Developing understandings of disability through a constructivist paradigm
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ABSTRACT

This article asserts that disability can be understood more holistically if the paradigmic stance employed to research it encompasses individual constructivism and social constructionism in tandem (thereby creating the constructivist paradigm). Adopting the constructivist paradigm allows researchers to better evaluate how internal and external understandings of disability are framed. It asserts that the clashing of separate constructivist and constructionist understandings of disability create ‘crip-dissonance’ – a lack of mutual understanding of disability and disabled lives between disabled and non-disabled people. Using a constructivist paradigm can, however, be instrumental in recognising the creation of disability as a social construct, and thereby understanding that the reality of disability is created through perception. The article also explains that in the current UK socio-political climate, the constructivist paradigm can contribute towards moving understandings of disability beyond passive awareness to an active tool against dis/ableism and discrimination.

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INTRODUCTION

This article explores the complex interactions between the ways that disability is constructed and experienced. It promotes the simultaneous adoption of both facets of the constructivist paradigm (i.e., social constructionism and individual constructivism) by disability researchers in order to develop holistic understandings of disability. In doing so, it recognises the interplay between individual interpretation and shared understanding, the private versus social self, and the politics of impairment versus socio-environmental disablement.

We define the constructivist paradigm as encompassing two key constructive theories:

The first, personal construct theory, was first described by Kelly (1963) and emphasizes individual reality or interpretation of the world. The second, social construct theory, major proponents of which were Berger and Luckmann (1966) emphasizes the influence of society, culture, and social environment on reality (Al-Saggaf & Williamson 2006: 7).

Therefore, we understand the constructivist paradigm as encompassing both social constructionism and individual constructivism, also recognising that constructivist theory inhabits a continuum (Raskin 2002). In this article, we aim to delineate our understanding of the constructivist paradigm and its utility in the process of constructing understandings about disability. We also acknowledge that the evolution of constructivism and social constructionism has resulted in their mutual theoretical alignment in viewing ‘knowing and learning as embedded in social life’ (Charmaz 2014: 14).

Grue (2016) advocates that the social meaning of disability should be studied further, given that understandings of disability are ‘undermined by narrow construals of the category of disability, and a social meaning connoting marginality and exclusion’ (Grue 2016: 962). This paper, while wholeheartedly concurring with Grue, suggests that the key to holistically understanding disability is utilising both individual constructivism and social constructionism simultaneously. Doing so helps not only to reframe the historical societal congruence between disability and deviance (Susman 1994) to reduce stigma, but also responds to Grue’s (2016: 963) call for research that helps understand the way in which ‘people identify with or identify others as members’ of a universal disabled category, or as having an illness or impairment.

Gergen (2001: 2) regards social constructionism as an ‘intellectual sinew’ that weaves through and flexibly binds together the critical disciplines of the social sciences. Therefore, it surely follows that social constructionism should be at the heart of Critical Disability Studies (CDS), an academic field that consistently and reflexively asks: ‘Who are disabled people, and who should speak for them?’ (Albrecht et al. 2001: 2). On the other hand, Gallagher (2004: np) attests that constructivism is more ‘consistent with the aim of disability studies to confront the oppression and marginalization of people with disabilities, particularly with regard to their right to define who they are and their liberty to speak for themselves’. This paper argues instead that CDS scholars must underpin their research and practice by combining both theoretical standpoints to create an overarching and all-encompassing constructivist paradigm. Such an approach can bridge gaps in the understanding of the disabled experience, especially those that can exist between disabled and non-disabled people. This is achieved through addressing a phenomenon that we term ‘crip-dissonance’.

CONSTRUCTING THEORETICAL UNDERPINNINGS

DIFFERENT REALITIES FOR DIFFERENT PEOPLE

There are varying interpretations of precisely what individual constructivism and social constructionism embody. These depend on the field of study in which it resides, whether it is cognitive or social, and what ontological and epistemological approaches are utilised in conjunction with it. This paper does not have the scope to provide an in-depth exploration of the distinctions between these numerous theoretical standpoints. Rather it attempts to briefly outline a conception of the paradigmatic similarities and differences, acknowledging the complexities and shifting understandings and applications in order to contextualise current creations of disability and to conceptualise a means to challenge ‘inaccurate’ compositions.
We wish to delineate between individual constructivism and social constructionism to acknowledge the ‘variety and heterogeneity both within and between them’ (Young & Collin 2004: 374). We also acknowledge the existence of a continuum of ‘constructivisms’, to borrow Raskin’s (2002) pluralisation of the term. We do not ascribe to radical constructivism, which ‘posits a highly individualistic approach [to knowledge development] without reference to social interaction, contexts, and discourses’ (Young & Collin 2004: 376). Rather we ascribe to a more Piagetian (1952) notion of (individual) constructivism, which bridges these iterations recognising that individual construction is influenced by social interaction.

