Disabilities Defined

Definition

Various definitions of “persons with a disability” and how they perceive themselves make great mental demands on victims because they are complex and result from different causes and results; for example, genetic or traumatic. New definitions emerge at the same time the status of persons with disabilities in society dramatically changes. Moreover, legislation causes changes commensurate with shifts in public policy based upon status, identity and disability. One of the central goals of the disability rights movement calls for a new and more positive understanding of what it means to have a disability.

Disability policy scholars describe four different historical and social models of disability:

1. A moral model of disability which regards disability as the result of sin;
2. A medical model of disability which regards disability as a defect or sickness which must be cured through medical intervention;
3. A rehabilitation model, an offshoot of the medical model, which regards the disability as a deficiency that must be fixed by rehabilitation; and
4. The disability model, under which the problem is defined as a dominating attitude by professionals and others, inadequate support services when compared with society generally, as well as attitudinal, architectural, sensory, cognitive, economic and the strong tendency for people to generalize about all persons with disabilities overlooking the large variations within the disability community for either financial or political expedience.

The Medical Model

The medical model came about as modern medicine began to develop in the 19th Century, along with the enhanced role of the physician in society. Since many disabilities have medical origins, people with disabilities were expected to benefit from coming under the direction of the medical profession. Under this model, the problems that are associated with disability are deemed to reside within the individual. In other words, if the individual is “cured” then these problems will not exist. Society has no underlying responsibility to make a “place” for persons with disabilities, since they live in an outsider role waiting to be cured when in many cases there is no cure.

Individuals with disabilities occupy a sick role under the medical model. When people are sick, they are excused from normal obligations of society: going to school, getting a job, taking on family responsibilities, etc. They are also expected to come under the authority of the medical profession in order to get better. Thus, until recently, most disability policy issues have been regarded as health issues and physicians assume the responsibilities of primary care.

One can see the influence of the medical model in disability public policy, most notably in the social security systems in which disability is defined as the inability to work. This is consistent with the role of the person with a disability as being sick. This dichotomy creates enormous problems for individuals with disabilities who want to work, but who would risk losing all related...
public benefits such as health care coverage or access to personal assistance services (for in home
chores and personal functioning) since they loses disability status and benefits by going to work.

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