

Chapter 1

Disability Studies: The Context



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Abstract This introductory chapter situates the contents of the book in the discipline of Disability Studies. Disability Studies is introduced as an interdisciplinary discipline with socio-political, economic, historic, socio-cultural and psychological perspectives built into it. Also, sketching how the discipline of Disability Studies has been evolving to become more inclusive in theorizations and sociological analyses, the inclusions of feminist studies, cultural studies, gerontology and transgender studies have been presented. The social model of disability has been presented with both its strengths and criticism. Examining with the lens of social model, oppression and exclusion are described as the causes for the problems faced by the disabled people, not their impairments. Ongoing debates surrounding inclusive education, the deliberations concerning where and under what conditions students with disabilities should be educated, have been discussed as the central and one of the most contentious issues in Disability Studies. To give a complete picture, global and national initiatives for the welfare of persons with disability in terms of state policies and acts have been discussed.

Keywords Interdisciplinarity · Multiple perspectives · Social model · Barrier free environment · Inclusivity · Critical Disability Studies (CDS) · Transgender studies · Gerontology · Technology for disabled · Disability inclusion

Disability Studies as an Interdisciplinary Discipline

The academic discipline of Disability Studies is a diverse interdisciplinary field that investigates the nature, meanings and consequences of disability from social, historical, cultural, educational and political perspectives. It evolved through answering questions like what is the nature of disability, what are the appropriate teaching practices for students with disabilities, what counts as research and inquiry in the field of special education, etc. In his book *Disability Studies: An Interdisciplinary*

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Introduction, Goodley (2011), in the preface, justifies the subtitle of his book, ... “[An] *Interdisciplinary Introduction*, conveys an attempt to span a host of disciplines, including sociology, critical psychology, cultural studies, psychoanalysis and education, to analyse three overlapping layers of everyday life: psyche, culture and society” (p. xi).

According to Barton (2000):

Disability Studies provides a framework and language through which disabled people can describe their experiences. Discrimination, exclusion and inequality can be named and challenged. It offers a means through which the question of disability can be explained and understood in terms of wider socio-economic conditions and relations. It provides a basis for support and collective engagement of disabled people. Finally, it is a means through which the non-disabled world can be provided with an alternative and positive view of disability. Thus it has a very important educative function. (p. 3)

Historical analysis reveals that the research efforts and activism in the area of disability, which we now know as Disability Studies, have been a powerful influence on policy and practice with respect to people with disabilities. In other words, Disability Studies as a discipline has evolved as a means of addressing how people with disabilities have been treated historically and how they continue to be treated. Earlier perceived through the lens of medical model as people who are sick and in need of cure, through that of sociological model where people with disabilities are labelled and stigmatized by nondisabled, or through that of a psychological model where their experiences have been individualized and pathologized, people with disabilities are now being understood through different perspectives. Although medical and psychological models are still prevalent, they are being resisted by the relatively new field of Disability Studies, its philosophy being that disability is a socially construed conception. While Disability Studies does not deny that there are differences, either physical or mental, between people, they argue that “the nature and significance of these differences depend on how we view and interpret them” (Bogdan and Taylor 1994).

Disability Studies attempts to examine the social, economic and political factors that have caused the marginalization and oppression of people with disabilities. The field has emerged over the last several years, drawing on theories and perspectives from sociology, social science, women’s studies, cultural studies and education. One of the central ideas in Disability Studies is that people with disabilities are a minority group who has been discriminated against. In this sense, the study of disability is closely linked to human rights and justice and is akin to the study of race, class and gender inequalities.

The field of Disability Studies is in an evolutionary stage. Recent additions to the field such as feminist Disability Studies and cultural studies have challenged “traditional” Disability Studies and have forced the field to be more inclusive of different perspectives and positions in society. Moreover, traditionally, Disability Studies has focused on issues around people with physical, rather than cognitive disabilities. One major challenge for the scholars in the field of Disability Studies is giving voice to people with cognitive disabilities and the inclusion of their experiences.

