Chapter 2 Disability as a Social Justice Imperative: Historical, Theoretical, and Practical Implications

Adam Moore

Roger Williams University, USA

ABSTRACT

Educators in the United States have the legal obligation to ensure that students with disabilities are given equitable access to an education. Under the Individuals with Education Act (2004), Section 504 of the Rehabilitation Act (1973), and the Americans with Disabilities Act (1990), individuals with disabilities cannot be discriminated against based on their disability and must be provided the same educational opportunities as their non-disabled counterparts. While most teacher preparation programs as well as educators in higher education are knowledgeable of these laws, there is a striking absence of learning about the historical implication of segregation, abuse, and maltreatment of individuals with disabilities that led to these laws being enacted. Most teacher preparation programs do not teach future educators about the history regarding disability rights and the social construct of disability. This chapter will present the major theoretical and historical movements in the disability rights movement, as well as the practical implications for educators today.

INTRODUCTION

Historical Perspectives of Disabilities

Throughout history people with disabilities have been labeled, excluded, abused, pitied, and tolerated—all in an effort to dehumanize and define what is "normal" (i.e. Baglieri, et al., 2011; Baker, 2002). These practices have been systematic and often lawful. The eugenics movement in the United States, for instance, legitimized that one's intellectual ability could be categorized by race, particularly with

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the surge of immigration during the early 1900's. The eugenics movement, was deemed a "scientific" way to determine a person's intellectual capacity and worth in society (Winfield, 2007). During a time of increased immigration from Eastern European countries in the early 1900's, eugenicists used race to cast categories of intelligence based upon the purity of one's ancestry. The use of scientific concepts such as purity of one's blood, in terms of racial purity, were used to segregate, label, and even sterilize (Winfield, 2007). A famous Supreme Court decision, Buck v. Bell (1927), found that individuals with intellectual disabilities could be sterilized "for the protection and health of the state." Between 1920's – 1970's it is estimated that 65,000 Americans were forcibly sterilized (Stern, 2005).

The eugenics movement in the United States was widely followed and subscribed to by psychologists like Dr. Henry Goddard, who translated the Binet Intelligence Test into English (Gould, 1996). Though IQ testing has been shown to be an inadequate manner to determine one's intellectual abilities (i.e. Gardner, 1993; Gould, 1996; Winfield, 2007), today IQ testing is still being used to label and categorize children in public schools.

Influence of IQ Testing in Schools

This categorization took hold in public schooling with the implementation of the intelligent quotient (IQ) as a means to determine the potential for being able to learn. Intelligence testing, the bell curve, and the use of "science" were used to determine and perpetuate inferiority based on race. The eugenics movement helped establish the view public schools had on how to deal with a student who had difficulty learning or was "deficient" in intellectual ability; segregate or "fix" the problem was the general attitude. In the 1900's, psychologist Dr. Henry Goddard institutionalized terms such as "imbecile," "moron", and "idiot" based on one's IQ score. These terms were used in clinical examinations of IQs and were used to label and determine "treatment" throughout the United States.

This form of intelligence categorization is not unlike what happens in contemporary schools today. Terms such as idiot, imbecile, defective, and feebleminded were used in scientific studies to categorize one's intellect. While the eugenics movement in the United States was discredited, the medical model used to classify and categorize based on deficiency was established as a science and common practice. The medical model was quickly and almost universally accepted in both medical and educational communities (Triano, 2000). Terms such as impairment, deficient, mental retardation, diagnoses, disorder, and crippled were derived from the medical model that defined disability. Educators began using terms that focused on "fixing" broken students with disabilities with terms like intervention and remediation. In this approach to defining disability, the expert was clearly the physician, educator, or psychologist. This placed the person with a disability in the role of a victim who needs to be helped by the knowledgeable expert who will "fix" them (Triano, 2000).

IQ tests are also used to label students with a variety of disabilities under 1990 federal legislation, the Individuals with Disabilities Act (IDEA). For instance, until recently, for a student to qualify for a specific learning disability and receive special education services under IDEA, the student had to have a significant discrepancy between their IQ and their achievement scores. Schools often used arbitrary rules about when a child would qualify for services, stating that, for example, a "15 point" split between an IQ score and a particular achievement area (reading, writing, mathematics) would make a student eligible for special education service under the specific learning disability category. This meant that students might be 14 points discrepant, along with years of failing grades, and still not qualify for services. While the severe discrepancy model was not written into IDEA policy with harsh cut-off scores, most local

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