

Defining Disability

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1. A physical or mental condition that limits a person's movements, senses, or activities.

2. A disadvantage or handicap, especially one imposed or recognized by the law.

(Oxford Dictionaries)

3. a physical or mental condition that makes someone unable to act in a way that is considered usual for most people (Cambridge English Dictionary)

Sociological and psychological theorists regard DISABILITY as a complex of constraints that the able-bodied population imposes on the behavior of physically impaired people.

People with a **disability** may include:

- people who are blind or partially sighted
- people with learning or intellectual disabilities
- people who are deaf or hearing impaired
- people with a physical disability
- people with long term illnesses
- people with mental health or psychological difficulties
- people with an acquired brain injury

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I. INTRODUCTION

The most commonly cited definition is that of the World Health Organization in 1976(1), which draws a three-fold distinction between impairment, disability and handicap, defined as follows.

A **disability** is an umbrella term, covering impairments, activity limitations, and participation restrictions. **Impairment** is a problem in body function or structure; an activity limitation is a difficulty encountered by an individual in executing a task or action; while a participation restriction is a problem experienced by an individual in involvement in life situations. (WHO, 1976)

Thus, **disability** is a complex phenomenon, reflecting an interaction between features of a person's body and features of the society in which he or she lives.

The convention on the Rights of Persons with Disabilities (2006), the first legally binding disability specific human rights convention, adopted by the United Nations gives two descriptions of disability.

The preambles to the convention states that "Disability results from the interaction between person with impairments and attitudinal and environmental barriers that hinder their full and affective participation in society on an equal basis with others." Again it emphasizes that "persons with disabilities are those who have long physical, mental, intellectual or sensory impairment which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others."

According to the United Nations Standard Rules on the equalization of Opportunities for Persons with disabilities:

The term "**disability**" summarizes a great number of different functional limitations occurring in any population in any country, of the world. People may be disabled by physical, intellectual or sensory impairment, medical conditions or mental illness. Such impairments, conditions or illnesses may be permanent or transitory in nature.

In 1976 WHO draws a threefold distinction between **impairment**, **disability** and **handicap**. 'An **impairment** is any loss or abnormality of psychological, physiological or anatomical structure or function, a **disability** is any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being, a **handicap** is a disadvantage for a given individual, resulting from an impairment or a disability, that prevents the fulfilment of a role that is considered normal (depending on age, sex and social and cultural factors) for that individual'.

- An '**Impairment** is lacking part of or all of a limb, or having a defective limb, organ or mechanism of the body'. '**Disability** is the disadvantage or restriction of activity caused by contemporary organizations which take no or little account of people who have physical impairments and thus excludes them from the mainstream of social activities'.

Let's take a look at some definitions of the word "Disability" as defined by various organisations around the world.

The **Disability Discrimination Act (DDA)** defines a **disabled person** as someone who has a physical or mental impairment that has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities. (DDA, 1995)

The DDA sets out the circumstances under which a person is 'disabled'. A person is considered to be disabled if:

This means that, in general:

- the person has an impairment that is either physical or mental;
- the impairment has adverse effects which are substantial;
- the substantial adverse effects are long-term; and
- the long-term substantial adverse effects have effects on normal day-to-day activities

ADA (American with Disability Act) Definition of "disability"

The ADA has a three-part definition of "disability." The ADA defines a person with a disability

a person who has a physical or mental impairment that substantially limits one or more major life activity. This includes people who have a record of such an impairment, even if they do not currently have a disability. It also includes individuals who do not have a disability but are regarded as having a disability.

\ The ADA also makes it unlawful to discriminate against a person based on that person's association with a person with a disability. This definition, based on the definition under the Rehabilitation Act, reflects the specific types of discrimination experienced by people with disabilities. Accordingly, it is not the same as the definition of disability in other laws, such as state workers' compensation laws or other federal or state laws that provide benefits for people with disabilities and disabled veterans (ADA, 1990)

Under the ADA, an individual with a disability is a person who:

1. Has a physical or mental impairment that substantially limits one or more major life activities
2. Has a record of such an impairment
3. Is regarded as having such impairment.

Three dimensions of disability are recognized in the International Classification of Impairments, Disabilities and Handicaps (ICIDH)

A new version of the ICIDH is now being drafted, to embrace developments in the field since 1980, and criticism of the first ICIDH. A range of countries, including Australia, is involved in the work with the World Health Organization, as well as organizations representing people with a disability. One of the major developments is the more specific recognition of the social construction of the third dimension of disability. It is being proposed that this third dimension be renamed 'participation', and that its definition recognize the critical role played by environmental or contextual factors in restricting full participation.

Definitions of the ICIDH 1980

The **International Classification of Impairments, Disabilities and Handicaps (ICIDH)**, provides a conceptual framework for disability which is described in three dimensions-impairment, disability and handicap:

- **Impairment:** In the context of health experience impairment is any loss or abnormality of psychological, physiological or anatomical structure or function. Impairment is considered to occur at the level of organ or system function. Disability is concerned with functional performance or activity, affecting the whole person.
- **Disability:** In the context of health experience a disability is any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being.
- **Handicap:** In the context of health experience a handicap is a disadvantage for a given individual, resulting from an impairment or a disability, that limits or prevents the fulfilment of a role that is normal (depending on age, sex, and social and cultural factors) for that individual.