The overall experience of disability is diverse as it is the combination of limitations in functioning across multiple domains (e.g. seeing, walking, hearing, talking), each on a range, from little to severe disabilities, either within a particular domain or across multiple domains. For each domain, the level of functioning a person experiences depends on both the individual capacity of the body and the attributes of his or her environment that can either lower or raise the person's ability to participate in any activity. An analysis of developments in the field of Disability Studies brings us to an understanding that disability is not a thing, but a conceptualization, a conceived idea that is derived from the interactions between a person's impairment and his/her environment. It is a fact that people do vary or differ from one another in sometimes very obvious ways, but to call or label some of those differences as "disabilities" is to make a judgment, not an unbiased or neutral observation. What matters is what we make out of these differences or what attitude we develop towards them and how we treat these people with differences, rather than the differences people have in comparison to others or in what way or to what extent they vary from each other. What gives full meaning to disability are the insights regarding how macro-level processes such as societal attitudes about diversity intersect with disability issues as well as how race, class, gender, language, culture and sexual orientation shape the experience of disability.

Delineating impairment from disability, impairment refers to variations that exist in human behaviour, appearance, functioning, sensory acuity and cognitive processing. Disability, on the other hand, is the outcome of interface between impairment and social, political, economic and cultural practice. Perceiving disability as an outcome of interactions among social contexts brings us primarily to the task of designing learning environments in such ways so as to enable all sites of learning accessible and to enable all members involved at these sites to have access to curriculum and learning opportunities.

Disability Studies includes a diverse group of people: people who are blind or deaf, who use wheelchairs, who experience chronic pain, who learn at a slower pace than others, who have multiple disabilities and so on and who have immensely different experiences and perspectives. Yet they are all included within a common definition of disability, with corresponding consequences for how they are viewed and treated by the majority which is supposed to be nondisabled.

Disability Studies is not medicine, rehabilitation, special education, physical or occupational therapy and any of the professions oriented towards the cure, prevention or treatment of disabilities. Although some of the scholars in the field of Disability Studies generally subscribe to the minority group model of disability, i.e. the view that the status of people as a minority shapes their experiences in society, they have certain points in departure to this view. For example, some Disability Studies scholars view disability with respect to culture and identity, while others see disability as a social construct and a label. Some Disability Studies scholars use different language to refer to people; "person with a disability" or "people first language" conveys the idea that the person's identity as a human being is primary; person labelled as disabled (mentally retarded, mentally ill and so on) foregrounds how disability is

socially constructed and imposed on people who may or may not agree to this description. Accordingly, a deaf person and Deaf person convey very different meanings, with the latter stressing membership in a linguistically defined culture. There is yet another group of disability activists, like Petra Kuppens, who prefer to be called “disabled”, “...as she feels that this word is a political identifier which links many of them in the disability culture together” (Chennat and Lakhyani 2018, p. 6).

Multiple Perspectives on Disability Studies

The field of DSE has a defining characteristic of commitment to open inquiry, and the spirit of pluralism on which it was founded is significant enough to be considered. Neither Disability Studies nor Disability Studies in Education supports a unitary perspective. Knowledge in these areas draws on disciplines as varied as sociology, literature, critical theory, economics, law, history, art, philosophy and more and includes social constructionist or interpretivist, materialist, postmodernist, poststructuralist, legal and structural-functionalist perspectives. Nevertheless, there are certain central themes that characterize DSE, the primary among them being the idea that disability is a social phenomenon.

Impairment, as described by Disability Studies scholar Simi Linton (Linton and Berube 1998), refers to variations that exist or develop in human behaviour, appearance, functioning, sensory acuity and cognitive processing. *Disability*, on the other hand, is the creation or resultant outcome of social, political, economic and cultural practice. If the definitions of mild disabilities like learning disabilities (LDs) and mild intellectual/emotional disturbance (ED) can change, as they certainly have over the years, it is proved that they are the product of judgment. If the criteria for identifying any of these disabilities involve drawing a line somewhere between what is and what is not considered to be LD, MR or ED, these judgments are essentially and at best random. When it comes to low incidence disabilities like LD, a student may become “disabled” or “cured” by crossing a state. If these disabilities were anything other than interpretation about certain context-dependent differences, crossing state boundaries would not, and could not, change a student’s disability status. Anyone who has travelled to a different country, where his or her first language is generally spoken although with a different accent, will vouch for the fact that the context determines his or her position as a member of the group. Also, it is proved that capable people can be made to appear quite incompetent in an academic scenario in which most or all of the other students have more background knowledge, life experience, personal dispositions and interest in the subject at hand.

