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Just as social work in disability settings is often overlooked in the academic and professional literature, so too has disability been marginalised by social activists, and the disability perspective on social justice ignored by policymakers. In this chapter, we maintain that social work practice framed within a social justice perspective has a positive contribution to make to the lives of disabled people. We explore what social justice means in the context of disability, before considering two particular social justice concerns facing disabled people: the disproportionate impact of the Covid-19 pandemic and the phenomena of hate and mate crime. We then offer three suggestions for practice in disability settings: adopting a critical perspective to practice, a focus on human rights, and being an ally to the Disability Rights Movement.

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Running Head Right-hand: Disability, Social Justice, Human Rights

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Disability, Social Justice and Human Rights

The Experience of the United Kingdom

Peter Simcock and Caroline Lee

Introduction

As central to its purpose, its mission and its role, social justice has been a core social work value throughout the history of the profession (Reamer, 2006; Hodgson & Watts, 2017; Poston-Aizik et al., 2019). Social work educators are required to include content on social justice in their course curricula and the concept 'permeates social work definitions and codes of ethics across the world' (Martinez-Herrero, 2017:16). Many have argued that its focus on social justice is what distinguishes social work from other helping professions (Kwong Kam, 2014; Mehrotra et al., 2019). Despite this long-standing commitment to social justice, an increase in professionalisation and bureaucratic practice has seen social work scholars lament the profession's move away from promoting social justice as its main goal (Kwong Kam, 2014; Postan-Aizik et al., 2019). In a world of increasing social injustice, there are therefore calls for social work education and practice to reclaim their focus on social justice as a central principle and value (Mehrotra et al., 2019; Watson, 2019).

The International Federation of Social Work (IFSW) and the International Association of Schools of Social Work (IASSW) (2018) make it clear that social workers' responsibility to promote social justice relates not only to society overall but also 'to the people with whom they work'. Many of those using social work services are disabled, and as the world's largest and fastest-growing minority population (Series, 2020), it is probable that irrespective of setting, practitioners will work with disabled people. However, just as social work practice with disabled people has been neglected in the academic and professional literature (Simcock & Castle, 2016), disability has been somewhat marginalised by social activists, and the disability perspective on social justice overlooked by policymakers (Mladenov, 2016; Singh 2020). For example, disability is notable by its absence in the Canadian campaigning tool to promote social justice known as the Leap Manifesto. Furthermore, despite evidence of human rights violations across the globe, Series (2020) highlights the omission of disabled people from the minorities listed as being at risk of discrimination in Article 2 of the Universal Declaration of Human Rights (UDHR) and Article 14 of the European Convention on Human Rights (ECHR). Disabled people's particular needs were also omitted from the original version of the United Nations' Millennium Development Goals (Mittler, 2016). It is therefore unsurprising that there are calls for further work on social justice in the disability research and practice arenas (Perrin, 2019).

In this chapter, we explore what social justice means in the context of disability, before considering two particular social justice concerns facing disabled people: the disproportionate impact of the Covid-19 pandemic and the phenomena of hate and mate crime. Though there are various social work approaches to the promotion of social justice (Watts & Hodgson, 2019), we then offer three suggestions for practice in disability settings: adopting a critical perspective to practice, a focus on human rights and being an ally to the Disability Rights Movement. Notwithstanding the variable disability terminology used in academic, legal and political spheres (Iriate et al., 2016), throughout the chapter we predominantly refer to 'disabled people', rather than 'people with disabilities', as this is the preferred term of the United Kingdom (UK) Disability Movement and reflects our understanding of disability as socially imposed.

What Do We Mean by Social Justice in the Context of Disability?

If social workers working with disabled people are to promote social justice, they need to have an understanding of what it means. This is complicated by the lack of a single definition and the many different interpretations and understandings of the notion (Krol, 2019; Postan-Aizik et al., 2019). Nevertheless, its foundations are found in the concepts of human rights, fairness, equality and dignity (Watts & Hodgson, 2019). When considering social justice in the context of disability, it is helpful to reflect upon the observation of Goodley and colleagues (2019:987) that ‘disability is place of oppression but also possibility’. Not only is an understanding of social justice insufficient if it neglects disabled people (Kittay, 2019), a disability perspective on the concept is vital for the realisation of social justice for *everyone* (Mladenov, 2016; Singh, 2020). Such argument was maintained by the UK Disability Rights Commission, which predicted a failure in the country’s public policy goals of economic prosperity, full employment, better health, and a reduction in child poverty and crime levels, if disabled people’s experiences were ignored.

Though a very diverse population, various shared experiences of disabled people are considered social justice concerns, such that Goodley et al. (2019: 979) contend that ‘disabled people find themselves in dangerously precarious situations all over the world’. Such situations include:

Poverty: an association between disability and poverty is well established (Thomas-Skaf & Jenney, 2020. The majority of disabled people live in poverty in developing nations (Iriate et al. 2016). Nonetheless, higher rates of poverty are also recorded among disabled people in the developed world, including the UK (Ghosh et al., 2016), where the prevalence of disability is also observed to increase in economically deprived areas (Odell, 2016). Notwithstanding disabled people’s increased likelihood of experiencing poverty, cuts to welfare benefits as part of the UK’s austerity policies have largely targeted this population (Watson, 2019).

