DISABILITY FROM PHILOSOPHICAL PERSPECTIVE

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"พิการ" เป็นคำที่สามารถเป็นอุปสรรคแก่ความเข้าใจได้ เนื่องจากภาพลวงจากความที่เป็นคำสามัญทั่วไป อันที่จริงคำนี้นับเป็นทางบรรจบของปรัชญาและการปฏิบัติเนื่องจากสามารถเข้าใจความหมายได้หลากหลาย ขึ้นอยู่กับกรอบแนวคิดทางปรัชญาที่ขัดแย้งและมีนัยเชิงนโยบายอันแตกต่างกัน ในบรรดากรอบแนวคิดเหล่านี้ ที่ทรงอิทธิพลได้แก่รูปแบบเชิงการแพทย์และรูปแบบเชิงสังคม แม้ว่ารูปแบบเชิงสังคมจะเป็นปฏิปักษ์กับรูปแบบเชิงการแพทย์แต่ก็มีฐานคติแบบเดส์การ์ตเช่นเดียวกัน จึงนำสู่การกดขี่คนพิการ ไม่น้อยไปกว่ากัน ประเด็นนี้ถูกเปิดโปงในงานด้านการรื้อโครงสร้างของนักวิชาการสายหลังสมัยใหม่/หลังโครงสร้างในทุพลภาพศึกษา ดังนั้น จึงได้นำเสนอกรอบแนวคิดของฟูโกสำหรับการปลดปล่อยผู้พิการ โดยมิให้มีการกดขี่เป็นผลตามมาด้วยนั้น เพื่อให้ง่ายแก่การพิจารณา จึงนำเสนอผลการวิจัยผ่านกรณีศึกษาของ เธเรซา ชาน สตรีผู้มีความพิการซ้ำซ้อนที่ได้รับการบอกเล่าในภาพยนตร์ที่ได้รับรางวัลเรื่อง "Be With Me"

Abstract

"Disability" is a term that can be very disabling to our comprehension because of its illusory commonness. Embedded in conflicting philosophical frameworks with different policy implications, it is such an intersection of the philosophical and the practical. Most influential among these frameworks are the medical model and the social model of disability. Despite its declared animosity toward the former, the latter shares its Cartesian presuppositions and therefore leads to no less oppression of the disabled. This is exposed in the work of deconstruction by later postmodern/

poststructuralist scholars in disability studies. To liberate the disabled without oppressive side effects, a Foucauldian framework is thus offered as an alternative. The case study of "Theresa Chan", a multiple-disabled woman as portrayed in the award-winning film, "Be With Me", is herein used to facilitate the presentation of the research results.

1. Introduction

Although it seems simple, the term, "disabled" is a complicated concept whose meaning varies from one philosophical framework to another. And the adoption of one framework over the others has great implications on social policies. In this research report, the two widely adopted frameworks are subject to critical analysis, and an alternative framework developed within the Foucauldian tenet is considered. The case study of "Theresa Chan", a multiple-disabled woman as portrayed in the award-winning film, "Be With Me", is herein used to provide a common ground for the analysis.

2. Theresa Chan

The winner of five international awards, the film "Be With Me" was inspired by the autobiography of Theresa Chan'. Becoming deaf at 12 and blind at 14 years old, the multiple-disabled lady was in her 60's at the time of the film production. She was able to communicate through word-by-word pronunciation but unable to hear her own voice. She was once in love, but cancer took her fiancé away. Despite all these tragedies, she was a perfect human being fully living her life. She devoted herself teaching disabled students and depended on her own strong self when she travelled, cooked, exercised and wrote her autobiography.

Apart from Chan, the film features three inter-woven story lines. In "Meant to Be", a story is told of an old man incapable of facing the truth that his wife had departed. Although a shopkeeper, he was a talented cook. His estranged son, a social worker taking care of Chan, eventually introduced the old man to her, who cured his distress of departure with

her autobiography and gentle touch. In another story, "So in Love", two teenage girls, Jackie and Sam, developed a romantic intimacy keeping contact by mean of texting through the Internet and cell phones. The love, serious and passionate for Jackie, was considered by Sam to be experimentation. Upon finding a new boyfriend, Sam left.