To a great extent, the demarcations between nondisabled and mildly disabled and mildly disabled and moderately or severely disabled all in a way involve judgment. Moreover, these categorizations are premised on our beliefs about what comprises *normal*, a notion that is itself context-dependent. What is normal at one time and place may not hold good at another. Considering all of human diversity normal is definitely a more justified stand from the justice and equality perspective. Some of

the disabilities have an obvious physiological component (e.g. anatomical structure, vision and hearing). To say these as socially constructed would seem ludicrous for many because it appears to deny that some people cannot walk, see or hear. Actually, what is being questioned is *not* the fact that some people cannot walk, hear or see, but the meaning or significance the society attributes to these biological differences. This is not a minor issue; what is made out of some people's differences holds direct and deep implications for how they are educated in our schools and treated at working places and other social sites.

Genesis of DSE

Disability Studies has its origins in the political and social anarchy of the mid-twentieth century like many of the movements slackly classified under the umbrella of cultural or identity politics. Disabled people were seen as useless or worthless traditionally and hence were understood to be fixed or wiped out as the society had little forbearance to accommodate them. Disability activists see this approach as the hallmark of a modern, normalizing society. Additionally, for many disabled people, a cure may be neither possible nor desirable.

Against the society's normalizing demand for disabled people to be adapted to their environments, usually through overcoming their disability or by coming to terms with their situation, it has been the imperative of the Disability Studies movement to improve the quality of life of disabled persons through the transformation and adaptation of social and physical environments. The cry for a distinction between impairment as a medical condition and disability as the effect of social attitudes and interactions complemented and supported this activism.

Analysing the education scenario of children with disabilities, it can be seen that schools specifically for children with disabilities were opened at a time when children with disabilities were routinely denied the access to education that their "non-disabled" peers were entitled to, by default. Legislations in each country mandating the education of all children in inclusive settings marked a turning point in the education of children with disabilities. This was a time period when the disability scholars, working from a medical perspective of disability, conceptualized disability as a deficit within the individual, a deficit to be fixed, cured or accommodated, and this perspective was prominent in the disability discourse. This understanding of disability from a medical model perspective systematically informed the legislations and reflected largely in them:

During a conference in 1999, a group of about 30 disability researchers from around the world gathered together with the purpose of forging new alternatives to traditional special education research. They explored innovative ways of envisioning, writing about, and talking about the lives and possibilities of people with disabilities, including many traditions of scholarship (in social science, humanities, arts, spiritual traditions, etc.) and the numerous voices that have something of importance to say about disability issues. The group came to a consensus that the kind of work they were discussing is best described as "Disability Studies in Education."

Near the conclusion of this discussion, Susan Gabel announced that she had taken the initiative to submit an application to form a new special interest group called Disability Studies in Education at the American Educational Research Association. This marked the founding, at least in a formal sense, of the now thriving field of DSE. (Gabel 2005; Gabel and Danforth 2006 as cited by Baglieri et al. 2011)

The deliberations and scholarly writings of academicians from the field of sociology, psychology, education and special education emphasized that the objectivist representation of disability from the medical perspective was neither precise nor sufficient and discourse in this direction progressively embarked on the social model of disability.

Social Model of Disability

The social model of disability that originated in Britain opposed the traditional supposition that disability is the direct result of an individual shortfall or incapability. In disability discourse, disablism is seen to represent not only a diversity of discriminatory practices but also the way in which disability, as an impact of social oppression, is taken for granted as the “symptom” of individual attributes, that is, as the effect of impairments.

Extending further the socio-political dimensions of disability and highlighting the patterns of discrimination of disabled persons, Disability Studies conceptualized the status of disabled persons as essentially similar to the challenges encountered by persons belonging to other minority groups. Thus, parallel and concurrent to the conceptualization of the social model of disability, a strand of activism evolved that put forth claims to rights of disabled persons and resistance against bigoted practices and environments.

Strengths of the Social Model

The social model, the grand idea of the British Disability Movement, has been effective politically in building the social movement of people with disabilities. It is simple and straightforward and generates a clear agenda for social change. The social model provides means of distinguishing between supporters and enemies; “disabled people” indicates a social model approach, whereas “people with disabilities” signals a mainstream approach. By identifying the societal barriers to inclusion, the social model has been instrumental in the liberation of disabled people. Michael Oliver argues that social model is a “practical tool, not a theory, an idea or a concept” (Oliver, 2004).