Therefore, our understanding of the constructivist paradigm (i.e., individual constructivism and social constructionism) intimates that both factions share an ontological belief that reality is created through lived experiences and interactions with others. Both theories support that no single true reality exists and that any perceived reality is co-constructed with others and shaped by their own lived experience (i.e., relativism). As such, whichever tenet employed, reality and knowledge are subjective. Although individual constructivists emphasise the internal workings of the mind to create reality, social constructionists emphasise the interactions of people to do so (Sommers-Flanagan 2012).

The many overlaps of individual constructivism and social constructionism may be what led Dean to state that, ‘there is no clear delineation of what we are talking about when we speak of “constructionism” and “constructivism”’ (Dean 1998: 182). Raskin and Bridges (2004), however, vehemently disagree and state that there is not only a distinction, but that if one wishes to be considered a true social constructionist, they must reject the idea of individual constructivism. This is because, in their conception, true constructionists understand that it is only through social interaction that meaning is made, and it is through these relational processes that we form a sense of individuality (Raskin & Bridges 2004). However, we contest that it is the distinction between these theories that can actually make them stronger when they are united, rather than divided. Only by combining the ‘private/social split that has divided constructionism and constructivism’ identified by Raskin and Bridges (2004: 15) can more holistic understandings of disability be created.

CONSTRUCTING AND DECONSTRUCTING DISABILITY

THE SOCIAL CONSTRUCTION OF DISABILITY

Disability has been seen as a social construct, rather than simply pathologised/medicalised (Kitchin 1998) for over four decades. A major contributing factor to this was the creation of the social model of disability. Emerging from a group of disabled activists (Union of the Physically Impaired Against Segregation, or UPIAS) in 1974, the social model of disability made a clear distinction between what constituted an impairment and what constituted a disability. They defined impairment as:

Lacking part of or all of a limb, or having a defective limb, organ or mechanism of the body; and disability as the disadvantage or restriction of activity caused by a contemporary social organisation which takes no or little account of people who have physical impairments and thus excludes them from participation in the mainstream of social activities (UPIAS 1975: 20).

They particularly noted that ‘physical disability is, therefore, a particular form of social oppression’ (UPIAS 1975: 20). Oliver and Barnes (2012) also emphasised the power that the social model brings to bear on society. This model emphasises that if disability is a social construction, attention can be shifted ‘to disabled people’s common experiences of oppression and exclusion and those areas that might be changed by collective political action and social change’ (Oliver & Barnes 2012: 22). The identification of which provides opportunities for removing barriers to inclusion and resisting socially oppressive policies.

Shakespeare (1998) partially agrees with Oliver and Barnes’ sentiments and the revolutionary importance of the social model of disability. He concedes that this social constructionist approach to disability does indeed transform the status of disabled people, and that the idea of disability as a social creation serves to mobilise disabled people under a positive self-
identity which places the impetus for change on society. However, he states that by doing so, in such an absolute form, the role that impairment plays in the social experience of disability is denied (Shakespeare 1998). Shakespeare makes the point that impairment and the social construct of disability are interlinked – so much so, that in some circumstances one cannot be addressed without addressing the other. As Morris has stated: ‘we are different’ (Morris 1993: 17, emphasis in original) and it is okay for disabled people to both demand to be integrated into their communities and to be explicit about how they are different from the non-disabled world. Hosking (2008) also recognises the role of difference, stating that disability is the perfect example of Martha Minow’s (1990) ‘dilemma of difference’, which occurs when it must be decided if difference should be handled by acknowledging it or ignoring it (Hosking 2008).