"Finding Love", is a story of secret love, told about Fatty Koh, a security guard in a big office building who fell in love with a lady executive. She was confident, beautiful and stylish, which was quite contrary to the timid, coward security guard haunted by childhood memories of family violence. Each day, Koh was obsessed with only three kinds of activities: Eat, watch the lady, and plan a confession of love. He finally decided to give the lady a love letter. Yet, he was killed on the way when someone dropped on him. That person from the sky was the heartbroken Jackie, who had committed suicide by jumping off a building. The social worker came in and took care of the surviving girl. It was probable that he would be a bridge for Jackie to meet with Chan, the life inspirer.

Why is it said above that Chan is a "perfect" human being? The film communicates this idea through pictures of activities. Chan did everything that other characters did; but not everything that Chan did was done by each one of the characters. The old man cooked and read; Fatty Koh ate and wrote a letter; Jackie and Sam went to school, wrote and sent texts through the internet and cell phones, and enjoyed leisure. Chan did all these: She cooked and ate, wrote and sent, went to school, and enjoyed leisure.

There was but one trait that she didn't share. That was found in the case of Koh stricken with the memory of his abusing parents. Chan was different for she was not haunted by the tragic past. It is evident that Koh was the only character who never touched love no matter whether it was from his parents, colleagues, the office lady, or even Chan. An objection may be raised that Koh was not different since he suffered from a tragic past just like the others. A closer consideration shows that his tragic past was not due to a broken heart but to 'injustice', which can be related to Chan, for whom the multiple disabilities and the departure of the loved one can be described as 'unjust' fates. Another remarkable feature was that Koh solely was a 'taker', which was portrayed through the scenes of his eating and also through that in which he was unable to be a 'giver', i.e.

when in an elevator and incapable even to move himself to help a boy being abused by his father. Koh's obsession with the past injustice and inability to be a giver are what prevents him from becoming a perfect human being.

There is one thing that Chan did while all others didn't – Chan gave. All other characters desired to 'take' from someone whereas Chan, who suffered most, gave love to everyone. In the end before meeting with Chan, the old shopkeeper cooked for Chan upon the request of his son, the social worker; and he cooked to his best even though Chan was not yet 'somebody' to him. Just then, the old man became what Chan was - the one who gave without discrimination. Finally, he met and received love from Chan, the universal love that inspired, comforted, and gave life a meaning. More than this, one activity that all characters evidently shared throughout the film was the travel, which reminded us of *samasara*. It seems, on the path of life, only those can find the true happiness who are self-emancipated from injustice, in quest of love, and offering love.

3. "Impairment" or "Disability"

The story of Theresa Chan provides an excellent means to understand disability from a philosophical perspective. People can be surprised if someone says it is more appropriate to say that Chan is 'impaired' rather than 'disabled'. Why? That is because of the assumption that impairment and disability are one and the same. Endorsement and refutation of this assumption is a key to grasping the debate on the definition of disability. Those who agree with such identification are thinking within the philosophical framework of medical model. In Thailand, they usually are healthcare personnel, social workers, policy makers, and people in general. As a result, it can be deemed as the mainstream understanding of disability. Those who find the above assumption disagreeable support the social model of disability. They usually are scholars in the field of disability studies and advocates of the rights of people with disabilities.

The social model has not yet been mainstream – not only in Thailand, where it was recently introduced, but also in the West, especially the USA, where the disability rights advocates declared the victory of the

social model in 1990 when the Americans with Disabilities Act (ADA) was enacted. The reason is that progress in bio-medical science and technology (e.g. cloning, genetic selection, advanced prosthetics, etc.) carries with it the presupposition that disabilities are physical, including the implication of discrimination against disability and the determination to eliminate them.

