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A Disabling Social Structure: the Social Exclusion of Disabled People and the Role of Politics in Italy

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Introduction

Inequality and social rights, discrimination and marginalisation, social exclusion and disadvantage are issues that civil society and political institutions are particularly concerned with when dealing with sexism and racism.

However, less attention is devoted to the segregation of people with physical and/or intellectual impairments in society, also known as 'disablism'. In this dissertation, I will focus on the causes that have led and lead people with impairments to be progressively isolated from the other members of their society.

More specifically, in the first chapter I will show why prejudice and discriminatory practices against people with impairments revolve around the concept of normality and how this has been influenced by the medical model of disability. In addition, I will explain how the advent of capitalism contributed to strengthen this model. In contrast to the medical model, I will describe how impaired people have been disabled by the structure of their society, thus confirming the validity of the claims made by the social model of disability. In this respect, I will explore in which ways in Italy their full participation to the activities of their society is undermined within their public environments, including public buildings and roads, public transportation and information and communication technological systems, and within the education and employment systems.

In the second chapter, I will discuss the policies implemented in Italy to prevent the marginalisation of people with impairments and advance their inclusion in all these areas. In this regard, I will analyse current laws on disability in light of the principles of Universal Design and the UN Convention on the Rights of People with Disabilities (2006). On this account, I will be concerned with the question as to why discrimination persists in Italy despite its highly progressive social legislation. That being so, I will suggest some proposals with the objective to improve and ensure the enforcement of Italian provisions in this sector.

In the third chapter, I will point out that in Italy, apart from legislation, political institutions hardly address the cultural dimension of the issue of discrimination. For this reason, social policies are not able to fully tackle the problem of social exclusion of people with impairments. In this respect, I will show how the third sector contributes to obviate this problem by analysing the role that Anffas as non-profit organisation plays to fight the unequal power relations between disabled and non-disabled. In particular, I will present a case study including two projects recently launched by Anffas called 'Shorten the Distance' and 'I Citizen! Tools for the Full Participation, Active
Citizenship and Self-Advocacy of People with Intellectual and/or Relational Impairments'. In this respect, I will point out that they make use of participatory approaches to social development and I will give an account of how effective they are in discarding prejudicial cultural beliefs about disability. To conclude, I will explain why providing incentives to these cultural initiatives can contribute to build a more inclusive society.
Chapter I

The Unequal Power Relations between Disabled and Non-disabled

1. Introduction

"Disability is not something we possess, but something our society possesses" (Leaman, 1981 in Finkelstein, 2004, p.14).

The idea of disability might appear quite straightforward. People who are fit and healthy participate in the normal activities of their society. Hence, they can be considered able-bodied. On the contrary, those who lack physical and/or mental capabilities are regarded as limited in their actions and as experiencing a true 'personal tragedy'. They are judged as unable to fulfil their social duties; thus, they are labelled as disabled.

By following this logic, since people with disabilities are unable to live a 'normal' life, they are expected to be "segregated and excluded from society" and cared for by someone else (Goffman, 1961 and P. Morris, 1969 in Scott and Fulcher, 2011, p.283).

In this chapter, after considering the notion of disability, I will question this view because it lies at the basis of a phenomenon known as disablism, defined as a "form of oppression, social exclusion, and disadvantage exercised over the impaired by the other members of their society" (Barnes and Mercer, 2003 in Scott and Fulcher, 2011, p.283).

In this respect, I will examine as a starting point the differences between the social and the medical model of disability and, following this analysis, I will firstly focus on the distinction made between the concepts of impairment and disability (Oliver, 1976).

Secondly, I will show that "disability is entirely socially caused" as it is not physical impairments, but society that disables the non-able bodied by restricting their activities (Thomas, 1999 in Scott and Fulcher, 2011, p.284).

That being so, I will challenge the individual model of disability and advocate the social one as a tool to transform the unequal "power relations and structures of which society is constructed" (Oliver, 2004, p.1). As a product of these uneven power disparities, I will argue that society is permeated by numerous obstacles disabling the physically impaired in all areas: "employment,
housing, education, civil rights, transportation" exactly because the environment has been hegemonically designed by able-bodied for able-bodied (Thomas, 2004, p.21).

For this purpose, I will in the first place explore how in the past the capitalist mode of production has increased, since its inception, the process of marginalization and discrimination of the physically impaired subjecting them to a proper enforced dependency (Oliver, 1990; Glesson, 1999 and Thomas, 1999 in Goble, 2004).

In the second place, I will claim that the dominant ideas of the able-bodied, as Oliver claims (2004), are still evident and reinforced in present times in the "organizations and institutions of society, in its organization and delivery of services and, also, in its culture".

One of the main concerns of this chapter, and of the entire dissertation, is to focus especially on Italy and to analyse the main disabling barriers present in the Italian society with regard to its public enabling environments, its employment and education systems. With the aim of showing how discrimination against people with disabilities still persists within public transportation services, within schools and universities and in the workplace, I will explore the connection existing between current individual practices and societal power structures in order to conclude they appear sensible, peaceful and natural while, in reality, they are not (Gramsci, 1930). In other words, they contribute to reproduce inequality (Oliver, 1994).

1.1 The Medical and the Social Models of Disability

The main views accounting for disability are currently two: the social and the medical model of disability (Oliver, 1983). Both are informative of this issue but they are based on completely different assumptions. Thus, they lead to opposite conclusions about how to address the treatment of people with impairments.

To begin with, I will analyse the model which comes first chronologically speaking, namely the medical one. The 'individualised model', as Oliver calls it (1990), has been considered for a long time the only valid approach to disability. It asserts that disability is a random accident unfortunately affecting single individuals. For this model, the problem resides in the intrinsic physical and psychological constraints people with disabilities face. Hence, following this reasoning, this 'personal' disadvantage prevents them from functioning as all the other members of their community. Therefore, it proves necessary for doctors to cure their illnesses and restore them to normality (Oliver, 1990; Barnes, 2004).
This idea that people with disabilities cannot conduct non-disabled ways of life and must be looked after by rehabilitation professionals is pretty much in line with what Talcott Parsons (1951) defined as the 'sick role' (Barnes, 2004). To him, a person is sick if he cannot perform any daily activity or when his actions are deemed inappropriate. In order to eliminate this threat to ordinary social activities, anyone who departs from the normal lifestyle must comply with standards of behaviour that are socially acceptable. Accordingly, he must stick to specific rights and responsibilities. The ill person is free from any kind of personal, domestic and working duty and he is forced to ask for medical support and "to become a 'patient'" (Scott and Fulcher, 2011, p.286).

This medical approach to disability has been prevalent until 1980's. As the economic system was increasingly becoming more efficient, the belief was the body was to be made productive. This attitude is part of what Foucault (1975) described as 'anatomo-politics' of the body (Scott and Fulcher, 2011). Foucault argues that doctors knew they were the only competent to deal with the treatment of illnesses and this led them to establish over them a 'professional control', both physical and mental. In order to accomplish it, they used the 'medical gaze' (Foucault, 1975 in Scott and Fulcher, 2011). Through this medical gaze they started addressing the pathologies of the sick bodies in a dehumanising way: persons were to become functional by means of clinical manipulation (Scott and Fulcher, 2011).

In this respect, these individualistic explanations linked to medicine and medical concerns can be grasped also when considering the negative consequences produced by industrial capitalism (Oliver, 1990; Thomas, 1999 in Goble, 2004). This idea of people with disabilities depending on doctors results from the change "from a rural society to an urban industrial one" (Goble, 2004, p.41). According to the Marxist interpretation of the world, in traditional economies there was no separation between workers and the means of production and there was a greater system of solidarity and inter-dependence. The ideological change brought by the rise of industrial capitalism made capitalists establish their control on the production process and led to the emergence of wage labour. The old subsistence economy was destroyed and people start becoming dependent on wages (Marx, 1848). Consequently, in order to live by, those not owning the means of production needed to sell their labour. However, those who could not sell it on 'normal' and 'average' terms were prevented from attaining their means of subsistence independently (Marx, 1848 in Thomas, 2004). The outcome was that "the impaired started to be socially excluded by the non-impaired because of the capitalist relations of production" (Oliver, 1990 and Glesson, 1999 in Thomas, 2004, p.22).
Capitalism marginalized people with disabilities subjecting them to a kind of enforced dependency or, as Goble puts it (2004), it did not deprive them of their independence but made the notion of dependence become "problematic". As the new rules and the speed of production did not fit those with physical, sensory and intellectual impairments, they could not work and could not be integrated into their community. From here, the necessity to institutionalise the "helpless and inferior sick into workhouses, special schools, colonies for the feeble-minded and mentally defective" (Thomas, 2004; Goble, 2004, p.41).

