

## The need for a wider understanding of “the social model of disability” for mental health conditions

Sofia Jeppsson (Umeå University)

In discussions of the social model, there’s often a narrow focus on disabling environmental factors that affect the agent *here* and *now*. For instance, autistic writers and neurodiversity advocates write of how they need a sufficiently calm office space and the opportunity to work from home a few days a week. It’s disabling for them to demand that they come to the office each day and work in a glaring light with noise from other people (de Vries 2021; Enright 2021). I don’t deny that such here-and-now accommodations are important, but we must widen our gaze.

First, environmental factors can do more than merely turn existing conditions into disabilities; they sometimes *cause* conditions and impairments to arise. This is widely recognized for physical disabilities (e.g., unsafe cars and traffic conditions can cause more people to need wheelchairs). However, despite lots of research, it’s often overlooked in popular and political discussions that society-wide problems like racism, poverty, and persistent job stress can cause people to develop mental disorders (e.g., Benthall 2004). Second, environmental factors that negatively effect you *now* can still be society-wide, rather than local conditions in, e.g., your workplace, school or family. Even if every conceivable workplace adjustment and a supporting family fail to fully alleviate your suffering and problems, it might be the case that you’d be perfectly happy, different but not disabled, in a hypothetical and much better society (Aftab and Rashed 2021).

Moreover, it’s generally recognized that stigma can worsen one’s condition. It’s important, we’re told, that people with psychiatric and neuropsychiatric diagnoses can disclose without fear of negative repercussions. Nevertheless, information campaigns and medical advice sites might take a narrow view on what proper disclosure should look like (see, e.g., Health Direct for a typical example). But being pushed into presenting one’s madness or neurodivergence in an “acceptable” manner that doesn’t stay true to who one really is can feel as constricting, stigmatizing, and *disabling* as being pushed into keeping quiet altogether. A social model of mental disability should acknowledge this as well.