Employment: related to higher rates of poverty are the high levels of disabled people’s exclusion from the labour market (Iriate et al., 2016). While disabled people are less likely to be in paid employment (United Nations, 2020), a UK-based longitudinal study also found a correlation between the onset of impairment and a decline in employment (Ghosh et al., 2016); similarly, undesired early retirement has been observed among those acquiring impairment (Arndt & Parker, 2016; Simcock, 2020a).

Access to Health, Social Care and Education: globally, disabled people are reported to have limited access to, and substantially poorer outcomes from, education, health and social care services (Iriate et al., 2016; United Nations, 2020). This includes the exclusion of disabled children from mainstream schools, bullying at school and the experience of discrimination at universities, and failure to meet disabled people's social care needs as a result of reductions in welfare services (World Health Organisation and The World Bank, 2011; Ghosh et al. 2016).

Violence, Abuse, Neglect and Discrimination: in her theorising on social justice, Iris Marion Young (see Chapter One) notes violence as one of the five faces of oppression. Watts and Hodgson (2019) highlight that disabled people are considerably more likely than non-disabled people to experience violence; this includes institutional violence, abuse, neglect, discrimination and other forms of ill-treatment (Malinga & Gumbo, 2016; Jenkins, 2018; Thomas-Skaf & Jenney, 2020). Drawing on research from both the United Kingdom and the United States, Odell (2016) concludes that disabled children are more at risk of abuse than non-disabled children. Although there are multiple contributory factors for such increased risk (Gilligan, 2016), social workers have been observed to tolerate neglect of disabled children, owing to assumptions made about the difficulties parents may have caring for their child (Thomas-Skaf & Jenney, 2020).

In addition to the situations described earlier, social workers should explore social injustice through an intersectional lens. The experiences of disabled people of colour, disabled people from sexual minorities, Indigenous disabled people and older disabled people have been described using terms such as 'multiple marginalisation' and 'double burden' (Ghosh et al., 2016; Conover & Israel, 2019; Perrin, 2019). The UN Special Rapporteur on the Rights of Persons with Disabilities (2017: 11) draws particular attention to the 'systematic and multiple discrimination' faced by disabled women and girls, something observed in both the developed and developing world, and throughout the life course (Ghosh et al., 2016).

As described in Chapter 1, the work of Amartya Sen and John Rawls on theories of social justice is particularly relevant to social work. Such theorising can also inform our understanding of social justice in the context of disability. For example, Sen (1999) illustrated his human capabilities approach to social justice by highlighting the association between poverty and disability described earlier. He contends that disability may not only impact on an individual’s ability to earn but that disabled people may require additional income in order to achieve the same capabilities (Ghosh et al., 2016); put simply, ‘a disabled person can do fewer things with the same resources, than a non-disabled person’ (Martinez-Herrero, 2017: 34). Drawing on Rawls’ distributive perspective, social justice can only be achieved where a fair share of resources and the benefits of social co-operation are made available. However, disabled people often lack access to necessary resources. For example, Thomas-Skaf and Jenney (2020) report on disabled children’s lack of access to therapeutic services and unequal access to adequate support is similarly noted (Mladenov, 2016). Nevertheless, other theorists have argued that redistribution alone is insufficient if social justice is to be attained for *all* people (Kwong Kam, 2014; Krol, 2019). In particular, Kittay (2019) critiques a Rawlsian perspective on social justice in the context of disability, in relation to fair terms of social co-operation. She highlights the limitations of arguing that enabling disabled people to engage in work is justification for additional resources, because for some disabled people, no amount of support can facilitate this (*ibid.*). She therefore contends that to render a theory of social justice inclusive of disabled people, it must be founded on the notion of the inevitable interdependence of all people.

Social workers in disability settings and scholars undertaking disability research are also influenced by Nancy Fraser’s theorising on social justice, albeit that thus far, this has only focused on gender, class, race and sexuality (Mladenov, 2016; Krol, 2019). Disabled people’s experiences have been understood using Fraser’s model of social justice in a number of ways. For example, Shrewsbury (2015) drew upon the model to examine the underrepresentation of disabled students accessing the legal, medical and teaching professions, and Danermark and Gellerstedt (2004) used it to make sense of disabled people’s exclusion from modern society.

The usefulness of Fraser’s social justice model in a disability context is evident because of its concern with parity of participation (Mladenov, 2016; Krol, 2019). Full and meaningful participation has been the focus of disability campaigning and the work of the

