

INTRODUCTION

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There are at least three good reasons for publishing a reader on the topic of *Disability in Different Cultures*. The first is of a practical nature: this book is a collection of virtually all the contributions presented and discussed at the symposium *Local Concepts and Beliefs about Disability in Different Cultures* (21st to 24th May 1998 at the Gustav-Stresemann-Institut e.V. in Bonn, Germany). Here, people with disabilities from both North and South met with special education professionals, people working in development cooperation organisations and students and academics from different disciplines concerned with disability, and started a dialogue which is, we trust, reflected in this reader. It is the editors' hope that this dialogue, which was at most merely initiated at the symposium, can and will be continued in greater depth on the basis of this collection. The reader has the further aim of carrying the dialogue beyond the restricted circle of symposium participants and making it accessible and comprehensible to a wider public.

The second reason for the publication of this book relates to the experiences of many of those engaged in development cooperation and working in NGOs, experiences which represented an important impetus for organising the symposium and which, correspondingly, constituted the central topic of both plenary sessions and working groups. *Disability and Culture* is an essential issue in development cooperation. On the one hand, disabilities, whether physical, mental or emotional, can be seen as parameters for the structural disadvantaging and deficits of the countries with so-called *catching-up development*. They are very frequently the results of hunger, malnutrition and wars (cf. the contributions by Tietze, DeKeersmaecker and Boyce/Weera in this volume). Thus NGOs are confronted with the issue of disability, no matter what social and economic areas they are concerned with. On the other hand project planners – advisors, health educators and other socially engaged individuals – find again and again that their work cannot achieve the intended

results, is unsuccessful, is avoided or even completely rejected by the people affected, or that support for a particular person ends in personal disaster, because the target group attributes different meanings to disability from the planners. This can be illustrated by the example of the Cambodian mine victim who was fitted with a prosthesis in an NGO aid programme. Some days later, the man was seen begging at the roadside, minus prosthesis. When asked why he was not wearing it, he replied: Your prostheses can't feed me (Tietze in this collection, see also the contributions by Kalyanpur and Groce). One of the aims of the reader is, therefore, to create an awareness of the gaps in our knowledge when it comes to the framework of spiritual, cultural and socio-economic conditions which affect the issue of disability in different societies, and at the same time an awareness of how to reduce this gap, or rather, how difficult it is to acquire the appropriate knowledge.

The third reason for addressing the issue of *Disability and Culture* is the most wide-reaching, even if it is the least evident at first glance, and relates to the emancipatory potential of the topic. In exploring the wide variety of local concepts of and different ideas and beliefs about disability, it becomes strikingly clear just how differently a disability may be judged. In this light, *disability* can no longer be perceived as a physical, psychological or mental characteristic which a person is born with or has acquired in the course of her or his life. On the contrary, it becomes evident to what a large degree the attitudes and the interactions with others that are usual in the respective social context form and influence the nature and extent of a disability and thereby determine the life of the disabled person. This altered consciousness with regard to disabilities makes it possible to perceive a condition formerly held to be *natural* – where the disability was seen as an inborn physical state, entailing consequences viewed as inevitable – as something which can be both changed and shaped.

Over the last three decades, people who found themselves pushed to the fringes of society (women, ethnic minorities, gays and lesbians, disabled people) have stood up for equal rights on various political levels, whilst also pressing for representation and a voice in academic writing and research. This reader aspires to make a contribution to the discourse both of and about people with disabilities and the contexts of their experience. In addition, its intercultural nature is able to show with particular clarity that a discussion of *disability* always also incorporates *non-disability*, as well as the dominant concepts of normality. By looking at different social constellations, it reveals how variously people create normality, or conversely, make differentiations and draw borders. Each

conception of disability points to more comprehensive conceptions, to comprehensive social meaning structures, on whose basis for example incapacity, illness, invalidity, disfigurement, death and anomaly are differently rated and judged. A confrontation with the structures that regulate the social life of another society throws light upon the structures of one's own, which are otherwise often obscured (cf. Albrecht's contribution in this collection). Not only for people with disabilities does examining these structures make sense.

