Towards a Socio-Cultural Framework of Disability in Morocco

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ABSTRACT

The Social Model of Disability posits that individuals are disabled by societal barriers, not by their inherent impairments or differences. This conceptual framework emerged as the culmination of ideas and heightened awareness within the disability rights movements during the 1960s and 1970s in Europe and the United States. The widespread adoption of the Social Model and its core principles has significantly influenced policy-making, profoundly impacting the living conditions of individuals with disabilities. Despite its noteworthy contributions, the implementation of the Social Model alone does not comprehensively address the challenge of achieving inclusion. This paper aims to delineate the pitfalls associated with the Social Model of Disability, as elucidated by authorities in the field. It argues for a more effective approach that involves the integration of both the Social Model and the Cultural Model, which values disability as a facet of human diversity. This combination is particularly pertinent in the Moroccan context, where traditionalist models of disability persist. By examining and synthesizing these models, this paper postulates that a comprehensive framework should emerge, better suited to addressing the complexities of disability and fostering inclusion in diverse cultural contexts.

Keywords: Disability, disability Rights, social inclusion Social Model, Cultural Model.

The change that the Social Model brought to the improvement of the living conditions of people with disabilities across Europe and the United States is undeniable. In fact, its emergence consists of a paradigm shift in the view to disability which had been until the coinage of this term regarded as a curse, or a tragedy, or an impairment that needs rehabilitation. The Social Model represents a momentum for the disability movement in the West, a collective outcry for a delocalization of disability from the personal to the environmental. Nowadays, the Social Model informs many international documents, and frames policies that regards people with disabilities in the most advanced societies. Notwithstanding its success in alleviating social barriers, the Social Model of disabilities may not alone solve the riddle of inclusion as its landscape does not account for a number of issues that hamper the efforts to make people with disabilities part of their community, especially those that pertain to the field of culture.

This paper reviews the available literature on the Social and Cultural model of disability in order to   present information about the birth and development of both models. It explains in detail their strengths and weaknesses in the hope of culminating a socio-cultural model that

suits better the Moroccan context, in which negative stereotypes about the disabled and the impaired imagery prevail.

The findings of this research paper are the result of a rigorous research methodology, which can be summarized in three main steps. First, the interest to suggest a combination of the *Social Model* and the *Cultural Model* approach to disability emanated from exchanges with academics and people with people with disability from countries where the *Social Model* has been implemented for decades, and whose financial abilities are far better than Morocco's. Yet, the *Social Model* has not been efficient in solving the inclusion riddle, namely issues of cultural nature. The presentation of people with disability and the casual discussion in the 2021 Society of Disability Studies (SDS) International Conference on Disability and the   2022 Greenwich University FLAS PhD Symposium on *A Phenomenology of Misfits: Discrepancies Between Body and World*. Helped not only identify the strengths and weaknesses of the Social Model but also suggest leading figures and highly sighted references to consult on this topic.

Second, an online search was launched for books and book chapters by leading figures of the *Social Model* and the *Cultural Model*. This research strategy was chosen to compensate for the lack of resources on disability in Moroccan libraries and their data bases. The online research yielded fruitful results as many references on both models were available. Regarding references on the *Social Model*, the research. Came up with book chapters, namely in the *Disability Studies Reader* edited by Lennard J. Davis, *Disabling Barriers Enabling Environments* edited by J. Swain, and *Implementing the Social Model of disability: Theory and Practice* edited by Barnes and Mercer, among others. Concerning references pertaining to the *Cultural Model*, the research showed relatively fewer results due to the novelty of the model and its popularity comparatively to the *Social Model*. References related to the *Cultural Model* include, but not limited to, *Changing Social Attitudes Toward Disability— Perspectives from Historical, Cultural,, and Educational* Studies edited by David Bolt. The book chapters were listed, reviewed , and categorized then thematically analyzed to identify the strengths and weaknesses of both models, with more focus on the Social Model as it is the one under criticism in this paper. The analysis of the book chapter revealed the dominance of four main themes, the emergence of the *Social Model*, its definition, its strengths and weaknesses, and the need for a combination of both models.