As it can be noticed, the notions of impairment and disability are used by the medical model as synonymous. However, the idea that impairment and disability are interchangeable concepts has been questioned by the social model of disability. It contends that impairment is not disability and disability is not a sickness the impaired must be cured of. "An impairment exists when a person has a defective part in his body, such as blindness and visual impairment, deafness, vocal difficulties, paralysis, amputation, arthritis, epilepsy, and problems of brain disorder and function. It may result from congenital and perinatal conditions, from a disease and illness, and from injury. A disability is a disadvantage" due to "particular forms of organisation as, for example, the inability to negotiate stairs, use keyboards and telephones, read documents, get dressed, communicate, or drive a car" (Albrecht et al. 2001 in Scott and Fulcher, 2011, p.283).

The novelty of the social model has been to claim the problem does not lie in the individual, but in the society that is unable to take into account the needs of those with impairments. "It is society which disables physically impaired people. Disability is something imposed on top of our impairments by the way we are unnecessarily isolated and excluded from full participation in society" (UPIAS 1976:14 in Scott and Fulcher, 2011, p.283). Impaired people, in fact, face several difficulties when trying to interact with their social environment: they are denied access to several services and facilities, such as "public transport, quality education and so, they are prevented from competing for well-paid jobs in the labour market"(Thomas, 2004, p.22).

Furthermore, in contrast with the medical model, Oliver (1990) argues that society does not damage by chance single persons but collectively discriminates against disabled people as a group making them undergo 'a personal tragedy'. The institutionalisation of the impaired combined with an heavy usage of psycho-active medication is supposed to make them normal and independent. However, in the next section I will show that this way of doing, instead of enhancing their independence, has fuelled their dependence.
1.2 'Normalcy' and (in)dependence: A Non-Tragedy View of Disability

The medical model of disability assumes that the misfortune of people with impairments must be definitely 'normalised' and that rehabilitation to normality fuels their independence. In reality, with regard to the issues of blindness and deafness, Robert Scott (1969) has revealed how doctors and the medical personnel are effective in making blind people comply with their normative expectations (Scott and Fulcher, 2011). He has showed, in fact, the staff "rewards" them when they observe the established behavioural standards and "punishes" them for their challenging behaviour when they do not respect them (Scott, 1969 in Scott and Fulcher, 2011, p.284). In other words, the medical and care services transform "the behaviour and the identity" of the impaired who become dependent and start playing the 'blind' role (ibid.).

This attempt to normalisation is also evident in the statements of people with impairments: "at my special school, I remember one of the care staff telling me I should never give up hope because one day doctors would find a cure for my affliction, and I told her I did not want to be 'cured'. I remember this incident because of the utter disbelief this statement caused amongst all the non-disabled present, and the delight it caused amongst my disabled friends. The School decided I had 'the wrong attitude' and that I should indeed go to Lourdes" (Mason, 2000:8 in French and Swain, 2004, p.38).

As evidence suggests, the medical assumption that people with disabilities need and want to be cured, that they need to become 'normal' and be able to function as all the other members of their society has been shown to be wrong (Seymour, 1998 in French and Swain, 2004). People with disabilities do not want to be 'normal' as disability is not something separate from their identity (Mason, 2000 in French and Swain, 2004). Colin Cameron, a disabled person, writes: "we are who we are as people with impairments, and might actually feel comfortable with our lives if it wasn't for all those interfering busybodies who feel that is their responsibility to feel sorry for us, or to find cures for us, or to manage our lives for us, or to harry us in order to make us something we are not, i.e. 'normal'" (Tyneside Disability Arts, 1999:35 in French and Swain, 2004, p.38). Similarly, "I do not wish for a cure to Asperger's Syndrome. What I wish is a cure for the common ill that pervades too many lives, the ill that makes people compare themselves to a normal that is measured in terms of perfect and absolute standards, most of which are impossible for anyone to reach" (Holliday Willey, 1999:96 in French and Swain, 2004, p.38). Disabled people experience sorrow not because
of their impairments but because they must conform to the expectations society has created for them - "to be independent, normal, to adjust and accept their situation" (French and Swain, 2004).

People with disabilities, however, feel they are perceived as different in their society. As a result, they are confronted with a physical and social environment that reacts against them with dislike or hostility on the grounds of prejudice and social stereotypes. In other words, they struggle against the stigmatisation of their impairments. The non-impaired, in fact, disparage and impede the social inclusion of the impaired as they consider their peculiar characteristics as 'abnormal' or uncommon (Goffman, 1963 in Scott and Fulcher, 2011). When the able-bodied stigmatise their impairments, they inevitably disrupt their personal identity (Goffman, 1963 in Scott and Fulcher, 2011). Thus, when interacting with the non-impaired the impaired feel they are not perceived as normal and try to cope with this 'spoiled identity': "hiding their impairments" is the only way to prove they are not different from them (Goffman, 1963 in Scott and Fulcher, 2011, p.284). Similarly, they attempt to persuade the able-bodied to belittle their impairments through the so-called 'mechanisms of deviance disavowal' (Davis, 1961 in Scott and Fulcher, 2011, p.284).

When these mechanisms are not successful, the impaired face the negative reactions by those not suffering from disabilities and by whom they hoped and wanted to be accepted. Still, they strive to adopt 'coping mechanisms': their strategy is to replace a "disabling self-image - the disabled self" - with one that may be accepted as normal by their society - "the capable self" (Corbin and Strauss, 1985 in Scott and Fulcher, 2011, p. 284). As a result, while the able-bodied become increasingly powerful in determining the identities of people with disabilities, the impaired increasingly lose the control over them. When people with impairments fail also in adopting these 'coping mechanisms', there is no room for non-discrimination.

1.3 Disabling Environments: Physical and Information Barriers

"After the injury it was difficult for me to go out with my friends because the environment is not adapted for wheel-chair users, either the streets, transportation, shops, restaurants, or other facilities" (WB, 2011, p.168) . This is a short extract taken from an interview made to a person with disability who expresses her disappointment with the physical environment in which she lives. The interviewee, Fadi, manifests how her social and recreational activities are impeded by the inadequacy of public services provided in her society. Yet, Article 9 of the UN Convention on the Rights of People with Disabilities expressly states that "to enable persons with disabilities to live
independently and participate fully in all aspects of life, States Parties shall take appropriate measures to ensure to persons with disabilities access, on an equal basis with others, to the physical environment, to transportation, to information and communications, (...) and to other facilities and services open or provided to the public, (...)” (2006).

As it is evident, physical and informational barriers, including public buildings and roads, public transportation and accessible information and communication technology, matter for the inclusion and the full participation of the impaired in all the areas of social life.

Firstly, I will start addressing the issue of physical barriers with a special focus on the Italian ones. With regard to public transportation in urban areas, the situation is far from being positive. All public buses and, particularly, low-floor vehicles should guarantee the access to the bus without any difficulty through small ramps so as to diminish the level change between the vehicle and the platform (Steinfeld, 2011).

However, most of the times, especially in Italy, stations and stops are inaccessible also because these small bridge plates do not work or, even bus drivers do not know how to make them function, thus restricting the right to mobility and the right to autonomy of people with impairments (WB, 2011).

Nevertheless, although in some cases the access to the means of public transport is not denied, there are still other problems, especially for wheelchair users, as there is no wheelchair anchoring in buses (WB, 2011). Another difficulty with the mobility of people with impairments is the lack of continuity in the travel chain. This is related to all those components which are essential for a person to start a journey, "from starting point to destination - including the pedestrian access, the vehicles and the transfer points” (WB, 2011, p.179). If there are difficulties even only with one of these three elements, the entire trip is almost impossible (ibid.).