This is a core issue for many disabled people, in part because their external and social experiences and internal ‘realities’ can be heavily influenced by the acknowledgement and/or disclosure of their impairment, for example when requesting reasonable adjustments in the workplace. In this scenario, the disabled person’s internal constructivist understanding of themselves and the needs of their impairment contributes to their decision to disclose their disability – even if it may lead to heightened stigma or prejudice in the workplace. This disclosure may then either be challenged or be accepted by the employers through their own social constructionist understanding of the disability, their legal obligations, and so on.

Therefore, while researching disability, one must be cautious not to take the posture that disability is simply a ‘myth’. Because if disability were a social construct alone, and did not truly exist at all (i.e., in the form of impairment), it could not be further addressed. Thus, an external change, based on learning through social interaction is required (i.e., a social constructionist approach) to address the barriers that social and physical environments can present, as opposed to changing negative internal perceptions (individual constructivism) alone. Without using both facets of the constructivist paradigm in building knowledge about disability, changing people’s ableist and exclusionary practices and attitudes, let alone making any claims as to why disability matters (Hartigan 2005), would be impossible.

This may contribute to why, as Grue (2016: 959) states, some disabled people prefer to identify as ‘a member of impairment-specific or illness-specific categories’, rather than ascribing to the category of disability as a wider label. This approach allows them to not only share ‘realities’ with those who have similar internally constructed ‘realities,’ but also to combine their power to challenge social constructions of their disability in the eyes of the law, so that they can access financial and structural support created by systems that medicalise disability through social constructionism.

In using a combined constructivist paradigm in (critical) disability research, one can more comprehensively examine the delineations between interpretations of what having an impairment, and what being disabled, means to those with impairments who are disabled by attitudes, social policies, practices, and legislation. It can afford researchers a more ‘complete understanding of disability and impairment as social concepts, with recognition for individual experiences of the body over time and in variable circumstances (Crow, 1996)’ (Goethals, De Schauwer & Van Hove 2015: 79–80). It allows us to capture both the ‘insider and outsider’ (Linton 1998: 2) understandings of disability and impairment, resulting in a more holistic evaluation that brings together the embodied experience of impairment and the social barriers of disability. The constructivist paradigm encourages us to situate disability ‘at the intersection of biology and society and of agency and structure…[it] cannot be reduced to a singular identity: it is a multiplicity, a plurality’ (Gabel & Peters 2004: 588). To capture disability’s multivalent identities, we need to understand the different ways it is constructed within and between individuals (both disabled and not) and consider influences on its internal and external constructions.

CONSTRUCTIVISTS REBEL AGAINST CONSTRUCTED BELIEFS

So how can a combined constructivist understanding of disability (i.e., embracing both individual constructivism and social constructionism) tell the ‘whole story’? This is where the importance of disabled and non-disabled people interacting and inter- and intra-personally building knowledge of disability is crucial. As Jones (1996: 350) states:
To explore disability as a socially constructed phenomenon requires that the analysis be expanded to include both those with disabilities and those without. This perspective depends upon an understanding that much of what is believed about disability results from meanings attached by those who are not disabled and challenges the assumptions upon which those meanings rest.

However, if it is as Lynch claims, and ‘nothing could be more definitive of constructivism than the thesis that social identities depend on audience ascriptions’ (Lynch 1998: 14), then what does it mean for those with disabilities who refuse these ascriptions? What does it mean if they freely accept them?

External social understandings of disability by non-disabled people can be highly conflictive with the internal understandings and knowledge of what it means to live with a disability by disabled people. This has been evidenced in both social discourses and academic circles, with the prevalence of deficit narratives expounded by popular culture and the Media, such as the ‘pity/heroism trap’ (Shelton 2017: np), and academia’s pedestalisation of ‘accepted, and accept/able, expertise’ (Pilson 2020: np) both serving to undermine disabled people’s lived experience as a source of understanding disability. This categorisation of disabled people into an outgroup can be a rapid, automatic, and nonconscious process (Reskin 2000), which hides from the perceiver the violence that their perception of someone as different (Siebers 2001) can have upon the person they are encountering.