Third, to gain a more in depth understanding of the *Social Model* And the *Cultural Model* from diverse researchers across the globe, the data bases of two online peer reviewed journals that specialize in Disability studies, *Disability Studies Quarterly* (DSQ) and *Review of Disability Studies* (RDS), were consulted, using 'Social Model 'and 'Cultural Model 'as key words. A number of papers were listed and thematically processed according to the aim of the study. The review and analysis of the journal articles fell into the same thematic patterns mentioned above.

The process of data collection and analysis resulted in the emergence of four thematic patterns that are listed as follows:

The Emergence of the Social Model of Disability
The Social Model of Disability came about as a reaction to a long tradition of dealing with the handicap as 'a personal tragedy '(Finkelstein, 2004, 14) and the handicapped as being 'quite

incomplete 'and therefore not illegible to participate in society (Oliver, 2004), or to the over-medicalization of the disabled body by the medical and paramedical professionals (Thomas, 2004), and also to the fact that disabled people have always been victim of different ideologies that have shaped the life of European societies, be these ideologies religious, cultural, social, or medical, economic, political, ETc. (Barnes & Mercer, 2004; Thomas, 2004; Goble, 2004; Shakespeare, 2010) Examples of these ideologies include the impact of cultural artifacts like myth and superstition on the social inclusion of people with disabilities, the effect of industrialization and the birth of capitalism which caused cooperative work to die out (French, 2017; Thomas, 2004), and the up-spring of the Eugenic Movement in the U.S., Swidden, and other parts of Europe and the Nazi takeover which resulted in atrocities against handicapped people in the Nazi Death Camps (Burdett, 2014). The Social Model is the fruit of the struggle of the civil society movements across Europe and the United State for equality and inclusion, and against the disabling barriers that hinder the social participation of people with disabilities (Barnes & Mercer, 2004; Thomas, 2004; Shakespeare, 2010). According to Shakespeare (2010), during the 1970s a civil right movement emerged to plead for the rights of disabled people, and to ask for the accommodation of their environment to their specific needs so that they can effectively participate in the life of their community and live decently. Some of the leading organizations belonging to this civil society tissue includes the Disablement income Group (DIG) founded in 1965 and the Union for the Physically Impaired Against Segregation (UPIAS), whose work informed and influenced the Social Model, and its founders and leaders were the model paragons (Oliver, 2004; Finkelstein, 2004). (UPIAS) work consisted of denouncing the absence of accessibilities in public space and infrastructure. According to its policy statement adapted in 1974, (UPIAS) set a clear and straightforward agenda for its activities that Tom Shakespeare sums up as follows: 'to replace segregated facilities with opportunities for people with impairments to participate fully in society, to live independently, to undertake productive work and to have full control over their whole life '(Shakespeare, 2010, 266-67).)

The (UPIAS) policy statement is considered a major framework of the social model of disability since it defines people with disabilities as an oppressed group and highlights social and cultural barriers that hinder the social participation of that group in society. The policy statement reads 'we find ourselves isolated and excluded by such things such as flights of steps, inadequate public and personal transport, Unsuitable housing, rigid work routines in factories and offices, and a lack of up-to-date aids and equipments. '(Quoted in Shakespeare, 2010, 267)

Though Shakespeare (2010) attributes full credit to the work of (UPIAS) as a precursor of the social model of disability, he does not exclude other voices from the disability studies discussion among which the Liberation Network of People with Disabilities. This association stands for a different understanding of disability. It argues that 'people with disabilities suffer from inherent inferiority due to their handicap', and accordingly, their strategy of liberation also differs from that of the (UPIAS). This strategy includes,'Developing connections with other disabled people and creating an inclusive disability community for mutual support, exploring social conditions in positive self awareness; the abolition of all segregation; seeking control over media representation working out a just economic policy; encouraging the formation of groups of people with disabilities. '(Quoted in Shakespeare, 2010, 267)

It is within this sociopolitical background of the 1970s that the social model of disability emerged as a structuralist approach to deal with the phenomenon of disability as socially

constructed not as medically inherent (Shakespeare, 2010; Oliver, 2004; Finkelstein, 2004). Shakespeare (2010) and Abrams (2014) write that It was Mike Oliver who was the first to adapt the structuralist approach to understand disability and the first to coin the term the social model of disability.

