



Histories of Disability: The Good and the Great, the Bad and the Ugly

Foreword

Stories have the power to inform, to establish empathy and to inspire a journey towards change.

This exhibition presents an introduction to the histories and personal experiences shared by its contributors, who all have something of the disabled experience that they want you to know. Showcased here are examples of disabled life, its barriers, and successes, in all their wonderful and shocking reality. The 'ugliest' among them have been tagged with trigger warnings and if you consider yourself sensitive to some of the topics here made explicit, please progress with caution.

If you feel triggered by something you've read or you are struggling, please reach out for support now.

Whilst it is inevitable that elements of the disabled experience may be considered upsetting, these are far outweighed by the number of uplifting examples signposting goodness and greatness. As the exhibition demonstrates, the contributions of the disabled community are staggering and play a key role in the development of society as a whole. Through our passion, determination, intellect, resilience, sensitivity, and dedication, we make a difference.

It is important to recognise our partners. The idea for this exhibition arose from anthologies published by key staff at the University of Greenwich. With pieces exploring student experiences relating to xenophobia (Prof. Louise Owusu Kwarteng) and poetry offering insight into the experience of being transgender (Dr Cherry Smythe). Subsequently, I was keen to see our community voice its experience in a similar way. Community support for developing a project with a focus on disabled experience was clear from the start, with institutional champion Dr Melanie Thorley driving its promotion.

Recognition of the work Melanie does is essential, her lynchpin liaison championing participation and raising awareness. Her support provided the driving force this exhibition needed to succeed. Community partnership with her exceptional sector leading initiative that provides *Support Through AccessAbility Retention and Transition* (STAART) for disabled students, and the *National Association for Disabled Staff Networks* (NADSN) where she holds office as regional director, projected our calls for participation which were answered both domestically and internationally. Further to note, featured within this exhibition are the STAART Principles of Disability (SPOD), another UK first from Dr Thorley, illuminating what disability on campus means. Hence, the stories shared here extend across international borders, represent the perspectives and experiences of staff and students holding a variety of roles and progressing a variety of degrees at all levels, and representing a range of disabilities.

I hope you enjoy reading our slides, celebrate our imperfections and come away better resourced to enable the spaces we share. My greatest appreciation to all who contributed and helped make this happen.

Alan Dudley BA PG Dip MA (he/him)

University of Greenwich, Disabled Staff Community Co-chair 2022/23
NADSN Member and STAART Graduate



Histories of Disability: The Good

Disability Is (Not) A Barrier: For Blind Warriors, or Commercial Success

As detailed in my book-length study, *The Paths of Zatoichi* (2021), Shintaro Katsu played the famous blind swordsman in 26 films (1962-73, and in 1989), and in 100 TV episodes (1974-79). In addition to Katsu's 26 films, three other Japanese actors have portrayed the character in features released in 2003, 2008 and 2010. The character's popularity has also inspired other blind characters in Western media.

One of the earliest homages to the blind warrior, and Asian pop culture stereotypes, was *Blind Fury* (dir. Phillip Noyce, 1989). Later, the *Daredevil* series (2015-18) referred to the blind swordsman character through visual nods to both the *Zatoichi* films and *Blind Fury*. Then, in *Rogue One: A Star Wars Story* (Gareth Edwards, 2016), Donnie Yen plays the character of Chirrut Imwe. Yen has often claimed that it was his idea to play the character as blind, due to his love of the *Zatoichi* films.

Chirrut's heightened senses of hearing are explained through his knowledge of the Force, though he is not a Jedi. However, he falls into another category of character, as does *Daredevil* – that of the supercrip. Chirrut is portrayed by a sighted actor, and this is also true for all portrayals of *Zatoichi*. Josefina Walivaraa details how both *Zatoichi* and Chirrut are supercrips (2018, 1047-52), who are often depicted as having an air of wisdom and superiority to those around them. They may be intended as positive role models, but we must remember that these characters often have supernatural or fantastical skills.

But, these stereotypical portrayals often sell, as the blind warrior has typically been portrayed by multi-talented stars after the passing of Shintaro Katsu. This includes the entertainer, actor and director Takeshi Kitano (2003); model, pop star and actress Haruka Ayase (2008); and the former member of boyband SMAP, Shingo Katori (2010). Not only do such multi-talented stars sell, but so do popular characters and stereotypes, like *Zatoichi*.

Jonathan Wroot, DSC Ally

1. Walivaraa, Josefina. 2018. Blind Warriors, Supercrips, and Techno-Marvels: Challenging Depictions of Disability in *Star Wars*. *Journal of Popular Culture*, 51(4), 1036-1056
2. *This short article is an extract from a much longer blog post, available at the following web address:* Wroot, Jonathan. 2022. Disability Is (Not) A Barrier – For Fantasy Heroes, or Commercial Success. *Fantasy/Animation* website. Published on 13th May 2022.



Histories of Disability: The Great

Proud to be GRE: The 1st professor of disability studies in the world and father of the social model of disability

Mike Oliver 1949–2019, University of Greenwich Professor Emeritus

Mike Oliver was an intellectual giant who changed our thinking about disability, from its framing as solely a medical issue to one of human rights. Mike saw how the removal of barriers that disable people, preventing access to the everyday places and things that most take for granted, has the potential to open doors for more and more disabled people to achieve their potential. Through the 70's and 80's Mike's work and study accelerated, leading to the publication of his book, *Social Work with Disabled People*. In his book, Mike first coined the phrase 'the *Social Model of Disability*'¹ and in doing so, this seminal piece gave the disabled community the framework of language needed to address inaccessibility and discrimination, for the first time.

Mike's journey was not without barriers, however. In 1971 Mike left his first offer of a place to study at the University of Reading – where he was disabled by the complete absence of any support!² One year later he tried again with the University of Kent, where he established his academic career, obtaining BSc through to PhD in Sociology. It's worth noting that even though he succeeded, his success was in part due to the hands-on support of fellow students – who took the time to carry him and his chair up the flights of stairs necessary to access his classes. A situation which could quite as easily have again resulted in the course being dropped. Thankfully it didn't.

Identifying and addressing the barriers society puts in the way of disabled people was key to his paradigm and his understanding underpins the growing modern-day global movement towards AccessAbility. A master among proponents for disabled rights, Mike's work also led to a sizeable number of changes to legislation that now better support the rights of disabled people within the UK. Mike was driven by the desire to construct a society that supported disabled people to achieve their potential, steering away from the tragic notions of disabled people as unemployable. Today more and more disabled people are succeeding in their careers and our place, and contribution, is now more evident than ever before.

I think it's fair to say that Mike would be proud of the work we are doing here, through our partnerships uniting disabled staff across the University of Greenwich, disabled students through STAART and connecting the country through the National Association for Disabled Staff Networks. Working together to understand our identities, negotiate our needs, celebrate our successes, and work towards greater protections.

Alan Dudley, DSC Co-chair 2022/23, NADSN Member and STAART Graduate

1. The Shaw Trust, Disability Power 100. Mike Oliver 1949-2019.
2. The Guardian Newspaper. Mike Oliver, Academic and Disability Rights Campaigner. Obituary.