Disability Rights Movement since the 1970s, and in 1981 was adopted as the theme of the International Year of Disabled Persons (Malinga & Gumbo, 2016; Mladenov, 2016). Barriers to full and effective participation are also explicit in the very definition of disability contained in the UN Convention on the Rights of Persons with Disabilities (CRPD). Acknowledging that participation demands access to necessary resources, redistribution is one element of Fraser's 'tripartite model of social justice' (Mladenov, 2016). Such redistribution must involve enhanced access to appropriate support (*ibid.*), such that disabled people's participation in society and the enjoyment of their human rights is achieved (UN Special Rapporteur on the Rights of Persons with Disabilities, 2017). Nonetheless, as the name of the model suggests, Fraser maintains that redistribution alone is insufficient, and must be combined with cultural recognition and political representation, for social justice to be realised (Krol, 2019). Applying the second of these elements to the experience of disabled people, Krol (2019) refers to the pervasive devaluing of disabled lives, and misrecognition of disabled people's worth. Such misrecognition is often centred on the stigmatisation of dependence, applicable to disabled people in receipt of care and support services, and propagated through a 'welfare dependency' narrative, evident in conservative media and political discourse (Mladenov, 2016). Using the example of disabled university students' exclusion from social interaction with peers, Krol (2019) illustrates their misrepresentation in higher education, the third element of Fraser's model. This is a social injustice, as their opportunity to participate fully is denied (Mladenov, 2016). Keeping in mind that the promotion of social justice necessitates redistribution, recognition and representation, we now turn to consider two social justice concerns facing disabled people in particular: the disproportionate impact of the Covid-19 pandemic, and the phenomena of hate and mate crime.

Disabled People and the Covid-19 Pandemic

On 11th March 2020, the World Health Organisation declared that the Covid-19 outbreak, initially reported in Wuhan, China, in December 2019, had been characterised as a pandemic.

Although the Covid-19 coronavirus has impacted upon all our lives, certain groups have been disproportionately affected, including disabled people (Lee & Miller, 2020; Smith, 2020). The UN Office of the High Commissioner for Human Rights (OCHR) made particular reference to the number of Covid-19 related deaths among the disabled population. In the UK, while not published until June 2020, official statistics revealing the number of disabled people who had died of the virus were alarming. These figures suggest a two to three times higher death rate for disabled people than the general population; for individuals with a learning disability (intellectual impairment), the death rate is six times higher than the general population (Office for National Statistics (ONS), 2020).

The health needs of disabled people may differ from their non-disabled peers (Jenkins, 2018) and the presence of underlying health conditions, associated with some impairments, is known to increase the risk of negative outcomes of Covid-19 infection (Rotenburg, 2021). Nevertheless, Rotenburg (2021) maintains that health inequalities have exacerbated such risk, a position confirmed by the ONS, which observes a statistically significant increased risk of death from Covid-19 for disabled people, even when taking factors such as underlying health conditions and living in a care home into account. Abbasi (2021) uses Engel's phrase 'social murder' to describe the failure of the UK Government to pay sufficient attention to these inequalities and the ways in which they have intensified the effects of the pandemic. In a very literal sense, the disproportionate impact of Covid-19 on disabled people illustrates Lundy's (2011: 38) claim that 'social injustice is killing people'.

Criticising the lack of action taken by various nations to protect disabled people during the pandemic, the OCHR published specific guidance in April 2020, making recommendations to alleviate the disproportionate impact. This guidance does highlight instances of good practice. For example, it refers to the Bioethics Committee of the San Marino Republic Covid-19 triage guidance, which explicitly prohibits disability discrimination, and the accessible Covid-19 related public health information available on the New Zealand and Mexican government websites.

In the UK, the political rhetoric and response to the pandemic have been described as 'disablist and worrying' (Hoskin & Finch, 2020). In June 2020, the Disability Law and Policy

Project (2020), published *An Affront to Dignity, Inclusion and Equality*, which documents the ways government Covid-19 policy-making is contrary to provisions protecting disabled people found in both national and international equality and human rights legal provisions. In the same month, research published by the user-led disability organisation Inclusion London (2020), *Abandoned, Forgotten and Ignored*, presents disabled people's experiences during the pandemic, which are characterised by discrimination, disadvantage and a feeling that government has either overlooked their needs or treated disabled people as an afterthought. By March 2021, disabled people's organisations had developed a list of 24 ways in which disabled people's rights had been breached during the pandemic; this list illustrated the 'profound injustice done to disabled people by the UK government' (Pring, 2021). Disabled people's rights have been affected in the following ways:

Restrictions to health, care and education based rights: the Coronavirus Act 2020, emergency legislation introduced during the pandemic, saw a downgrading of the statutory duties on local authorities in England in relation to disabled people's rights to social care and special educational needs provision. Illustrating its impact, Inclusion London (2020) describe local authorities across the country adopting different approaches to the provision of social care, such that many disabled people lost essential care and support services. Furthermore, survey findings from a Research Institute for Disabled Consumers study (2020) reveal that 50% (n = 421) of respondents were no longer receiving health or personal care home visits, despite having identified care and support needs. Similarly, over 3000 families of disabled children reported having essential care services stopped (Disabled Children's Partnership, 2020). In addition to the Coronavirus Act, the UK Government introduced lockdown guidance that discriminated against disabled people who needed to exercise outdoors more than once a day, and NHS England visitor guidance prevented personal assistants from accompanying disabled people with communication and high support needs when attending hospital (Simcock, 2020b).

Problems with Personal Protective Equipment (PPE): disabled people describe difficulties accessing PPE, while some direct payment recipients tell of insufficient monies to source such equipment, leaving them either to place themselves and their personal assistants at increased risk of infection or to cancel required support and rely on family and friends (Hoskin and Finch, 2020; Inclusion London, 2020). Deaf, deafblind and hearing impaired people have felt overlooked because of the push for universal mask wearing, owing to the substantial impact this has on communication and interpersonal interaction (Saunders et al., 2020; Simcock, 2020b).