The third dimension: 'handicap'-focuses on the person as a social being and reflects the interaction with and adaptation to the person's surroundings. The classification system for handicap is not hierarchical, but is constructed of a group of dimensions, with each dimension having an associated scaling factor to indicate impact on the individual's life.

A **disability is a functional limitation or restriction of an individual's ability to perform an activity**. A disability becomes a "handicap" because of environmental or attitudinal barriers that limit the opportunity for a person to participate fully. Negative attitudes or inaccessible entrances to buildings are examples of handicaps.

A disability is a condition or function judged to be significantly impaired relative to the usual standard of an individual or group. The term is used to refer to individual functioning, including physical impairment, sensory impairment, cognitive impairment, intellectual impairment mental illness, and various types of chronic disease.

Disability is conceptualized as being a multidimensional experience for the person involved. There may be effects on organs or body parts and there may be effects on a person's participation in areas of life. Correspondingly, three dimensions of disability are recognized in ICF: body structure and function (and impairment thereof), activity (and activity restrictions) and participation (and participation restrictions).

II. DISABILITY AND ANTHROPOLOGY

Anthropology has provided a theoretical context for the study of disability. Social and cultural anthropology and medical anthropology have enriched our understanding of disability. Anthropological interpretations of disability feature concepts of “the other,” deviance, and stigma that can expand our interpretations of human behavior in the social environment.

Each sub discipline of Anthropology overlap with disabilities are often labeled “the Other,” somehow separate from people who are not considered to have disabilities (Ablon, 1995).

The ethnological approach to otherness, to difference, to not of us, as a topic of study is a uniquely compelling aspect of anthropology that makes it a natural discipline to engage in disability studies. To researchers in the social science and humanities disabled people and disability, like sick people and illness in the past, are becoming increasingly compelling examples of otherness. Severe, visible, physical disability is even more compelling. Anthropologists seek the other to find themselves. The newly identified (primarily by other disciplines) otherness of disability attracts established ethnographers looking for a renewal of their experience of other (the culture shock experience?) in a known field site. It also attracts people looking for otherness closer to home. Disability also attracts anthropologists because it is a socially and culturally constructed category with important implications about how societies differentially distribute power (Kasnitz and Shuttleworth, 2001).

Individuals are impaired if they experience (or are perceived by others to experience) physiological or behavioral statuses or processes which are socially identified as problems, illnesses, conditions, disorders syndromes, or other similarly negatively valued differences, distinctions, or characteristics which might have an ethnomedical diagnostic category or label.... Disability exists when people experience discrimination on the basis of perceived functional limitations. (Kasnitz & Shuttleworth 2001, p. 2)

The “otherness” of disability is unique, however, because anyone may become disabled at any time (McDermott & Herve, 1995). Anthropology’s “genuine fascination” with “the Other” can logically inform the field of disability studies, but this connection has not fully been utilized (Cervinkova, 1996; Edgerton, 1984; Kasnitz, 2001; Klotz, 2003; McDermott & Herve, 1995).

Each subdiscipline of anthropology overlaps with disability studies, and many important contributions to the study of disability are rooted in anthropology. Linguistic anthropologists have studied deaf sign languages and the culture of language, but this has not been a main focus of linguistic anthropology (Fjord, 1996; Groce, 1985; Padden, 2000; Senghas, 2002; Stokoe, 1980; Washabaugh, 1981). **Archaeology** has contributed to the understanding of disability among prehistoric human ancestors, but this contribution has been limited (Bridges, 1992; Hubert, 2000; Klotz, 2003; Schacht, 2001). Anthropologists note that the field of disability studies used theoretical constructs such as culture, stigma, and status transitions (liminality) to explain and explore disability (Gleeson, 1997; Shuttleworth, 2004).

The largest Anthropological contribution to disability studies has come from cultural and medical anthropology. It is universally acknowledged that “some range of physical and behavioral differences are recognized in all societies,” but the reactions to those differences vary widely between cultures and communities. (Groce, 1985; Klotz, 2003; McDermott, 1995; Rao, 2006; Scheer, 1988; Shuttleworth, 2004). Disability is a “complex social, cultural, and biomedical phenomenon” (Klotz, 2003). Anthropologists have contributed to the understanding of disability as a sociocultural experience and a physical or mental condition (McDermott, 1995; Scheer, 1988).

Shuttleworth (2004) and others assert that anthropologists have only begun to explore disability but have been prominent voices in the field of disability. Anthropological theories have influenced the public discourse on disability by focusing on cultural conceptions of disability. The cultural relativity of disability has had a profound influence on the treatment of people with disabilities over time (Cervinkova, 1996; Klotz, 2003). The need for non-discrimination should be taught to young children so that the disability does not become a handicap. The attitude of the public towards disability condition is the hardest burden to bear. Sometimes it is stereotypic in nature.

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