BOOK REVIEW

Disability Rights and Wrongs

TOM SHAKESPEARE
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We attended the UK Disability Studies Association conference in Lancaster in September 2006, which included the launching of Tom Shakespeare's book *Disability Rights and Wrongs*. Amidst hopeful and especially inquisitive nods during his introductory comments, there were background grumbles and rumbles even before Shakespeare uttered 10 sentences. For many participants from the Nordic countries, the grumbling was both surprising and interesting, and has become increasingly significant in our understanding how different cultures understand disability studies, disability politics and perhaps more fundamentally, questions about reality and science.

As one who initially embraced the social model because it fit his own experiences and academic studies, Shakespeare describes himself as a "critical friend" (Shakespeare 2006:4) of the British social model. Having the dual position of disabled activist and disability scholar makes his critical reflections presented in this book deserving of attention. What we present here is partially a review of Shakespeare's book, combined with our experiences at the Lancaster book launch and subsequent responses to Shakespeare's book (Sheldon *et al*. 2007, Vehmas 2007, 2008).

When introducing his book, Tom Shakespeare proposed that the British social model of disability has ended up in a "cul-de-sac". As he said, "Entering a blind alley, you don't necessarily understand it at once ... often you have to walk down that road a while before you realise you're at a dead end. When it comes to the social model of disability, it has taken years, but now maybe we have to realise we're in a cul-de-sac".

A Road that Felt Promising but Ended Up in a Tautological Circle?

Shakespeare's book offers several well-articulated arguments about why the British social model of disability should not only be criticized, but be abandoned. The central part of his analysis is presented in the book's first part "Conceptualising disability", but also parts two "Disability and bioethics" and three "The social relations of disability" reflect Shakespeare's ambition of unveiling the numerous inconsistencies in different contemporary disability discourses, especially those influenced by social constructivism.

Shakespeare claims that critique within the existing social model will no longer do, primarily because the model's proponents position themselves as representing the one "true" approach, in this instance that of disability. We support this contention, which severely limits scientific researchers in the academic liberty and responsibility of seeking answers freely, without regard to predetermined givens of what is considered ontologically true and/or epistemologically how to find one's way there. Given its strong position in Britain, the social model in many ways functions as a self-fulfilling prophecy: if a researcher has research questions or findings which deviate from those deemed acceptable within the social model, it is the researcher who often must re-formulate corrections in line with hegemonic "truths". The UK social model has thus become an inflexible construction which discourages possibilities for inviting or generating new insights from alternative perspectives. Instead, many extremely competent UK scholars seem to spend their (valuable) time adding and subtracting bits and pieces in order in keep the thing afloat, a bit like applying bandages to the sinking Titanic.

A central point from Shakespeare shares many similarities with Thomas Kuhn's concept of a crisis within the practice of "normal science" (Kuhn 1970). For Shakespeare this crisis is a symptom of a flaw in the very foundations of the social model. Shakespeare's core argument of why the British social model of disability should be abandoned is that the model is based on the supposed existence of several dichotomies, which have little basis in empirical reality: The social model is "a good idea that became ossified and exaggerated into a set of crude dichotomies which were ultimately misleading" (Shakespeare 2006:13). He questions the existence of these dichotomies and seeks to illustrate how those who take these dichotomies for granted fail to come up with consistent answers. Of central importance here is the alleged dichotomy between the social model and the so-called medical model of disability. Shakespeare contends that the existence of a medical model as opposed to a social one lacks substantial evidence: although there is a vast range of medical approaches to disability – many of which can and should be questioned – there is hardly anything supporting the notion that there is a systematic and unified medical model explicitly developed within the medical field. For proponents of the social model however, the medical model has nicely served the purpose of being the antagonistic perspective one can easily criticize.

He then continues to question the reality of two other dichotomies: disability versus impairment, and that of disabled versus non-disabled people. These dichotomies accent aspects related to social versus medical conceptions of disability, above all the question of "nature's given order" as opposed to "conventions in a society". In Shakespeare's view, it is futile to grapple with questions related to disability if everything involving aspects of biology are excluded as irrelevant.

Is Shakespeare's Critique Plausible?