Histories of Disability: The Bad

COVID for Christmas

19th December 2020, a date etched in my mind! Sniff, snuffle, cough, but Christmas is coming and "it's only a cold". Come December 23rd, it clearly was not a cold, but as a Mum and a Nanna and completing the planning for Christmas, I was doing as much as possible for the upcoming week with family. By late evening of the 24th, Christmas was cancelled in my house, food, presents, and decorations were sent to the new host family, I curled up in bed struggling to breathe but sleeping most of the time. Christmas Day was a blur, on Boxing Day I found myself in an ambulance on my way to A&E with Covid-19.

After a 5 hour wait outside A&E in the ambulance, then an isolated 2 hours wait inside for a bed, I was moved to a "Covid Ward". Drifting in and out of sleep, with excruciating and laboured breathing, more drugs to kill the pain and an inability to even sit up with pillows, this 'thing' was debilitating. Unbeknown to me at the time, my close family members were terrified.

I opened my eyes on day 2, on oxygen. When I took the mask off, I became immediately dizzy and felt comatose, so I had to keep it on. I couldn't walk, my legs would not function, I didn't eat, it was a lot of energy to chew, and I could only manage shallow breaths as it was too painful for my chest.

Day 4, I managed to go to the bathroom, but I had to use a Zimmer frame (for my legs) with the oxygen tank attached (for my breathing). It took about 20 minutes there and back!

Slow wins were the name of this game. I had to show I could stay awake, eat, walk without a nurse following me to the bathroom, wean off major analgesics and remain independent of additional oxygen. The latter was the hardest, but after 10 days on extra air, I managed a whole day without the oxygen tank, and I was allowed home.

Four weeks later I attempted to work from home, not a smart move. My head was fuzzy, my thought processes were confused, my focus was shot. I still couldn't walk up the house stairs in one go, maybe I needed another week or two. A slow phased return was arranged, support from my Line Manager was superb, however, I still felt like a fraud, a malingerer, a skiver, a bit of a charlatan. After all, I looked ok.

Two years onwards in 2023, I am in a much better place. I acknowledge I still can't work for 4 hours straight without a break or do the housework as I would like. I can't walk up lots of stairs, sing as I used to or dance at parties and gatherings as I still cannot breathe without pain. In fact, my whole life has changed, and I must think about alternative ways forward. I am depressed, I am angry, I am frustrated, but I am also happy and glad that I am alive with a future, plus I have a marvellous family and the very best of friends who understand and support me.

Beverley Woodhams, DSC and STAART Member



Histories of Disability: The Ugly

Structural and Institutional Causes of Ableism within the Media Industry

⚠️ Trigger Warning ⚠️

Several media industry forces lead to the reproduction of prejudicial stereotypes about disability. Not only do most portrayals perpetuate harmful stereotypes, but almost all of them are made without disabled writers or actors¹. Disabled people are under-represented on television. In the real world, disabled people make up 18% of the total population, yet only 8.3% of on-screen characters and 6% of off-screen staff. They are also primarily concentrated in low-level positions². Inclusive casting, however, is not enough to address narrative inequalities; instead, a more holistic approach is required³. Physical inaccessibility of the industry is a contributing factor, with many studios and offices not even having accessible bathrooms⁴.

Research by the BBC found that a core issue in sustaining harmful portrayals of disabled people was that the industry was not recognising and understanding disability as a civil rights issue in the same way as other minority groups⁵. The medical model of disability is still the primary framework for presenting disability on-screen. This model helps to legitimise societal inequities by medicalising and individualising broader social problems⁶. News reporting, for example, tends to blame individual mental health for suicide without mentioning policy decisions that have significantly increased suicide rates⁷. It is common practice in the news media to seek opinions on disability issues from non-disabled people, and from non-user-lead charities, a practice not often considered acceptable for other minority groups⁸.

There are well-defined structures within the film industry that incentivise ableist portrayals for the benefit of non-disabled actors and audiences⁹. There are even ableist recommendations in core textbooks for teaching screenwriters, where physical difference is recommended as a method to visually convey moral difference, such as adding a limp to a character to suggest "being an emotional cripple"¹⁰; this relies on the idea of disability as a signifier of evil character¹¹. Ableist portrayals are frequently used in texts as examples of good writing¹². One frequently used example in these books is the critically acclaimed film 'Me Before You', which includes the implication that death is preferable to living with a disability, a view which is considered to be incorrect (and prejudiced) by the disabled community¹³. 'Cultural Imperialism' is one of the dimensions through which oppression operates, and specifically refers to when those with power in a society determine how those without power are thought and represented¹⁴.

Richard Amm, STAART Member

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Histories of Disability: The Good

How can those with disabilities empower themselves?

De Montfort University in 2021 launched its Empowering University strategy. This has led me to consider how those with disabilities can empower themselves. Through my own personal experiences and work I present 3 ways in which those with disabilities can empower themselves.

Challenge your internalised ableism – I feel this is the hardest to do. Ableism is prejudicial and stereotypical views and discrimination to those with disabilities¹. Internalised ableism is when those with disabilities internalise those thoughts to themselves². For me, this manifests in not always asking for support when I need it and find it hard to reveal when I'm struggling. The reason is I worry that saying I'm struggling will make people think less of me. This is not a helpful strategy as it means people don't necessarily know what reasonable adjustments would be beneficial for me. Internalised ableism is something I'm working on challenging within myself.

Know that confidence will grow with time – Your confidence will grow with time. I have more confidence in myself now than 10 years ago and am happier to seek out opportunities and network. Doing things can be scary but it is seeking opportunities that allow us to grow and therefore I encourage you to seek out opportunities. Whether your disability is visible, like mine, or invisible confidence can be hard. For me as someone with a visible disability I worry that people will make judgements about me when I walk into a room with my white cane even before I've opened my mouth. For those with invisible disabilities, it is deciding whether to disclose and the potential impact of disclosure. For example, worrying that they will not be believed.

Network – Networking for anyone in academia is important. However, when one has a disability there may not be that internal support network available through a disabled staff network. It is important to form external networks. One way to do this is join the National Association of Disabled Staff Networks (NADSN) which brings together staff from different areas (many members are in Higher Education) and LinkedIn which has a thriving disability community both in and out of academia. Through networking in this manner, you will have the opportunity to read/hear/meet people who you can potentially network with and other sources of support and information. LinkedIn gives you the opportunity to network with the wider academic community and raise your professional profile.

Through finding ways to empower ourselves, we as individuals with disabilities can collectively help reduce stigma and discrimination within academia and wider society. However, we need to appreciate the importance of academia and society playing their role as they need to take responsibility for reducing barriers.

Dr Meredith Wilkinson, NADSN Member

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2. Campbell, F.K. 2009. Internalised ableism: The tyranny within. *Contours of Ableism: The Production of Disability and Abledness*, pp.16-29



Histories of Disability: The Great

Disabled Radicals

Disabled people, as a political group, are not only incredibly diverse but have also been at the forefront of fighting for the rights of other groups. It is important to remember those who came before us as we continue their struggles for better world and equal rights for all.

Rosa May Billinghurst (1875-1953), was a suffragette, activist and social worker from Lewisham who campaigned for women to get the right to vote. She chained herself to the railings at Buckingham Palace, damaged post-boxes and hide rocks in her wheelchair for people to smash windows with. She would distract horses and charge police lines, using her chair as a battering ram. The police would often tip her from the chair or let the air out of her wheels. When she was arrested, she persisted in her hunger strike even after they broke her teeth to force-feed her. She once said: "In these situations I am invaluable, a wheelchair is highly useful, the hard metal of this clumsy thing is no match against policemen's shins!"