The inaccessibility of the travel chain is mostly caused by the lack of pedestrian access. In some cases, for example, there are no sidewalks or, if they are, they are poorly maintained, thus making wheelchair users decide to change their route or, worse, to stay at home (WB, 2011). As it can be noticed, also roads and streets do not accommodate the needs of people with mobility impairments. Evidence suggests that not only pavements are often uneven but also that curb cuts do not always exist (Imrie, 2004). As a consequence, in order to exercise their right to mobility wheelchair users become increasingly dependent on others. This makes them feel frustrated as they perceive they are less free than others, they are less citizens than others (Manley, 2011). That being so, if having access to streets is extremely difficult, what follows is that also buildings
will be inaccessible and that inequalities will continue to rise (Manley, 2011). As a matter of fact, public facilities such as toilets and buildings entries are not accessible to wheel-chair users (WB, 2011). Schools, universities, workplaces, restaurants, pubs and many others are not provided with accessible amenities. This affects negatively their life by reducing further the possibility to be involved in any kind of educational, working and leisure activity and so, lessen their freedom.

Along with physical barriers, information and communication barriers are also relevant to the social exclusion of people with disabilities. More specifically, information and communication technology products, such as computers and telephones, are not accessible both in the workplace and at home (Sheldon, 2004; WB, 2011). In this regard, surveys shows that people with impairments use less ICT (Information and Communication Technology) than non-impaired people, that they are less likely to have Internet access in their domestic spaces and even to have a personal computer (WB, 2011).

One of the reasons why people with disabilities are limited in their use of Internet is the cost they might sustain when purchasing a computer with assistive devices appropriate to their impairments. Screen readers in the U.S., for example, can cost approximately $1000 (WB, 2011). Furthermore, the pace of technological change contributes to make assistive technology outdated, thus preventing those with limited means to afford such amenities (Sheldon, 2004; WB, 2011). As one interviewee in a study reveals: "I want to have my own [computer], but you know… they’re so expensive … And then you’ve got to keep up with it … they always say if you were to buy your computer you can always guarantee the next day it’s out of date, so it’s just costly updating it …" (Sheldon, 2004, p.157).

In addition, deaf people and people with hearing impairments experience further limitations to information access due to the absence of captioning, audio description and sign language interpretation in television programmes (Brewer, 2011; WB, 2011). A research carried out by the World Federation of the Deaf demonstrates that 72 countries out of 93 do not make available captioning and sign language in their programmes (WB, 2011). What is more, websites, including social networks are not accessible (Brewer, 2011).

The difficulties people with disabilities face when trying to have access to information and technology services affect them negatively by precluding their chance to receive information of any kind, including those about their health as well as about educational and employment opportunities (WB, 2011). Moreover, the more the Internet is not readily available to all of them and the more the obstacles they encounter in their physical environments are, the greater is the sense of isolation and
disempowerment they feel. The lack of both face-to-face and virtual interaction with others potentially contributes to their segregation at home, neglecting in this way their full participation in society.

1.4 Education: Needs and Ambitions Against opportunities

"In my former school both pupils and teachers used to laugh at me when I failed to say something, since I could not pronounce words properly and they would not let me talk" (WB, 2011, p.204). This statement comes from a study included in the World Bank Report on Disability (2011) where a research participant, named Pauline, reveals the discrimination she is subjected to within her classroom both by her peers and teachers. The case of Pauline is not an isolated one as barriers within the education system are many and extremely widespread although all persons with disabilities are in principle granted "the right to education without discrimination and on the basis of equal opportunity" by ensuring an "inclusive education system" (CRPD, 2006).

In most of the European countries education systems foster the inclusion of people with impairments or, at least, this is what is provided for by the law. In Italy the Convention was ratified by the Italian Parliament on the 24th February in 2009 but anti-discrimination legislative measures, such as the Law 118/71, the Law 517/77 and the Law 104/92 were already present in the Italian Constitution (D’Alessio, 2008).

Nevertheless, there are still significant barriers to the project of social inclusion of people with disabilities.

One of the main problems that leads to discrimination are attitudinal barriers (Begeny and Martens, 2007; Atlas Alliance, 2008; D’Alessio, 2008; UNESCO, 2009; WB, 2011). Negative attitudes of teachers, school administrators, other children and even family members are negatively correlated to the inclusion of people with disabilities (Atlas Alliance, 2008; UNESCO, 2009; WB, 2011). In some countries school teachers are convinced they do not have any commitment to teach to disabled pupils (WB, 2011), while in Italy some teachers claim that are fearful about interacting with children with disabilities (D’Alessio, 2008). Parents themselves believe their children are unable to learn as all the others and, in some cases, are persuaded that segregate teaching settings would be better for their sons and daughters (WB, 2011).

Along with attitudinal barriers, also the process of labelling matters. Teachers may label children with disabilities as blind, deaf or dyslexic in order to provide them with the support
services they need to enhance their communication and comprehension capabilities but they can also label them by using "concepts of normality " with regard their physical and social abilities (Davis, 2004, p.143). In both cases the effects of labelling on them and on the relationships with their peers have been shown to be negative (WB, 2011). They are stigmatised and ostracised by their peers who see them as "different, inferior, dependent and less competent" (French and Swain, 2004, p.172).

In this respect, the fact that young non-disabled persons treat their disabled fellows differently can be related, as Vouchley (1997) states, to the "special equipment, to the special computers and to the special teachers" which are provided to them; to the idea that if they do not receive support "they don't know what to do" (French and Swain, 2004, p.172). Also, Vouchley continues, non-disabled pupils may believe their reputation would be ruined if others saw them with the weak disabled children (ibid.).

As a result of all these negative attitudes, disabled students are more likely to experience violence, bullying and abuse, both physical and verbal, and social exclusion (French and Swain, 2004; WB, 2011). More specifically, according to Dawkins (1996), impaired children face the highest probability to be bullied because they are "males, they are alone at break, have less than two friends in class and are provided with extra support by their school" (French and Swain, 2004, p.173). Because they are aware they are not accepted by those surrounding them, because they feel humiliated when they are insulted and are fearful about being physically threatened, they try to conceal their difference and prefer to attend special schools (French and Swain, 2004; WB, 2011). As evidence suggests, the negative relationships disabled students have with their non-disabled peers produce an enormous impact on their self-esteem and on their opportunities, which are drastically reduced (WB, 2011).

To further complicate the situation, the lack of adequate resources and of adequate training for teachers and, even, the absence of inclusive curricula is another barrier to the inclusive education of people with disabilities (Cornoldi et al., 1998; Begeny and Martens, 2007; D'Alessio, 2008; Atlas Alliance, 2008; UNESCO, 2009; WB, 2011). With regard to resources, especially in Italy services and instructional materials are inappropriate as, for example, information are not provided through modalities, such as Braille, that can be really accessible to everyone (ibid.). A survey conducted by Cornoldi et al. (1998) reveals only 7.1% of Italian teachers believed they had adequate resources and only 9.3 % reported they had sufficient assistance from other teachers, 19.4 % of them claimed
they did not have appropriate skills and training and 30.5% they did not have enough time for teaching (Figure 1 - Table 1).

