

# Social Model In Practice?

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Paper to accompany the workshop at the Disability Studies: Theory, Policy and Practice Conference, Lancaster, September 2003.



Essex County Council

# **Social Model in Practice?**

## **Introduction**

The social model of disability describes the individual and shared experience that results in people being Disabled. 'Disability' is the shared or common experience that disabled people have of discrimination and disabling barriers. This view of disability within the world has been developed by disabled activists - in particular such people as Michael Oliver and Vic Finkelstein who have written extensively about the subject.

Disability rights organisations were among the first protagonists of the social model of disability, and indeed many of its original activists came from within these organisations. They, in their turn, sought to influence the local authorities as one of the main sources of services to disabled people. This is seen as part of their political and educational role.

Essex County Council (ECC) along with numerous other local authorities have begun to address the challenge of working to the social model of disability within its social care services. The lead on this has been a specialism that works with people with physical and sensory impairments. This is partly a recognition that the social model approach offers a much more positive response to the lives of Disabled People than the traditional models have done.

In response to the challenge that the social model identifies, ECC social care has started to look at how to put the social model into practice and to examine disabled people in their work and what they can do to address barriers, often in partnership with other organisations. The social model is discussed within individual teams and is included in training programmes.

The language of the social model is to be found in many of the council's official publications.

Despite the official adherence to this model of disability within some of ECC work, there is still tension within the local authority. Not all practitioners have a good understanding of the model, and fewer can accurately claim to practice within the model. ECC works within a society that has not adjusted to the challenge of the social model. The local authorities own role within this society is one of rationing and administering available services as well as fulfilling legal requirements. Many of the targets of the authority are judged by central government and can actively work against the implementation of the social model - for example, those around respite care. This has profoundly affected the ability of the ECC social care services to work to this "new" approach and deliver social model outcomes.

However, in ECC social care there are a number of initiatives that are looking to positively address this. Indeed, Essex, are leaders nationally, in a number of areas that touch on this, for example Direct Payments and participation. In ECC there are two connected teams whose specific function is to promote the social model of disability. One of these teams is called the "Independent Living Network" and it's task is to further the social model and independent living principles within the whole range of Essex County Council's activities. The other team is a Social Model Assessment Team (called the Social Model Pilot Project) which is a pilot project being evaluated by outcome measures. Its aim is to offer a service to people with a physical impairment, based on the social model of disability.

# **Independent Living Network Team**

## **Background**

The Independent Living Network team is involved in a wide range of activities, which look to bring the social model into practice across ECC and its partner organisations. Within the confines of this paper I have chosen to address just one aspect of this work, that is, to reflect on issues involved when a Disabled Person from a disability rights organisation moves into the statutory sector with a view to develop social model practice.

This section of the paper is based on my experiences and observations of having worked as a Disabled Person in many different organisations in the United Kingdom and New Zealand. It is my thoughts of both my experiences and my observations of colleagues in similar situations. However, it concentrates on my current post working in ECC Social Care as a policy advisor.

Disabled People in organisations of Disabled People have been pushing for major changes in the form of social model practice. This message and new model is starting to spread, although it is not a quick process, the idea itself can look deceptively simple. It is in practice easier for organisations to continue to work the way that they always have than to implement social model practice. However, parts of the statutory sector and non-government organisations have started to pick it up and in turn they apply pressure on others to start to implement the social model. Organisations have many competing pressures, many of them not consistent with the social model, for example, the performance indicators for respite care.

## **Doing Something**

Various organisations are realising that they have to do “something”, in response to the pressures put on them by other organisations (including organisations of Disabled People) and legislation, such as the Disability Discrimination Act 1995. The “something” varies a great deal and organisations have looked to a number of strategies. Sometimes they may buy in training (e.g. Disability Awareness or Disability Equality), they may ask for an Access Audit, write a policy, or do consultation. They may also start to look to employ people internally to address disability rights related issues. This can be problematic. Just because management has an awareness it should do “something” it does not necessarily follow that it knows how to do this, even if it has their full support. For example, a classic error is Disability Awareness Training.

## **Organisations of Disabled People**

Organisations of Disabled People, in comparison to the many of organisations they wish to change, have:

- very few resources
- limited knowledge of what is required internally to change the organisation
- an awareness of not being told information
- the knowledge that when it counts, more often than not they are not involved in key decision making.

They also know that implementing change within the organisations may not be helpful if the people implementing improvements do not have the knowledge of and commitment to the social model.

Also of importance to Disabled People is that organisations of Disabled People have comparatively;

- few paid positions
- lower wages
- limited contract lengths
- limited benefits e.g. how many have nursery provision
- few opportunities of promotion and a career.

In short, it seems, that if you work for organisations of Disabled People you are unlikely to have equal spending power, working conditions, and career opportunities to those working in the statutory sector.