Evgenia Iaroslavskaia-Markon (1902-1931), was an anti-Soviet revolutionary who had prosthetic legs. She worked as an anti-religious academic lecturer, and later as a fortune teller and thief. She was an active anti-government and anti-authoritarian activist who also helped storm a prison to release political prisoners. While at a gulag in Siberia, she threw a stone at the head of the officer who had executed her husband and paid for that with her own life. She believed that "Everyone is innocent, sinless and not responsible for their acts, character is created by a chain of causation, that depends on everything in the world, not on the single person"¹.

Benjamin Lay (1682-1759), was an anti-slavery activist, feminist, quaker, vegan who had restricted growth. For a time, he lived in a cave with his wife, and likely owned the largest book collection in the USA. He was uncompromising and was cast out of many communities for his dramatic protests. Some of these included smashing expensive tea sets, walking barefoot in the snow and splattering slave-owners with fake blood. He believed that "We must truly and sincerely desire the present and eternal welfare and happiness of all mankind, all the world over, of all colours and nations"².

Albert Libertad (1875-1908) was an individualist anarchist who advocated for the dissolution of all hierarchies. He was described as magnetically attractive, a one-man demonstration, and the heart and soul of the liberation movement. He did not have full use of his legs, but he skilfully wielded his walking sticks in fights against the authorities. He thought that one had to embody revolution oneself by living free, instead of waiting for a better future. He was against conformity, work, marriage, military service, and voting. He believed that "All laws are wicked, all judgments are unfair, all judges are wrong, all prisoners are innocent."³.

Richard Amm, STAART Member

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Histories of Disability: The Bad

Spiralling

One thousand four hundred and sixty days, maybe more; this was my ugly truth. My reflection was a stranger, some sort of shadowy echo of a past life. I had intrusive thoughts, thoughts that were *not mine*. In this constant state of fear a hypervigilance, constantly alert, there was no silence, no relief for this overactive mind. Reality warped, lines blurred where did one begin and become the other, the definition was not clear. Grasping I tried to reach out to bring myself back, but it slipped through my fingers like sand in an open hand.

Time lost, but more than just that, I lost myself, my being, and my purpose. You become convinced you're still falling, spiralling down into the abyss. The stigma of diagnosis weighted me down, this label became my only definition; branded and tarnished with a blackened brush.

The ugly truth with disability is we often have wounds that will not heal there is no magic fix we just learn to move with them. One thousand four hundred and sixty days, it took to build, to grow to shut that door. Some things can't be healed by modern medicine, not like a dislocation or a broken bone but what we can do is encourage others to grow and understand. There is no magic wand nor a white flag you wave. My healing began when I realised my purpose was to help others with that very understanding, to draw that attention to the fact that disability and mental health are not linear, and it is not clear cut. Life is not just black and white it is far more complex than that, to accept myself I embraced living in different shades.

One thousand four hundred and sixty days it took me to realise I am not on my own, I am one of the 14.6 million in the UK.

Serena Christie, STAART Ambassador



Histories of Disability: The Ugly

Disabled Hate Crime: It should be an aggravated offence

⚠️ Trigger Warning ⚠️

Disability is one of five protected characteristics in England (along with race, religion, sexual orientation, and transgender). The Crime and Disorder Act 1998 provides a list of racially and religiously aggravated offences,¹ including criminal damage, assaults, public order offences and harassment. The Sentencing Act 2020 allows for the Crown Prosecution Service to apply for an uplift in sentencing for all the protected characteristics.² However, this means that for the remaining protected characteristics, which includes disability, the only outcome available in the criminal justice process is that the perpetrator receives an enhanced sentence. Even if an increased sentence is imposed however, it will not appear on the offender's criminal record because they have not been prosecuted for an aggravated offence for Disability. A further inequality exists where a range of conduct that is either intended or likely to stir up hatred on the grounds of race or intended to stir up hatred on the grounds of religion is also prohibited.³ Currently, Disability is not protected by stirring up offences.

Disability Hate Crime (DHC) needs to be put on an equal footing with race and religion. One of the Law Commission's recommendations in 2021⁴ was that aggravated offences that currently exist for race and religion should be extended to all other existing characteristics including Disability. The Law Commission recommended extending aggravated offences back in 2014 but no action was taken by the Government.

The current law does not achieve justice for victims of DHC. The police struggle to implement it because the aspect of motivated by hostility is hard to identify, unlike race and religious hate crime offences which are easier to identify as having aggravating factors. Enhanced sentencing only works if the initial crime is recognised as a DHC, and this is reliant on the police officer carrying out the investigation as to whether they recognise the offence as a potential DHC. Allies like me want to see not only improvements to the law but improvements in the way the police respond to DHC.

Dr Louise Hewitt, DSC Ally and Member

1. Sections 29-32 Crime and Disorder Act 1998
2. Section 66(3) excludes all racially and religiously aggravated offences. listed in the Crime and Disorder Act 1998.
3. There are six forms of conduct for stirring up hatred, including but not limited to using words or behaviour, displaying, publishing or distributing written material and presenting or directing the public performance of a play.
4. Hate Crime Laws: The Final Report, (2021) Law Com No 402 accessed on 6 December.



Histories of Disability: The Good

Acing Neurodivergence

I was just completing my MBA and thought it will be a good idea to revisit the dyslexia assessment that I'd started during my undergraduate study, ten years before.

I had been terrified when the assessor mentioned seeing a psychologist and being 47:53 dyslexic!

"There's nothing wrong with my head, I'd be fine, with the 50% part." I thought. I didn't go back.

I must admit, my results were not as I or my lecturers expected but I decided to forge ahead. I was okay... for a while. I set up a few businesses over 15 years alongside my teaching career. I was an experienced educator and leader who handled assessment, behaviour, teaching and learning in secondary school proficiently. I was spontaneous yet dutiful and systematic. When it was time to teach and assess adults for business, I found a way around that one too and had a time of my life training and coaching senior professionals, MDs, and CEOs.

Living with Dyslexia became apparent even though I had masked it all my life, but unknown to me, there was also ADHD and Autism in the mix. I suddenly experienced what I now know was a crisis of all three of the conditions – all at once which led to the assessment.

I was devastated. How would I find meaningful work in future? Could I keep masking all three for longer? Would my belief hinder my acceptance? What would people say?

Was there a trend with my work or preference of work that could have reflected my neurodivergence earlier or conversely, kept me going crisis-free?

What about my childhood? I recalled a teacher calling me slow and me hiding in my wardrobe for quiet – Had these things always been there? I began to see patterns that I'd missed and could have denied.

They simply didn't affect me at the time. I was always finding a better way to do things. This included planning earlier or rehearsing my response before social gatherings. I would also replay events to learn from mistakes to get better.

Needless to say, I went through a mourning phase after my initial assessment but later got revitalised. My faith and family became the only familiar things because I felt like a stranger to myself.

Adult neurominority is not unheard of, you are not alone. You have done well masking it, just know that you are different in a remarkable way. YOU can be focused, spontaneous, timely, creative, a solutionist...

Don't hold yourself back.

Where religion or culture stop others, I intend to build a bridge to help them understand – My research looks at people from ethnic minorities who do not understand or believe in being neurodivergent. Some BAME do not accept diagnosis of neurominority conditions hence are affected in study or work by the consequences of undiagnosed or unmanaged ADHD/ADD, dyslexia, dyspraxia (DCD), autism (ASD), OCD and others.