Since the 17th century at the latest, the populations of the South have been confronted with values and meaning structures alien to them, and forced to mediate between these and their own. For people from the North, this has hitherto not been necessary. The stream of exports of development aid – know-how, expertise, assistance, (special) educational concepts – flows from North to South. Conditions are attached to the aid provided, and there are frequently deliberate interventions in the social structures of the so-called beneficiaries.¹ Often however this type of influencing occurs subconsciously rather than on directly perceptible levels. As long as the flow of aid continues to take this course, then, it is important for the people of the South that those involved in development cooperation take local concepts and beliefs seriously, are interested in them, and occupy themselves with them. At the same time, such intercultural work is able to draw attention to experiences and knowledge in the field of disability which people are not (or are no longer) aware of. With reference to area of South East Asia, Miles' contribution in this collection shows just how important the history of disability and rehabilitation in one's own region or else one's own social and cultural reference group can be in the search for adequate forms of rehabilitation (cf. also Miles 1999). In his article, Kisanji indicates the awareness-forming potential of folk songs, proverbs and poems for school children in Tanzania, as regards both people with disabilities and the pupils' own traditions (cf. also Devlieger, see pp. 169–177). In certain cases, this “*archaeology of knowledge*” (Foucault) brings to light thought structures related to disability which have clear advantages over those shaped by dominant world-wide biomedical Western attitudes (cf. Kasonde's contribution); these could be the way forward for both South and North.

So what is suddenly motivating those from the Centre to now do what they neglected to do for years? The feasibility and success of projects, both of which have to be documented for the benefit of funders, undoubtedly play a not insignificant role here. An interest in the *doubly unknown* (Kemler 1988) – i.e. disability and (other) cultures – may also express the wish to know more about oneself. When inhabitants of the

North start becoming receptive to the concepts and beliefs of other cultures, this is a sign that they are opening up. Part of being open to other cultures inevitably entails being open to one's own; that is, prepared to puzzle over habits and things normally seen as self-evident, inclined to inquire into their meanings, to question them, and finally, to orientate oneself anew and arrive at an altered consciousness of one's own significance (self-consciousness in Mead's sense).

DISABILITY AND CULTURES: SOME REMARKS ON THE CONCEPTS

How Does a Disability Come About?

If we assume that the significance of disabilities varies according to cultural context, and that what is a disability in one context is not one in another, then it would appear that the very foundations essential to intercultural understanding have caved in under our feet. Since as early as 1980, the World Health Organisation has been trying with its three-dimensional differentiation of disability to take into account the fact that it is not sufficient to perceive disability merely as a physical or mental characteristic. Instead, it has to be seen in relation to the expectations a given society has of an individual. Thus a physical/organic and mental abnormality and/or loss of function which can be demonstrably established (impairment) is only the first dimension in this model (cf. WHO 1980: 27). A second dimension – known as disability – concerns “any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being” (WHO 1980: 28). The third dimension, handicap, is the “disadvantage for a given individual, resulting from an impairment or disability, that limits or prevents the fulfilment of a role that is normal (depending on age, sex, and social and cultural factors) for the individual” (ibid.: 29). This three-dimensional definition avoids a question, however, which always intrudes itself when encountering different societies: does it make sense at all to perceive impairment, if a person is socially integrated? In other words, why diagnose an impairment when there is no handicap? Or putting it differently again, the question could be posed as follows: for whom is it important to thematise impairment at all?² The answer could lie between two poles. On the one hand, it may be an important issue for the individual with a disability seeking rehabilitation measures that could remedy physical or mental irregularities and reduce suffering. On the other hand, impairment is thematised by those

for whom abnormalities and irregularities are carriers of significance in those symbolic structures that govern their respective societies. This is not always the case in the same way. It is valid for countries of the North, like for example the U.S.A., where the only “complete unblushing male” is portrayed as a “young, married, white, urban, northern, heterosexual Protestant father of college education, fully employed, of good complexion, weight and height, and a recent record in sports” (Goffman 1963: 128). Against this background, damage of a physical, intellectual or emotional nature always carries the message of not being successful and not being capable of succeeding, of being condemned irrevocably to leading a worthless existence. And virtually any deviation carries this message of damage. Damage is also a carrier of significance in those regions where an abnormality or irregularity is seen as a message from another perceptual world, and may be interpreted either positively or negatively (see the articles by Gbodossou and Rösing).

It is surely no coincidence that the people who distance themselves the most from impairment, the individual defect, in their definition of disability, are those affected themselves. Self-help movements from different countries explicitly oppose the medical model, which concentrates on the disabled individual and aims at *undoing* an impairment as far as possible, so as to make the individual submit to a concept of normality which has no space for disabilities (see the contributions of Kern, Perez Cruz, Malinga, Miles-Paul). These movements develop their own way of seeing, in which disability becomes a variety of human needs which a society has not adjusted to and is not in a position to satisfy. The individual defect turns into the ability (or lack of it) of the society to adjust (social model). In thinking this social definition of disability through to its logical end, generally accepted value hierarchies are turned on their heads. Rehabilitation and medical care take a completely different position on the scale of importance. They are no longer placed at the beginning of social integration for people with disabilities, but become self-evident accompanying factors (see Perez Cruz: “We don’t need to be cured first in order to live”).