The constructivist paradigm can therefore facilitate opportunities for disabled people to identify and then make visible ‘shadow barriers’ – that is, ‘barriers that “shadow” disabled people’s daily lived experiences. These are often invisible to non-disabled people but are ever-present in disabled people’s lives’ (Olsen et al. 2020: 266). By doing so, non-disabled people are able to better understand the pressures and constraints inherently faced by disabled people in society, and thereby allow them to question previously held assumptions that disabled people are ashamed of their disability; see their disability as a burden; believe their life is not worth living; desire to be normal and whole; are suffering; live empty lives; and always share the same attitude towards disability as non-disabled people (Morris, 1993). Mutual social agreement may not always be reached, yet such encounters serve to emphasise that each subjective ‘reality’ exists.

Garland-Thompson (2012) argues for the conservation of disability, rather than its removal or erasure. She states disability can provide an ‘epistemic tool’ in helping to disrupt dominant societal narratives. She goes on to suggest that ‘our bodily form, function, comportment, perceptual apprehension, and way of mind shape how we understand our world’ (2012: 345). This, therefore, suggests that disabled people are automatically using a constructivist paradigm to further understandings of disability simply through their existence. For Garland-Thompson, the embodied experience of disability automatically influences intrapersonal understandings of disability for the individual. Therefore, embracing an individual constructivist stance, cannot be avoided. Through reflexive experience, disabled people can decide whether to accept or reject social beliefs and perceptions, if they are known not to comport with what they have learned from their lived experience. At the same time, if disabled people actively engage in constructing understandings of disability mutually (via a social constructionist stance), then positive outcomes can be produced, wherein disabled people can (re)understand their own experiences via an external lens, thus (in the best-case scenario) allowing disabled people to reframe self-stigmatisation or internalised ableism.

However, when the lived experience of the disabled person is antipode to the ideological reality that they are presented with by the non-disabled person, a dissonance is created. This may occur because ideology ‘serves to hide the interests of dominated groups from themselves [creating a] … false consciousness’ (Harvey 1990: 24). The removal of this dissonance in this scenario then would require convincing disabled people that they are indeed suffering and that their lives are not worth living – a belief that some argue is often relayed in social interactions. Or conversely, by convincing non-disabled people that disability is a social construct and their interpretation of it is inaccurate, thereby developing ontological authenticity (Lincoln & Guba 1985). Unfortunately, resolution of dissonance tends to be achieved by the former and not the latter. Goodley (2014) argues that the narrative currently conveyed in societal tropes is
one that implies disabled people are not welcome in social spaces – that they don’t belong. Unfortunately, the belief that they are not welcome is something that disabled people often come to recognise and internalise.

This raises the question: does the dissonance occur due to non-disabled people being dominated by a false narrative that says that disability demands exclusion? One that ‘serves to conceal contradictions … [and] that renders myths natural’ (Harvey 1990: 198)? Oliver and Barnes (2012) postulated that this might be the case, because there are strong economic reasons in capitalist societies to keep disabled people excluded from mainstream society. This theory would support the reification and embedding of ableist ideologies in society, especially given the current political climate in which disabled people are actively positioned by government policy as second-class citizens, perpetuating the exclusionary status quo. Such issues once again emphasise why it is imperative to apply both individual constructivist and social constructionist underpinnings to research. It is the unbridged space between these two approaches to reality that creates a vast schism between the understandings of disability held by the disabled and the non-disabled. This chasm is where ‘crip-dissonance’ is found.

THE CONSTRUCTION OF CRIP-DISSONANCE

THE CREATION AND MANIFESTATION OF CRIP-DISSONANCE

Crip-dissonance emerges when there is a simultaneous convergence of disability, a violation of expectations, and the presence of cognitive dissonance (see Figure 1.1). Expectation, or the belief that something will occur, is a standard process that consistently occurs in one’s mind. This constant envisioning of future events impacts our decisions and overall behaviours (Bubic et al. 2009). When there is a difference between what is expected to occur and what actually happens, cognitive dissonance ensues. Festinger’s (1957) cognitive dissonance theory suggests that people experience feelings of discomfort when they hold two inconsistent cognitions or even when there is an inconsistency between our cognition and our behaviour (Yousaf & Gobet 2013). This theory goes on to propose that individuals seek to eradicate this incongruity (Yousaf & Gobet 2013) in order to remove this discomfort. For non-disabled people, the root of this dissonance may stem from their lack of schema. Piaget (1952: 7) defines a schema as: ‘a cohesive, repeatable action sequence possessing component actions that are tightly interconnected and governed by a core meaning.’