Defining the Social Model of Disability

It is hard to negotiate a definition of the social model of disability outside the (UPIAS) definition of disability which theoretically frames that model. According to (UPIAS), 'it is society which disables physically impaired people. 'They add, 'disability is something imposed on top of our impairment, by the *way* we are unnecessarily isolated and excluded from full participation in society." They conclude, 'disabled people are an oppressed group in society. '(quoted in Shakespeare 2010) Drawing on (UPIAS) ideas, Thomas Abrams sees the Social Model as the identification of 'barriers experienced by the impaired as the cause of their impairment ' (Abrams, 2014). In this respect and in consistence with (upias) principles, the Disability Studies researchers , Collin Barnes and Jeof Mercer (2004) Define the social Model of disability as 'nothing more complicated than an emphasis on the economic, environmental and cultural barriers encountered by people viewed by others as having some form of impairment. These barriers include,

(a) inaccessible education, information and communication systems and working environments,
(b) Inadequate disability benefit and discriminatory health and social support services,
(c) inaccessible transport, housing and public buildings."

According to Waldschmit (2016), The Social Model of disability revolves around three key ideas that she summarizes as follows:

- Disabled people are a minority group that suffers from social injustice.
- Impairment and disability are not synonymous nor interrelated. In other words, it is not impairment that disables, but social practices and non-accommodated infrastructure that cause disability.
- It is the society's responsibility to remove the barriers a*n*d obstacles that hinder the social integration and participation of people with disability in the community. (Waldschmit, 2016, 21/22)

The Social Model understanding of disability redefines other concepts related to impairment. According to shakespeare, (2010) the social model of disability thinking is based on a series of dichotomies:

(a) Impairment is distinguished from disability. The former is individual and private, the latter is structural and public which calls to mind the distinction that gender studies makes of biological sex, male female, and social gender, masculine feminine. Likewise, the social model considers disability a social construction of impairment.
(b) The social model is different from the medical or the individual model. While the former defines disability as a social creation —a relationship between people with impairment and a disabling society—, the latter treats it as an individual deficit and thus translating a mainstream practice. Mike Oliver writes, "Models are ways of translating ideas into practice and the idea underpinning the individual model was that of personal tragedy

while the idea underpinning the social model was that of externally imposed restrictions." (Quoted in Shakespeare 2010)

(c) Disabled people are distinguished from non-disabled people. This entails that disabled people are regarded as oppressed and society is the oppressor. This also mandates that the struggle of the people with disabilities to achieve equal participation in society is a right struggle not a charity or welfare struggle.

The Social Model Strengths and Weaknesses
During the last decade of the 20th century, the social model of disability had widely spread in Britain and across Europe. Many critics in that period had called for its adaptation in dealing with disabilities for its numerous strengths that can be summarized as follows:

- First, the social model has been effective in building the social movement of disabled people. It is clear, easy, and straightforward (Shakespeare, 2010).

- Second, Not only did the social model form a sort of collective awareness of disability rights that had been translated to civic and political activism, but it also contributed to the liberation of people with disabilities, seeking the removal of the barriers that prevent them from equal participation in society (Oliver, 2004; Thomas, 2004). This liberation was translated in a political civil rights movement to decry the hegemonic practices the main stream society exerts over the disabled, and to call for first the participation of people with disabilities in decision making that directly concerns them as the famous disability movement slogan goes 'nothing about us without us', then for an effective inclusion in the economic and political life of the mainstream society (Shakespeare, 2010).).