<table>
<thead>
<tr>
<th>Item</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Uncertain</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>n</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I support the concept</td>
<td>25.5</td>
<td>52.1</td>
<td>17.2</td>
<td>2.1</td>
<td>2.7</td>
<td>518</td>
</tr>
<tr>
<td>2. I am willing to teach students</td>
<td>22.5</td>
<td>51.8</td>
<td>18.8</td>
<td>4.7</td>
<td>2.1</td>
<td>515</td>
</tr>
<tr>
<td>3. Students with learning problems benefit</td>
<td>31.7</td>
<td>44.1</td>
<td>21.1</td>
<td>2.1</td>
<td>1.0</td>
<td>521</td>
</tr>
<tr>
<td>4. Normally achieving students benefit</td>
<td>14.9</td>
<td>38.7</td>
<td>31.7</td>
<td>9.4</td>
<td>5.3</td>
<td>511</td>
</tr>
<tr>
<td>5. I have sufficient time for teaching</td>
<td>1.2</td>
<td>17.4</td>
<td>42.4</td>
<td>30.5</td>
<td>8.6</td>
<td>512</td>
</tr>
<tr>
<td>6. I have sufficient skills and training</td>
<td>3.5</td>
<td>18.8</td>
<td>51.4</td>
<td>19.4</td>
<td>6.9</td>
<td>521</td>
</tr>
<tr>
<td>7. I have sufficient assistance</td>
<td>1.4</td>
<td>9.3</td>
<td>30.7</td>
<td>36.1</td>
<td>22.5</td>
<td>515</td>
</tr>
<tr>
<td>8. I have sufficient resources</td>
<td>1.0</td>
<td>7.1</td>
<td>25.9</td>
<td>39.7</td>
<td>26.3</td>
<td>509</td>
</tr>
</tbody>
</table>

However, empirical evidence shows this situation has remained the same for nine years (Begeny and Martens, 2007). Curricula, for example, continue to be inflexible, in the sense they do not accommodate the needs and the skills of all students. The way in which children with disabilities are assessed and evaluated within the education system exclude them rather than fostering their inclusion and participation. This is due to the fact they are judged on the basis of their academic achievements and not on the improvement of their individual capabilities (WB, 2011).

Their needs and also their ambitions are not properly taken into account by the society and by the education system as one student with disability, James, says in the World Bank Report on Disability: "the opportunities I would have wanted never occurred, so I was only able to reach a certain level, I could not get any further. Ideally I would have gone to university" (WB, 2011, p.204).

In this respect, in 2005 Burchardt wrote a report comparing the ambitions of the disabled and the non-disabled in the field of education. In contrast with the previous research, she showed there is not any significant difference in the academic goals between the impaired and the non-impaired, but, rather, that they actually converge. Data analysis reveals, in fact, that 62 % of disabled young people were willing to keep on studying after 16, in contrast with 60 % of the non-disabled.
Anyway, people with disabilities felt more the desire to be employed (with the 33% of them looking for a job) than the non-disabled (with only 24%) (Scott and Fulcher, 2011).

However, disabled people were thwarted in their aspirations. While the 71% of non-disabled continued studying after 16 years old, only 62% of the disabled did it. As resulting from survey data, this is justified by the lack of opportunities in education and employment that discourage and undermine the possibilities of the disabled to be accepted and hired (Scott and Fulcher, 2011). As a matter of fact, people with disabilities, Burchardt concludes (2005:49), have "high educational and occupational aspirations" but this is not enough (Scott and Fulcher, 2011, p.333). The impaired will never achieve their objectives if their society diminishes their "chances of fulfillment" (Scott and Fulcher, 2011, p.333).

1.5 Employment Barriers and Inequality in the Labour Market

The discrimination against people with disabilities in the world labour market is increasing (WB, 2011). A research conducted by the OECF highlights that the employment rate for people with impairments is extremely low as it is far less (44%) than that for people without impairments which is about 75% (ibid.). Along with the employment rate, also the data on their types of employment and wages are striking (WB, 2011). People with disabilities are employed more in part-time rather than full-time jobs as they are more flexible, especially given their health concerns, and they are more likely to earn lower wages also because of this (ibid.).

However, evidence suggests that the wage disparity between disabled and non-disabled is not ascribed to difference in productivity as it might be expected (WB, 2011). A study carried out in the United Kingdom shows that the pay of people with disabilities are disproportionately lower than those without disability for factors which are not related at all to productivity (ibid.).

Yet, all of the problems disabled people face when trying to have access to the labour market violate their "right to work" to be treated "on an equal basis with others (...) and be accepted in a work environment that is open, inclusive and accessible to persons with disabilities" (Art.27 in CRPD, 2006).

There are several factors explaining the low employment rates and the lack of inclusiveness of people with disabilities in the labour market. In this respect, Roulstone (2004, p.197) identified four different but interconnected barriers which are "personal, attitudinal, environmental and governmental".
Governmental barriers result from the laws, the benefits and the schemes designed by welfare states for people with disabilities, including overprotection in the labour laws (Roulstone, 2004; WB, 2011). As I will analyse the policies devised by the Italian government to enhance the inclusion of disabled people in the labour market in the second chapter, I will discuss them in greater detail later on. As far as concerns this chapter, I will now focus only on the first three obstacles.

Starting from the personal ones, Roulstone states that the disabled people are less likely to have a job than non-disabled because their social capital is lower (Roulstone, 2004). Their social capital is low, as Roulstone explains, because they are less educated and so, less employable (Roulstone, 2004; WB, 2011; Ferrucci, 2014). According to Barnes et al. (1999), the idea people with disabilities cannot do what all the others do make them likely to be educated in special schools. This prevents them from having access to formal education and training and consequently to the labour market (Roulstone, 2004). In Italy persons with disabilities are less likely to have a high school diploma (34.5%) in contrast with people without disabilities (43.5%) and less likely to be awarded a university degree (5 %) compared with non-disabled people (Ferrucci, 2014, Figure 2).

In addition to personal barriers, environmental obstacles are also relevant to their exclusion from the labour market. There are several physical obstacles ranging from the journey they make everyday from and to their workplace and, even, to physical infrastructures themselves which are not built in ways that are accessible to everyone (Roulstone, 2004; WB, 2011).

Negative attitudes and, more specifically, misconceptions about disability are negatively correlated to the access of disabled people to the labour market (WB, 2011). This way of thinking about people with disabilities mainly derives from preconceived opinions not based on reason or
actual experience, such as that they are not equally productive as their non-disabled fellows. Because of these wrong beliefs about their abilities, employers treat them differently (ibid.).

In Italy, a research (Tuorto, 2013 in Ferrucci, 2014) indicates that 40.6% of people with impairments feel discriminated when applying for a job, and 38% experience it in their work environment (Ferrucci, 2014). Again, a cross-sectional survey in 27 countries - including Italy - published by the Lancet in 2009 reveals that out of 732 people with schizophrenia, 29% were confronted with discriminatory behaviour by their employers when searching for a job or when maintaining it, such as not being hired without being provided with any rational justification for their rejection (Thornicroft et al., 2009, Figure 3).

In this respect, Turning Point, one of the main health and social care providers, conducted a survey in 2010 showing the high level of discrimination against people with learning disabilities
with "1.5 million of hate crimes" committed against them (Williams, 2010). The poll reveals that "a third of Britons think those with learning disabilities cannot live independently or do jobs, almost a quarter imagine they would be living in care homes and nearly one in ten expect them to be cared for in a secure hospital out of town". In the U.K. the verbal and physical mistreats against her disabled daughter made Fiona Pilkington kill herself and her child (ibid.).

Furthermore, from the interviews conducted it appears that people do not have clear ideas about what is a learning disability (Williams, 2010). It is these preconceptions that increase further discrimination against people with disabilities, as the Turning Point's director claims. "People often think individuals with a learning disability are 'different' and discriminate against them because of this", he asserts. "In fact, they can make a great contribution to society when given the right support: working, living independently and playing an active role within the local community".

Also Rosa Monckton, whose child has a Down's syndrome, denounces the negative stereotypes society has when thinking about people with learning disabilities. She observes that "when people are asked in the survey to describe a typical person with a learning disability they most frequently suggest negative characteristics such as having poor social skills, lack of confidence, shouting, being aggressive or slurred speech" (Williams, 2010).

As it can be noticed, discrimination against people with impairments increases further as society strengthens its social categorisations: the normal versus the abnormal, those able to live independently versus those who cannot and must be cared for by someone else.