The self-help movements’ social definition of disability is undeniably an umbrella, one under which people with disabilities from every possible social context can take their place without any problem. Variety thrives under this umbrella, and the fact that *those affected* are stringing together a discourse in no way detracts from the power of that discourse. Every discourse includes and excludes, legitimates and de-legitimates, operates with strategies which are often more orientated towards testing their power in the political and/or the academic arena, than towards

those who are not participating in the discourse as subjects (cf. Hark 1998). Here we are faced with the second challenge that the contributions in this book have posed, in very different ways. How do experts (of any genre) acquit themselves in regard to the unique and particular life-worlds of those they study, with whom they work, with whom they live? How do they make themselves aware of their own ontological and epistemological assumptions, which also inform every communication (cf. Marfo's contribution)? These questions concern the concept of culture.

A CONCEPT OF CULTURE

Let us assume that structures of interrelated meanings are what regulate social life. These kinds of symbolic orders take shape in speech, in religious beliefs, philosophies, family structures, gender arrangements, the relationship between humankind and nature, in art and value systems, to name only a few of the elements which can be subsumed under the generic term *culture*. These elements are almost always the result of a long history of encounters, demarcations and combinations of symbolic orders. Symbolic orders are at the same time essential orientations in socialisation. To the extent that individuals stand in a relation to the surrounding order and find ways of dealing with it, finding affirmation in or else dissociating themselves from it, so they develop as conscious persons. Every culture receives a dynamic impulse from the fact that the relationship between signs and symbolic content leaves room for interpretation (take for example the word *culture* [=sign], whose symbolic content has been defined again here for the x-thousandth time) (cf. Sahlins 1994: 310ff.). When people whose socialisation has taken place according to different orders meet, this cultural dynamic becomes evident. Viewed on the level of interaction, its character (initially at least) is one of communication difficulties. On the level of the individual, an identity game results: for some it represents primarily an enrichment of their everyday life and widening of their horizon of perceptions, for others a drawing of boundaries and a struggle for power "which needs to be fought anew in every social relationship" (Hofbauer 1995, our translation). People with disabilities develop their identity with reference to a symbolic order which allocates them a special place. Devlieger argues in his contribution that this place often lies in "no man's land". With a disability, people are neither familiar nor unfamiliar, neither well nor ill,

both irresponsible and responsible. This place *in-between* is not the same in all cultures; and what it means for a migrant with a disability to have to orientate her or himself in different symbolic orders is shown by Ouertani's article.

What Can a Perspective of Intercultural Comparison Offer?

While it is not possible to engage in an exhaustive discussion of the potential and limitations of intercultural communication here, the editors consider it important to mention three points which ought to be included in a discussion to which this book will hopefully bring a new impetus. Firstly, intercultural communication presupposes a large degree of self-reflection, relating both to one's own position, and to the assumptions underlying one's perceptions. In the North, the significance of the self-reflexive discourse is being increasingly recognised – a necessity resulting from the structural inequality between the participants when people from North and South communicate. Inhabitants of the South as well as migrants have been and are often forced to acquiesce to symbolic orders which negate them as equal players on various social levels. The task of developing an identity from this was and is left to them. In comparison to the experiences of coercion or force which so often accompany this search for identity, and have turned and continue to turn it into a tightrope walk, people in the North are able to develop their identities in ethnocentric, if not racist and xenophobic ways, with relatively little interference, by discriminating against what is identified as foreign (ibid.: 19). In response to excluding behaviour of this kind there seems nevertheless to be one possible sanction, i.e. not to allow communication to take place. Secondly: if we see cultures as mixtures of symbolic orders in a globalised world, coalitions may arise which run counter to national, territorial and ethnic affiliations. In this book, Kofi Marfo thematises the extent to which academics and researchers can be seen as members of different cultures at all, if their professional socialisation takes place within one and the same order, which structures their perceptions. It is by no means unthinkable that two sociologists from Mexico and Germany are able to communicate with more immediacy with one another than when the one communicates with her Zapotec relatives in the highlands, and the other with her aunt and uncle in a Westphalian village. The third point concerns the danger of seeing cultures as static, self-contained structures – a viewpoint which often also involves considering foreign traditions as something that one has no right to interfere with, and that should not be touched. What results is the opposite form of behaviour to colonialism: where earlier other traditions – and these are

