Disability Policy Practice in the 21st Century: Putting the Disjuncture Framework to Work

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For today

• A little about us and how we got into this agenda
• Brief overview of social work explicit and implicit curricula
  • Models
  • Policies
  • Analysis of disability in social work curricula
• Disability as disjuncture- A model to guide social work education, research, and practice
• A look towards the future-The impact of economic hegemony, globalization, and technology on addressing disability in social work education, practice, and research
First, A Few Words About Language

- Focus on language is important but must be discussed in a larger context.
- If we truncate discussions of disability to PC language, we lose meaning and respect for the communicator and the receiver.
A Few Words about the Complex Obligations of Deans and Directors

• To uphold policy and legal mandates for inclusion
• Obligations towards faculty
• To provide leadership in explicit and implicit curricula
• Complexity of the educational institution (e.g. interface with disability services and EEO)
• A sticky wicket for sure
A Peek Inside the Social Work Curriculum
Current Overview-Explicit Curriculum

• We reviewed the literature over the past 10 years or more
  • CSWE started to require disability content under "diversity" in SW education (2001)
  • According to Bean and Kreck (2012) 80 % of a sample of Schools of Social Work provide some disability content. But we suggest that all social work curricula discuss disability even without naming it.
• In the social work literature and curricula, disability is discussed as:
  • Disability as embodied condition
  • Disability as social oppression
  • Disability as identity
Current Intentional Explicit Disability Curriculum

- Social work has the framework in place for a progressive approach to disability-humans in environments and diversity, BUT
  - We tend to formally present disability as an impaired, oppressed population in need of services
  - The models taught and inscribed in our scholarship primarily include medical, social, and minority models (to be discussed)
  - A tension exists between disability as embodied condition and disability as human diversity
  - Our policy content focuses on protecting the rights and resource population-specific policies (ADA, ADAAA, Rehab Act of 1973, UN Convention, IDEA)
Explicit curriculum, continued

- Rights policies include ADA and ADAAA, UN Convention on the Rights of Persons with Disabilities (CRPD), IDEA, Rehab Act of 1973
- Resource Policies include SSDI, Rehab Act of 1973
- Some international policy content beyond the CRPD
- Our policies and research are built on qualification on the basis of embodied condition, implying a medical model—as example the ADA and ADAAA definition of disability
What is not labeled as disability content but is:

- Health and illness
- Family function and dysfunction
- Function and dysfunction in micro, messo, exo, and macro systems
- Poverty
- Oppression and discrimination
- Diversity
- Human rights and social injustice
- Policies designed to prevent impairment
We have an opportunity for progressive leadership—we can address oppression, discrimination, helping, and resources while advancing a progressive agenda-

Stay Tuned
Implicit Curriculum

- Social Work has the framework for a progressive approach to disability in the EPAS (2015).

- BUT
  - We use the ADA and The Rehab Act to structure our admissions, responses to students, guidelines for faculty—recall how one qualifies for protection
  - We provide accommodation for students and faculty who have documented conditions—A good start but separate and unequal
  - Many of us and our students are not skilled in accessibility
Implicit Curriculum - We have the Ruby Slippers

We have an opportunity to be leaders and model profound approach to disability as human diversity

Stay Tuned
Two Incomplete Models Of Disability

• Medical-embodied deficit, what is wrong with me?
• Social-disability is imposed by the social environment-what is wrong with you?
A Little More on the Medical Model

• Permanent internal (embodied) medical condition (mental, sensory, cognitive, etc.) intrinsic to the individual
• Interpreted as reducing the individual’s “quality of life”
• Interpreted as affecting the individual’s daily life
A Little More on the Social (Constructed) Model

- Political, social, economic, and other factors that portray disability as exclusion, discrimination, truncation of rights, and devaluation
- Negative social attitudes, limited or nonexistent physical and communication access
Models and Policy

• Models serve as the basis for policy responses
• In essence, all disability policies, even those that masquerade as rights policies, segment people by medical condition
• Disjuncture theory (to be discussed) underpins profound policy change, moving from specialized responses to “those people” to accessibility as its focus
• Example of the ADA-Stephen’s W/C use and reasonable accommodation
• Example-Section 504 of the Rehab Act-hearing booboo
Disability as Disjuncture

• Avoids the binary debate of disability as either embodied or environmental

• Respects and attends to both body and context

• Explains disability as an interactive “ill-fit” between bodies (defined broadly) and environments (defined broadly) (sound familiar?)

• Brings us to query the universe of environmental design and symbol in delineating the category of disability and affixing the value of those who fit within it.
Full juncture

Moderate or compliance juncture

Disjuncture
We propose Disjuncture as the model to integrate the explicit and implicit curriculum

• Attends to the body in context (a social work foundation)
  • Student body
  • Faculty body
  • Environment

• Negotiation of solutions that are not “either-or”

• We can teach about disjuncture and healing it-explicit curriculum

• We can seek to model full juncture in our on-campus and virtual classrooms

• We can seek to model full juncture in our policies and institutional practices-move beyond population specific policies

• We can seek to achieve full juncture through our research
A vision of what could change?

• Reasonable accommodation could be supplanted with access for all: e.g. captioning on all films that does not solely address hearing impairment

• Captioned access responses meet the needs of many:
  • ESL
  • Multitaskers
  • Students and faculty in loud environments
Students and faculty cannot eat on campus

Cafeteria style service

Cannot carry a tray safely

Stigma of asking for special help

Social model environmental barriers

Isolation and exclusion

Problem Map
(DePoy & Gilson, 2017)
Servicebot
Social Work Rocks!!!!

• Student problem solving through solution development in a collaborative context
• Students exposed to accessibility through high tech
• Faculty use of technology to resolve social work problems
• Faculty merit rewards for collaboration and product development in SW
• Model how social work functions to advance technological and commercial agendas within the social justice and access scope of social work
• Holding the university’s feet to the fire for fostering interdisciplinarity
Guidelines for social work in putting disjuncture to work

• Access, access, access
• Technology, technology, technology
• Fairness and equivalence of student admission and retention policies
• Purpose, purpose, purpose in our teaching, policies, research, and practices
  • Examples
    • Servicebot
    • timed tests and attendance policies
    • why are admitting and retaining unqualified students
    • tenure, promotion, workload policies
    • faculty with changing embodied needs
A look towards the future—the impact of economic hegemony, globalization and technology on social work education, practice, and research

• We need to collaborate

• We need to recognize disability as a global phenomenon that as or will happen to everyone

• We need to move from specialized policies to expanded and fair access

• We need to move beyond the 20th century. The disjuncture model is contemporary as it respects and addresses simplicity through complexity

• We need to consider how disability is changed by technology, profit, globalization, and ever-changing trends
Thank you!

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References