Tola Awe, STAART Member



Histories of Disability: The Great

Boccia – a sporting challenge

Boccia is a seated Paralympic sport similar to Petanque – inclusive to all. A friend introduced me to it, who's a Referee. I enjoyed watching a game. Suddenly I was given a quick assessment on how I throw, given the Classification of BC1 (Had no idea what/why/how] and unbelievably I entered myself into a competition, East Regionals in Colchester, 2 weeks later - October 2010, I think! Talk about spontaneous, 'Yes I will play!' – even though I had never played. Apparently, people who I watched play, started playing in school. Within 2 weeks I learnt basic rules of the game and was supplied with a set of balls. I took the train to Colchester, stayed the night in a hotel – did more walking with my walker than I wanted I'm telling you, with a bag of Boccia balls and an overnight bag. Everyone was friendly, welcoming – spoke to most people and got close to winning a game. Threw myself into the deep end? Yes. Worth it? Yes. Would I try again? Yes. AND...

In June 2012 I was looking for an interest away from being focused on university constantly and joined a local Boccia Club - an easy route to get to in my electric wheelchair. A chance to meet other people, learn a sport and have fun. I loved it. 5 of us decided to form a team. We entered our first competition in October 2015, Kent Friendly, it was great fun. The following year we entered the Kent League, we won and went through to the Nationals in Sheffield. We didn't win this but enjoyed the experience. I entered my first singles competition, categorised as a BC1 - because of my movement/ strength/ power of throw due to my Cerebral Palsy. Was classified properly this time, causing hysterics because the assessors asked me to try different shots and at one point instead of throwing the ball forward, I threw it backwards!!!!!! Luckily only a wall was there! I played against other BC1 players around the South/Southeast. Anxious was an understatement but also, I was excited. I came 4th. I thought this was it but got given a 'Wildcard' for the finals, and since then have advanced to the next level, achieving 2 silver medals and a bronze.

My first competition after Covid in Sheffield, I reached the finals for 1st or 2nd place, playing against a GB player, I won SILVER!!!

Invited by Boccia England to be an England Future Athlete!!! I have been designated a coach, to assist me to be the best I can be with the vision of maybe one day competing at a GB level.

I achieved my Level 1 in Officiating in April[2022] so can now referee Boccia game too.

In early August we started 'Charles Angels Boccia Club' named after a dear friend who we sadly lost; he loved Boccia. We meet 2 or 3 times a week to practice for competitions or generally to have fun.

Anyone is welcome!!!

Amy Lewington, STAART Graduate



Histories of Disability: The Bad

Functional Neurological Disorder: When will I be "normal" again?

18th July 2022, the day my life changed forever.

"Mum, I am having a stroke" I slurred as the right side of my face dropped. My body slumped, eyes rolling backwards, unresponsive.

Earlier in the day, I had started my first day with a law firm in Cardiff. I was meant to work remotely from home daily undertaking legal tasks. It had been one of the hottest days of the year, but the office had been ice cold.

I thought I was going to die. I was blue-lighted to a hospital in Bristol and assessed by the stroke team. I was eventually told 7 hours later that I was fit enough to travel home to Essex. We had only left the hospital at 2am, but I was back in an ambulance by 7am the following day.

I started to have seizures. The first seizure I had lasted over 2.5 hours. I wasn't able to control the shaking of my body, but I could hear everything – my parents panicking, the ambulance staff nattering and sirens going off.

Over the next few months, hundreds more seizures, two CT scans, an MRI scan and lots of appointments later, a private neurologist diagnosed me with FND known as Functional Neurological Disorder.

Functional Neurological Disorder was previously thought of as 'hysteria', now psychiatrists refer to FND as a conversion disorder meaning that stress is converted into physical symptoms.

There are different reasons for why individuals develop FND. Excessive stress is the most common reason. I was a claimant in two court cases, my sister was diagnosed with bowel cancer at 32 unfortunately this is now terminal, severe wisdom tooth pain which I was waiting to have surgically removed and previous trauma that had led me to become excessively stressed.

In my Employment Tribunal, the Judge decided that the actions of my former employer were a contributory factor in the development of my FND. Going through any court case is difficult and taxing, but to go through two at the same time and having to deal with slander was more than most could take.

I now have daily multiple seizures, drop attacks, dystonia, speech difficulties as well as issues with my mobility. I also now have to have a carer with me 24/7. I will be getting a wheelchair in the near future to help me get out more and to live my life.

Since becoming a FND warrior, I have seen even more accessibility issues which I will continue to work hard to be the best advocate I can whilst also going through rehab to return to a new Bethany.

Some days are harder than others, but I get through it thanks to my family and friends.

Bethany Howell, STAART Ambassador and DSC Community Project Officer



Histories of Disability: The Ugly

Eugenics in the [so called] free world

⚠️ Trigger Warning ⚠️

“Nobody’s free until everybody’s free”¹

Intervention to remove medically and permanently a [disabled] person’s ability to reproduce via forced sterilisation was practised widely during the 20th century. The roots of eugenics are largely attributed to evolutionary schools of thought emanating from the late-19th/early-20th centuries. Motivated by the vision of a society that would resemble the Sparta of antiquity. Proponents advocated for legislation mandating compulsory sterilisation to enable the realisation of a society unencumbered.

To date, this vision lingers among those who disregard the disabled community’s contribution to society. The courtrooms of Nuremberg, following World War II, hosted some of the most notable eugenicists in modern history. Where, Nazi defendants cited the US Supreme Court’s 1927 *Buck v. Bell* ruling², to justify the forced sterilisation of vast numbers of people representing a variety of minority groups. This piece of US legislation has never been overturned.

The inextricable links between compulsory sterilisation and the eugenics movement can be observed across examples targeting the disabled, low-class/-income, intersex, transgender, women, and ethnic minority groups. Unsurprisingly, the impacts are greater among those identifying with multiple ‘protected’ characteristics (UK Equality Act, 2010³). E.g., data from the US National Survey of Family Growth shows, 41% of disabled black women used sterilisation, in comparison with 28% of disabled white women. Compounding this, the Centre for American Progress points out that **as of 2022, 31 US states permit the forced sterilisation of disabled children**². The culture of eugenics pervading US thinking can be further identified through pro-abortion movements that lean into the ideology, promoting how disabilities can be identified and avoided through prenatal testing, and abortion.

What does reproductive justice for the disabled community look like? Can you imagine having the choice to raise a child or children and living within a safe and supportive environment, free from stigma? Most do. Language says it all, and moving away from discriminatory phraseology, such as ‘survival of the fittest’ or ‘from good stock’ is helpful. Instead, language use that affirms a place among us is at the heart of cultural change. Recognising the myriad ways in which disabled people positively impact society is crucial and, it’s not hard. Among numerous examples technology stands out – through everyday speech command systems like ‘Alexa’, surfacing in response to the needs of disabled people.

NB: Forced sterilisation is now recognised as a crime against humanity under the jurisdiction of the International Criminal Court⁴.

Alan Dudley, DSC Co-chair 2022/23, NADSN Member and STAART Graduate

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Histories of Disability: The Good

Pregnant and Deaf

I hadn't read about losing my hearing during pregnancy in glossy magazines. It wasn't normal.

My ears had been the reason I had missed so much school as a child. Coupled with tonsillitis, I was often laid on the sofa, in a sleeping bag, wading my feet around inside to find a way to cool down my body.