Non-accessible or late information: a lack of timely, accessible public health information has also contributed to inequalities for disabled people. This has included delays in providing Covid-19 related guidance to direct payment users and disabled people living in supporting living accommodation (Inclusion London, 2020; Rook Sweeney, 2020), and a failure to provide British Sign Language interpreters at televised government briefings (Inclusion London, 2020). Particularly concerning is the failure of the Health and Social Care Secretary to produce guidelines prohibiting disability discrimination in relation to rights to life-sustaining treatment in the event of contracting Covid-19 (Inclusion London, 2020). This has resulted in psychological distress for many disabled people, who fear that they will be denied necessary health care (Hoskin & Finch, 2020) and sent a message that misrecognised the value of disabled lives (Singh, 2020. This is not a situation unique to England: Singh (2020 highlights allegations of medical rationing based on disability discrimination within the United States, and Rotenburg (2021) contends that across the world, limited consideration has been given to the prioritisation of disabled people for the Covid-19 vaccine.

Such injustices, often a direct result of government policy (Morris, 2021), have left disabled people feeling that they are ‘expendable in the fight against Covid’ (Hoskin & Finch, 2020), and there have been calls from disabled people’s organisations, academics and Members of Parliament for an independent, public inquiry into the disproportionate number of deaths of disabled people (Abbasi, 2021). Nevertheless, these injustices are not new: the pandemic has revealed and intensified existing and long-standing inequalities experienced by disabled people (Hoskin & Finch, 2020), including those related to access to health and social care (Rotenburg, 2021).

Disabled People and Phenomena of Hate and Mate Crime

UK legislation defines disability hate crime as

> A criminal offence motivated by hatred or prejudice towards a person because of their actual or perceived disability. It is also a criminal offence in which immediately before, after or during the offence the perpetrator demonstrates hostility towards a person because of their disability.
>
> (Section 146 of the Criminal Justice Act 2003)

In the UK there has been evidence of a rise, year on year, in reported incidences of hate crime specifically affecting disabled people. The disability rights charity United Response cite police figures for 2019–2020 which record 7,333 disability hate crimes reported across England and Wales—an increase of 12% from the previous year (United Response, 2020).

The phenomenon of hate crime directed against learning disabled people (intellectual disability) in particular illustrates the broader impact of social and economic inequalities (Sin, 2016; Healy, 2020. Underpinned by UK government austerity policies, the cuts to government funding for social care have reduced the opportunities for people to live independently with dignity and to participate socially (Malli et al., 2018; Ryan, 2019). The erosion of social care and the welfare benefits safety net for all in society appears to have contributed to an increase in hate crime against disabled people (Disability Rights UK, 2012; Quarmby, 2015). Ryan (2019: 47) contends that the UK right-wing media have fuelled disablist rhetoric, citing among others an article published in the Daily Express newspaper arguing for a ‘crack down’ on ‘sick note culture’.

In addition to the inequalities made evident by the Covid-19 pandemic discussed earlier, hostility and discrimination towards disabled people have also been compounded by the continued public health crisis. Research in the UK suggests that disabled adults have been targeted in public for not wearing face masks (Scope, 2020). A joint survey conducted by UK charities Disability Horizons and Leonard Cheshire reports on an increase of verbal and physical abuse to which disabled people have been subjected during the pandemic, citing examples of people being spat at in public, receiving online abuse for accepting food parcels, and accusations of being ‘less deserving’ of the Covid vaccine (Pring, 2020a). Value assumptions regarding the lives of disabled people are also evident at a systematic level within the health care system. A UK-based study found that learning disabled people had been automatically placed on an unlawful order of Do Not Resuscitate in hospital without prior consultation (Care Quality Commission, 2020).

The personal impact of this form of hostility is difficult to quantify. However, previous studies have pointed towards the significant impact on well-being that directly experiencing hate crime brings (Mencap 2000; Richardson et al., 2016). Hate crime victims are more than twice as likely to experience fear, difficulty sleeping, anxiety or panic attacks or depression compared with victims of overall crime (Office for National Statistics (ONS), 2019).

In 2017, the British Crown Prosecution Service (CPS) made a statement which sought to clarify the difference between a disability hate crime and crimes committed against disabled people. Crimes committed against disabled people are defined as

> Any crime in which disability is a factor, including the impact on the victim and where the perpetrator’s perception that the victim was disabled was a determining factor in his or her decision to offend against the specific victim. Some crimes are committed because the offender perceives the disabled person to be vulnerable and not because the offender dislikes or hates the person or disabled people.

Examples of types of crimes committed against disabled people are

> ‘Mate crime’ or ‘befriending crime’: the victim is groomed or befriended and subjected to financial or sexual exploitation; or made to commit minor criminal offences such as shoplifting; or the victim’s accommodation is taken over to commit further offences, such as taking/selling drugs, handling stolen goods, encouraging under-age drinking and sexual behaviour.