Oppression and exclusion are flagged as the causes for the problems faced by the disabled people, not their impairments, according to the proponents of social model. It is from this stand that they come to the moral responsibility of the society to alleviate

the barriers to enable the inclusion of disabled people. The social model has also been effective psychologically by improving the self-esteem and self-image of disabled people and a sense of collective identity among them. In the medical model, disabled people are made to feel that they are responsible for all their miseries, leading to very low self-confidence and self-esteem and depriving them of any participation in the societal activities. On the contrary, it is not the disabled person to be blamed, but society; it is not the disabled person who has to change, but society. Hence, the disabled person can feel agitated and voice against the society rather than feel self-pity.

Criticism of the Social Model

As a slogan and political ideology, the social model has many benefits; but these in turn are inadequate and drawbacks as academic explanation of disability. Another drawback is its authorship by a small group of disabled activists, majority of whom had spinal injury or other physical impairments. Had people with more diverse disabilities be included whose experiences are varied, disability would not have been so narrowly conceptualized.

The social model has been criticized for neglecting impairment as a vital aspect of many disabled people's lives:

As individuals, most of us simply cannot pretend with any conviction that our impairments are irrelevant because they influence every aspect of our lives. We must find a way to integrate them into our whole experience and identity for the sake of our physical and emotional well-being, and, subsequently, for our capacity to work against Disability. (Crow 1992, p. 7)

The experiences of disability for a congenitally blind or deaf person are entirely different from that for a person bedridden due to spinal injury. People of the latter category would depend immensely on medication and suffer pain for a long period of time. For people of the former category with static impairments, which do not degenerate or cause medical complications or lead to dependence on medicines, it may be possible to perceive disability as entirely socially constructed.

Impairment is a wide and heterogeneous spectrum encompassing conditions that are relatively benign to those that are incapacitating and even fatal at times. There can always be a medical dimension to it. To describe some forms of pain, say, as socially constructed does not mean that pain killers must therefore be useless.

According to another disability activist Carol Thomas (1999), "impairment effects" are to be included in the social model, so as to account for the limitations and difficulties of medical conditions. As a logical flow out from this position, she put forth a relational explication of the social model that allows the attribution of disabling features to both impairment and social oppression:

Once the term 'disability' is ring-fenced to mean forms of oppressive social reactions visited upon people with impairments, there is no need to deny that impairment and illness cause some restrictions of activity, or that in many situations both disability and impairment effects interact to place limits on activity. (Thomas 2004, p. 29)

Shakespeare (2006) contends that there are significant problems with the social model and it has become an obstacle to the development of the disability movement and to Disability Studies.

Barrier-Free Environment: A Utopia

The utopia of a barrier-free environment is criticized by many disability activists. How much ever we struggle, many parts of the globe will remain inaccessible for many of the disabled people; for example, mountain ranges, beaches and marshlands pose challenges to wheelchair users to negotiate, while beautiful nature scenery and nature's sounds cannot be enjoyed by those with blindness or deafness. In many situations, many of the barriers can be mitigated, but the diversity among people with the same type of impairment makes it extremely challenging to meet their range of requirements, for example, books in Braille, in large print, audio tape or electronic files. A large library could not possibly provide all the books in all these forms to address the needs of all readers with visual impairment. The point in focus is that while agreeing that environment and services can and should be adapted to address the needs of disabled people wherever possible, one needs to accept the fact that disadvantages still remain associated with having impairments which no level of environmental adaptations can completely alleviate.

Inclusion as a Central Theme in DSE

Social inclusion and inclusive education have been major concerns in Disability Studies. One of the most contentious issues in Disability Studies is found in the ongoing debates surrounding inclusive education, the deliberations concerning where and under what conditions students with disabilities should be educated. As per the World Bank and Global Partnership for Education (GPE) Report (2017) titled "Education: Children with Disabilities Are Left Behind", despite global efforts to improve education opportunities for all, children with disabilities are being left behind as gaps between children with and without disabilities have increased spectacularly in developing countries. The report reveals that these gaps are the result of exclusion associated with disabilities, as against other characteristics of children that could be concurrent with disabilities. The report also finds that children with physical disabilities or disabilities related to hearing, seeing or speech tend to be doing better than children with intellectual or multiple disabilities. According to the assessment of disability experts, access to school for children with disabilities is often limited by a scarcity of trained teachers, a lack of understanding about the needs of children with disabilities as well as a lack of matching facilities, classroom support and learning resource that address these needs.

Disability Studies and the Latest Trends

Emergence of Critical Disability Studies (CDS)

CDS has emerged in the last decade as a way to re-evaluate the critical underpinnings of past work in Disability Studies, most notably its focus on the social model of disability. CDS calls instead upon critical social theory, which challenges the very way that the status quo is construed and maintains a space for critical reason to achieve a more participatory and egalitarian society (Meekosha and Shuttleworth 2017, p. 175).