### **Employment options**

As a disabled person you are aware that historically, there has been discrimination against Disabled People in employment. This is a reality both acknowledged in the academic literature<sup>1</sup>, government strategies such as “Welfare to Work” and in statistics that are available. In Essex, approximately one half of working age people who are disabled are not employed<sup>2</sup>.

According to internal ECC monitoring very few Disabled People who work in ECC identify as Disabled.

Applying for employment for Disabled People has many barriers. One of these is the medical screening part of the process, which is problematic with potentially disabled employees feeling very vulnerable to discrimination.

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<sup>1</sup> See for example, Oliver, M. (1990). *The politics of Disablement*. MacMillan: Basingstoke

<sup>2</sup> Office of National Statistics, Labour Force Survey Autumn 2002.

An effect of this is that Disabled People may feel that the best chance they have of employment is with either a Disabled Persons organisation or in a job that works with disability rights issues. Ironically the result is that Disabled People run the risk of working in the area of Disability Rights though a lack of choice.

### **Issues on moving into organisations to change them**

When people who are from the disability rights organisations move into an organisation that at some level is acknowledging the need to “do something” there are some key questions that need to be addressed.

One of the first questions is why not give the money to the local organisation of Disabled People to do this work? The answer usually given to this question is that organisations need people to do some of this work internally. Being a Disabled Person, using knowledge from the Disability Rights movement, going to work for an organisation that you are meant to change, poses some problems. How effective can you be? You may be the only person in a room full of experts who have a traditional view of disability. Will you lose your disability rights or social model focus in an effort to get on with colleagues and be seen to be reasonable? It is easy to slip back into an old paradigm that you grew up with - and that everyone else around you is using. It is much more difficult for them to see the new paradigm and even more difficult for them to know what this means that they need to change in their work. You will also be asking for your colleagues to give up power - power that they may have spent years trying to acquire. Change is not always welcomed in services where employees may feel that they have had to work with too many changes already.

More importantly, you will be working for an employer who can demand that you behave in certain ways. They pay your wages, judge your performance, agree work plans and create your working environment. They may also have no real knowledge of what it takes to do the work – for example, good participation demands time and considerable commitment. They may think that one person can fix the problem in a short time span, rather than everyone in the organisation having to take responsibility to work in new ways.

Working in the public sector has the added complication of politics with both the small “p” and a capital “P”. The social model (like everything to do with people) is political. However, it is very noticeable with the Social Model where it is explicit, after all people regard it as revolutionary<sup>3</sup>. This can mean employees in the public sector find it difficult using a model which does not hide its political aspect.

### **The essentials for success**

In my experience there are some things that are essential for Disabled People to have success in this situation.

First you must not be isolated in the work environment, you need support internally. Without this internal support it is very unlikely that the social model would be put into practice. Management support of the work makes a significant difference.

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<sup>3</sup> Finkelstein, Vic. (2001). *Personal Journey into Disability Politics*. <http://www.leeds.ac.uk/disability-studies/archiveuk/archframe.htm>



Secondly, as a Disabled Person you also need to work with your employer with regard to how your employment access issues are addressed in the workplace. Individuals may find that this is difficult to do properly when they are eager to be employed and show that they can do it all. Myself (and other disabled people I have worked with) have taken the approach of “interviewing the employer” prior to accepting a job to ensure that the support needed to succeed will be forthcoming. If this support is not given then, in my view, it would be better to seek work elsewhere. This is consistent with the findings of Roulstone, Gradwell, Price & Child, (2003) where assertiveness and making things clear with your employer are highlighted as successful strategies<sup>4</sup>.

Thirdly, external support is essential for this work; much of this comes from organisations **of** Disabled People. This external support can be effective in a number of ways. It can ensure that the organisation is kept aware of the need to address how it responds to Disabled People. Without this, the organisation may decide to do nothing, not prioritise the work, or see the employee as the problem. The external support also gives the employee permission to act and provides a reference point that ensures that the employee does not lose focus on the social model, why it is important and the practical implications that this has. It provides an important place along with the academic dialogue to investigate and develop new ideas.

## **The Essex County Council experience**

In Essex we have been fortunate. We have strong organisations **of** Disabled People. These organisations are active in pushing for change and apply pressure to many of the local statutory organisations and businesses to do this. They also link in effectively with the agenda nationally.

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<sup>4</sup> Roulstone, A., Gradwell, L., Price, J., & Child, L.(1993) *Thriving and surviving at work: Disabled people's employment strategies*. Bristol: The Policy Press. Joseph Rowntree Foundation.

We have had a management in ECC that has been attempting to respond to this pressure. The debate has not been “won” yet, but significant progress has been made with many points being agreed and the responsibility taken by management to work with these.