In Piaget’s view, schema provide the building blocks of knowledge. Wadsworth (2004) explains these schemata in a more simplistic way: asking the reader to consider them as index cards of data which are filed in the brain. Each card provides an individual with how they should react to incoming stimuli based on previous experiences. Unfortunately, for disabled people, when many non-disabled people seek to access their ‘response to disability’ card, it is absent from the non-disabled person’s card catalogue, due to a lack of prior meaningful interaction with disabled people.

This inconsistency can be seen when the different realities between disabled and non-disabled people collide. Here, a violation of expectations, in conjunction with cognitive dissonance, create ‘crip-dissonance.’ This can occur because a non-disabled person meeting a disabled person in the social sphere may feel their expectations have been violated. This violation...
may be further exacerbated if they are required to interact with the disabled person through forced compliance behaviour. This behaviour occurs when someone is forced to do something publicly that they really do not wish to do privately (McLeod 2018). For some non-disabled people, interacting with someone whom they often do not expect to find in public, along with the forced compliance to interact with a portion of society they may have little experience interacting with, can create fear.

As a result, the non-disabled person’s stereotypes and fear-related expectations (Gollwitzer et al. 2018) of disabled people must be addressed during these interactions. It is here that we see that in a social constructionist framework, the application of labels and sorting is in itself a process that actively disables people (Grenier 2007). This often requires the disabled person to ensure the non-disabled person’s comfort, while at the same time being forced to challenge the non-disabled person’s inaccurate assumptions about disability.

For the disabled person, these interactions can result in ‘crip-dissonance’ as well. This can occur either when they meet a person who holds overt prejudices, or when a disabled person is presented with someone who wholeheartedly rejects stereotypes and prejudices towards disability. For the latter, and depending on a person’s disability, this can lead to surprise on the part of the disabled person as acceptance is not the default experience. For the former, the disabled person often reports feeling they have a responsibility to change the social stereotypes by being an inconsistent exemplar to what is expected (Gollwitzer et al. 2018). This can include challenging the ‘poor cripple’ stereotype and attempting to convey the social value of disabled people, using themselves as an example. However, the behaviour of the disabled person is often not enough to change the non-disabled person’s long-term socially constructed and ingrained beliefs about disability. It has been reported that even when there is a discrepancy between preconceived notions and new information, the preconceived notions prevail (Leivada et al. 2017).

Understanding crip-dissonance and applying the constructivist paradigm can assist with this through advancing research into destigmatisation. According to Clair (2018), new approaches are not only needed to remove stigma, but must be combined with research that garners theoretical knowledge that recognises stigma as a fundamental social process. As it places the interactions of the external presentation of stigma, and the internal process of accepting or rejecting stigma, a social constructivist paradigm, used in conjunction with an understanding of crip-dissonance, can assist with gathering this knowledge and creating outcomes that lessen social inequality.

**CAN USING A CONSTRUCTIVIST PARADIGM IN ACADEMIA QUIET CRIP-DISSONANCE?**

We attest that it is crucial for academia to avoid exacerbating crip-dissonance within research and society. Smith cautions against ‘the self-indulgence of inner exploration or any other enterprise with the self as sole focus and object’ (1972: 23, emphasis added). She states that ‘sociologists’ investigation of our directly experienced world as a problem is a mode of discovering or rediscovering the society from within’ (1972: 23). This is why the adoption of a constructivist stance in research (i.e., embracing both individual constructivism and social constructionism) is crucial in order to recognise and overcome (or at times, embed) ‘crip-dissonance’. It allows us to question or validate our internally created realities by re-understanding our experiences collectively.

The concept of ‘empathic neutrality’ (Snape & Spencer 2012) recognises that research cannot be value-free. However, this issue can be mitigated if the researcher understands the impact of their own values on the process. This interpretivist view sees the researcher and the social world as inseparable and interconnected. As such, the researcher and the participants involved in the research inevitably impact upon each other throughout the process. Therefore, the building of mutual understandings of disability (and potential avoidance of crip-dissonance) may be achieved by academia collaborating more closely with disabled people and the disability activism sector in order to sate the ‘hunger for knowledge that accompanies struggles against oppression’ (Finkelstein 2001: np).
In terms of employing researchers, academia, public organisations, and private industry must recognise that a researcher’s history and current status play a vital part in the production (and interpretation) of data (Hennink et al. 2013). It can then be postulated that it is not just the comfort that one feels when interacting with someone with similar self-perceived social identities during qualitative research, rather it is a recognition of the shared realities of life, the external influences upon it (constructionism) and the internal valuation of these influences (constructivism) that leads to quality information emanating from the research.

