Historicizing *the art of belonging*. Disability, activism and social science in the United Kingdom and the Netherlands since the 1960s[1]

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Introduction

An important way to practice the art of belonging, to refer to the conference theme, is to form disability groups. As you maybe know, there are striking differences in the way people with disabilities from different countries practice the art of belonging in the formation of disability groups, which raises the question how the formation of disability groups is determinse by national, or maybe even local contexts.

This is one of the themes I want to investigate further, now I have recently finished my PhD research about the integration of "the blind" in the Netherlands in the twentieth century.[2] Central to this new research is the historicizing of concepts like the 'social model', 'new social movements' and 'human rights'. Instead of using these concepts for my analysis I investigate how and why these concepts were used (or not) in the formation of disability groups.

In this paper I will answer the question about differences in the art of belonging by making a sketchy historical comparison in the use of the social model by cross-disability groups in the United Kingdom and the Netherlands.

Disability in the UK and the Netherlands, 1996

For my case study I want to take as my starting point the year 1996. During this year in both the UK and the Netherlands books, written by disabled people, were published. The books perfectly reflected the difference in 'disability movement' – as they call it - in both countries. The British book, titled *Disability Politics: Understanding Our Past, Changing Our*

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[1] This paper is based on my article 'Historicizing the social model: Some preliminary thoughts about the history of disability, science and politics in postwar Britain and the Netherlands', in: *Studien des Aachener Kompetenzzentrums für Wissenschaftsgeschichte* (Kassel: Kassel University Press, 2013) in press.

[2] Paul van Trigt, *Blind in een gidsland. Over de bejegening van mensen met een visuele beperking in de Nederlandse verzorgingsmaatschappij* (Hilversum: Verloren, 2013) in press.

Future, is written by Jane Campbell and Mike Oliver. The authors consider the history and future of the disability movement on the basis of interviews with disability activists. The origins of the movement were seen in the 1960s 'with the coming of the 'age of affluence', when disabled people began to organize themselves around issues of income, employment, rights and community living (...) in order to secure a reasonable standard of life'.[3] In the 1980s a transformation took place in 'our understanding of disability'.[4] Thanks to 'new social movements', disabled people began to 'recognize that the problem of disability is externally located and that our exclusion from society is a human rights issue'.[5] In the 1980s the British Council of Disabled People was set up and, something that was very important to the authors and interviewees, it 'took on board the social interpretation of disability'.[6] To quote one of the activists: 'I think the thing that started to make it clearer was the total acceptance of the social model as being the core of the movement, which it soon became. It was something that people could then adopt and feel part of'. In contrast to disability being individual limitation or loss, disabled people themselves redefine 'the problem of disability as the product of a disabling society'.[7] To quote again one of the activists: 'the social model was an immense liberation to me'. What became clear from this book was that the social model of disability, as it was developed in 1980s, was seen as the fundamental principle of the movement and midway through the 1990s it was still the guiding principle, although this was contested.

The Dutch book, titled *Trots en Treurnis* [*Pride and sadness. Disabled in the Netherlands*], gives a very different picture.[8] It was presented as the first book written almost entirely by disabled people and the first book from the social perspective on disability. There is not a lot of history in the book, simply because there is not a movement to write a history about, although there were a lot of small self-advocate associations. In the book the social model of disability was presented as a new and important perspective for

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[3] Jane Campbell and Mike Oliver, *Disability politics: understanding our past, changing our future* (London: Routledge, 1996), 19, 60.
[4] Campbell and Oliver, *Disability*, 19.
[5] Ibidem, 62.
[6] Ibidem, 80.
[7] Ibidem, 103, 105.
[8] Agnes van Wijnen, Yolan Koster-Dreese and Arko Oderwald, ed., *Trots en treurnis. Gehandicapt in Nederland* (Amsterdam: Babylon-De Geus, 1996).

Dutch people with disabilities. But when we have a closer look at the content, the social model was not a guiding principle as it was in the UK. In the first place there was a lot of attention paid to the body in the Dutch book. That is striking in comparison to the British ignorance of the body. Disability activists in the UK tended for a long time to give little attention to the body in their struggle for equality. The model presupposed a distinction between impairment, the body, and disability, a social construction. In the social model the emphasis was not laid on impairment as a medical deficit, but on disability, because the latter concept was constructed and had the opportunity to change. In the struggle for the same rights and the fight against discrimination and exclusion, it was helpful to emphasize the possibility of deconstructing and reconstructing disability.[9] In the Dutch book another strategy was found, namely stressing the importance of difference made by the body.

Secondly, in the Dutch book disability was still seen by some contributors as a welfare and social security issue. The perspective of civil rights and of identity politics was presented in the book by authors from abroad; by Theresia Degener from Germany and Vic Finkelstein from the UK. In the book it is acknowledged that the perspectives of the social model and civil rights are new in the Dutch situation, but a real awareness of the importance of the changes disability movements abroad had made, namely from social security to civil rights, was absent.

The different content of these two books raises the question of how we can explain the difference in the application of the social model.