1.6 Conclusion

Discrimination against people with impairments is very much widespread. Yet, less political attention is devoted to this minority, as compared with sexism or racism. This happens because people have several misconceptions about what disability is. They wrongly assume that the notions of impairment and disability are the same, as claimed by the medical model of disability. They believe, in fact, that people with impairments have been unlucky to be born in that way and, since they cannot work and live independently, they must depend on someone else that is able to take care of them. It follows the disabled must accept their abnormal situation and accept the guidance of doctors and the care staff if they want to become normal and be granted the same possibilities which are allowed to all the other members of their society.
On the contrary, by rooting my arguments in Marxist, Post-Structuralist and Post-Modernist theories, I showed that this mainstream idea of taking as overlapping the notions of impairment and disability is mistaken. I discussed, in fact, that while the impairment is an uncontrolled and random fact of life, disability is not, as advocated by the social model of disability. I explained that it is not the impaired who are unable to live in society but society and its dominant culture that carts them off and rejects them because it has socially constructed what is normal and what is not, because it has decided what are the social standards that must be followed in order to function as 'normally' everybody else does. In this respect, I pointed out that the medical strategies have tried to normalise the impaired and made them become more and more dependent because they are aimed at ensuring they conform to their normative behavioural expectations.

In addition, as advocated by the social model of disability, I highlighted that it is not individuals that are unsuitable to live in society but it is society that does not fit everybody by the way "work, the means of mobility, its housing provision, help, education and social relationships are organised" (Leaman, 1981 in Finkelstein, 2004, p.14). For this reason, I firstly provided evidence of the physical and information barriers existing in public environments. I argued that public buildings and roads are not built in accessible ways as there are no curb cuts and pavements are uneven. I showed that public transportation is inadequate to fulfill the needs of everyone because of the manner means of transportation are constructed (lack of ramps and wheel-chair anchoring for buses) and of the absence of an appropriate travel chain. All barriers that limit their right to mobility and increase their social isolation. I wrote that information and communication technology is not fully accessible to people with disabilities mainly because of the cost and the pace of technological change, thus restricting their right to information and furthering their social exclusion.

Secondly, I analysed the discrimination against people with disabilities and their lack of opportunities within the education system. I argued that attitudinal barriers and the process of labeling applied to students with disabilities is likely to increase violence, bullying and abuse against them. I also added the negative consequences brought about by the lack of resources in schools, by the adequate training of teachers and by inflexible curricula which thwart the aspirations and the opportunities of people with disability.

Thirdly, I focused on the inequality between disabled and non-disabled in the labour market, especially on the causes of their wage differentials. In this regard, I contended there are not only governmental (overprotection in labour laws) and environmental barriers (physical obstacles) preventing them to be hired but also personal problems such as a low social capital and
misconceptions about disability which increase both their experienced and anticipated discrimination.
Chapter II

Disabling Barriers and Social Policies in Italy

2. Introduction

In every society there is always a dominant way of thinking. What the majority of individuals in a community accepts as true or real and finds worthwhile to pursue constitutes a paradigm (Ostroff, 2011). Most of the times, paradigms do not result from formal or written norms but from customs or beliefs which are passed on from generation to generation. In other words, they are culturally determined (ibid.).

A paradigm manifests itself through the perspectives and interpretations of the world that a particular society has (Ostroff, 2011). Almost everyone acts without knowing that most of her beliefs, values and practices are influenced by the worldview of her society. Almost everybody unconsciously assimilates so much the vision of her society that does not have any doubt about it and does not raise any objection against the way things are commonly thought and done. This is the reason why paradigms are very unlikely to change and a paradigm paralysis is likely to occur (ibid.).

In almost every society one of the dominant paradigms is and has always been represented by physical and mental ableness. As I showed in the first chapter, discrimination is rooted in this conception and cause people with disabilities significant problems in several different areas, from public environments to education and employment systems.

Nevertheless, not everyone is influenced by the most powerful worldview in her society or, at least, there are some people who are able to distantiate themselves from it. This is what has slowly started taking place in the field of disability thanks to the UN Convention on the Rights of Persons with Disabilities (2006) and, previous to the Convention, to the UN Standard Rules on Equalization of Opportunities for Persons with Disabilities (1994).

In this chapter, I will focus on the different policies which have been made in Italy to foster the inclusion of people with disabilities and prevent their discrimination in their public environments, including public buildings and roads, public transportation and information and communication technology, and in the education and employment systems. In order to analyse Italian policies on accessibility, I will firstly refer to the principles of universal design which lie at the basis of the
current debate on the accessibility of public environments mentioned in the UN Convention on the Rights of People with Disabilities.

Secondly, I will analyse the gaps existing in the Italian legislation and show the reasons why legislative norms and social policies, more in general, are not implemented to grant people with disabilities the rights they deserve being citizens as all the others.

2.1 Universal Design and Accessibility to Public Environments

All over the world, different countries promoted initiatives to ensure the accessibility of public transportation systems and services, of public buildings and roads and of information and communication technology. In this respect, at both international and European level, the most important point of reference is represented by the UN Convention on the Right of Persons with Disabilities (2006) and, more specifically, by Art. 9. The latter is primarily focused on the need to ensure an equal access to public environments for all people with disabilities and on the "identification and elimination" of barriers to accessibility (CRPD, 2006).

The notion of accessibility contained in the CRPD is connected to the concept of universal design. Universal Design is "the design of products and environments to be usable by all people, to the greatest extent possible, without the need for adaptation or specialized design" (Connell et al., 1997 in Story, 2011).

It is worth noticing, however, that the idea of improving accessibility of public systems and services started circulating, especially in Europe, only after the principles of universal design had spread in the U.S.A.. Universal Design (UD) can be defined as a U.S. social movement born in the 90's. Its main objective has always been to incorporate the concept of bodily diversity into the design of products and systems of any kind by allowing everyone to use them without being in a position of disadvantage with respect to others (Imrie, 2004). Since the beginning, this movement struggled against the common practice of architects planning objects and services based on the concept of the normal body. It did not accept the idea the body must be necessarily "fit, able, fixed, measurable and neutral" (Imrie, 2004, p.281). It considers not only that people have different bodily shapes and sizes but also that they may change them over time. For this purpose, he recommends that a preparation be provided to architects in order to accommodate the needs of everyone through their designs (ibid.).
In addition, trying ex-post to neutralise or correct products and systems which are not built in ways that are accessible to people with impairments is humiliating for them (Imrie, 2004). It seems that as they are not able to physically function in their society, their inabilities are to be compensated for through accessible designs (ibid.)

However, this makes them feel more socially excluded and stigmatised (Imrie, 2004). Instead of adopting 'add-ons' which emphasise more a person's impairment, UD suggestion is to make more efforts to reduce ex-ante the possibility of social isolation and build an environment in which being different is not a problem (ibid.)

In order to further this project of universal design, seven basic principles have been developed (M.F. Story, 2011, Figure 4). The first two principles, Equitable Use and Flexibility in Use, are supposed to allow everyone to use and to adapt designs without being ostracised.

The third, the fourth and the fifth principles are respectively Simple and Intuitive Use, Perceptible Information and Tolerance for Error. They are aimed at eliminating all the problems that people may encounter when managing designs by ensuring a clear understanding of their use and by reducing the probability of making mistakes when using them (M.F. Story, 2011).

The last two principles are Low Physical Effort and Size and Space for Approach and Use. The former is based on the idea of minimising efforts when using designs efforts. The latter aims at preventing discrimination by accommodating people with different body characteristics and sizes (M.F. Story, 2011).
These principles have been incorporated by the UN into the CRPD (Art.2). As Italy and several other countries worldwide have ratified the Convention, in the next paragraphs I will consider
whether Italy has favoured universal design measures in its policies on public transportation, public buildings and roads and information and communication technology.

2.2 Public Enabling Environments and Policies on Physical Accessibility in Italy

At global level, most of policies try to ensure the right to mobility to people with disabilities by increasing accessibility of public transportation systems and of public buildings and roads (WB, 2011). One way adopted by some countries to guarantee equal access to public transportation infrastructures is to create 'special transport services' (ibid.).

However, setting up services of this kind seems to be problematic from different point of views. From an economic point of view, if governments provided special transport services, the costs that welfare states sustain would inevitably increase, also without solving the problem, that is the inaccessibility of the means of transportation. From a sociological perspective, providing people with disabilities with additional services would further emphasise their impairments, thus making them feel different and more isolated.

As proposed by the Universal Design movement, a solution would be to restructure vehicles in ways that can be truly used by anyone, regardless of any physical difference.