Hahn (2001) expands upon this when he argues that the presence of a visible or openly stated disability in a researcher may contribute to those being interviewed being more truthful. He compares this with other methodological approaches seen in research where interviewers and respondents from the same ethnic and cultural backgrounds are matched. We must, however, state here that we do not suggest that disabled and embodied experiences can be homogenised. For example, both authors of this article are legally considered disabled in Great Britain under the 2010 Equality Act. However, both have vastly different lived experience of disability. We also recognise that the experiences of physically and intellectually disabled people will be completely different. This paper may be of greater application to considering the experiences of the former, especially given the personal experiences of the authors in relation to disability. We mean instead to suggest that when applying an interpretative approach, one that acknowledges subjectivity and a recognition that the participant possesses subjective views of their world (Hennink et al. 2013), it can be ventured that the closer these two socially and internally constructed realities are, the more effective and appropriate the collection and interpretation of the data will be.

Having a researcher with an ‘obvious’ or openly-stated disability has other benefits. When one considers the central and irreducible role of the researcher and Harvey’s (1990) recognition that the application of references held by researchers can be an extreme threat to ‘accuracy’ of data interpretation, the value of recognising and addressing crip-dissonance is further supported. It clarifies that while power dynamics present in research can be an issue, a larger issue in terms of the ‘authenticity’ of outcomes may be the interpretation of the data by those who hold different ‘realities’ from participants. Furthermore, Barton (1996) and Oliver (1996) have expressed concerns regarding non-disabled researchers undertaking disability research. For example, if the medical model is held by a non-disabled researcher as an objective reality, then their interpretation of the information they gather may be impacted by this, and crip-dissonance can be created and concretised. Conversely, disabled researchers may have experienced similar dominant oppressive social structures to disabled participants and may share a more closely aligned internal and external view, leading to increased ‘accuracy’ of data interpretation, especially if they are positioned in participatory roles to co-produce and co-construct knowledge and understandings of disability.

**DISCUSSION – HOW CAN (AND SHOULD) CRITICAL DISABILITY STUDIES INTERACT WITH ‘CRIP-DISSONANCE’?**

In the relativists’ world there is no single shared reality, but rather different social constructions of reality (Snape & Spencer 2012). The constructivist paradigm (i.e., individual constructivism and social constructionism used together for evaluation of peoples internal and external perceptions of their and others reality) can aid in interrogating the different constructions of reality. This can be a useful tool for disabled people, and other marginalised groups negatively impacted by subjective realities that can be imposed upon them from the others constructed interpretations of their lived realities. Constructed understanding is created through social interactions with others, the world they inhabit (i.e., social constructionist thinking), and their internal reactions (i.e., individual constructivist thinking) to these interactions. As discussed, when it comes to disability, this can lead to ‘crip-dissonance’. Disabled people must either accept or reject the ‘reality’ they are presented with concerning their own value, which can often contradict their lived experience.

Meekosha and Shuttleworth’s (2009) seminal paper on the development of the Critical Disability Studies discipline outlines its key principles as encompassing: the avoidance of reducing understandings of disability via applying an objective lens; the need to link theory
and praxis in developing understandings of disability in ways that might promote autonomy and empowerment for disabled people; the requirement of the discipline to engage with its underpinning conceptual frameworks; and the need to engage with other cultures to mutually develop and share culturally significant concepts (2009: 47). Adopting a constructivist paradigm, therefore, offers Critical Disability Studies scholars an opportunity to meet these principles, as it provides them with the opportunity to unsubscribe from empirical limitations and to be bold in their theorising (Schaller 2002).

Researchers can evaluate the construction of disability through a cultural predisposition to what people see as 'disabled actions' and 'normative actions', what the expectations are for both, and how people came to hold them as expectations (Grenier 2007). In its most basic form, individual constructivism means that our perceptions are our reality. It rejects the belief that methods exist that can uncover a true reality (Jost & Kruglanski 2002). Instead, in the constructivist paradigm, reality is something subjective, something rooted in perceptions, experiences, and feelings (Ryan 2018). This is not to say that groups of people cannot have shared or similar experiences. They can – and it is the similarities in these common cores of experiences of people’s shared realities that can lead to research that is ‘representative’. This is because ‘if several reports confirm a statement, then it can be considered true as a representation of a socially constructed reality’ (Snape & Spencer 2012: 14).

