

Article Response 1

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When I began this course with my “Positionality Video” I was somewhat confused regarding what privilege was and how it was possible that I was oppressed in some facets of life yet I was able to move forward in life. My position was that I had experienced the oppression of both classism and sexism and in spite of this I was able to have some success in these areas. Was this due to ableism? I was not sure. Sensoy & DiAngelo’s chapter “Understanding Privilege Through Ableism” provided me with some background information that I needed in order to begin to comprehend these complex issues and my questions surrounding them (2017, pp.80-101).

Sensoy & DiAngelo define privilege as “not the product of fortune, luck, or happenstance, but the outcome of advantages some have and others do not” (2017, p.81). The concepts of structural privilege in the example of left-handed people (2017, p.82) assisted me in arriving at a greater understanding of the external and structural dimensions of privilege (2017, p.82) as both my father and my daughter are left-handed. I have observed some of their struggles in a “right-handed world. In fact, my Dad was so annoyed with right-handed refrigerators that we had a left-handed refrigerator in our home.

Examples of ableism “illustrate that privilege has the following external and structural dimensions:

- The integration of dominant group norms into the structures of society
- The construction of what’s normal and not-normal by the dominant group
- The invisibility of privilege for the dominant group” (Sensoy & DiAngelo, 2017, p. 83).

Privilege also embodies internal and attitudinal dimensions. It “has the following invisible internal and attitudinal effects:

- The belief that your group has the right to its position
- The internalization of messages of your group's superiority
- The lack of humility that results from your limited knowledge of the minoritized group
- The invisibility of your privilege to you." (Sensoy & DiAngelo, 2017, p. 90).

Although I understand that my privilege is "embedded in definitions, language, structures, and systems of society (2017, p.85), I continued to have questions about how the areas of oppression in my position could exist while still claiming privilege. Through Sensoy & DiAngelo's assertion that "we can be oppressed in one axis of life and still experience privilege in another." (2017, p.98) I discovered clarification to this dichotomy.

The separation of the concepts of impairment and disability in the Social Model of Disability gave me a strong differentiation between an individual's personal challenge of impairment and society's role in declaring the impairment as a disability where impairment is "individual and private whereas disability is structural and public" (Davis, n.d., p.197). Strengths of the social model of disability include that it has been shown to be politically effective, instrumental in identifying social barriers for removal, and in improving the self-esteem of disabled people (Davis, n.d., p. 198).

A weakness of the social model is how the social model "so strongly disowns individual and medical approaches, that it risks implying that impairment is not a problem" (Davis, n.d., p. 199).

The medical or individual model of disability "defines disability in terms of individual deficit" (David, n.d., p. 197). This made me wonder about our approach at the school, school board, and

Education Ministry levels. Do these areas of education use a social model of disability or a medical one? I think back to IPPs (IEPs in some jurisdictions) in my province as well as the corresponding documentation from medical professionals. Is the language used focused on what the student is unable to do (deficit model) or does the documentation separate impairment from disability? For example, in today's class presentation by Marlee, I loved the language use of "exceptionalities" instead of disabilities. I also think about my son's learning disability of written expression. When he was diagnosed the language used was disability and later on it was changed to a "Written Expression Disorder". Our psychologist told us that according to the Alberta government, a "disability" might change over time but a "disorder" continues indefinitely. I continue to wonder about who decides on this type of languaging? Is there room for a blend of the social and medical models of disability so the student is empowered and supported in every way necessary so teaching and learning engages a holistic perspective of the education of the student? I will need to give this more thought and research prior to making any statements in this regard.

References

Davis, L. (n.d.). *The disability studies reader / Lennard J. Davis [electronic resource]* (Fifth edition.). Routledge.

Sensoy, O., & DiAngelo, R. (2017). Understanding Privilege Through Ableism in *Is everyone really equal?: An introduction to key concepts in social justice education* (pp. 80-101).

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