In this respect, Italy has prescribed the need to ensure the accessibility of all means of public transportation to all people with mobility impairments (Law 118/71; Law 104/92; DPR. 503/1996). This advanced social legislation was passed in order to support the right to mobility to people with disabilities and prevent their discrimination. Art.24 of DPR.503/96 sets out in detail the norms that should be followed when designing bus and rail systems. These include priority seating, wheelchair anchoring and small ramps in order to close the gap between the sidewalk and the vehicle. The same DPR also regulates the accessibility of public buildings and open spaces (1996) although dispositions aimed at removing architectural barriers were already present in previous norms (Law 13/89; Decree 236/89).

The need to ease the access to public environments was initially envisaged in 1989 and then reasserted in 1996. Since the beginning, legislation has provided for three kinds of accessibility: "total accessibility, partial accessibility and adaptability" (D’Innocenzo and Morini, 2011, Chap.15). Totally accessible public buildings should ensure people with mobility impairments they have equal access to them and to all its common spaces, while partially accessible ones should at least guarantee they can approach and enter its "primary spaces". Other public infrastructures, as in the
case of adaptability, may still be subject to small modifications so as to be available to people with disabilities (ibid.).

As it can be observed, minimum standards concerning the accessibility of public facilities and services are present in the Italian legislation and they are in line with Art.9 of the CRPD. They were promoted well before the CRPD recommended that all countries developed and promulgated guidelines on accessibility (Art. 9, 2006).

Yet, as I showed in the previous chapter, people with disabilities experience enormous difficulties when trying to use means of public transportation, when attempting to have access to public buildings and even when exiting their homes as pavements are uneven. If disabling barriers to physical environments in Italy are so widespread and there are specific norms that regulate the design and accessibility of public amenities, evidence suggests that the problem does not lie in the absence of written provisions.

In this regard, one major obstacle to the use of public services is that accessibility is not embedded in the professional training curricula of architects and designers (WB, 2011). This implies that as long as no adequate preparation is provided to professionals on the principles of universal design, buildings and facilities will still remain inaccessible (ISGI, 2008).

Furthermore, according to ISGI (2008) another significant problem is the lack of appropriate enforcement and monitoring mechanisms that can check the implementation of existing accessibility laws. As the World Bank suggests (2011), with no regular control governments would not fully execute these laws. For this reason, an idea could be to create an extra-governmental institution in charge of impartially assessing the compliance of current practices with accessibility laws and, in case they are not, to enforce them (ibid.).

However, in order to apply them this body should receive funds which would be difficult to ensure as, most of the times, economic resources are scarce (WB, 2011).

It is important to stress that the government annually delivers a budget where its national revenues and expenditures for that year are clearly estimated in order to avoid any kind of budget deficit. For this reason, it has always to make choices about the nature and the amount of the resources which are to be provided, the modalities in which they are to be directed and which subjects, if any, are to be covered.

As a matter of fact, it has been argued that as in Italy the scarcity of economic resources is highly significant especially in the disability sector, the government is neither fully able to address
barriers to physical public environments nor to provide sufficient economic benefits to be destined to people with impairments (De Robertis and Speziale, 2009).

Notwithstanding this, the Italian government is still expected by the Italian law to ensure that part of the state expenditure be destined to people with disabilities. It is stated that economic support is to be granted to all people with disabilities both in the form of social benefits aimed at providing them with relief and assistance but also in the form of restructuring of public facilities aimed at providing them with equal and accessible services (De Robertis and Speziale, 2009).

Consequently, if there are legislative preconditions aimed at eradicating disabling barriers from the built environment, it might be supposed that the issue of accessibility is not felt extremely relevant by the Italian government and by its public administration to be prioritised (De Robertis and Speziale, 2009). The very fact that resources devoted to the issue of accessibility of public facilities are insufficient suggests that the uncomfortable physical obstacles people with mobility impairments face everyday when trying to use public services are only second-place problems to be solved. The lower significance attached to providing equal services to everybody, however, generates an inequality of treatment and a violation of the basic rights of people with disabilities (ibid.).

The analysis made above suggests that two main issues have not been properly addressed in terms of accessibility: the absence of legal obligations upon designers to build infrastructures in accessible ways and the lack of compliance of current practices with existing accessibility laws. Although there are several reasons why inaccessibility hinders the social inclusion of people with disabilities, few proposals have been put forward to solve these issues.

In the first place, one way to circumvent the absence of legal obligations upon designers to build accessible infrastructures would be to incorporate the idea of accessibility of public vehicles and buildings into all courses of study of architecture and design. In order for this change to occur, according to ISGI (2008), an idea would be to enact a law requiring a compulsory training on accessibility for all designers, as the French Law 102/2005 already provides.

In the second place, one solution by which to guarantee that existing accessibility laws on public infrastructures are enforced may be to increase penalties for those who violate them (ISGI, 2008).

Nevertheless, it is difficult to see how the lives of people with disabilities can be improved without promoting appropriate social and political programmes (Imrie, 2004). Imrie (2004) highlights that relying only on legal instruments to ensure the accessibility of buildings and vehicles
is not sufficient. Technical issues like inaccessibility could be addressed only by combining environmental adaptations with social and attitudinal changes in our society. In order for the law to be executed, it would be effective to make the problem of inaccessible buildings and vehicles be perceived socially and culturally relevant and, because of this, placed at the top of the political agenda. The commitment to make these issues acquire relevance at all levels - technical, social and political - could be fulfilled if also some social norms such as being fit and able to physically function in society were replaced with norms like being citizen and able to enjoy equal rights in society, regardless of any physical and bodily difference (ibid.).

Transforming these socially constructed standards is an objective that might be also met through awareness-raising campaigns (WB, 2011). These campaigns would have the potential to change discriminatory paradigms by making the public opinion conscious of the rights that people with disabilities have and the problems they face in their life when trying to have access to public services (ibid.)

In addition, another extremely powerful tool that can make non-disabled individuals more conscious about the problems people with disabilities experience within their physical environment are street audits. "A street audit is a systematic survey of an area, designed to record all the barriers to access and use" (Manley, 2011, Chap.17). It involves disability organisations as well as individual citizens and aims at assessing people's pedestrian access to the built environment. It relies on the collection of both quantitative and qualitative data by different stakeholders, especially local communities, which tend to include both disabled and non-disabled people. The study ends when evidence about public barriers is provided to local public officials and are used to ameliorate the accessibility of public environments (ibid.).

Street audits cannot make the built environment more accessible but they can lead to interventions that make it more accessible in a number of ways (Manley, 2011).

First of all, they can allow people with no impairments to become aware of the existence of roads which are not accessible and of the extent to which they cannot be used by people with disabilities (Manley, 2011). Increasing people's concern about this problem is extremely important because building infrastructures in accessible ways while not caring about the inaccessible nature of roads would be meaningless. If, in fact, pavements are uneven and curb cuts do not exist, it is not difficult to understand that mobility is restricted and that, for this reason, people with impairments will be forced to remain at home, to not use means of public transport and to not have access to buildings (ibid.)
Secondly, street audits can be used to call on local governments to intervene in order to take into account the rights of people with disabilities also at city level (Manley, 2011). For this purpose, accessibility audits would in fact be able to increase the availability of information on the problems people with disabilities face in different neighbourhoods, thus leading to better target the obstacles that must be eliminated. All of this would meet the ultimate objective of the survey which is "empowering people to take responsibility for making changes" (Manley, 2011, Chap.17).

2.3 (In)accessible Information and Communication Technologies and the Role of the Italian Government

The notion of accessibility lies at the basis of the principles of Universal Design. When it was introduced in the CRPD (Art.9, 2006) it aimed at granting all people with mobility impairments the right to have access to their public environments without any discrimination. The rationale behind this was the recognition of the need to ensure their capacity to "live independently and participate fully in society" (ibid.). For this purpose, physical barriers were to be removed in conjunction with information and communication ones. Eliminating information and communication obstacles is necessary, as the CRPD (2006) highlights, to guarantee that people with disabilities exercise the right to freely express their opinion and the right to freely receive information. In order for this to occur, "languages, display of text, Braille, tactile communication, large print, accessible multimedia as well as written, audio, plain-language, human-reader and augmentative and alternative modes, means and formats of communication, including accessible information and communication technology" should be promoted (Art.2 in CRPD, 2006).