However, a subscription to the belief that a representation of a shared constructed reality exists does not mean that those who share in that reality determine the quality of that group’s lived experience. This would remove the entirety of the social plane (Vygotsky 1987) from existence when, in fact, it has a huge role to play in the creation of their reality. A Vygotskian conception of learning states that an individual begins to construct ‘reality’ in an interactive way in the social plane – ‘it is not passively reflected in perception or abstractly cognized ... it is encountered in practice’ (Vygotsky 1987: 78–79). This means that engagement in the social sphere with other people and social structures catalyses understandings of reality. These structures can prove oppressive to disabled people. For instance, the continued existence of harmful preconceived notions/stereotypes about disability rarely impacts the non-disabled population in a harmful way. The same cannot be said for disabled people, especially when non-disabled people are regularly empowered to make decisions on behalf of disabled people. This poses a problem because not only is it difficult to alter ingrained beliefs, but Ackermann (citing Piaget) states it would be psychologically catastrophic if humans changed their view every time they encountered a surface perturbation. She attests that shaking a sticky belief, without disturbing the person, can be achieved, but the person must be given more than one opportunity to engage in the phenomena (Ackermann 2012).

This can be hard to accomplish when segregative practices and limited personal interaction with disabled people can lead to some non-disabled people’s only real experience of disability being the socially inherited negative stereotypes they obtain from others. These stereotypes are also socially reinforced through literature, film, television, social media, and other avenues of socio-cultural influence. With no counter-narrative, no personal relationships, and no real experience interacting with disabled people, these misconceptions may be accepted as truth. Ackermann’s (2012) assertion that multiple opportunities to experience phenomena may change beliefs is supported by research by Dixon et al. (2018), who found that non-disabled people’s attitudes improved towards disabled people when they had increased opportunities for meaningful interactions with them. They also found that when non-disabled people had a personal relationship with a disabled person, they were increasingly aware of the barriers and prejudice faced by disabled people. It appears, therefore, that in order to overcome crip-dissonance, scholars and others need to undertake further research to understand how non-disabled people ‘make sense of the phenomenon we want to teach, if we want to get them to abandon their current views of the world’ (Ackermann 2012).

It is only after we understand this phenomenon that the application of theories such as critical theory can ensue. After this occurs, then discovering how social processes, such as the interactions between disabled people and institutions impact the construction of disability (Kitchin 1998), both within the disabled person and society, can truly proceed. This is in line with Vehmas and Watson (2014), who state that to abolish oppression, one must understand that groups of people are both marginalised and oppressed, and this requires more than a
simple analysis of how they have been characterised and labelled. Instead, it requires theories that ‘seeks to challenge world views and the underlying power structures that create them’ (Ryan 2018: 18). This cannot be done until the non-disabled people in these power structures understand how such structures and systems impact upon the experiences of disabled people. As Yates (2015: 102) asserts:

For many disabled people, there have been and remain significant struggles connected directly to the ways in which their lives are shaped by a truth that they are obliged to recognise in themselves, a truth that exacts a severe cost, a cost of difference, inferiority and subordination, a truth that is apprehended by power relations and practices of government that lock them into relationships with others and positions within institutional settings.

Up until now critique has been an integral part of the process; however, as this article demonstrates, critique only has value if it is interwoven with knowledge (Harvey 1990). Until this knowledge is obtained it may not be used to emancipate people from domination (Held 1980). Obtaining this knowledge means acknowledging that marginalised group live in different realities and that freeing people from domination cannot occur until these realities are understood. The constructivist paradigm can be an essential tool in performing this necessary research.

CONCLUSION

This article has demonstrated that the constructivist paradigm (i.e., individual constructivism and social constructionism used in combination for the evaluation of people’s internal and external perceptions of theirs and others reality) allows researchers to better evaluate how internal and external evaluations of disability can be accepted or rejected by those presented with evaluations of the person’s reality that may not match their lived experience.