Two histories of the social model

If we interpret the emergence of the concept in terms of science, the social model must be seen as an alternative to the medical model. Or to formulate it slightly differently: a social scientist's model with which disabled people can fight the power of medicine and the power of medical doctors. In the British context this is an important observation. In the postwar system of social security in the UK, doctors had a lot of power in defining who was work-disabled and who not, and, as a consequence, in defining the social situation of disabled people. Also the practice of rehabilitation, developed in particular in order to get

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[9] Bill Hughes, "Disability and the body", in *Disability studies today*, ed. Colin Barnes, Mike Oliver and Len Barton (Cambridge: Polity, 2002), 58-76.

disabled veterans back to work, was a medical practice.[10] So medicine was very important in the inclusion and exclusion of disabled people in society. The social model was therefore so powerful because it was an alternative to the dominant medical view of disability. To a certain extent this seems self-evident: of course medicine was dominating disability, but if we have a look at the Dutch situation a different picture emerges.

The book *Pride and sadness* is, as far as I can see, right in claiming to be the first book in which disabled people themselves have put forward the social model. However, the opposition to the medical model and the conviction that a radical change of society towards disability was required were not new. These views had already been put forward by the representatives of counter cultures in the 1970s, but rarely by disabled people themselves.[11] Human and behavioral scientists, like psychologists, were very influential in this respect, and, more generally, this group of scientists, the so-called 'interior designers of the welfare state', can be seen as very important in determining the place of disabled people in society.[12] Let me explain that a little bit more: the Dutch welfare state was, especially in comparison to the UK, built up relatively late but in a very extensive manner. Besides guaranteeing an income for every citizen, a lot of money was invested in social work, the immaterial side of the welfare state. Rehabilitation or reintegration for example was, as Marcel Hoogenboom argued, 'characterized by a strong emphasis on social engineering, that is on the reintegration of disabled people into society rather than into the labour market'.[13] Because of the extensive material facilities and the lack of rehabilitation

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[10] Julie Anderson, *'The Soul of a Nation' The Second World War, Bodies and Rehabilitation in Britain* (Manchester: Manchester University Press, 2011); Anne Borsay, *Disability and social policy in Britain since 1750: a history of exclusion* (Basingstoke: Palgrave Macmillan, 2005).
[11] Evelien Tonkens, *Zelfontplooiingsregime, de actualiteit van Dennendal en de jaren zestig* (Amsterdam: Bert Bakker, 1999).
[12] Ido Weijers, *Terug naar het behouden huis. Romanschrijvers en wetenschappers in de jaren vijftig* (Amsterdam: SUA, 1991); Ido de Haan and James Kennedy, "Progress, Patients, Professionals and the Psyche. Comments on Cultures of Psychiatry and Mental Health Care in the Twentieth Century", in *Psychiatric cultures compared. Psychiatry and mental health care in the twentieth century: comparisons and approaches*, ed. Marijke Gijswijt-Hofstra, Harry Oosterhuis, Joost Vijselaar, Hugh Freeman (Amsterdam: Amsterdam University Press, 2005), 424-437.
[13] Marcel Hoogenboom, "The Netherlands: Two Tiers for All", in *Regulating the Risk of Unemployment. National Adaptations to Post-Industrial Labour Markets in Europe*, ed. J. Clasen and D. Clegg (Oxford: Oxford University Press, 2011), 75-99: 95. Cf. Kees van Kersbergen, "Religion and the Welfare State in the Netherlands", in*Religion, class coalitions and welfare states*, ed. Kees van Kersbergen and Phillip Manow (Cambridge: Cambridge University Press, 2009), 119-145.

practices aimed at going back to work, disabled people were less dependent on the judgment of medical doctors. They had a lot more to do with human scientists, who developed specific approaches for specific groups of disabled people. This is reflected precisely in the way self-advocate associations are structured. They are divided along the lines of all possible disabilities.[14] We can observe a process of what Bram de Swaan has called proto-professionalization: people were going to understand themselves with the help of professional concepts.[15] Of course this was also the case in the UK, but the framing of disability by doctors was much more negative and with more social consequences than the approach of the human/behavioral scientists in the Netherlands. Moreover, the medical model was already contested by these human and behavioral scientists in the 1970s, as I have already mentioned.

To conclude

By historicizing a model and taking into account national contexts my paper has hopefully led to a better understanding of (the history) of disability groups and the contextual dimensions of the art of belonging. The differences between disability groups in the United Kingdom and the Netherlands were explained by differences in welfare state arrangements and political culture. Still I am not satisfied with the imaging of disability groups lagging behind exemplary groups in Anglo-Saxon countries, but I am convinced a further historical investigigation of concepts like the 'new social movements' and 'human rights' will help us to better understand disability groups in different countries.

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[14] Dick Oudenampsen and Majone Steketee, "De patiëntenbeweging: van afhankelijkheid naar eigen regie", in *Emancipatie en subcultuur. Sociale bewegingen in België en Nederland*, ed. Thijl Sunier, Jan Willem Duijvendak, Sawitri Saharso and Fridus Steijlen (Amsterdam: Instituut voor Publiek en Politiek, 2000), 74-97.

[15] Abram de Swaan, *In care of the state: health care, education and welfare in Europe and the USA in the modern era* (New York: Oxford University Press, 1988).