The fundamental problem addressed by Shakespeare is that the social model takes for granted the fact that social phenomena are more ontologically "real"

than the physical and biological conditions a person might have. Shakespeare applies Ian Hacking's critique of social constructivism, which we find a very fruitful and relevant discussion. Hacking (2003) effectively points out that problems like those mentioned above are a version of a classical philosophical question: what is most real, the objects in the world surrounding me, or my subjective thoughts and ideas? In this respect the social model's dismissive attitude towards perspectives involving nature/biology leaves one with the impression that the social model is really a solipsistic project tacitly presupposing that reality is "all in your head". An antagonistic view – that only measurable objects outside me are "real" – would mean taking a sort of extreme positivistic position. Shakespeare does neither: how refreshing! As the German idealistic philosopher as well as neo-Hegelian philosophers he refers to, Shakespeare sees humankind as autonomous, free agents, partly limited by the laws of nature. Having refuted the dichotomies of the social model, he goes on making suggestions for new approaches to the concept of disability.

Disability as a Complex Interaction

Shakespeare sees disability as "a complex interaction" between factors intrinsic and extrinsic to an individual. For him this way of approaching disability means first, considering both the social conventions and the natural/biological circumstances resulting in the formation of the concept. Secondly, the complexity of conventions and natural/biological circumstances respectively can also be analysed. The basis for this approach is the ambition of obtaining thicker descriptions (Taylor 1989) instead of an oversimplified model.

For Shakespeare, the social model has served as a unifying idea that, being relatively simple, could be explained to politicians and decision makers. As Shakespeare recognizes the social model's potential for liberation, he at the same time points to the costs: above all he discusses the difference between identity as a political project and identity formation as an authentic cognitive and social process where a person's unique potentials are realized. This latter understanding of identity is influenced by Axel Honneth and Nancy Fraser (Honneth 1995, Fraser & Honneth 2003). This also undeniably involves strong liberating concepts as equal rights and the moral claim for redistribution. In this manner, Shakespeare can also be said to attempt the reconstruction of the strengths of the social model while disposing of some weaknesses at the same time. However, he is clear in his rejection of the notion that one can have it both ways: a consistent scientific approach to the concept disability can never be an easily accessible model serving mainly political interests.

In parts II and III Shakespeare contributes some thought-provoking ideas around current topics and debates in the bioethics field and concerning the social relations of caring. Shakespeare discusses a variety of issues. What they all have in common are that they have been framed in certain ways under the social model, often to the extent where some discussions have stopped up and been replaced by fixed opinions. Shakespeare does not offer a whole new under-standing or provide solutions to these debates, but tries to illustrate how viewing disability as a complex interaction might shed new light on old discussions.

Concluding Comments

The various stormy reactions to this book (Sheldon *et al.* 2007, Vehmas 2007, 2008) are somewhat puzzling to most of us in the Nordic countries. Our societies have had numerous ''social models'' when conceptualizing disability since the 1960s, including that disability is complex and contextual/relational, an interaction among individuals, environments and society. Hence, the British social model represents little that is new. Also intriguing is the social model claim that charity is something negative, often set up in opposition to rights which are seen as positive. The British charity campaigns do have a long history of poor quality service provision, and many upper-class dinners raise money which may alleviate the public conscience while doing little to redistribute the wealth. But this does not make charity itself a bad thing, as Shakespeare points out.

The book is accessible, relatively inexpensive, and full of food for thought. It is a book not without problems: some details are slightly erroneous, and more adequate referencing would have been wise. Sometimes it feels as if this is three small books put inside one cover, such that the different parts do not quite fit together. Perhaps the book's sub-title should have been ''Tom Shakespeare's ideas on some current disability issues''? And some have objected to the title ''Rights and Wrongs'', which is witty and catchy, but can be interpreted as his telling others what is right or wrong. Yet, if celebrating diversity is something we are aiming for in our societies, this must surely include social scientists and philosophers whose opinions one does not share? This book should be read with an open mind, in spirit with the intrepidity and honesty with which it was written. This book is highly recommended for students and researchers in disability studies and related fields, perhaps especially in the Nordic countries.

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