CDS is aimed at building an alternative body of philosophy and practice in the field of disability which is essentially subversive.

The disability movement's struggle was about more than ramps; now CDS can help to highlight how societies exclude "abnormal" bodies and reformulate who is eligible for participation in civic life. Investigating difficult problems that Disability Studies tended to shy away from will now contribute to an expanded understanding of disabled people's place in the world (Meekosha and Shuttleworth 2017, p. 175).

The highlighted dichotomy and binary way of conceptualizing disability from social or medical perspectives have undergone stringent criticism from feminists, cultural studies scholars and postmodernists resulting in disequilibrium and tension in the Disability Studies community. As departure from the preoccupations and restricted binary conceptualization of disability emerged CDS. Moreover, the permeable nature of Disability Studies as a field of inquiry and

the influx of humanities and cultural studies scholars with their post-modern leanings and decentering of subjectivity during the 1990s, especially in the US, enabled a more self-conscious focus on critical theorising to take hold in Disability Studies. Use of CDS signifies an implicit understanding that the terms of engagement in disability have changed; that the struggle for social change continues, but on another plane of development- one that is not simply social, economic, and political, but also psychological, cultural, discursive and carnal. (Meekosha and Shuttleworth 2017, p. 178)

This update in the field of Disability Studies has made it possible for it to become a more encompassing field providing a platform for critically examining oppression and exclusion of a larger group of persons, including transgender, aged and others.

Transgender Studies

Disability and transgender identities and communities can be analysed through a comparative and intersectional lens. From conceptual terminology to societal oppression and discrimination within many contexts including medical systems, Disability Studies and transgender studies share common issues and struggles. Understanding the intersections between Disability Studies and transgender studies

facilitates a broader understanding of how they complement each other and enhance the potential for social change in a unified manner.

Similar to “disabled” being used as an umbrella term to cover many identities, in current discourse, “transgender” is used as an umbrella term to refer to transsexuals, gender queers, intersexuals and other people who do not fit into a traditional gender binary.

Transsexuality is conceptualized as primarily a bodily experience because of its association with changing bodies. People within disability and transgender communities share histories of medicalization and institutionalization. Medical documentation is central to the medical model of disability. Transsexual people navigate the law in order to receive medical treatment; no matter the subject of a legal case, medical certificate is considered crucial for determining the rights of the trans person because of the ways trans bodies have been medicalized. There is a significant overlap between trans and Disability Studies relating to documentation, investment in normality and the ties between disability law and transsexuality (Mog 2008).

Having disability and being transgender have umpteen social implications that result in several social barriers at each stage in the life of these persons. Disability has been traditionally seen as a deficit of the individual and a personal tragedy. Historically, this has also been the case for transgender and queer people. The common place maxim is that if one tries hard enough, one can overcome the disability or can be gender normative, with the assumption that having no disability or being gender normative is the “natural” and “right” way to be.

In the context of passing as nondisabled with regard to able-bodiedness, Linton and Berube (1998) talk about how children who use wheelchairs are often taken out of them for family photographs; children with invisible disabilities are told not to discuss them (p. 20). They say that the message in this practice is that “you are like everyone else, but only as long as you hide your disability” (p. 21). Passing as nondisabled takes an emotional toll on the person passing, because it restrains them from talking about a cardinal aspect of themselves. This can be compared to how a transsexual is required to not talk about the past and transition. The additional challenge hidden in this predicament is that there is a piece of reality in their being that could possibly be used to shame an individual – being trans or being disabled. This shame, however, comes from the fact that disabled bodies and transgender bodies are devalued and are considered as the person’s deficit. Thus, passing as being nondisabled or not transsexual is considered the best way out.

The social model of disability explains that the societal barriers that people with disabilities face are created by the society which while privileging certain able bodies fail to recognize others as legitimate. As in the case of societal ableism, barriers that trans people face, like not having a safe bathroom to use, are not a result of the trans people being deficient in some way but are barriers resulting from the apathy and ignorance of the society.

Both transgender studies and Disability Studies are becoming more widely studied within universities in the United States and the other countries of the West, with developing countries following suit. Slowly, the similarities and complementarities among these and other movements for social change will help in deeper analyses of the means of oppression and pave way for socio-political change.