Impairment is a kind of bodily defects, formal and/or functional. Disability is an inability to perform daily, social and occupational activities as normal people do. According to the medical model, the disability is a natural consequence of the impairment. Therefore, for people with impairments, disabilities are inevitable, and this holds true in every social context. However, Michael Oliver, who first introduced the philosophical framework of the social model, challenged this idea by arguing that disablement doesn't result from physical impairments, but from social arrangements. That is, people with impairments are 'dis-abled' by social institutions. Therefore, the disablement is the result of social oppression. In other word, people with impairments are not dis-abled in the just society.

The term, 'oppression', is used because, according to the social model, the society does not pay attention to the needs of impaired people and draws the resources that should be allocated to meet these needs to benefit the majority of people who do not suffer from impairments. The new definition of disability inaugurated by Oliver is welcomed even by normal people because it draws attention to the fact that all of us can somehow be dis-abled when the social arrangements are not suitable. Different situations testify to this insight e.g. tourists who cannot understand language on street signs, young boys who cannot use relatively too high a urinal, children who cannot reach a public telephone, pregnant women and elderly people who cannot climb up stairs.

The social model can free disabled people from various, especially emotional, impacts from the medical model, within which the goal is to change them to be like normal people. The latter model is embedded in the Cartesian dualistic framework, which separates mind from body. The human self is identified with the mind that should be under the control of reason. The body, in which the mind resides, is just one among other physical objects in the world and thus subject to the external control, the

natural laws. According to this framework, the mind should be in control of the body the way Science controls the natural world.

As for people with impairments, their mind seems to fail to control their body. Many succumb to grief over their own fate, fail in rehabilitation, and give up their efforts. These are signs that they do not meet the standard of what it is to be a human being. The other side of the same coin is the appreciation given to those impaired persons who never grieve over their own fate, succeed in their rehabilitation, and never give up despite failures. Both derision and admiration confirms the Cartesian framework, which even leads the impaired people to blame and punish themselves.

The advocates of the social model consider it to be unjust the expectation to change the impaired people so that they have the characteristics of the 'human beings' as defined by the Cartesian framework. Many kinds of impairments defy rehabilitation, which means that many impaired people are cursed to always fail. According to the social model, instead of the impaired people themselves, the spotlight should be on the society. Indeed, people with impairments are not 'the losers' but 'the oppressed'. The shift of perspective greatly restores impaired people's self-esteem and encourages them to fight against the oppression. Eventually, the social model becomes highly influential among disability rights advocates and scholars in the disability studies.

4. "Impairment" in "Disability"

However, deconstruction by the later postmodern/poststructuralist scholars in the disability studies discloses that, in fact, the social model supports the medical model. Therefore, this makes it not a surprise the above example from the USA, in which the admiration for the successful campaign for the ADA is side by side with the dismay caused by the scientific and technological progress. The attempt of those working on the basis of the social model to turn the dis-abled into the able – so that they are just like the normal – is the clear sign that, in the social model, the same goal as found in the medical model is present – to change impaired persons to be like normal persons. This is to use 'the normal person' as 'the norm', which can be termed, 'normalization'. Moreover, the Carte-

sian idea of 'mind over matter' is also present. A difference is that, as for the social model, 'matter' is understood as the physical environment and social arrangements, rather than the body as it is the case in the medical model.

Consequences from the medical and the social models are therefore similar. In the context of new and 'enabling' infrastructure acquired through campaigns based on the social model, any disabled people who fail in rehabilitation are subject to emotional pressure and humiliation, and labeled as 'losers' and 'burdens' by their kind, normal people who 'pay the tax', and the state who provides the welfare system, which leads to similar experience they undergo in the framework of medical model i.e. self-blame and self-punishment. Moreover, the social model lends support to the medical model in another dimension through its implicit reiteration of the idea that the impairment cannot be separated from the disablement.

Even though the social model's definition of disability helps people to realize that dis-ability is common experience, none at all call them 'people with disabilities' those normal people who are dis-abled by the infrastructure. This is an indirect confirmation that the term, 'disabled', is specifically for the impaired people. Therefore, both the medical and the social models do not only highlight the presence of impairment, but also insist that they belong to the natural, not social, realm.