Antibiotics were given at every GP appointment back then, yet the infections' frequency remained the same. My eardrums scarred as a result and the tiny membrane became retracted, meaning it didn't vibrate quite right. I was officially deaf, with a little d.

Everyday life was manageable on most occasions. I could hear well enough, so long as I could see the lips of the person I was listening to. But when I was blessed with a successful twin pregnancy following several years of fertility treatment, I didn't imagine it might affect my hearing.

The twins were due to be born in January, and at Christmas time the year before, I had a common cold. My ears blocked, as they often do for most people, but mine didn't clear. I had less hearing as time went on and I relied more on lip reading.

'S' and 'F' seemed to help me to guess what people were saying. But during childbirth, I needed an epidural from an anaesthetist who would be injecting it into my back. If I couldn't see his lips, I couldn't hear when I needed to keep still. If I didn't keep still, I was at risk.

"I'll stand here, and you can look at me, Lou. I'll tell you when they say to hold still," my friend and birth partner said as she stood in front of me. I nodded and focused on her lips. When the time came, she told me, with eyes as wide as saucers, to keep still. Inside my body was a crunching noise, as if preparing chicken bones to make a broth. It was in, we did it.

We spent fifteen nights in the hospital as I couldn't hear the twin's cry. After feeding, winding them was difficult. I couldn't hear their gentle burps escaping, but I could feel them if I leaned my cheek on the top of their heads. Their body moved in a certain way once the bubble raised, and I knew the wind was up.

They were just seven months old when I was taken to hospital for a mastoidectomy. It was my most frightening operation. Possibly because I was now a mother, and I worried about my health, so I could take care of them. After several months, I gained back some hearing. Years later, the treatment still goes on every six weeks, but I have 30% hearing back. I enjoy music with them, we dance together to the beat of a tune, and the surgery helped me to watch them grow.

Louise Usher, STAART Graduate



Histories of Disability: The Great

Prof. Stephen Hawking: A beacon of resilience and intellect

At the young age of 21, Hawking was diagnosed with amyotrophic lateral sclerosis (ALS), a prognosis that was both life-changing and transformative. The journey that followed was nothing short of remarkable. Notwithstanding his physical constraints, he embraced cutting-edge technology to continue his communication and scientific work. He often shared his process: "I write the lecture with a computer program, which allows me to control a computer using a small sensor on my glasses which detects a single cheek muscle movement"¹.

Hawking's personal journey transcended the physical parameters of his condition. His life was a spectrum of emotional, psychological, and existential experiences that unfolded in tandem with his illness. The ALS prognosis, while undeniably challenging, served as a profound impetus for his unyielding determination and resolve. This was not just evident in his professional achievements, but also permeated his personal life, where he navigated the complexities of personal and professional relationships with grace and resilience.

His ex-wife, Jane Wilde, provided an intimate portrayal of their shared journey in her memoir, describing how despite their eventual separation, their life together was marked by shared victories against odds, enriching experiences, and the boundless will to thrive in adversity².

A staunch advocate for disabled rights, Hawking played an instrumental role in the enactment of the UK's Disability Discrimination Act (1995). This legislation was a milestone for disability rights, ensuring workplaces, including Cambridge University where Hawking spent his academic career, accommodated and supported the needs of disabled individuals. This played a pivotal role in shaping his own professional path and profoundly affected the lives of countless other disabled individuals³.

One of Hawking's most profound scientific concepts was that of 'imaginary time', which transformed our understanding of theoretical physics. This concept also metaphorically represented his approach to life, suggesting a worldview unbound by conventional physical and temporal limitations. It emphasized a life where his potential and achievements were not defined by his physical condition. As he poignantly put it, "I have found far greater challenges in life than in science. Don't feel bad for me. I don't. I have had a very full life"⁴.

Dr. Neil Turok, a colleague and friend of Hawking, offered a moving tribute to his spirit: "Hawking's greatest achievement, in my view, was his defiance of his disability to do science of the highest quality. It was a truly heroic demonstration of the power of the human spirit"⁵.

Yothin Luangkhot, Student and Ally

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5. Turok, N. (2014) 'Remembering Stephen Hawking', *Science*, 347(6216), p. 6.





Histories of Disability: The Bad

My teacher taught me social anxiety

When I was about 15 years old, I started to write a book and I showed the first pages to my language teacher. I am not an English native speaker therefore I think more accurate will be to say the Literature Teacher. Anyway, the teacher said that I should quit because what I was trying to do was not a genre of literature loved by many.

I was trying to blend sci-fi and fantasy, which back then was apparently not so well received according to her. I was very disheartened to say the least. Since that point in my life, I have written several research papers, but I could never write something related to fiction.

I tried to start writing again several times since then and I only managed to write around six pages at any given time, which I would delete as soon as the words of my teacher came to mind. Only now after I wrote two articles for STAART Newsletter and Melanie told me that they were fine from a writing style point of view I finally started considering writing again.

In addition, a few days ago I saw the post on social anxiety on STAART, which also gave me some courage, so I started to write again. For now, I am working on the first draft. I wanted to thank you for giving me some confidence regarding writing.

It meant the world to me. I love art and since my disability forces me to face some barriers regarding mobility while I paint or let my imagination create the world and characters of my book I am completely free of these so being able to pass over an old obstacle made from words with the help of STAART Community and Melanie means that for the first time in my life, I am writing whiteout fear a story that stayed with me for all these years, only I have never had the courage to write it down.

Marina Muscan, STAART Member



Histories of Disability: The Ugly

The Ugly Laws

⚠️ Trigger Warning ⚠️

Sometimes life can be frustrating for disabled folk. Many of us are still arguing for access to appropriate education, health, access to buildings, etc., etc., Whilst these difficulties are still apparent for many in 2023, hopefully this short article will demonstrate change is possible. *The Ugly Laws* were ordinances¹ in various American cities which prevented people who were deemed 'diseased, maimed, mutilated, or in any way deformed, so as to be an unsightly or disgusting object'². People who were included in these categories were not permitted outside or in public places. Fines for violating the Ugly Laws were \$25 (estimated at \$460 today) and a jail sentence of 25 days³. The last recorded arrest in relation to The Ugly Laws was in 1974⁴ in Omaha of a man who had visible scars on his body.

If such folk were detained for the audacity of going outside, they were held in a police station and then shipped off to a county poor house. County poor houses were often a euphemism for asylums and almshouses.

The Ugly Laws were first introduced in 1867 in various US cities under the guise of 'unsightly beggar ordinances' which prevented poor and/or disabled people from 'exposing himself or herself in public view'⁵. The Ugly Laws often prevented disabled people from getting married and having children⁶ which also included involuntary sterilisation. The final ordinance was repealed in 1973 in Chicago⁷.

A useful synopsis of *The Ugly Laws* can be found here⁸.

Dr Melanie Thorley, DSC Executive Officer, NADSN Regional Director and STAART Manager

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8. Ugly Law - Wikipedia



Histories of Disability: The Good

TikTok - Time Waster or Life Saver?

Doom scrolling for hours through TikTok is known to be bad for you in many ways. For me, it was addictive - I wasn't so hooked on the viral dance videos but more on the discovery of new information. To set the scene of my life a little, I was a high-achieving Politics Graduate from the University of Greenwich, I had some great jobs, but once the shiny name badge was not so shiny, I struggled to retain those jobs and redundancy, quitting, and dismissal had followed. As a multiple career changer, I could turn my hand to most things, from a Project Manager in Higher Education to a Small Business Consultant, on to a Software Engineer - not much could keep my attention like social media. The better job title should have been Social Media Addict!