In this respect, Italy set by law minimum standards in terms of accessible information and communication technologies in line with the principles of universal design incorporated in the CRPD.

The first measure regulating accessibility in Italy was Law 102/92 about the assistance, the social inclusion and the right of people with disabilities. Art.25 prescribes the need to make broadcasting and landline services accessible to people with disabilities, such as by installing television decoders and other complementary devices.

The obligation to provide adequate services, information and assistive technological devices to people with impairments is also present in subsequent laws, such as Law 04/2004. This piece of legislation deals with measures aimed at facilitating the access of people with disabilities to
information technologies. It contains accessibility requirements which conform to Art.21 of the CRPD (2006) stating the need to provide "information intended for the general public to persons with disabilities in accessible formats and technologies appropriate to different kinds of disabilities in a timely manner and without additional cost". The duty to comply with these norms is binding on entities working both in the public and private sectors. In both realms, in fact, employers should provide any assistive technological device which is useful and functional to the task people with disabilities must carry out in the workplace and, for this purpose, they may request public grants (Art. 4, Law 04/2004).

In the private sector, Art.6 of the same Law opens the possibility to private entities other than those referred to in Art.4 to request their websites to be assessed in terms of accessibility. In case they prove to be accessible, private providers would be most likely to receive incentives which would be highly beneficial to them as they would increase the visibility of their websites.

As information is to be provided in accessible ways, also mass media should be encouraged to do so (Art.21, CRPD). With reference to this, the Italian Ministry of Telecommunications, now Ministry of Economic Development, signed in 2007 a service contract with the Italian national public broadcasting company of RAI which is renewed every three years (ISGI, 2008). Each channel of this company has to guarantee that news and most of current affairs programmes are provided with sign language interpretation and captioning at least once a day.

However, if Italian laws place great emphasis on the accessibility of information technologies, communication devices, there are still some areas which are not covered by legislation.

According to Art.21 of CRPD (2006), "the use of sign languages, Braille, augmentative and alternative communication, and all other accessible means, modes and formats of communication of their choice by persons with disabilities in official interactions is to be accepted and facilitated". In this regard, one of the main gaps in the Italian legislation is the absence of guidelines aimed at overcoming communication barriers in official interactions (ISGI, 2008). During the election process, for example, people with impairments find difficulties when expressing their vote as there are no alternative forms of communication, such as Braille, provided to them.

An additional normative deficit in terms of communication barriers is the lack of recognition and promotion of the use of sign languages as required by the CRPD in Art.21. This causes people with sensorial impairments to be excluded from full participation in society, thus generating the need to address this gap in legislation (ISGI, 2008).
As it appears, Italian legislation generally conforms to the requirements concerning the accessibility of information technological devices.

Yet, as I showed in the previous chapter, several websites are not accessible. Also many products, such as computers and mobile-phones, are not built so as to accommodate the needs of people with impairments. This implies that in order to use these products assistive devices are to be added later on, with high costs for consumers.

In order for equal access to be guaranteed, a suggestion would be to strengthen the monitoring process by making providers and designers of these technologies be more accountable to national and local public administrations (ISGI, 2008).

Moreover, recommendations can be made in order to fill the gaps in the Italian legislation in terms of communication barriers (ISGI, 2008).

In the first place, it is important to take into account that obligations and incentives to provide captioning and sign languages are only imposed on public national broadcasting companies. For this reason, a suggestion may be to create a system of incentives which is also appealing to private broadcasting companies, thus increasing the quantity of information available to consumers with impairments (ISGI, 2008).

In the second place, efforts could be made to free official interactions from communicative obstacles (ISGI, 2008). In order to eliminate this problem, the Italian government may adopt appropriate guidelines concerning the availability of official documents in alternative formats as, for example, non-visual ones like Braille (ibid.).

In the third place, interventions could be realised in order to favour the diffusion of sign languages as it has not been yet legally and institutionally supported (ISGI, 2008).

Nevertheless, in order for these changes to take place, a particular endeavour could be made with the goal of challenging the way in which current systems are organised and the manner in which services are provided. This challenge can be enhanced through educational campaigns aimed at increasing awareness on the communicative problems people with disabilities experience everyday. Making non-disabled people more conscious of how relevant these issues are to disabled ones would greatly contribute to enhancing the social inclusion of people with disabilities (WB, 2011).
2.4 Education of Children with Disabilities in Italy: Inclusive Classes or Special Classes in Integrated Settings?

At global level, the access to education for people with disabilities is guaranteed in very different ways (WB, 2011). Currently, teaching is provided to them in either special institutions, inclusive schools or integrated schools. An example of the former are Belgium and Germany where disabled pupils are disjoined from non-disabled ones. In other countries, like Cyprus, Lithuania, Malta, Norway and Portugal, inclusive classes are preferred. Other states, like Greece, Denmark and Switzerland tend to adopt the model of special classes in integrated schools (ibid.).

In Italy the issue of integration of children with disabilities in general education classes has always been at the core of the debate between political institutions and civil society (Begeny and Martens, 2007). Some have argued that special schools are best suited to the needs of disabled pupils because there is a great number of resources available to them, while in inclusive schools assistance is insufficient and is not regularly provided. It is also maintained that in mainstream settings non-disabled students are likely to harm or intimidate their disabled peers as they see them as different (ibid.).

In contrast, opponents have shown that there are at least three good reasons for the integration of disabled children in ordinary classes: educational, social and economic (Begeny and Martens, 2007; UNESCO, 2009).

First, the educational justification is based on the idea that segregation violates the right to equal education of persons with disabilities provided for by Art.24 of the CRPD as teachers should use methods and approaches that accommodate and adjust to the specific needs of all children (UNESCO, 2009). Furthermore, research suggests that the academic gains that disabled pupils could achieve by participating in ordinary classes would be greater compared to those they would acquire in special schools (ibid.).

Second, as in mainstream settings both disabled and non-disabled students would receive the same education, the potential for non-disabled children to value diversity would increase and the likelihood of discriminatory behaviour would be lower (UNESCO, 2009). This means that the contact between impaired and non-impaired pupils would socially advantage not only disabled students but also non-disabled ones who would be encouraged to accept their disabled peers as moral equals (ibid.).
Third, creating special schools for children with disabilities instead of increasing support to them in mainstream settings would be very expensive from an economic point of view (UNESCO, 2009).

After this long debate, moves towards the educational integration of impaired pupils in Italy started emerging gradually from the bottom (D'Alessio, 2008). Local districts, associations of workers and non-governmental organisations struggled against the existence of special schools for people with disabilities animated by principles of social justice. They strongly questioned that teaching to students with impairments was provided in special institutions as their rights to equal opportunities were violated (Nocera, 2001 in D'Alessio, 2008). In contrast, they advocated the need to locate and support disabled children into general educational classes in order to fight isolation and discrimination (ibid.).

The first legislative steps towards the social integration of disabled pupils in Italy were taken in the 1970's. Law 118/71, implemented in 1977 through Law 517, established that all students with impairments were to be taught in ordinary classes (D'Alessio, 2008). The need to guarantee the right to education to all pupils without any discrimination required by Art.34 of the Italian Constitution made it clear that more efforts were to be made in order to integrate disabled children into the general education system.

As provided for by the Framework Law on Handicap, the objective of integration was to "develop the potentialities of persons with disabilities in their learning, in their communication skills, in their relations and in their process of socialisation" (Art.12, Law 104/1992). In order to enhance their capabilities, the same Law specifies in Art.13 that there must be support teachers in all general classes where disabled students are present. Their duty is to be responsible for the class as a whole, to provide recommendations to the curricular teachers about the methods they can use to ensure the effective learning of students and help them in planning "specialised individualised interventions" (D'Alessio, 2008, p.59). In this respect, it must be clarified that individualised interventions are not equivalent to individual ones. While the term individual refers to "the fragmentation of the school system into differentiated paths according to personal attainments", the notion of individualised interventions demands "the school community to struggle for the implementation of integration by means of mutual adjustments and structural changes" (D'Alessio, 2008, p.61).
According to Law 449/97, there should be one support teacher for every 138 enrolled students, including both the impaired and the non-impaired although more specialised staff can be added when needed.