Postmodern/post-structuralist scholars in the disabilities studies, especially those influenced by Michel Foucault, question the idea of 'mind over matter' and that of impairment as belonging to the realm of nature. They argue that the mind is actually constituted by an external condition i.e. discourse that constructs reality and deploys both the material (e.g. the body, objects, spaces) and the mental (e.g. self-identity) in such a way that they are in agreement with the constructed reality. The important point is that 'normality' as a discursive construct provides a criterion for constructing 'abnormality', which includes 'impairment'. The discursive power drives the process of normalization with the effort to turn the abnormal into the normal. Therefore, the true oppression stems from 'the good will' to help impaired people to be normal or close to normality no matter whether it is understood in terms of 'normal body' (in the medical model) or of 'normal way of life' (in the social model).

Why is the normalization considered to be a form, or even the origin of all forms, of oppression? In the West, it is disclosed that the model of normal human being is the white, heterosexual, and able-bodied male. Based on this model of normality, abnormality is constructed. Of course, those who fall into this category are homosexuals, non-whites, women, and impaired persons. This provides a justification for subjecting them to the process of normalization. However, since they will never fit the normal model, the process continues forever. Therefore, it is not unreasonable to deem oppressive the constant effort to change people into something they can never be.

Power has both repressive and productive dimensions. For the discursive power to operate, targeting mechanisms are needed. They are based on categorization which individualizes people. Each individualized person is given an identity, the intersection of categories to which she belongs. Identity is therefore nothing more than the categories that define an individual. There is no self over and above these categories. Therefore, according to Foucault, the individual as the discursive product can be understood as the 'subject', who is not only 'subject to' the discursive power, but also has 'subjectivity' defined by that power.

In addition, normalization is not only exercised from without but also from within; the external and the internal are both constructed by and subject to the same totalizing discourses. In self-surveillance, individuals observe and discipline themselves as if they were in a panopticon, a kind of prison proposed by Jeremy Bentham. Foucault offered it as the model for understanding self-surveillance. In the panopticon, illuminated prison cells form a ring around a central tower of guards that is kept out of light. Since they can never be sure whether the guards are around in the tower and since they are well aware of their own visibility, the prisoners have to always behave as if they are being watched. Eventually, they become the guards to themselves. From this, it can be seen that individuals unknowingly are representatives of power despite their sense of self-agency. More than that, apart from themselves, they act as the agent of power to control, or normalize, others.

The true horror of oppression is therefore not in its repressive violence, but in the subjectification and agency of power. For instance, when women's beauty is defined with thinness, it is the women who play

the active roles in observing and 'disciplining' themselves (e.g. through diet, exercise, weight-losing pills) in order to meet the beauty criterion. Likewise, among different mechanisms, including social work and rehabilitation that produce and maintain the understanding that impaired people are the disabled, one can find those mobilized by disability rights advocates and people with impairments.

The Foucauldian framework enables one to see that the 'good will' of the social model is not different from that of the medical model in that it too supports oppression. The philosophical framework of the social model implicitly maintains that impairment belongs to the natural realm. At the same time, it approves the bio-medical scientific categorization of body and impairments, the knowledge of which is necessary for implementation of welfare policies. Moreover, as the social model advocates launch campaigns to urge the government to provide different welfare systems to support people with impairments, they encourage development of more meticulous and detailed systems of categorization that are needed for individualizing impaired people in the process to select 'appropriate' welfare recipients. And the acquired supportive systems put pressure on impaired people with the expectation that they succeed in living a normal life.

However, if it is true as Foucault pointed out that reality is discursively constructed so that human self does not even exist, it seems none can deal with the oppressive power. A question that follows is how the oppressed can be emancipated.