I can't set the scene for the day my life changed as it started no different to any other - I was back working as a consultant after being made redundant in 2022. Work for the day got boring, so out came my phone to doom scroll again. Who knew the TikTok algorithm was about to change my life? Up popped a video about ADHD in women, listing off some common ways it presents itself. It caught my attention,

"Hmm, that sounds like me."

But I dismissed it. Some of my classmates in school had ADHD and spent most of their day running around the playground like a man-made cyclone. I barely made use of my gym membership; there was no way I was hyperactive, and I carried on scrolling. The beauty of TikTok is that it understands that the amount of time you pay attention to a video directly correlates with interest in said topic. About 10 minutes later, another video on ADHD in the workplace - again, I could relate. This pattern of watching these videos explaining symptoms that I thought were my personality, continued on for a few weeks. The more videos I watched, the more videos I connected with, the more the cycle intensified.

To cut a very long story short, I was fortunate enough to have a great community of ADHD'ers in my friendship circle and extended network - some I had no idea had ADHD. I was able to quickly start some homeopathic supplements to help me gain some control while I navigated the messy terrain of getting a diagnosis. The TikTok videos continued, with more advice on how to make ADHD my superpower rather than my nemesis. With a lot of self-reflection, another career change and a vital diagnosis, I am now in the happiest place in my life - I feel like I have been given the operating manual for how I function and could finally start to be productive rather than self-destructive.

They say (on TikTok) only one in four adult women have been diagnosed with ADHD, the lowest of any group. I am so grateful that I have been able to gain some control over my life, rather than letting life happen to me.

Katrina Harradine, STAART Graduate



Histories of Disability: The Great

How we got here

Upon finishing my undergraduate degree, with a first, people asking me what was next. My stroke had set me on a different path, and I knew further study next. I set off talking to people about the next stages and eventually landed on undertaking a PhD under my current supervisors at The University of Greenwich. After interviewing, I was accepted back to The University under a PhD program.

However, my disability means I needed to work from home one day a week and have one day of rest. This meant that I would need 4 years of study instead of the normal 3. Student finance only cover 3 years of a PhD program, so to ensure that I could complete my programme, I started a business (Barrier-Free World).

I then presented this new model of a funded PhD programme for disabled students to our vice chancellor Jane Harrington. I asked if the University could adapt a VC scholarship for a disabled person and, after pitching my idea at countless meetings and fighting for this new style of PhD in the University, I was able to secure the funding and trial of the new disabled PhD VC scholarship. Furthermore, the University reflected on their policies and now offer the traditional VC scholarship to part time students, something that was not available previously.

I am now working alongside the University to review policies that affect disabled and PhD students. I hope that I encourage more disabled students to undertake a PhD at the University of Greenwich and beyond and that the new VC scholarship can play a large role in this. This can not only lead to more innovation in the research, but also increase the amount of disabled academics and support for disabled staff. I believe this PhD model is unique to the University of Greenwich and I can't believe that I have been the catalyst to jumpstart it.

For me, this has been a fantastic learning experience. I have learnt that disabled people have a place at the table and can use their perspective and voice to change the society around us. I have learnt that because I think differently to my colleges, through innovation I am able to work in the field in which I am passionate and in the laboratory with support.

Even though my life is not what I had envisioned when I was younger, with support networks such as STAART, family, and friends, I have been able to achieve so much. This support network also allows me to continue to push the boundaries of what is possible and hopefully improves the lives for those who follow after me. As always, there are bad days, where nothing goes right, and I feel the effects of burnout and fatigue. But with this new PhD model, I have been able to manage my PhD workload without leaving early.

I can't wait for what is next.

Bradley Cory, STAART Graduate



Histories of Disability: The Bad

You can make baskets

"You Can Make Baskets" was what I was told when I was first diagnosed with MS.

One of my first symptoms was acute numbness in my left and right hands. As I was employed as a secretary that meant I'd lost the essential skill of fast typing. I was in shock, and I asked my consultant what I could do, workwise. This was nearly 30 years ago, when Mental Health was not widely acknowledged. In fact, he was wrong, as I would not be able to make baskets either due to both my hands being affected.

Instead of completely shattering me, the diagnosis spurred my inner strength and made me want to succeed and fight.

So, having had Multiple Sclerosis (MS) – a hidden disease! – since my late 20s, I have spent 30 years hiding my condition. Friends and Colleagues thought that I was just clumsy (dropping things due to numbness in my fingers); falling on occasions (not looking where I was going); and I always made a joke of it, never admitting to what I had. My mother also had MS, which she always hid due to the historical lack of understanding towards disabilities.

I was told not to disclose my disability by my family, and I learnt to hide my physical and emotional feelings, and any setbacks. Adding that being a single parent I needed to be strong for my 4-year-old child.

Since COVID I have found that my MS has progressed. I now use a walking stick due to both balance issues and a common system called "foot drop", made even worse when I'm tired. On one occasion at work a senior staff member, who did not know me well and in front of a few people, suggested that I had been drinking alcohol, which was pretty awful. "Have you had a few too many?" This situation was excruciating both for them and myself when I explained why I appeared unsteady.

I am now hyper conscious when going out not knowing if supporting infrastructure is in place, like the two handrails I need to get upstairs. On campus in Greenwich this renders Queen Anne largely inaccessible, and I dread having to walk too far between buildings. I am now not able to drive due to the lack of feeling in my hands and feet. Experiencing COVID and lockdown exasperated my MS and left me in a state of depression. I am grateful, however. Thankfully attitudes towards disabilities are improving and I, and other people facing similar difficulties, can be far more open about our circumstances. The more people learn about what it's like to live-with-it the more intuitive help can be offered.

DSC Member



Histories of Disability: The Ugly

Witches

⚠️ Trigger Warning ⚠️

Witchcraft was not made a capital offence in Britain until 1563, although it was deemed deviant and was denounced as such by Pope Innocent VIII in 1484. From then onwards, and until around 1750, some 200,000 witches were tortured, burnt or hanged in Western Europe.

Most supposed witches were usually older women, and invariably poor. Any who were unfortunate enough to be 'crone-like', with physical deformities, snaggle-teeth, sunken cheeks and a hairy lip, were assumed to possess the 'Evil Eye'.

Many were condemned on this evidence alone and hanged after undergoing appalling abuse including, beatings, banishment, cutting of body parts, amputation of limbs, torture and even murder.

In the 17th Century in particular, there were two notable examples - The first was the Lancashire Witch Trials in England, where twelve people were imprisoned and executed at Lancaster Castle. One of the so-called "Pendle Witches", Elizabeth Device, had a physical deformity. At the time people believed her condition was due to her association with the Devil.

The second was the infamous Salem Witch Trials in Massachusetts, which began in the Spring of 1692, after two girls in Salem Village began having terrible contortions and screaming fits. This ultimately led to nineteen people being executed for practicing witchcraft.

In both examples, the individuals physical disabilities were used and accepted as evidence of being a witch.

Fortunately, we've moved beyond physical persecution of people with disabilities, but there is still a long way to go when it comes to the way we are represented.

For example, the 2020 film adaptation of Roald Dahl's novel, *The Witches*, depicted the film's villain, the Grand High Witch, with misshapen hands and feet. Her strange features were designed to be horrifying and sent the message, that people with physical differences were evil and to be feared.