also cultural concepts – either didn't interest anyone or were else suppressed and forcefully assimilated, now they are voyeuristically kept at a distance, and are trotted out routinely as a reason why it is impossible to find a common meeting-point. Traditions, though, are the result of thousands of years of communication; or, in the words of Al Imfeld: "Traditions are like geological layers going back at least 300,000 years" (Imfeld 1999: 5, our translation). The dynamic of traditions often produced encounters which were not *herrschaftsfrei*, i.e., they entailed some form of domination (for example wars [cf. Tietze's contribution], slavery, colonialism, assimilation). By no means all the forms and structures established and strengthened in this process have to be treated with respect and approval, simply because they bear the label *traditional*. This applies for example in the case of barren women who are ostracised and expelled from their social environments, as Erick Gbodossou describes for the Fatick Region in Senegal and the Mono Region in Benin (in this collection). Traditions have always changed, and can always change further. Democratically oriented communication is able to play an important role in this.

What Role Can Cultural Studies Analyses Play in the Understanding of Disability?

As already mentioned, people with disabilities, in that they are people with stigmas, abnormalities, irregularities, are very often themselves carriers of significance, and "stand out". Stiker, writing in this book, thematises the issue that although "power, sexuality, religion, poverty, gender" have been and continue to be analysed in relation to their symbolic content in different cultures, infirmity (as a generic term for illness and disability) is seldom addressed. In the social sciences, the structural functionalist approach categorises people with disability as being no less *deviant* than criminals or homosexuals (an "assignment to a group" which Goffman's sociology of everyday life approach fails to relativise); whereas the historical materialist disposition regards the status of people as *disabled* in relation to economic usefulness. In politics, disability is counted as a social problem; to *solve* it, acceptable solutions are being sought (acceptable above all to the state coffers, that is). But statutory measures are often ineffective. In Germany, for example, the law lays down that enterprises above a certain size have to employ a certain proportion of people with disabilities. Only too often do employers prefer to pay a monthly "fine" of DM 250, rather than take on a person with a disability. The widespread view that having a disability means *incomplete* or *defective* life may provide an explanation for this

behaviour (cf. Kern in this collection). Thus, analyses from the fields of cultural anthropology and sociology of culture are able to contribute to a more complete analysis, in that they register and include the differing symbolic content of the phenomenon found in societies (cf. also Devlieger, see pp. 297–303, and Dossa in this collection).

THE CHAPTERS AND INDIVIDUAL CONTRIBUTIONS

The meeting of symbolic orders is a theme running through all the chapters and articles. *The first chapter* includes contributions which can be seen as exemplary presentations of concepts and beliefs relating to disability in different cultures. As such, they refer to various areas of symbolic orders. *Rösing* and *Holzer* examine local contexts in South and Middle America, and show how the cultural meaning of disabilities determines the way those affected are treated, as well as their daily lives. Both articles relate the ascription of meanings to the structuration of economic and social life in the respective societies and by so doing, expose their striking differences to postindustrial Western society. The contributions of *Gbodossou*, *Kisanji*, *Miles* and *Turmusani* deal with various areas of the symbolic order in local contexts. *Gbodossou* presents the holistic religious and spiritual cosmovision in two regions in Senegal and Benin respectively, in which disabilities cannot lead to exclusion from social life (with the exception of *barren* women, see above). People with disabilities frequently find their place in society as traditional healers. *Gbodossou* gives some results of a wide-ranging survey of this profession, people with disability and people caring for them in the named regions. *Kisanji* shows the symbolic power of images in dealing with disabilities, and how they occur in folk songs, proverbs and stories. He demonstrates how these could be included in a concept of integrative education, sensitising pupils to their own cultural context, and also to people with disabilities and their many-sided and also positively-seen roles. Using the example of the South East Asian context, *Miles* outlines a way of obtaining knowledge of the history of disability and forms of rehabilitation. By analysing ballads, for example, societies can gain insights into the meanings of disability and thus free themselves of the myths imposed on them from the outside. *Turmusani* analyses positive and negative attitudes to people with disabilities in Jordan, and discusses the extent to which these can be traced back to the *Qur'an*. The author also thematises the changes in meaning in relation to disability that are

being initiated by the work of NGOs and which reinforce certain negative, individualising effects of the image found in the *Qur'an*.