5. Neither "Impaired" nor "Disabled"

The above Foucauldian ideas belong to the earlier period, which rest on the two poles of 'power' and 'knowledge' (i.e. categorization). These cannot be separated and thus are referred to as 'power/knowledge'. As for the later period, Foucault introduced another pole, 'self', whose existence seems to be denied by his earlier thought. The later Foucault studied about the ancient Greeks and found that people then focused on stylizing their self to make it beautiful like a work of art. In this process, they took care of the self through self-reflection based on the norms defined by power/knowledge, and through self-formation based

on that reflection. Therefore, Foucault sees that, before power and knowledge can create the subject, they must interact with the self.

Usually, the self is passive letting power/knowledge to mold the subject. As shown in the above example, women let power/knowledge to construct their subjectivity and consequently try in every way to keep thin. Processes in the society that lead to these women's subjectivity and contribute to their weight-keeping efforts are called, 'technologies of power', which include ridicule of 'fat' women, skinny models on magazine covers, weight-control clinics, etc. However, the Greek lesson shows that the self can have an active role. Although it still relies on power/knowledge and technologies of power, it transforms them into 'technologies of the self'.

The starting point, according to Foucault, is the criticality known as 'limit attitude', which is to be in quest of the limits of our being, doing, or thinking. In other words, it is to search for possibilities of not being, doing, or thinking as we are. When the limit is discovered, one can start to form one's self in a way different from that within the limit constructed by discourse. The product of the quest is an understanding about the kind of subject formed by the discourse through the technologies of power. This understanding includes the rationality that legitimizes the discourse.

The understanding is vital because, if lacking, the emancipatory activities will instead become oppressive. For instance, in their resistance to sexual oppression, if women does not take into account the rationality that provides the basis for the oppressive practice and struggle against it by way of doing everything opposite to those prescribed by society, they eventually lend support to what they are against. Some women wear revealing clothes or are sexually liberal to rebel against the social prescriptions. Unknowingly, these support the rationality for women's subjugation because they are raised as evidence to confirm that women lack conscience and self-control on the one hand, and that they are sex objects on the other hand. The resisted discourse is thus strengthened, rather than challenged.

The critical attitude, which initiates self-formation through technologies of the self, needs to be maintained. It is analogous to an artist who has to keep critically assessing her own work while in the creative process. Therefore, Foucault called this constant care of the self, 'aesthetics of existence'. His concept of ethics plays an important role in this

resistance through self-formation. According to Foucault, 'morality' prescribes the sort of subject that discourse aims to mold while 'ethics' is how a person relates to morality. Ethics is therefore the way to negotiate with morality.

Foucault saw that the former was the practice of the ancient Greeks while the latter belonged to the modern period. Even though prescriptions of conduct existed in the time of Greeks, the focus was on individuals' styles, interpretations of these prescriptions. Individuals during that time were therefore free to a certain extent in their decision of how to relate to the norms. Ethics is thus a resource for the 'ethics of existence', affirmation of freedom through self-formation. However, in the modern time, the focus shifted from individuals' styles to the prescriptions themselves, which deprived individuals of interpretive liberty. The social norms thus demanded, with punitive threats, strict observance. A return to the Greek way was urged in order to change from the passive attitude of subjectification to the active attitude of self-formation.

According to Foucault, the ethical practices comprise the following four elements.

1. Ontology or ethical substance: It constitutes an ethical concern. For example, as for the ancient Greeks, their concern was 'aphrodisiac', the practices of sexuality; as for Christians, their concern was the spirit; as for people with impairments, their concern is the body.

2. Deontology or mode of subjection: This is how one relates to the ethical substance. For instance, the ancient Greek individuals' care of the substance was voluntary. As for the Christians and the impaired people, the relation to the ethical substances is in the form of obligation.

3. Ascetics or elaboration of ethical work: Ascetic are those activities and methods utilized to become the subject as desired. The ancient Greeks' ascetics is stylization e.g. through gymnastics. Christian ascetic practice is self-discipline e.g. by way of self-confession. Likewise, the impaired people elaborate their ethical work through self-discipline e.g. rehabilitation.