We firmly place our understandings of disability as both personally and mutually constructed and situated within social discourses: ‘disability is not a universal, unambiguous, and invariable phenomenon but a concept that, as emphasized by the Convention on the Rights of Persons with Disabilities, is constantly evolving’ (Goodley, Szarota & Wolowicz 2020: 4). We therefore assert that the constructivist paradigm can aid in explaining the lack of acceptance and inclusion of disabled people into society. Part of existing exclusion may be due to a collision of interpretations of reality which can result in ‘crip-dissonance’ (i.e., incompatible views of disability between disabled and non-disabled people). ‘Crip-dissonance’ may only be removed if the chasm between the two realities is filled with knowledge that is both individually and socially constructed, both internally and externally, and stemming from consistent exposure to phenomena based on the another’s lived experiences that are outside their recognised schemata.

Goodley (2013: 633) states that ‘marginalization is a relational concept, emerging in the routines of (and interactions between) disabled and non-disabled people’. If parties have different conceptions of reality, this relationality can be where crip-dissonance occurs. To understand these wider societal constructs, we need to use the constructivist paradigm. A constructivist stance allows the individual to interpret their conception of reality via consideration of their own routines, while at the same time comparing and contrasting them via interactions with (non)disabled people. Therefore, adopting a constructivist paradigm conceptually, in the way we advise, means researchers can go beyond relativistic understandings of disability and can also begin to tie in post-structural elements to our conceptions – provoking questioning of the binary between ability and disability (and ableism and disablism) and aligning individual and wider societal interests (Goodley 2017; Rabinow & Rose 2006).

Finally, Navon (1996), has stated that constructionist research has not given much attention to the destigmatisation of disability. One of the reasons for this may be that without taking into account corresponding constructivist perspectives garnered from disabled people, there was insufficient data to do so. The constructivist paradigm (which embraces the constructionist-constructivist continuum) remedies this barrier, making it a valuable tool for disabled people and other marginalised groups. Adopting it can represent an opportunity to not just to enhance
interpretivist disability studies, but also to move towards a more transformative philosophy. It can help us to move on from accepting that all realities are equally valid, to understanding which conceptions may be reifying oppression, by unmasking ‘constructs that have possibly served in the exploitation of various individuals and groups for a [sic] assortment of reasons’ (Young & Collin 2004: 377).

It is also important for the disabled person to be able to identify those with similar views to develop a sense of solidarity. It is hoped that utilising the word ‘crip’ may act as a provocation to non-disabled people from the outset to demonstrate their allyship with, or openness to developing understanding about disability. Just as disabled bodies invert societal expectations, the term ‘crip-dissonance’ subverts the ‘conventions of language’ (Schwandt 1994: 129), ‘Crip’, slang for ‘cripple’, has attained taboo status in everyday ‘polite’ language, having ‘a long history of pejorative use’ (Passanante Elman 2012: 318). However, activists and disability scholars (notably McRuer 2006 and Kofer 2013) have reclaimed the term for the disabled community, bestowing upon it a new iteration as a verb. To ‘crip’ means to actively ‘disrupt normative conditions of the neoliberal order … crip is a rallying call’ (Goodley 2017: 39–42). ‘Crip’ becomes a signifier of aligned concepts of reality. Using the constructivist paradigm to interactively build knowledge between and within disabled and non-disabled people may help the latter to understand this activist conception of ‘crip’. In doing so, they may relate further to the disabled community, and even reflexively situate themselves within a ‘coalition of “left-behinds” who may or may not identify as disabled, but who can be … connected somehow through a crip analytic’ (McRuer 2016: np).

Therefore, the constructivist paradigm, as well as removing crip dissonance, can also strengthen it in a positive manner. It can help disabled to avoid aligning their beliefs with those which can compromise or suppress their own understandings. It can enhance pride in the disabled identity. It can highlight ignorance, oppression, and misunderstanding. It can reframe disability ‘as a potentially generative resource rather than unequivocally restrictive liability’ (Garland-Thompson 2012: 340). Given that we are in the midst of a ‘highly contentious political moment’ (Fine & Torre 2019: 433), it has never been more important for disabled people to embrace their situated knowledge and embodied experiences, and to share their expertise, in order rally against socio-political dis/ableism (Goodley 2014). Adopting a constructivist approach to generating understandings of disability can catalyse this crucial process.

COMPETING INTERESTS

The authors have no competing interests to declare.

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