The last two contributions in this chapter have as their focus the meeting or else the comparison of concepts from North and South. *Kasonde* contrasts bio-medical thinking with the everyday notions and knowledge of people in West Africa and indicates various social structures which underlie these concepts. *Albrecht* discusses the extent to which cultural comparisons can contribute to improvements in the practice of special education in the North. With reference to a comparative study of the role of the father in the upbringing of children with a disability, he illustrates how comparative studies of culture can contribute to a better understanding of the conditions and problems connected with one's own methods of child rearing.

Chapter II concerns three specific areas of experience related to the vast topic of migration. Against the background of her experience as a special educator, *Kalyanpur* examines four concepts used in the bio-medical approach to disability, showing how and where these collide with the cultural conceptions of migrants (disability as a physical phenomenon, disability as a chronic illness, disability as an individual phenomenon that can be fixed). On the basis of his personal experience of migration, *Ouertani* thematises differences in the systems of social security in Germany and Tunisia. From her point of view as a special educator, *Merz-Atalik* discusses how the meaning attached to disability is not so much culturally determined – if culture is related to national or territorial affiliation – as dependent on the family or even on the individual.

Chapter III deals, on various levels, with cultural encounters in development cooperation. *Devlieger* views the current state of affairs in the dialogue between North and South as characterised by a competition between global and local knowledge systems. He sketches how this competition could be overcome via cooperation between universities, the political sphere, and (self-help) organisations. *Tietze* and *DeKeersmaecker* both report from their NGO work in various Southern countries. Using the example of *Medico International's* work with landmine victims in Angola, *Tietze* describes the difficulties that arise on the one hand in the context of the "culture of poverty" (Lewis 1971) in war zones, and which on the other may be encountered in the attempt to make systematic assessments and estimations of disabilities. With reference to his experiences in a number of projects run by *Handicap International*, *DeKeersmaecker* discusses the relevance of cultural concepts. The following three articles address the meeting of cultures on the level of project

planning. *Burck* thematises the significance and the difficulties of obtaining local knowledge about disability and integrating it into project praxis. *Wirz* examines the aspect of international training courses for project planners and managers (in particular CBR projects³). She emphasises how important the different preconditions with regard to expectations of training, expectations of service and expectations of service planning which the participants bring with them are for the success of the course. *Finkenflügel* analyses the daily routine of CBR projects, in which expatriate and local co-workers meet on various levels of project organisation. The last two contributions in this chapter refer to the cooperation between professionals and parents. *Kalyanpur* names three cornerstone Western values – equity, choice and individualism – which can lead to communication difficulties between special educators with a training orientated towards Western knowledge systems, and parents from Asiatic cultural milieux. *Van der Putten* presents the results of a study of child rearing practices which Jamaican mothers routinely carry out with their infants. These practices are a part of that knowledge which is handed down from mother to daughter, and has the purpose of encouraging growth and suppleness in the children. These are beneficial rehabilitation methods when an impairment is present. They also enable mothers to identify such impairments early on. The practices are an example of local knowledge that it is both useful and necessary to take into account in rehabilitation projects.

In the *IVth chapter* four authors who are active in the self-help movement present their organisations. *Kern*, U.S.A., thematises the fact that women with disabilities are particularly affected with regard to rehabilitation, CBR and development projects in both North and South. By the example of the international whirlwind networks, she demonstrates the problems that arise because the specific situation of women (with disabilities) is, again and again, not given sufficient attention in project praxis. Women have drawn their own conclusions about this, and in 1994 founded whirlwind women, a network that can now point to experiences in many countries in both North and South. *Perez Cruz*, Mexico, gives a portrait of a self-help group in Oaxaca City. He thematises the priorities of the group's work, as well as the concept of disability and of an independent, autonomous life towards which the work is oriented. *Malinga*, Zimbabwe, stresses the need for people with disabilities to fight for equal rights, and rights in general. *Miles-Paul*, Germany, states which central policy principles are embraced by the international Independent Living Movement: equality and anti-discrimination laws; the de-medicalisation of disability; no singling out or exclusion, and the

greatest possible integration into the life of the community; the greatest possible control over their own organisations and over the services for the disabled by the disabled themselves; peer counselling and peer support for the empowerment of people with disabilities (cf. “Basic Principles of a Self-Determined Life” in Miles-Paul’s contribution, pp. 279–280).