Gerontology and Critical Disability Studies (CDS)

Gerontology, the **study** of **old age** and of the **changes** it **causes** in the **body** and its intersections with CDS, albeit a new interdisciplinary venture among academia has been initiated right from the time of UNCRPD (2006).

The Convention on the Rights of Persons with Disabilities (UNCRPD) (2006) framework for action contains a number of articles which highlight the cross-sectionalities of ageing and disability. For instance, Article 9 [accessibility], Article 19 [living independently and being included in the community], Article 20 (personal mobility) and Article 25 (health) are just a few examples of how the Convention provides a concrete framework for action which may be of particular interest to the discussions on disability and ageing.

2030 Agenda: Leaving no one behind. Promoting and protecting the rights and dignity of older persons and facilitating their full participation in society are an integral part of the pursuit of the 2030 Agenda for Sustainable Development which pledges that no one will be left behind (UN 2019).

Human rights perspective posits that every person irrespective of age, among many other diversity dimensions, has the right to living with dignity. Thus the old people have the right to inclusion with facilities like secure living, health and medical care, etc. The examination of these rights to social inclusion by older people's groups from a critical perspective is the centrality of the gerontology-CDS nexus. Inquiries into such socially relevant questions provide an initial base for theory development in this under-researched area that has considerable significance vis-à-vis policy formulation.

Some of the main endeavours in this field of inquiry are highlighting the role of self-advocacy groups in giving greater voice to older disabled people in policy debate and challenging the truncated perspective of academic and policy implementations on the requirements of older people and disabled people, albeit the commonality of many of them.

The field of CDS in gerontology also attempts to inquire into the current issues and concerns of older people (e.g. access to housing, income, transport, health and social care), the kinds of discourses used by older people's groups to legitimize these issues as the basis for claims to social inclusion, the issues and claims that have most in common with corresponding areas of concern for disabled people's groups, how this analysis inform policy making and how could future research on disability, ageing and inclusion be designed, so as to adequately respond to the related claims of both older people and disabled people. Thus, it is the mission in this field to bridge the gap between related, but traditionally separate, fields of enquiry (Priestley and Rabiee 2001).

Technology for Disabled

The whole world is working hard to realize the target of inclusion of persons with disabilities at all levels. Needless to say, the support from the field of technology has been a great boon in these efforts. “.....[T]he global society is rapidly marching towards inclusivity and access to affordable and reliable technology for empowering the persons with disabilities” (Karna 2016, p. 7). One of the most amazing developments seen in education over the past 10 years is the way that technology has created a revolution in possibilities for learners with disabilities. For years, students have struggled with their assignments or been excluded from different classes or subjects because schools had accessibility or instructional problems, resulting in inadequate and unequal educational opportunities for children with disabilities.

But the rapid development and application of computer-based technology, however, has created a sea change in the available options for disabled students. This situation has gone a long way in improving the limited opportunities faced by disabled students. Computer programs have been designed to make it easier for disabled students to access the material, communicate their ideas and work and participate in educational experiences.

While Braille reading and writing techniques have helped blind or visually impaired students continue their education since the nineteenth century, mobility, hearing and visual aids have made revolutionary changes in the world of disabled persons.

Electronics and information technology is the pulse of this revolution in learning opportunities for disabled students because they are the basis of assistive technology. Any item, equipment or product, whether purchased, modified or customized, that is used to enhance, maintain or improve functional capabilities of individuals with disabilities is assistive technology.

Hence, whether to move a part of the body, move from one place to another, access information, communicate (in oral or written mode) and comprehend (oral or written information), assistive technology is at the service of disabled persons.

Each chapter of this book covering specific disability discusses the matching technological support whether it is for mobility or communication or accessing information, as the need be.

Disability Inclusion

The following sections present a glimpse of the important initiatives taken at the global and national levels aimed at inclusive education of persons with disabilities.

International Initiatives

The Universal Declaration of Human Rights (UN) (1948) Some of the articles such as Articles 1, 2, 22 and 25 are relevant to the need of persons with disabilities.

The Universal Declaration on the Rights of Mentally Retarded Persons (1971) This was the first step towards integration of persons with disabilities.

The World Programme of Action Concerning Disabled Persons (1982) It is an international strategy to enhance disability prevention, rehabilitation and equalization of opportunities and full participation of persons with disabilities in social life and national development.

