

# Speech-Language Pathology: Medical or Social Model

Emma Grace Cornell: Understanding the Foundations of Disability



# Why am I passionate about SLP's and what they do?

- Through out high school and college I have dedicated time to shadow SLP's in a variety of settings, such as schools, clinics, and hospitals.
- It is my dream after college to be accepted and attend U of SC to become a Speech Language Pathologist.
- SLP's are professionals that have earned a master's or doctoral degree with a certificate of clinical competence from the American Speech-Language Hearing Association. They also obtain a state license where it is required.
- Speech pathologist are able to work in schools, homes, and hospitals to focus on social interaction, literacy, learning, speech, and swallow therapy.
- Speech pathologist's goals are to lead their patients to success using good communication through speaking, thinking, reading, writing and learning.



# Medical VS. Social Models: the problem

## Medical Model



The person is disabled by the abnormalities and deficits of their own body and/or brain.



Disabled people are broken, abnormal, or damaged versions of human being and should be fixed, cured, and/or prevented.



Since the disabled person's impairments prevent them from functioning normally, they need caregivers and professionals to make decisions for them. The disabled person is an object of charity and receiver of help.

VS

## Social Model



The person is disabled by their environment and its physical, attitudinal, communication, and social barriers.



Disabled people are normal, valid varieties of human being and should have equal rights and access to society, just as they are.



Since the disabled person is inherently equal, they have a right to autonomy, choice, and free and informed consent in their own lives.

# Medical Model vs. Social Model

- The Social Model described by Donaldson: This model argues that although an individual may experience challenges due to a specific impairment (motor, communication, social), their true disability results from the barriers to access and opportunity created by society, and seeks to identify ways to break down such barriers and capitalize on an individual's strengths to meet individual challenges. ”
- “The medical model seeks to normalize the population identified in its ranks.” The Medical Model often is seen to “fix” a disability rather than meet the individual where they are with the strengths they do have.
- To confirm the medical model's presence, almost 90% of doctors recommended genetic testing while the baby is still in the mother's womb. (Quinones)

# The power of communication

- Here is an example of how the medical model shapes our thinking into verbal communication is the only door to relationships, value, customers, success, and loyalty.
- Communication comes in a variety of ways, not just verbally.



# Why is there emphasized power in communication?

- Whether it be face-to-face or whether it is through a messenger app, people place power in communicating. To change stereotypes starts in our everyday life.
- I believe it is our job, those with Disability Studies backgrounds to help inform and educate parents, doctors, and genetic counselors, and those that are considering what they feel is the best for the child, whether that includes speech therapy or not.
- Something to think about: Why do we often see an emphasis in people with speech delays learning their native language rather than the people around them learning sign language?



# Universal Acceptance

- In “Finding Difference: Nemo and Friends Opening the Door to Disability Theory” a universal acceptance approach is used to by removing barriers from the beginning, and not modifying the disability. Disability Studies has defined several models through which disability can be interpreted.
- A quote that I like from Preston’s article is: “The disability is not what needs to be “fixed” and the person with the impairment is not wrong, but the social model rather, focus on how society can improve its integration of people as they are for who they are.” (Preston)





# My take-away...

- The outlook I have taken from studying and understanding disabilities is the importance of the person, not the disability. I believe that society today has made pressures for everyone to feel like they must contribute great deals to society through their occupation, specifically, in order to make a difference or matter through the medical model.
- By majority of society having this medical model mentality, not only limits and belittles the individual with the disability and shapes society's thinking around disabilities as a whole.
- The change starts with the individual to educate, advocate, and recognize how to advocate for social model mentality.



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