4. Telos: It is the goal of subjectification, the kind of subject to create. The ancient Greeks aimed at self-mastery; the Christians' goal was to become without sins; the impaired people want to be normal or able.

Based on understanding of the exiting ontology and telos, resistance is carried on with voluntary deontology. The ascetics is thereby separated from the 'telos' and attached to a new one. Therefore, a person can benefit from the technologies for ascetic practice by subjecting them to the new telos. In case of people with impairments, they need to resist by abandoning the telos to be like normal people while using the available technologies (e.g. medicine, rehabilitation, social welfare, NGO's, etc.) to serve a new telos. Then, they can attain freedom or autonomy.

Autonomy is usually understood as absolute freedom. However, the above does not lead to such freedom. The resistant are still bound to their contexts. Actually, the quest for autonomy is possible in the contexts whose possibilities are structured by power, especially its technologies. This is not to say that the achieved autonomy is not true because, according to Foucault, autonomy is intertwined with heteronomy. This was clear in time of the ancient Greeks when a method to take care of the self was to seek a teacher. Through earlier dependency on teachers, students were later able to depend on themselves.

Even though the resistance as freedom seems to be personal, it implies relationship with others. The separation of telos from ascetics is a challenge to the discourse that unifies them. Thereby, both the categorization and the rationality are disturbed. In addition, the resistance to the discursive power is a fight against normalization, which reaches everyone. At the same time, Foucault encouraged friendship as the mode of relating to others which, because of its requirement to accept others as they are, presupposes differences between the parties and prevents one from being an agent of normalizing power. This kind of relationship therefore allows others to form their selves.

However, this is not easy. Because power is to make others do what one wants and people inevitably wants others to do as they want, it is impossible to be free of power. Foucault consequently proposed a principle of minimal domination. He also defined friendship as a 'way of life', which can be shared among people with differences. In other words, 'a way of life' is characterized by its not being institutionalized, which means that it does not have norms that can easily lead to normalization. As is shown above, the social model leads to new forms of oppression because it fell victim to the institutionalization. The 'way of life' is in agreement with

the process of self-formation, the aesthetics of existence carried out throughout life.

An escape from the totalizing discourse, self-creation is not easy because the telos and ascetics are not easy to identify; the rationality underlying the discourse is not easy to analyze. And, even though the rationality is recognized, it is not easy to overcome because our understanding of reality is conditioned by it. These do not only lead to a failure of resistance but also transform the resistance into an ally. Moreover, even when the legitimizing rationality is disclosed, it is not possible to imagine a resistance as a collective movement (e.g. by the impaired people) since this will eventually lead to institutionalization that starts another cycle of normalization.

A good example is the authors' direct experience when this research was presented in a conference. A debate started among the audiences about terms that should be used to address people with impairments. Their common goal was to find a term that did not imply the normal/abnormal distinction for fear that, if otherwise, it might lead to discriminations. From the Foucauldian perspective, since the new term functions to remind people of the normal/abnormal distinction and thereby maintain the foundation of discrimination, such goal should be relinquished. However, if so, people who still need to talk about people with impairments have to use the terms that are widely used in the society and functioning in the normalization process. Therefore, from this example, it can be seen that the totalizing discourse can deploy both the new and the old terms to support itself.

Consequently, although according to the above arguments, the Foucauldian framework is superior to those of the medical and the social model in the effort to understand the nature of impairment and disability, its application is not clear and is still a topic of debates among scholars who adopted the later Foucault's ideas in the fields of disabilities studies, women's studies, education, organization theory, sociology of sport, etc. One of the difficulties stems from the attempts to discover resistance methods for use in the collective level. The generalized solutions are open to discursive deployment as shown in the above example. Moreover, Foucault himself seemed to suggest that one should avoid acting as a representative for a collectivity for it may lead to a normalizing attitude. There-

fore, the best way to apply the Foucauldian framework is by way of case studies to understand individuality. Yet, it should be careful not to utilize the study results as models for other cases in such a way that normalization follows. The case studies should give inspiration to individuals in their self-formation.