(CPS, 2017)

The usefulness of this distinction is debateable and raises questions about whether or not disabled people are automatically considered as vulnerable to crime owing merely to their impairment. Such questions have practical importance, as the ways in which both disability and vulnerability are understood by social workers directly influences practice (Fawcett, 2009), as considered later in this chapter.

Although in the UK there is no legal definition of the term ‘Mate Crime’, the term was coined to describe the sorts of coercive and abusive behaviours specifically experienced by people with a learning disability by so-called friends (ARC, 2013). Voluntary sector services in the UK continue to document the high levels of discrimination and harassment that many people with a learning disability (including people on the autistic spectrum) experience daily (Mencap, 2000; Chaplin & Mukhopadhyay, 2018). The increased prevalence of mate crime affecting people on the autistic spectrum in particular has also been identified (ONS, 2018. A regional UK study conducted by Charity *Autism Together* found that 80% of respondents had experienced bullying or exploitation from someone they considered a friend (Vasey, 2017).

The UK has witnessed high-profile cases at the ‘extreme end’ of mate crime, which has resulted in the violent deaths of learning disabled people. Steven Hoskin, Gemma Hayter and Keith Philpott are especially notable in that their abusers were regarded as friends (Equality and Human Rights Commission 2011).

The Murder of Steven Hoskin

In 2008, the Joint Committee on Human Rights produced a report entitled *A Life Like Any Other*?, following an enquiry into the extent to which the human rights of adults with learning disabilities were being upheld. In this report, they cite the case of Steven Hoskin, the details of which were summarised in the press:

> In a particularly disturbing murder case involving a man with profound learning difficulties, a teenage girl and two men tortured 38-year-old Steven

> Hoskin before forcing him to his death from a 100ft viaduct in St Austell, Cornwall . . . Yesterday, they were jailed for murder and manslaughter. As well as drugging him with 70 paracetamol tablets, burning him with cigarettes and forcing him to walk around on a dog lead, the offenders made Mr Hoskin confess to being a paedophile before killing him.
>
> (Guardian, Society, 31 July 2007)

The serious case review (a local authority commissioned inquiry following the death of an adult with care and support needs) into Steven's death was published later that year (Flynn, 2007). This review highlighted over 40 missed opportunities to intervene by a number of external agencies involved in Steven's life, notably police, social care, housing and ambulance services, pointing to a systemic failure on behalf of agencies to work together. Steven's death was not recognised or investigated as a disability hate crime. Nonetheless, due to his perceived level of vulnerability, it arguably falls into the category of a crime against a disabled person or mate crime (CPS, 2017;).

The review's recommendations led to an eventual change in English legislation, placing adult safeguarding (adult protection) on a statutory footing, including the introduction of Multi Agency Safeguarding Adults Boards (Care Act 2014). This legislation provides a rights-based framework for social work practice with adults in England and a more proactive approach to safeguarding adults. A rights-based approach for learning disabled people is also underpinned by UK social policy (see, for example, *Valuing People*, 2000 and *Valuing People Now*, 2009). This policy is founded on the concepts of normalisation and inclusion in society, challenging traditional assumptions of vulnerability and risk (Wolfensberger et al., 1972; Wolfensberger, 1983; O'Brien, 2006). Nevertheless, without a wider political commitment, which advocates for a joined-up approach to supporting disabled people to access housing, paid employment and public services, there is a risk that this becomes meaningless rhetoric.

Promoting Social Justice in Social Work Practice With Disabled People

Martinez-Herrero (2017) asserts that social work interventions will be ineffective unless informed by a social justice perspective. Consequently, social workers need to move beyond an understanding of social justice and develop an ability to put the principle into practice (Banks, 2006). In the context of increased social welfare privatisation, cuts to social services' budgets, constraining institutional policies, and an emphasis on individual approaches such as care management, to do so is particularly challenging (Ahmed, 2011; Kwong Kam, 2014; Postin-Aizik et al., 2019). In the second part of this chapter, we now suggest three practice approaches that support the promotion of social justice in the context of work with disabled people, starting with the importance of adopting a critical perspective.

Adopting a Critical Perspective to Practice

Critical thinking, critical reflection and critical judgment are essential social work tools for promoting social justice (Morgan, 2015; Mehrotra et al., 2019). Watts and Hodgson (2019) maintain that a lack of criticality in practice contributes to stereotypical and prejudicial views about those whom social workers support. In the context of work with disabled people, practitioners' understandings of disability influence their interventions (Odell, 2016). Perrin (2019) therefore encourages further research into diverse ways of knowing and understanding the phenomenon. Marginalising or ignoring these diverse understandings contributes to social injustice (Smith, 2010.

Notwithstanding the many ways in which a social model of disability has influenced national and international policy and practice, the medical model retains dominance, even in social work education and practice (Perrin, 2019; Thomas-Skaf & Jenney, 2020). Consequently, disabled people are perceived as 'defective folk' (Conway, 2018: 2), in need of professional intervention, charity or pity (Goodley et al., 2019). Koubel (2016) warns that social workers' interventions will be adversely affected if such a model is central to their understanding of disability, arguing that it results in infantilisation and a neglect of disabled people's strengths. This is echoed by Andrews et al. (2019), who refer to the way in which euphemistic language, such as 'differently abled' or 'special' denies both the structural oppression encountered by disabled people and also their potential. The impact of a deficit-based understanding is observed in the medical rationing policies during the Covid-19 pandemic, described earlier. As Ryan (2020) notes, the notion that an 'early death is somehow natural for disabled people is still worryingly prevalent'.