The Vth and final chapter deals with methodological questions which have arisen in the course of researching local concepts and beliefs about disability in different cultures. Cultural concepts are not simply revealed to strangers to a culture; a whole series of conditions and boundaries which get drawn into the research, or else are inherent to it, have to be considered as well. Ethnology and anthropology have a long tradition of developing different methodologies and methods for tracking down cultures and their development, and for reflecting at the same time on the cultural assumptions that the researchers contribute themselves. Some methodological approaches and methods are explained in the contributions to this chapter. *Groce* starts it off with some general ideas which concern both the relevance of culture in looking at disability, and the demands which should be made on the methodologies used to research the phenomenon. In this, she places great emphasis on interdisciplinary project designs that cross the borders of specific subjects and professional fields. *Devlieger* presents arguments for a “cultural theory of disability”, to be developed trans-culturally while at the same time being able to grasp the specificity of particular cultures. Disability can, universalistically, be termed an “interstitial category”, which “acknowledges that people with disabilities are the same and different” (see page 299). The theory becomes relativistic when cultural areas in one place at one time are studied with regard to these kinds of interstices, like for example language, art, rituals, religion, political discourses, etc. *Dossa* too sketches methodological-theoretical guidelines for the study of disability, ethnicity and gender. She stresses the significance of action-theory approaches (for example, Giddens’ “structure and action” [1979]), in order not to see culture as a static construct. Those affiliated to the culture are not only products (=victims) of it but (re)produce structures themselves. By means of three areas – live narratives, space and embodiment – subjective and objective mechanisms can be identified, which produce stigmatised differences like gender, ethnicity and disability, and confirm them again and again. *Marfo* presents philosophical and methodological reflections, relevant both to researching cultural concepts, and to research itself as an “intrinsically cultural activity” (see page 317). As long as the epistemological (concerning the relation between the knower and the knowable)

and ontological (relating to the the nature of reality and what is knowable) assumptions that researchers bring with them into their studies are not made explicit, their results necessarily lose something of their validity. If the assumptions are made explicit, then it becomes clear that the division into local and expatriate investigators becomes blurred, since researchers in both the South *and* the North are socialised into scientific concepts that have been developed in the North.

The next two contributions deal with the contextualisation of disability on the level of project praxis. *Vreede* takes up the assertion that concepts of disability do vary widely and are dependent on usual activities of daily living (ADL) in the community under study. The social context determines which activities it must be possible to carry out, alone or in cooperation with others, to master daily living. This concept can be seen as the basis for an empirical approach which leads to a definition of disability which “establishes the priority needs and solutions from the community’s perspective” (Boyce/Weera in this collection). The potential of ADL is demonstrated by *Boyce* and *Weera* in their work in war zones. They examine the extent to which different definitions of disability are suited to planning “immediate, institutionalised and community based rehabilitation programmes which can alleviate human sufferings and the disruption of routine activities, caused by physical injuries”. They favour the ADL approach (*Vreede*, see above), since concrete, ideology-free socio-environmental factors can be included in the project planning and work. *Turmusani* presents a further research method which has found acceptance not only in research *on*, but also primarily *by* people with disabilities – the so-called Participatory Rapid Appraisal Method. In this method, the aim is to involve the target group on all levels of the research planning and execution, and thus to link the research process with the process of project implementation. *Stiker*’s contribution concludes the chapter with a discussion of cultural theories of disability. He stresses the significance of the symbolic content which disability has in every society, in one way or another. The contribution of Historical Anthropology is discussed with reference to, and in dissociation from discourses from sociology and anthropology in particular. The overview over theories and developments which results in this way creates a meta-reflection, upon the background of which different directions in view-point and thinking appearing in the reader can be considered (anew) and put into place.

Editorial Note

In this reader there are articles written in both British and American English. The respective spelling conventions have only been kept consistent within each article. By consciously preserving these differences, we hope that the reader will succeed in reflecting the multicultural nature of the symposium from which it results.

Quotations from texts which are not in English, and of which no English translation exists, have been translated by us.

NOTES

- 1 This happens for example when the IMF and the World Bank make structural adjustment measures a condition for awarding credit.
- 2 The WHO nowadays uses the terms *impairment*, *activities* and *participation*. But these new dimensions are still impairment-based (see Vreede in this collection).
- 3 CBR “is a strategy within community development for the rehabilitation, equalization of opportunities and social integration of all people with disabilities” (see Boyce and Weera in this collection, p. 337).

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