While it is not clear, in an individual's care for their self, what should be chosen as a new telos and how the technologies should be diverted to serve self-formation, it is clear how we individuals should treat others. We should let them be. Thus, impaired people should not be subject to rehabilitating processes so that they show as much as possible appearances and abilities akin to those of normal people. In other word, to let them live with the kind of bodies they have is a form of friendship. For instance, instead of inconvenient artificial legs, an impaired person should be allowed to use a roller board or even move on the ground with hands if that suits the person's desire. People should not impose their opinion that, since such choices look demeaning, the person should walk on legs like normal people. Although it seems easy to open space for people to choose their telos and transform the technologies of power into technologies of the self, one complication that one should bear in mind is that this should be based on understanding of the legitimizing rationality.

5. Theresa Chan and Michel Foucault

Theresa Chan's story is best understood within the Foucauldian framework. From the Foucauldian perspective of ethical practices, Chan's ethical substance seems to be love rather than the body as prescribed by the discourse of disabilities. To serve her telos of non-discriminate giving, Chan made use of the available technologies e.g. Braille, typewriter, education, residence and occupation provided by social welfares. Superficially, she seemed to be one among those disabled people who subject themselves to normalization through these technologies. However, a closer consideration shows that, despite her perfect abilities to live like a normal person, she went beyond that by applying these abilities to serve others. She wrote the inspiring autobiography, taught students with disabilities, gave warm comfort to suffering persons. To sum up, her ascetics is to help

people.

Why the Foucauldian framework? It seems the medical and the social models suffice for understanding Chan. Can we say that Chan achieved the goal of the medical model i.e. had an appearance and physical functioning enjoyed by normal people? It is not so. Although, looking like other elderly ladies, she did not have a problem with her appearance, the functioning of her eyes and ears could never be restored. Yet, from the rehabilitative perspective derived from the medical model, she was considered to achieve the goal never to surrender to physical limitations. However, this is not sufficient to understand Chan's story. Since the medical model focuses on the body and its functioning, it aims at a personal victory over her own body.

In addition, there was a scene in which Chan was swimming and a lady beside the pool could not hold her laughter. This too highlights the failure of the medical model whose goal is to fit people into the model of ideal human being i.e. the 'normal' person. Even though Chan was able to perform normal people's activities, her impairments – the mark of abnormality – were still present. The laughter lends support to the idea held by the social model that the society oppresses people with disabilities and therefore highlights the motive to struggle against the social prejudices and achieve facilities that give abilities to the presently dis-abled people. Pushing for reforms of infrastructure and social welfares for people with disabilities, the social model emphasizes a victory over the society. The film portrayed Chan as the one who enjoyed this kind of victory while the roles of medical technology and physical therapy were not present.

However, it is undeniable that, no matter how many facilities are won, the laughter remains if the sole aim is for the impaired people to become like normal people. May be, the social model implicitly enjoys such laughter because it helps maintain the rationale for campaigning. Moreover, since the social model focuses on abilities, it can be said that people with impairments can be superior to normal people if the former has better abilities. This kind of superiority was not portrayed in the film at all. Chan performed ordinary activities i.e. ate, cooked, read, wrote, cleaned her place, travelled, etc. More than that, Chan lacked the attitude required by the social model. Unlike Fatty Koh, Chan was never obsessed with injustice. This was reiterated in the above scene in which Chan was

totally untouched by the laughter.

Knowing that people in general felt that disabilities were pathetic, Chan wrote the autobiography of the life with multiple disabilities to inspire readers. This shows that, while Chan depends on others, she depends on herself. While the society defined her with impairments, she utilized that definition to serve her telos. This was in contrast to other characters who, despite their apparent autonomy, depended on others so much that they could not live their life when the people that they were attached to left them. Chan did everything the other characters did but not with the same goal. Her autonomy provides the reason for adopting the Foucauldian framework to understand her story. On the other hand, it is now evident that the case of Theresa Chan can facilitate an understanding of the Foucauldian framework.

6. Acknowledgements

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