Associated with a deficit-based understanding of disability, and of particular concern to many disabled people, is their categorisation as 'the vulnerable' or even 'the *most* vulnerable' (Koubel, 2016; Stewart & MacIntyre, 2018; Ryan, 2019), a term used frequently during the Covid-19 pandemic and applied to disabled victims of hate crime (Mathews, 2018; Shannon, 2020). The perception of disabled lives as vulnerable lives has resulted in the disempowerment, dehumanising and 'othering' of disabled people and the denial of their human rights (Simcock, 2020a). Overlooking the heterogeneity of disabled people (Jenkins, 2018) and the fluid nature of vulnerability (Stewart and MacIntyre, 2018; Simcock, 2020a), perceiving people as *inherently* vulnerable owing to impairment is especially problematic. It results in failure to address the relational, situational and structural factors that construct their vulnerability, such as economic deprivation, unequal access to health and social care, and the abusive actions of others (Koubel, 2016; Inclusion London, 2020; Simcock, 2020a; Morris, 2021). In the context of hate crime, the vulnerability label may result in victim blaming (Mathews, 2018; Thomas-Skaf & Jenney, 2020) and sanction paternalistic intervention, resulting in over protection rather than access to justice (Simcock, 2020a).

The social justice-orientated social worker needs to adopt a critical perspective on the difficulties disabled people face and challenge dominant yet oppressive understandings of disability (Goodley et al., 2019; Hoskin & Finch, 2020). A starting point is to think critically about the way in which oneself understands disability. For example, when reading this chapter, did you position disabled people as service users only and never as social workers themselves? Mehrotra et al. (2019) observe how disabled people are presented as service users and never as social workers or social work students throughout social work course syllabi. Thomas-Skaf & Jenney (2020) recommend that social workers develop their knowledge by drawing upon the insights of Critical Disability Studies scholarship, a body of work rich in counter-narratives that challenge dominant understandings of disability (Goodley et al., 2019). As there is evidence of internalised disability discrimination among disabled people (Foster-Pratt et al., 2019), it is also essential for social workers to challenge negative self-perception informed by pervasive deficit-based understandings and to influence the attitudes of family members and other professionals (Gilligan, 2016; Freidman, 2019).

Social workers should also be informed by a social construction model of vulnerability (Kwong Kam, 2014; Koubel, 2016). There have been calls to pay more attention to the particular risks disabled people are vulnerable to, rather than the mere identification of the population as a vulnerable group (Simcock, 2020a). Nonetheless, Simcock (2020a) recommends that social workers explore not only what disabled people feel vulnerable about and to, but also the situations *when* they feel vulnerable, paying particular attention to situational, structural and pathological factors that construct such vulnerability. Adopting a social construction model of vulnerability also requires social workers to avoid stigmatising disabled people's dependence (Mladenov, 2016). Reflecting the theorising of Kittay, described earlier in this chapter, this involves acknowledging the universality of interdependence (Singh, 2020). Furthermore, it necessitates social work practice focused on the identification, recognition and promotion of disabled people's rights, on an equal footing with the non-disabled majority, and a move away from paternalistic and overly protective intervention (Koubel, 2016; Potten, 2016).

A final way in which social workers can challenge deficit models of disability is to utilise strengths-based approaches to practice, recognising and reinforcing disabled people's agency, resilience, and resources (Kwong Kam, 2014; Stanley, 2016). Smith (2010) argues that this goes beyond the identification of personal strengths, talents and skills that disabled people may have *despite* their impairments, and exploration of the ways in which particular conditions themselves are conceptualised as strengths. For example, participants in Simcock's (2020a) study on deafblindness describe their dual sensory loss as a 'gift', offering opportunities and insights that would have otherwise been missed. A strengths-based approach recognises the value and personhood of disabled people. In the words of Woodward (2020), 'We aren't simply disabled or vulnerable, we are also the policy makers, journalists, entrepreneurs and everything else you can imagine'. We now turn to consider how a focus on human rights assists social workers to promote social justice, paying particular attention to the UN Convention on the Rights of Persons with Disabilities, a legal instrument that eschews the 'language of vulnerability' (Series, 2020: 81).

A Focus on Human Rights

Like social justice, the promotion of human rights is considered fundamental to social work, as reflected in the IFSW definition. Social justice and human rights are not only conceptualised as interconnected (Martinez-Herrero, 2017), but the securing of human rights is seen as a mechanism for attaining social justice (Hodgson & Watts, 2017) and a socially just society perceived as one in which human rights are respected (Martinez-Herrero, 2017). Conway (2018) contends that disability needs better inclusion in human rights policy-making and public discourse, a position with which Krol (2019) agrees by highlighting a failure to secure disabled people's human rights as itself a disabling barrier.