World Declaration on Education for All (1990) World Commitment on Education as a Right: The right of every child to education was proclaimed in the Universal Declaration of Human Rights (1948) and was strongly reaffirmed and agreed upon at this Jomtien World Declaration.

The UN Standard Rules on the Equalization of Opportunities for Persons with Disabilities (1993) It was an important resolution for improving the educational conditions of persons with disabilities.

The World Conference on Special Needs Education – The Salamanca Statement and Framework for Action on Special Needs Education (1994) This was the first global initiative with primary emphasis on inclusive education. The Statement reads “Regular schools with inclusive orientation are the most effective means of combating discriminatory attitudes, building on inclusive society and achieving education for all, moreover they provide effective education to the majority of children and improve the efficiency and ultimately the cost effectiveness of the entire education system”.

World Education Forum for Action (2000) The Dakar Forum was convened to re-assert the urgency of ensuring that marginalized groups can access education, particularly in light of the Millennium Development Goals. The Forum stated: “All children, young people and adults have the right to benefit from an education that will meet their basic learning needs in the best and fullest sense of the term, an education that includes learning to know, to do, to live together and be”.

Education for All (Flagship): Right to Education for Persons with Disabilities (2001) The aim of the UNESCO EFA Flagship was to reinforce the Dakar statement and to make it clear that without actively seeking to integrate children with disabilities and children from other minorities, the MDGs will never be met.

UN Convention on the Rights of Persons with Disabilities (UNCRPD) (2006) This is a human rights instrument that explicitly sets out the rights of disabled people and is the most important tool we have to argue for inclusive education worldwide. Signatories to the convention are required to promote, protect and ensure the full enjoyment of human rights by every person with disabilities and also ensure that they enjoy full equality under the law.

National-Level Policy and Legislation

Govt. of India Report on Blindness (1944) Govt. of India Report on Blindness (1944) merits mention here in this context. Most of the current educational programmes for the visually impaired in this country are built on the fundamental principles of the recommendations given in this report. It was in accordance with its recommendations that the Ministry of Education established a unit for the blind in April 1947 (adapted from Kumar and Agarwal 2016, p. 80).

Since 1947, many national-level commissions, committees, acts, schemes and policies have been implemented in India for education, inclusion, employment and rehabilitation of persons with disabilities. Some of the important ones are briefly presented below in a chronological order.

Sargent Report (1944) or CABE Report The British chief educational advisor observed that whatever was done for disabled people in India was by voluntary organizations and that the country could profitably borrow from the experiences and achievements of countries which had been proactive in this field. The report is claimed to be a landmark in the path of efforts for integration of disabled children in regular schools, and it continued its recommendation for special schools, as required by the nature and extent of the disability.

Education Commission (1966) Education Commission (1966) made a first to suggest that the education of handicapped children has to be planned and implemented not merely on humanitarian grounds but also based on the principle of utility. The Commission emphasized that the education of children with disability should be “an inseparable part of the general education system” and emphasized the importance of integrated education in meeting this target as it was cost-effective and useful in developing mutual understanding between children with and without disabilities.

National Education Policy (1968) The National Education Policy followed the Kothari Commission’s recommendations and suggested the expansion of educational facilities for physically and mentally handicapped children and the development of an “integrated programme enabling handicapped children to study in regular schools”. Eight years later a scheme for the integrated education of disabled children (IEDC), 1974, was started by the Welfare Ministry.

Integrated Education for Disabled Children (IEDC) (1974)

Integrated Education for Disabled Children is a centrally sponsored scheme launched in 1974 by the Department of Social Welfare which got transferred to the Dept. of Education in 1982. Under the scheme handicapped (the term in vogue then) children were sought to be integrated in regular school system. The overall aim of the programme was to enable children with disabilities to face life courageously and develop a level of self-confidence, thus bringing them into mainstream of the society. Children with disabilities were to be provided with financial support for books, stationery, school uniforms, transportation, special equipment and aids. The state governments were provided with 50% of the financial assistance to implement this programme in regular schools. The IEDC programme was revised in 1992, and in the revised programme, 100% assistance was made available to schools involved in the “integration” of students with disabilities. Various NGOs were also fully funded to implement the programme. IEDC got implemented in almost all the states and union territories.

IEDC was revised and named “Inclusive Education of the Disabled at the Secondary Stage” (IEDSS) in 2009–2010 to provide assistance for the inclusive education of the disabled children at ninth and tenth classes. This scheme got subsumed under Rashtriya Madhyamik Shiksha Abhiyan (RMSA) in 2013.