For example, the Equal Lives strategy is a budgeted strategy that is explicitly and systematically adopted and Independent Living Principles approach. The Best Value review of Older Peoples services has formally meant the adoption of Independent Living Principles for this service. However, the adoption into policy and strategy does not mean that there is Social Model in Practice. However, some very positive practical outcomes are evident in Essex. For example, Essex has a very successful Direct Payments scheme, it also has a very positive advocacy sector, and Disabled People are being involved in the decision-making processes of the Council in many different ways.

## **Social Model Pilot Project**

The social model pilot project, or assessment team, was set up in response to a piece of action research, which called for practice within Independent Living using the social model of disability. This was to be based within the Equal Lives framework, to which Essex County Council has a commitment.

The team comprises three Occupational Therapists, three Social Workers and one Team Clerk. Their role is to offer community care assessments to service users, work with them to identify the disabling barriers they experience in their lives and the best way of overcoming them. They are recording a ‘list of needs’ or ‘disabling barriers’ and prioritising them using both the local authorities priority system and the service users own priorities.

A researcher, Jenny Morris, is employed to evaluate the team's work and is also acting as a consultant to help the team translate the social model theory into their practice. She is using outcome measures and will interview service users about their experiences working with members of the team.

The team has been set up to operate for one year from March 2003 and social workers and occupational therapists have been seconded from local teams. During the first nine months they are working as a discreet team, offering their services to the public. For the last three months they will return to their original teams and continue to work in them, with a role of furthering practice of the social model within these teams.

One of the immediate effects felt was brought about because of social workers and occupational therapists working closely together. This means that when a service user identifies a barrier that can be dealt with by an aid or adaptation, an occupational therapist can visit quickly to assess the situation and make a recommendation. Previously an electronic referral had to be made to the O.T. team, the service user was then placed on a waiting list and sometimes six months or more lapsed before they received a visit from an occupational therapist for assessment. We have found that this has had profound effects on the quality of service users' lives, in a short space of time. For example, one lady with a life limiting condition and high pain levels was able to stay in her own home and maintain her independence after being provided with a riser recliner chair. She was then able to rest during the day and get in and out of her chair independently.

From the occupational therapists perspective, if they have visited a service user and discovered that they need a personal assistant to remove barriers to independence, a social worker can immediately be brought in to add to the assessment and describe the various ways of financing this service. For example, an occupational therapist responding to a request for a stair-lift discovered that the service user was experiencing barriers to personal care.

On a subsequent visit a social worker went with the occupational therapist and they were able to discuss the various ways of providing a personal assistant. The social worker then added to the assessment, made an application to the panel and the service was provided. This way of working prevented a long wait for a referral to be made to the physical impairment team, the case to be allocated to a social worker and a second assessment completed before the service could be provided.

Another part of the process for the team has been their recognition of the need for openness to comment and discussion about their assessments, to ensure every effort has been made to work according to the social model. The team has regular case discussions and their work is sent to the researcher in her role as consultant, for comment. It has been a difficult but a valuable lesson to depersonalise criticism and understand the effects of working in an organisation with a different value base, reflecting that of the wider society and influencing practitioners thought processes and assessments.

The team has mentors from the local authority and the Disability Rights organisations, as well as the researcher/consultant who is a disabled person. They are also working with a group of service users to ensure they have a wide view of the recipients of the service. At times this input can be confusing, but each individual needs to be understood against the background of the culture in which they are working.

## Conclusion

Both the Independent Living Network and the Social Model Team have been brought into being as islands of social model practice within a local authority County Council Department. Their remit is to educate and influence the wider environment as well as developing good practice and providing a research setting.

As such, their position is often uncomfortable as it is never easy to occupy a minority position in an alternative culture. Not surprisingly, neither team has "succeeded" in putting in place the social model into practice comprehensively. Indeed, this is an impossibility, when we are involved in a wider society that is yet to comprehensively adopt the social model approach. As such, disappointment seems to be an integral part of the experience. The Disability Rights organisations perceive a lack of radicalism that disappoints them. For example, the Social Model team occupies a building that is inaccessible for wheelchairs. The practitioners feel a disappointment in their less than perfect practice, underlined by the constant analysis to which it is subjected.

However, this feeling is interspersed with times of clarity and hopefulness. There have been some considerable successes, for example, when the Social Model Pilot Project practitioners have met with a particularly positive service user, been able to make a difference in someone's life or understood a particular point in the model of working. The independent living network has had a number of successes in changing how both how ECC works and our partner organisations. This is the social model coming into practice by steps, rather than a "big bang".

Central to all these steps is the pressure exerted by Disabled Peoples organisations. This pressure can take a number of forms from direct action, to the development of ideas, to just being there. Organisations of Disabled Peoples can influence organisations across the country - although they may not be aware themselves of the effect and power that they have in giving those in statutory organisations the permission to act to put the social model into practice.

In our experience the social model is not simple, easy or quick to put into practice given today's society. However, much more can be done and it is the model that offers the potential of a much more positive and inclusive future than traditional models can. The more we put it into practice, the greater the scope there is for spreading the social model as it gradually works its way into society.