- Third, the social model of disability has been also effective on the psychological level. The traditional model of disability places the blame on the disabled individual which results in an inherent feeling of shame, embarrassment, lack of self confidence, etc. The social model of disability, however, relocates the blame from the individual to the disabling social barriers and attitudes and thereby changes the intra-perception of the disabled individual from self pity to anger and pride. (Shakespeare 2010; Stone 1999; Oliver, 2004)

Although the Social Model consists of a paradigm shift in the field of disability studies as 'the first big idea of the disability movement '(Oliver, 2004, 11), and has sustained the interest of researchers and decision makers, its adaptation and that of the documents it has informed still fuels criticism. The constitutive elements of the social model of disability as they are outlined in the (UPIAS) policy statement paradoxically make up both its strength and weaknesse. The latter comprises its sometimes exaggerated simplicity in dealing with the issue of disability. Another weakness lies in the small authorship of this model that includes a limited number of impaired people most of whom suffer from light handicaps. Shakespeare writes 'had UPIAS included people with learning difficulties, mental health problems, or with more complex physical problems, or more representative of different experiences, it could not have produced such a narrow understanding of disability '(Shakespeare, 2010).

In this respect and in his apology of the social model, Oliver (2004) lists five factors that inform its criticism. First, many Disability Studies critics denounce the exaggerated collectivist approach of the social model to deal with the issue of disability. They think that each disability

should be treated on its own as what disables for a wheelchair user and a person with vision impairment varies. Second, the social model, driven by its collectivist approach, seems to overlook the individual experience with pain. According to Oliver, disabled people sometimes complain about the ignorance or neglect of the social model theorists of the medical aspect of impairment, which also pertains to their disability experience. Third, the social model fails to catch the intersectional aspect of disability as the impact of disablement increases when disability intersects with ethnicity, gender, or social status. A fourth criticism of the social model lies in its exaggerated focus on the environmental barriers and their impact on the economic participation of the disabled. The model, however, is oblivious of the cultural aspect of exclusion, which is detrimental to the social image of the disabled. A final and maybe concluding criticism that Oliver points to is that the social model is not a theory . According to him, it is a perspective by which the disability movement has been able to challenge the dominant medical assumptions of disability. He agrees on the last view with Finkelstein (2004), who describes the social model as an interpretation of disability (Oliver, 2004).

In addition to Oliver (2004), Shakespeare (2010) sums up some pitfalls of the social model as follows:

1. The neglect of impairment as an important feature of the life of the disabled: The rejection of impairment as a medical fact that may impact the life of the handicapped depending on its level of severity implies that the social model activists deal only with one side of the coin even if this implication has not been explicitly stated by UPIAS activists, it has always been a major criticism that the movement has to face (Shakespeare, 2010).

2. The social model assumes what it needs to prove. This leads to another interpretation of the claims of the social model authorship which makes of social oppression an unescapable experience for people with disability. Shakespeare (2010) argues that it is hard for researchers seeking to apply the social model to investigate the issue of disability specially those who want to use qualitative data collection methods to start their research studies without the presumption that the handicapped is oppressed which in his opinion should be proven not presumed. He draws an analogy with gender studies in which the issue of gender is not necessarily related to oppression, but it is research that demonstrates it.

3. The concept of the barrier free utopia. Another implication of the social model of disability is that it seeks a world free of barriers and hinderances similar to Finkelstein's accommodated village where all the inhabitants are wheelchair users. Finkelstein's idea consists of reversing the concept of disability by showing how society would unwillingly disable people who are not wheelchair users (Finkelstein, 2004). Shakespeare (2010) insists that Finkelstein idea is idealistic, and that the barrier free utopia is impossible to achieve. He explains that places like mountains and sand beaches has always consisted a difficulty to wheel chair users whereas the sunset and sunrise are impossible to accommodate for the visually impaired. Furthermore, the challenge is even higher with mental and intellectual disabilities 'what would it mean to create a barrier free utopia for people with learning difficulties? 'He asks. He agrees, in this respect, with the visually impaired researcher Sally French (2004) who complains about the failure of the social model to resolve issues related to non-verbal communication or face recognition).