National Policy on Education (1986) The National Policy on Education was adopted by the Indian Parliament in 1986. The policy emphasized the removal of disparities while ensuring equalization of educational opportunity.

The Mental Health Act (1987) This Act replaced the Lunacy Act of 1912. The purpose of this Act was to regulate admission to psychiatric hospitals or nursing homes of mentally ill persons who do not have sufficient understanding to seek treatment on a voluntary basis and to protect the rights of such persons while being detained.

Programme of Action (1992) (POA) (MHRD) The NPE/POA 1986 was redesigned and POA was chalked out in 1992. The 1992 POA made a determined commitment to universal enrolment by the end of the Ninth Plan for both categories of children: those who could be educated in general primary schools and those who required education in special schools or special classes in general schools. It also called for the reorientation of the pre-service and in-service teacher education programmes.

Rehabilitation Council of India Act (1992) This Act casts norms for service delivery to persons with disabilities among other responsibilities of the Council. The Council has the twin responsibility of standardizing and regulating the training of personnel and professionals in the field of Rehabilitation and Special Education.

Persons with Disabilities Act or Equal Opportunities, Protection of Rights and Full Participation (1995) This law is an important landmark in the path of improv-

ing the life of persons with disabilities in the Indian context and is a significant step in the direction of ensuring equal opportunities for persons with disabilities and their full participation in nation building.

National Trust Act (1999) This Act constituted a national body for the Welfare of Persons with Autism, Mental Retardation, Cerebral Palsy and Multiple Disabilities, and the objectives of this body were clearly spelt out.

National Policy for Persons with Disability (2006) The National Policy (2006) recognized persons with disabilities as a valuable human resource for the country and sought to create an environment that provided them equal opportunities, protected their rights and ensured their full participation in society. The focus of the policy was on prevention of disabilities and on rehabilitation measures.

The Right of Children to Free and Compulsory Education (RTE) Act, 2009 The RTE Act is the law giving directions for implementing the fundamental right to free and compulsory education of children in the age group of 6 to 14. Although it has pitfalls, this Act is seen as a landmark law for transforming the education system to make it inclusive. There are many aspects of the law that support inclusion of many marginalized groups of children, those with disabilities being one among them.

RTE Amendment Act (2012)

Among other amendments was the amendment with regard to children with disabilities. The amendment not only specifically included children with disabilities under the disadvantaged groups of children but also added another clause to the Act – gave children with severe and multiple disabilities the right to opt for home-based education.

Right of Persons with Disabilities Act (RPWD) 2016 Apart from covering 21 categories of disabilities from the previous 7 categories under the 1995 PwD Act, this new Act emphasizes rights of persons with disabilities – right to equality and opportunity, right to inherit and own property, right to home and family, right to safe and secure living and medical care and reproductive rights among others. Unlike the 1995 Act, the new Act talks about accessibility – setting a 2-year deadline for the government to ensure that persons with disabilities get barrier-free access to physical infrastructure and transport systems. Additionally, it also holds the private sector accountable. This also includes educational institutions “recognized” by the government such as privately owned universities and colleges. A game changer feature of this Act is the increase in reservation for persons with disabilities in government jobs from 3% to 4%.

The new list of recognized disabilities includes three blood disorders: thalassemia, haemophilia and sickle cell disease, and acid attack survivors have also been included in the list, so also intellectual disability, Parkinson’s disease, cerebral palsy, dwarfism and autistic spectrum disorders. With this new Act, the development in the disability arena has been catapulted onto a higher level.

Consolidation

The field of Disability Studies covers the development of the theoretical, research, educational and advocacy models necessary to remove the legal, physical, policy and attitudinal barriers that exclude people with disabilities from society. Disability Studies, as a field of study, challenges the way in which disability is constructed in society and has the potential to benefit people with disabilities as well as society by the participation and presence of people with disabilities in our schools, neighbourhoods, workplaces, families and lives. The interdisciplinary intersections in the field and the emergence of the field of Critical Disability Studies are immense leaps in the academic discourse and social practice for equity and justice for full participation of persons with disabilities in the society. At national and global levels, efforts are on the go since more than half a century for the inclusion and participation of persons with disabilities in all the social platforms. The pace has been set and it definitely is a long steady ahead, especially for India and all other developing countries.

Silhouetted against the above background of Disability Studies is the presentation of inclusive education of children with specific disability (six categories) in the following chapters of this book.

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