Social workers may engage in a range of human rights-based practice, including advocacy and activism (Watts & Hodgson, 2019). However, as human rights are 'not just abstract concepts [but] are defined and protected by law' (Martinez-Herrero, 2017: 20), it is vital that social workers have a sound knowledge of human rights legal instruments and how they relate to disabled people's lives (Ahmed, 2011). There is a range of such legal provisions, many of which emerged over the latter half of the 20th century as a result of the campaigning activities of the disability movement, such as the Americans with Disabilities Act 1990 (Series, 2020). On a national level, other important instruments include the *Additional Protocol to the American Convention on Human Rights in the Area of Economic, Social and Cultural Rights*, the *African Charter on Human and People's Rights* and the *Incheon Strategy to 'Make the Right Real' for persons with disabilities in Asia and the Pacific (2013–22).*

At an international level, of considerable importance to the lives of disabled people is the *UN Convention on the Rights of Persons with Disabilities* (CRPD). This convention is described as the 'highest international standard to promote and protect the rights' of disabled people (UN Special Rapporteur on the Rights of Persons with Disabilities, 2017: 8) and a 'landmark achievement for inclusive law-making [and] disability advocacy' (Series, 2020: 80). Adopted by the UN in December 2006, the CRPD came into force in 2008 and was signed by 158 countries within its first eight years. It was developed by disabled people and is informed by a human rights model of disability, valuing disabled lives as part of human diversity (Krol, 2019). The CRPD places a range of obligations on states, including a requirement to ensure national legislation and policy are compatible with the convention, and responsibility to guarantee disabled people's access to wide-ranging support services. Although no country has yet achieved full compliance, for nations who have signed and ratified the CRPD, it is binding in international law (Series, 2020). Its enforceability in domestic law varies among signatory states, depending on whether they are monist (international conventions become domestic law if ratified) or dualist (ratified international conventions are only domestic law if parliament passes legislation to this effect) (Series, 2020). Nevertheless, even in states where the convention is not directly binding in domestic law, there is evidence that its provisions are informing the decision-making of higher domestic courts (see, for example, the UK Court of Appeal case *Burnip v Birmingham City Council and Another* [2012]). Furthermore, Mittler (2016) observes that even those states that have signed but not ratified the CRPD, for example the United States, have committed to respect the general obligations it imposes.

The purpose of the CRPD is described In Article 1:

> to promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity.

The remaining 49 Articles cover substantive civil, political, economic, social and cultural rights, both positive and negative, and provisions for their implementation and monitoring.

Series (2020) refutes the notion that the CRPD establishes no new rights, highlighting multiple novel provisions that speak directly to the experiences of disabled people, such as the right to independent living (Article 19). Indeed, the CRPD contains rights of particular relevance to the injustices faced by disabled people described in this chapter. For example, during humanitarian emergencies, such as the Covid-19 pandemic, Article 11 requires governments to take all necessary steps to ensure the protection and safety of disabled people. Article 16, the right to freedom from exploitation, violence and abuse, and Article 13, the right to access to justice are especially important to those experiencing disability hate crime. The latter is fundamental to the enjoyment of all human rights, yet several barriers impact on disabled people's equitable access to justice (Ruck Keene, 2020). The UN Special Rapporteur on the Rights of Persons with Disabilities, the Committee on the Rights of Persons with Disabilities and the Special Envoy of the secretary-general on disability and accessibility have therefore collectively produced specific guidelines on access to justice for disabled people. Ruck Keene (2020) believes that these guidelines have transformative potential in relation to securing disabled people's substantive rights. Notwithstanding the importance of the CRPD, Mittler (2016) observes limited understanding of its potential among welfare organisations. Consequently, it is incumbent upon social workers to raise awareness of the convention and the rights contained within it.

Although some legal provisions promote human rights, Krol (2019) refers to the role law and policy can have in maintaining social injustices faced by disabled people. For example, Steele (2020) examines the ways in which UK criminal law has contributed to the sustained oppression of disabled people, particularly that related to court diversion practices. Therefore, in order to promote human rights, social workers should support people to challenge existing discriminatory and oppressive law and policy, and lobby against any suggested legal changes that would have such effect (Watts and Hodgson, 2019). In the UK, such action has seen successful challenge to the discriminatory regulations relating to the prohibition of more than one episode of outdoor activity during the lockdown and the NHS England visitor policy preventing disabled people from being accompanied by a personal assistant if admitted to hospital, described earlier in this chapter.

Despite such positive outcomes, by itself, critical knowledge of the law is insufficient for the promotion of disabled people's human rights (Ife, 2010; Series, 2020). Hodgson and Watts (2017) emphasise the values element of human rights-based practice, which involves relationship-based practice focused on the 'human' in human rights discourse (Martinez-Herrero, 2017). In their exploration of social work in adult protection settings, Spreadbury & Hubbard, (2020) describe this practice as informed by a human rights *perspective* rather than a human rights legal framework. This requires more than just legal knowledge, but an ability to recognise human rights abuses, work to empower disabled people to secure their rights, and ensuring professional decision-making is informed by human rights principles (Martinez-Herrero, 2017; Spreadbury & Hubbard, 2020). The importance of such an approach is highlighted by Potten (2016), who describes the potential escalation of minor infringements of rights to systematic abuse. Adopting a human rights perspective necessitates social work involvement in advocacy, policy development, political lobbying and social action such as engagement in public demonstrations (Payne, 2020).