Shakespeare concludes that the social model needs to be reviewed regardless of the multiple advantages it has brought to disability studies. He calls for a model that mixes the traditional/medical with the progressivist/social approach. (Shakespeare 2010)

In addition to the weaknesses outlined by Shakespeare (2010) and Oliver (2004), Waldschmidt (2017), Hughes (2004) and Stone (1999) insist that the difficulty of implementation of its principles on a transnational level and, more importantly, Accommodations and assistance do not alone solve the problem of disablement as the latter is culturally constructed. Moreover, Waldschmidt and Stone agree that   The social model becomes a form of imperialism when it travels beyond occidental borders which threatens the adoption of an international definition of disability as the concept of disability   varies from a culture to another. Additionally, The materialist/essentialist nature of the social model condemns the disabled to a life of an unescapable exclusion which denies them the slim chance of breaking free from the medicalizing view (Thomas, 2004).

Towards a Socio-cultural Framework
It was the look for a more realistic framework to disability that caused the emergence of the Cultural Model, As a reaction to the pitfalls that the adaptation of the Social Model had shown, especially With the flourishing of some fields of knowledge like cultural studies and the emergence and outspread of different trends of analysis such as post structuralism which centers on the study of meaning. researchers in the field of disability expressed a need for an overlap between Disability Studies and other research branches that are not necessarily linked to the field of disability, an overlap that could widen the horizon that had been until that time focused almost exclusively on militantism to change the social conditions of people with disabilities.

An example of this overlap is the birth and emergence of the Cultural Model. It is the study of disability through culture and the application of some Cultural Studies terms to the field of disability. The cultural Model incorporates notions, like the gaze, alterity, representation, etc, to understand how disabled people are pushed aside and categorized as abnormal. The cultural Model assumes that disability is both structured and experienced through culture.

We believe the cultural model provides a fuller concept than the social model, in which disability signifies only discriminatory encounters." Write Snyder and Mitchell. (Quoted inn Waldschmidt, 2016, 22) Though Snyder's and Mitchell's definition of cultural studies remains vague, it implies the need of a new approach to disability that is marked by the flexibility to englobe, understand and use a wide range of terms and concepts other than discrimination, which constructs the back bone of the Social Model of disability. Snyder's and Mitchell's words find resonance in the works of Tom shakespeare (1997) and Colin Barnes (1992). In his 1997 Essay Cultural Representation of Disabled People: Dustbins for a Disavowal?, Shakespeare studies the way disability is constructed in the media through analyzing   the impairment imagery and its impact on the social image of the disabled. To reach this goal, he draws on cultural studies key terms, such as ideology, otherness, anomaly, and liminality. He, therefore, paves the ground for the cultural model of disability to emerge as a new approach, another alternative to deal with the issue of disability.

The concept of representation constitutes one of the first encounters between disability studies and cultural studies. As early as 1992, Colin Barnes, like shakespeare, pointed out to the importance of the impaired imagery, that is fabricated and propagated by all types of media, in shaping negative and widely shared stereotypes about people with disabilities.

'Disabling stereotypes which medicalise, patronise, criminalise, and dehumanise disabled people are bound in books, films, on television and in the press. They form the bedrock upon which the attitudes towards assumptions about, expectations of disabled people are based. They are fundamental to the discrimination and exploitation which disabled people encounter daily and and contribute significantly to their systematic exclusion from mainstream community life. '(Barnes, 1992, 39)

The social marginalization of people with disabilities, specially in traditionalist societies where disability is still conceived of as a personal tragedy, is not caused only by the multiple environmental barriers this social group encounters on daily basis, but it is also the result of meaning construction of disability and knowledge fabrication and propagation about people with disabilities. The stereotypical imagery that the community makes up about the disabled is mediated through a number of cultural means, such as language media law etc., which makes of inclusion an unrealizable outcome of the Social Model. For this reason, an intertwine of the Social and Cultural Model of disability is mostly needed in a traditionalist context like the Moroccan one. Otherwise, a visually impaired father would have no problem to make a restaurant reservation for his family, but once he is there, the waiter/waitress would ask someone else for his order.

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