This is despite a ground-breaking workshop held by the UN in 2017 - the first-ever to discuss witchcraft and human rights in a systematic and in-depth manner. It brought together experts from all over the world, to discuss the violence associated with such beliefs and the groups that are particularly vulnerable to being wrongly persecuted. They made recommendations to improve legal frameworks and drafted guidance on how to investigate and make improvements, to prevent harm. But sadly, it has not completely eliminated the problem.

Vikki Wood, DSC Executive Officer

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Histories of Disability: The Great

Leonhard Euler – the triumph of a mathematician over blindness

Leonhard Euler (1707-1783) was a brilliant Swiss-born Russian mathematician who made ground-breaking contributions to many fields of mathematics, such as calculus, geometry, and number theory. He single-handedly started set theory ("Euler diagrams") and graph theory ("Eulerian circuits"). Euler introduced the concept of function and modern notation for trigonometric and logarithmic functions. He became famous with his natural logarithm base number e and "Euler's formula" $e^{ix} = \cos(x) + i \cdot \sin(x)$. He also applied his mathematical skills to physics, astronomy, engineering, and music theory. Along with Carl Friedrich Gauss (1777-1855), he is widely regarded as the greatest mathematician in the history of humankind.

Euler spent most of his career in St. Petersburg, Russia. He first moved to St. Petersburg in 1727, where he became a member of the St. Petersburg Academy of Sciences and succeeded Daniel Bernoulli as the chair of mathematics. In 1741, Euler accepted an invitation from Frederick the Great and temporarily joined the Berlin Academy, where he continued his prolific output of publications and correspondences. However, he faced some difficulties in Berlin due to his religious views and his preference for speaking French rather than German.

In 1766, Euler returned to St. Petersburg at the request of Catherine the Great, who awarded him a pension and privileges. Euler's extended family also moved to and settled in Russia, and he remained there until his death in 1783. He was honoured by the Russian government with a state funeral and a monument at his grave.

Euler faced a major challenge in his life when he lost his sight in one eye in 1738, earning himself a nickname of the "cyclops". He became completely blind around 1771. However, Euler did not let his disability stop him from doing mathematics. He relied on his amazing memory and mental calculation skills to continue his research. He also received help from his family members, especially his sons Johann and Christoph, who acted as his scribes and assistants. So, Euler's blindness did not diminish his productivity or creativity. In fact, some of his most remarkable achievements were made during this period.

Euler's life and work are an inspiration for anyone who loves mathematics and wants to overcome obstacles. He showed that disability is not a barrier to excellence, but rather an opportunity to develop new ways of thinking and learning. He also demonstrated that mathematics is a universal language that can connect able and disabled people across cultures and disciplines.

Oleg Tolmachev, STAART Ambassador

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Histories of Disability: The Great

Accepting my mental health through working at University of Greenwich

At 15 years of age, I developed a mechanism to cope with the pressure of exams and the unwanted stress from others that was beyond my control. If I restrained my eating, at least I was in control of one aspect of my life. Dropping to 7 stone, which at over 6ft tall is dangerously low, I was forced to the GP by my parents. Here I was informed I was extremely underweight and can eat what I want in life. Advise which as you may guess, was not helpful!

At 19 I began my undergraduate in a Russell group university. Living in London and away from home for the first time, there began to be different kinds of pressure. I was often looked down upon and ridiculed for my 'common accent' and for not fitting in as I came from a state school. I lost confidence, reclused in myself and this time begun binge eating to cope. I gained stones and spent weeks without leaving my bed. Struggling with my course, I contacted the wellbeing team who informed me that I cannot get extenuating circumstances for depression or an eating disorder. I can get 6 weeks of counselling, but I am not a serious case so there will be a minimum of a year's wait.

Not being able to get the correct help and support and being told that my depression and eating disorder is not a valid struggle, has caused me to hide it all my life. My mask never came off. That was until I began working for University of Greenwich. Student and Staff wellbeing is a top priority for this university, and with such institutional values I have realised I do not need to hide my struggles. Being honest to yourself and your line manager about your mental capabilities when struggling with depression has enabled me to manage my mental health so much better than I have ever been able to before. Sharing experiences through the disability network and STAART has empowered me, and I have become proud of how far I have come since that scared 15-year-old developed an innocent coping mechanism. Today I am happy to stand up in front of all our Student Ambassadors to explain my disability, how the university supports me and how we can support all students who are struggling in any shape or form. University of Greenwich has taught me so much about myself and I love how we support colleagues and students to achieve our greatest potential, disability or no disability.

Thank you, University of Greenwich!

Natalie Turner, Jobshop Manager, DSC and STAART Member



Histories of Disability: The Great

Positive for life

At around 6am, I was delivered to my parents Romeo Joseph and Dolly Perl.

Nearly 30 years later, I would return to that same hospital I was born in for the results of a blood test I chose to take after proposing to my future wife, I wanted to be sure I was healthy before embarking on a lifetime of marriage.

While my memory of that day has dimmed, the content of it is indelibly printed on my mind and something I live with every day.

"I'm sorry to tell you this but the results of your test are positive, you have HIV." My immediate and unequivocal response to that statement was one of faith in my saviour Yahusha HaMashiach (Jesus Christ). I replied, "that's okay, Jesus took this illness for me on his cross". With this scripture in my mind and heart: "**Isaiah 53:5** But He was pierced for our transgressions, He was crushed for our iniquities; the punishment that brought us peace was on him, and by his wounds we are healed".

Deep in my heart I knew this would not be the end of me, although, at the time, HIV (Human Immunodeficiency Virus) infection was a death sentence with not much known about it then or any treatment available.

I have faith in my creator to ultimately bring me to eternal life, I had my life to live. It did not seem appropriate to proceed with my marriage proposal, so I spoke to my fiancée and broke off our engagement.

We did eventually marry, seven years into our marriage we had a daughter whom I named "Faith." She was an answer to prayer, today, Faith is together with her partner and has given us two beautiful granddaughters.

This would not be possible without answered prayer and the hard work and research so many have put into finding treatments for HIV. For years I lived with the fear of passing it on to someone I loved, today I take 1 tablet a day that has rendered the virus "undetectable" in my body but more importantly, I'm not infectious and while I am HIV positive, I am positive for life!

Get tested, don't let shame or embarrassment hinder you, I plan to live a lot longer.

NB: For more full information about HIV and AIDS, testing and treatment, visit www.nhs.uk

DSC Member



Histories of Disability: The Great

Paralympic Movement

When invited to showcase a history of disability, I reflected on one of my passions and started to explore how impactful the Paralympic movement has been in creating a platform for sporting individuals to compete on a level playing field and engage in meaningful competition.

The Paralympic movement provides opportunities for athletes with disabilities to compete on a global level. Its roots go back to 1944 when the Government commissioned Dr Ludwig Guttman to open a spinal injuries centre at the Stoke Mandeville Hospital which led to the development of rehabilitation sport which progressed to competitive sport. In 1948, Dr Guttman organised the first competition for wheelchair athletes during the 1948 London Olympic Games opening ceremony. This was named the Stoke Mandeville Games and became a key milestone in Paralympic history.

In 1989 the International Paralympic Committee was created to oversee the Paralympic movement named to demonstrate that the competition amongst athletes with disabilities would take place alongside ('para') with the Olympic movement.