Being an Ally to the Disability Rights Movement

Describing it as essential to anti-oppressive practice, Kwong Kam (2014: 736) asserts that 'being an ally is key to advancing social justice'. Considered practice at the macro level, owing to its focus on the interests of particular groups (Payne, 2020), social workers have allied themselves to rights movements, such as the Civil Rights movement in the United States and anti-apartheid movement in South Africa, throughout history (Martinez-Herrero, 2017). In the context of disability, Foster-Pratt et al. (2019) contend that being an ally to the disability community is essential to the promotion of social justice, and such allyhood is recommended by both the World Health Organisation (WHO & World Bank, 2011) and UN Special Rapporteur on the Rights of Persons with Disabilities (2017). Moreover, collaboration between states and disabled people's organisations is mandated by the CRDP (Article 4(3)). Commenting on addressing inequalities faced by disabled people exposed by the Covid-19 pandemic, Liz Sayce, former chief executive of Disability Rights UK, emphasised, ‘We cannot go it alone. We need allies and there are lots of potential allies on this agenda’ (cited in Pring, 2020b).

Being an ally requires social workers to consider approaches focused on wider social change rather than methods of intervention aimed at supporting individuals (Watts & Hodgson, 2019). It involves forming alliances with disabled people’s organisations and self-advocacy groups at a local, national and global level (Goodley et al., 2019) and forming egalitarian relationships with disabled people (Kwong Kam, 2014). Kwong Kam (2014) maintains that being an ally means working *with* people and not *for* them and that such an approach necessitates the sharing of power and recognition of service-user expertise.

The particular expertise of user-led disabled people’s organisations has been highlighted (Morgan, 2015) and, like other social movements (Mehrotra, 2019), the potential for the disability movement and disability activists to effect social change should not be underestimated. Indeed, Iriate et al. (2016: 6) describe worldwide disability movements as ‘major drivers of change’. For example, the work of the disability movement was pivotal to the emergence of user-led organisations and rights-based legislation such as the Rehabilitation Act in the US and the Disability Discrimination Act in the UK (Morgan, 2015; Conway, 2018). In the context of social care, one of the most significant changes brought about as a direct result of the campaigning of disabled people’s organisations was the availability of direct payments as a means of meeting care and support needs (Morgan, 2015). Activism on a smaller scale is also achieving change, such as the campaigning work of a disabled students’ collective aimed at tackling discrimination experienced on campus at their UK-based university (Aylen, 2020).

Being an ally may involve collaborative community organising and development, group work, cultural projects, evaluation work, advocacy, and training and skills development (Watts & Hodgson, 2019; Payne, 2020). Social workers should draw on their networking and relationship-based skills to facilitate collaboration (Watson, 2019), bringing together disabled people and their organisations to address the concerns that matter to them (Thomas-Skaf & Jenney, 2020). Kwong Kam (2014) suggests that as an ally, social workers can assist organisations to identify and articulate disabled people’s needs; this in turn supports disabled people to inform the policies that affect them, essential to participation and thus social justice (Mladenov, 2016). Such work has been effective in addressing some of the injustices exacerbated by the Covid-19 pandemic described earlier. For example, a collaboration of disabled people's organisations and their allies presented a statement to NHS England, along with a list of guiding principles, in relation to fears that they will be denied life-sustaining treatment. This resulted in confirmation from NHS England that the NHS must safeguard disabled people's rights. Additionally, a number of local authorities in England decided not to adopt the option of downgrading their social care duties, made available by the Coronavirus Act 2020, following campaigning by disabled people's organisations and their allies (Hoskin & Finch, 2020).

The responsibility to promote social justice via effective social change may leave individual social workers feeling overwhelmed; being an ally to the disability movement offers the solidarity needed (Watson, 2019). Nonetheless, Goodley et al. (2019) argue that learning about disability necessitates embracing the expertise of disabled people. As such, allyhood with the disability movement not only provides such solidarity but also offers social workers the opportunity to explore their own biases, often influenced by ableism and a dominant medical model of disability (Foster-Pratt et al., 2019), and to explore how their professional knowledge and skills can best serve disabled people (Morgan, 2015). As Malinga and Gumbo (2016: 64) assert,

> [t]he struggle for disabled people is not a struggle for [non-disabled] people who can jump in and out of policy making: it is a struggle for disabled people, and all they need is support for the cause.

Conclusion

Despite the view expressed by some within the disability movement that social work no longer has a role with disabled people, we maintain that practice framed within a social justice perspective has a positive contribution to make. It is a complex, yet highly rewarding area of practice. Nevertheless, just as social work in disability settings is often overlooked in the academic and professional literature, so too has disability been marginalised by social activists, and the disability perspective on social justice ignored by policymakers. Though a very diverse population, various shared experiences of disabled people are considered social justice concerns. This chapter has explored some of these concerns and contends that adopting a critical perspective, focusing on human rights, and being an ally to the Disability Rights Movement, enables social workers to put the social justice principle into practice.

Suggested Further Reading

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