often comes to define disabled people in terms of their ‘deficits’. They are particularly enlightening when discussing the disabled child and the impact of developmental psychology.

As a health professional I personally found these parts especially interesting, as they offered a different way for me to view and evaluate my practice; to consider how often I try to rely on diagnosis to understand the disabled person’s condition, or to apply various judgemental standards, without questioning their basis. I found the information presented to me of great benefit to try and differentiate between the times when my ‘readings of disability…stifle or enable’ (p139).

In summary, I would recommend this book as a very readable and clear introduction to the area of disability studies and the politics of disability. As health professionals I feel it is essential that we constantly question our practice, and seek to understand our biases and opinions. I found much in this book that both prompted me to do this and provided valuable facts and tools to assist me in this on-going process.

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