Anyone that has witnessed first-hand these amazing athletes can't help but be inspired by their athletic abilities, and a demonstration of the same qualities you see in able bodied athletes who dedicate many hours of training to test the limit of their athletic ability. Watching wheelchair athletes at London Marathon exposes the precision, power, tactics and focus as athletes draft, correct and make moves in their endeavour to be the best they can be on the day all at speeds of around 20mph!

The IPC developed a classification system that aims to group athletes by the degree of activity limitation resulting from their impairment and to ensure a level of fair competition. However, like other sports 'fairness' can be challenged, particularly with increasing use of sports science, technology with athletes quest to explore all angles to go longer, get faster, and get faster. This was more publicly exposed in 2012 with the Oscar Pistorius vs Alan Oliveira dispute about the length of Oliveira's blades. As with able bodied sports, the IPC has to put in safeguards to ensure only clean performances and fair technology is adopted across the sport.

I hope this piece has given a little insight into the history of the Paralympic movement and the impact it has had in exposing us to the pursuit of athletic excellence from athletes with disabilities. I hope you are inspired to get down earlier to watch the wheelchair athletes at the London marathon and get close to the athleticism and competitiveness that exists within the Paralympics movement.

Louise Watson, University of Greenwich Chief Finance Officer and Ally

1. The International Paralympic Committee. Paralympics History. Article. Website accessed, June 2023.



Histories of Disability: The Great

Steps to change from across the pond

The disability community in Winnipeg, Canada continues to face an inordinate amount of barriers in the pursuit of: opportunities equal with other individuals to make for themselves the lives that they are able and wish to have and to have their needs accommodated without discrimination. As the Chair of the Accessibility and Inclusion sub-committee and a member of the Human Rights Committee of Council for the City of Winnipeg, we pursue advocacy in the realization of this statement in our community.

History

To provide some brief context and history of the subcommittee: there were originally two committees that existed, the Citizen Equity Committee as well as an Access Advisory Committee. When the Human Rights Committee of Council was inaugurated, those two committees were dissolved, and the Human Rights Committee then had two subcommittees: Equity & Diversity as well as Accessibility & Inclusion.

The Mandate of the Accessibility & Inclusion Subcommittee includes:

1. To advise the Human Rights Committee of Council (HRCC) directly on the emerging status of the City of Winnipeg's current Accessibility Plan as submitted to the Province of Manitoba as part of our commitment to the "Accessibility for Manitobans Act", with compliance to the 5 key areas of Accessibility Standards including: Customer Service, Employment, Transportation, Information and Communication Technologies & Built Environments.
2. To work co-operatively with existing City Departments and community stakeholder organizations to better understand the emerging trends of accessibility issues for both providers and consumers of City of Winnipeg services.
3. To generate recommendations to the Human Rights Committee of Council via discussions pertaining to Accessibility & Inclusion at the City of Winnipeg.

Initiatives

1. A milestone that was achieved via the Accessibility & Inclusion subcommittee, was a motion moved by Chair and appointed citizen to the HRCC, Michael Baker to have the City of Winnipeg adopt a new Accessibility Icon coupled with an advocacy and education initiative.
2. A motion moved by the Chair and appointed citizen to the HRCC on July 7th, 2023, Michael Baker to have the City of Winnipeg support and implement a municipal campaign to collect metal tabs and funds for the purchasing of wheelchairs for local users/riders. This initiative will increase access in our community.

Progress is the sum of small victories won by individual human beings. Small victories are better than none. We don't have to engage in grand, heroic actions to participate in the process of change. Small acts, when multiplied by millions of people, can transform the world (Howard Zinn).

Michael Baker, NADSN International Associate

1. City of Winnipeg. City Clerk's Decision Making Information System. September 14, 2022. Executive Policy Committee Regular Meeting Minutes (Adopted)



Histories of Disability: The Great

The Thunder God

Rick Allen is a rock icon, ranked the 7th greatest drummer of all time¹ and known to his fans as the Thunder God. Since 1978 Rick has played with new wave heavy metal band from Sheffield UK, Def Leppard.

During a driving altercation in 1984 Rick's car veered into a stone wall at speed, resulting in a crash that cost him his left arm.

Rick was devastated by the accident and Def Leppard came to a complete stand still. Over the next 2 years Rick came back to his passion for drumming enabled by an electric drum set designed specifically to meet his needs. Foot pedals were extended to the snare, bass, hi-hat and tom drums, allowing Rick to adapt his technique.

In 1986 Def Leppard returned with Rick to play at Castle Donnington for the Monsters of Rock Festival².

Def Leppard are a British musical institution, having sold over 100 million records globally over the course of 45 years, they continue to tour, making new albums and playing live gigs to full stadiums.

March 2023, Rick Allen was subjected to a violent attack in the US city of Fort Lauderdale, occurring shortly after playing locally to adoring crowds. The brutal attack left Rick dazed on the floor and resulted in the injury of a woman who stepped in to help. Little is known of the attacker, the outcome of his subsequent arrest nor his motivation. As Rick said, 'I was on the floor and I raised my hand, and just said, I am no threat to you'³.

What goes through the mind of a young man that lashes out at a 59-year-old one-armed man, unprovoked?

Could this or should this be considered an aggravated hate crime?

Rick and his wife founded the Raven Drum Foundation in 2001, to support survivors of and responders to trauma – with the principle aim of supporting the recovery of both physical and mental health⁴.

Rick's recovery, resilience, brilliance, and his desire to help others, his empathy, are all qualities that define the disabled experience and are shared by so many of the disabled people we share our spaces with. The violence Rick experienced is illustrative of the hate experienced by so many and sends a clear message that we all must share these stories and play our part to stand up for change.

And, whilst standing for change we could do a lot worse for an anthem than Def Leppard's Pour Some Sugar on Me!
♪♪♪

DSC Member

1. Gigwise. Website. Magazine. Article, The greatest drummers of all time. 05/2008. Accessed, 06/2023.
2. Wikipedia. Article. Rick Allen (Drummer). Accessed, 06/2023.
3. ABC News. Def Leppard drummer Rick Allen speaks out for 1st time since brutal attack: Rick Allen opens up about his recovery months after he was assaulted. Article. Published 05/2023. Accessed, 06/2023.
4. Raven Drum Foundation. Website. Accessed, 06/2023.



Histories of Disability: The Great

STAART Principles of Disability (SPoD)

These principles have been created by self-selected University of Greenwich (UK) disabled students, disabled graduates, and disabled staff:

1. Disability includes physical impairments; neurodivergence (dyslexic and autistic spectra); mental health conditions; long-term health conditions; and/or potentially life-shortening illnesses.
2. We are not embarrassed and/or ashamed of our disabilities.
3. Some days are better than others.
4. Sometimes it may take us longer to work or study than our non-disabled peers, although sometimes we are quicker than our non-disabled peers to achieve the same results.
5. We are capable of great achievements.
6. Ninety-two per cent of our disabilities are not visible.
7. Disabled peers can be our greatest allies and successful supporters.
8. We are disabled people, not people with disabilities. We are (mostly) disabled by the environment and attitudes rather than our bodies and brains.
9. We are experts by experience (of our disability/disabilities).
10. We come in different shapes, sizes, colours, faiths, and genders.

Thank you to all the disabled students, graduates and staff members who contributed to the creation of the SPoD. Although the SPoD belongs to the University of Greenwich, we have attached a Creative Commons Licence to enable other organisations to adopt the principles if they choose.

Dr Melanie Thorley, DSC Executive Officer, NADSNI Regional Director and STAART Manager