Furthermore, in order for teachers to better support disabled children, no more than 20 students per class should be allowed (Ministerial Decree 141/99; Art.5, DPR 81/2009). For the same reason, also the number of disabled pupils in the same class must be limited (MD 141/99).

Moreover, the integration of disabled students into mainstream school settings should not be compromised in any aspect. For this reason, they should take part to all their curriculum activities (Art.68, 144/1999) and working opportunities, including internships, should not be denied to them (Legislative decree 77/2005).

As it can be observed, Italian legislation is particularly advanced as it strongly favours the integration of disabled children into the general education system, at least legislatively speaking. Yet, there are several obstacles to this project.

In the first place, one problem is that Italy favours the integration not the inclusion of disabled children in mainstream settings. The terms 'integration' and 'inclusion' are often confused and usually used interchangeably but they have totally different meanings (French and Swain, 2004; D'Alessio, 2008). Art.24 of the CRPD clearly states that "States Parties shall ensure an inclusive education system" not an integrated one and that "persons with disabilities can access an inclusive, quality and free primary education and secondary education on an equal basis with others in the communities in which they live" and not they have to be integrated.

The distinction between inclusion and integration is a very subtle one but is relevant to understand how the medical model of disability is still strongly rooted in the Italian society (D'Alessio, 2008). By integration Simona D'Alessio refers to "the structural, organisational and curricular responses to meet diversity in regular schools related to the educational domain in relation to disabled students" (2008:58). Inclusion, on the contrary, is "a more radical socio-political project that engages society as a whole and considers integration as just part of its project" (2008:58). Also Rieser (2002:132) highlights this distinction pointing out that integration is "a matter of location, placing a disabled child in a mainstream setting, usually with some additional support to access what was being offered in the school, changing the child to fit in with the social and academic life of the school" (French and Swain, 2004). In contrast, he considers inclusion as consisting in "valuing all children irrespective of their type or degree of impairment, or reconstructing the institution to remove barriers so that teaching and learning take place so all
children can be valued for who they are, participate, interact and develop their potential” (French and Swain, 2004).

In Italy the project of social inclusion of disabled children into general classes as defined by Rieser has several fallacies as there are not inclusive classes but special classes which are provided in integrated settings (D'Alessio, 2008). In the previous chapter, in fact, I showed that resources are not sufficient, that teachers' training is inadequate and that curricula are not flexible. In addition, also the attitudes of teachers, school administrators and other children are often negative and violence, bullying and abuse against disabled students are frequent.

If there is a well-defined set of norms regulating the full participation of pupils with disabilities in schools and their integration is not often promoted in practice, the problem does not lie in the absence of written provisions. In this regard, there are two main issues to be addressed: laws are not adequately enforced and current practices in the education sector are not regularly controlled (ISGI, 2008; De Robertis and Speziale, 2009).

First of all, in contrast to Law 449/97, the number of support teachers available in primary and secondary schools is compromised by the increasing cuts in government spending (De Robertis and Speziale, 2009). This means that their presence in the education system is lower, thus decreasing the support to disabled students which is functional to their integration.

Not only there is not an ample number of support teachers but also the possibility they have to look after disabled children is undermined (De Robertis and Speziale, 2009). As a matter of fact, the hours they should devote to pupils with disabilities during the day are consistently reduced as resources are not sufficient (ibid.). In this way, students with impairments may participate less to general classes and be more subject to violence, bullying and abuse.

In addition, the principle that all teachers should be responsible for working with children with disabilities (Art.13, Law 104/92) is significantly disrupted (D'Alessio, 2008; De Robertis and Speziale, 2009). Several teachers, in fact, entrust the task to educate disabled pupils only to support teachers and some teachers are not properly trained to deal with classes where more than one disabled student is present (ibid.).

There are mainly two reasons why some teachers avoid contacts with disabled children (D'Alessio, 2008). First, they misunderstand the role support teachers should play in classes. Second, they are fearful about disabled pupils' reactions (ibid.).

The outcome is that non-disabled pupils perceive the negative attitudes these teachers have towards their disabled peers and use them as a justification to act in the same way. This makes in
turn students with impairments feel more discriminated with evident negative impacts on their involvement in class.

Besides this, it is worth noticing that teachers in the classroom should provide individualised rather than individual interventions to children with impairments. In line with Art.24 of the CRPD on the right to education, curricula, textbooks and learning materials should be flexible and inclusive which means they should "address the child's cognitive, emotional, social and creative development" (UNESCO, 2009).

However, some teachers create standardised rather than flexible curricula (UNESCO, 2009). They believe that it is appropriate that a unique modality of teaching is provided to all pupils and that the same knowledge must be acquired exactly in the same period by all of them. This approach, however, fails to recognize that each student is different and has different needs to be satisfied (ibid.)

Also, they often care more about the content of the information they are conveying to disabled children instead of ensuring whether the latter actually grasp it (UNESCO, 2009). This is particularly relevant as excessive burdens in terms of information on disabled pupils are not beneficial at all to their effective learning and may produce exactly the opposite result (ibid.).

The efficacy of integration of disabled pupils is further undermined as other significant laws and regulations are violated (De Robertis and Speziale, 2009). If the maximum number of students per class where children with impairments are present should be 20 (Ministerial Decree 141/99; Art.5, DPR 81/2009,) in reality school municipals do not always control whether the limit is respected. This implies that classes are overpopulated. The main consequence of this is that teachers cannot provide adequate support to pupils with disabilities who, therefore, feel excluded from ordinary classes (De Robertis and Speziale, 2009).

Moreover, the limit to the number of disabled children per class (MD 141/99) is not respected (De Robertis and Speziale, 2009). Most of the times what happens is that there are classes only made up of disabled students which is equivalent to creating segregated settings (ibid.).

Furthermore, the obligation for schools to ensure their participation to their curricular activities as provided for by Law 144/1999 (Art.68) is not always respected (De Robertis and Speziale, 2009). In connection to this, in contrast to the Legislative Decree 77/2005, they are also often marginalised and excluded from trips and internships others have access to. This suggests that opportunities for informal and non-formal education are few, hence contributing to their isolation and hindering their integration (ibid.)
Among the problems concerning the integration of pupils with impairments into the general system, there are not only the inappropriate enforcement of anti-discriminatory legislation and insufficient resources but also attitudinal barriers. Again, not much is done to address this issue as policies aimed at changing social (discriminatory) norms are not strongly incentivised. This partly explains the reason why discrimination has not been completely eradicated even from the Italian education system that has one of the most progressive legislation in this regard.

To conclude, some recommendations can be made in order to stimulate further concrete actions aimed at fighting discrimination against disabled children in the education system.

Firstly, one suggestion would be to strengthen the rights-based policies through the application and monitoring of the laws and regulations which have been promulgated in terms of funding, inclusive curricula, number of students per class and number and role of support teachers in classrooms (D'Alessio, 2008; Atlas Alliance, 2008; UNESCO, 2009; WB, 2011).

Secondly, efforts could be made to eliminate the attitudinal barriers that prevent students with impairments from participating to general classes without discrimination and on an equal basis with others. In this respect, the networks, advocacy and dialogue at regional and national levels, positive images and welcoming environments could be promoted to increase awareness and support in society about inclusive education (Atlas Alliance, 2008). This would require to adopt positive role models, raise awareness and education on human rights and to encourage the formation of self-advocacy groups that may challenge current discriminatory practices by means of empowerment. For example, events may be organised where the most active members of disabled people's can contribute to stimulate discussions about what social inclusion is and what can be done to enhance it. Merely their participation would contribute to disrupt the stereotypes - prejudice - discrimination negative circle (ibid.).

Thirdly, shifting the attention of social policies in Italy from integration to inclusion would make the Welfare State become more concerned with the human rights of disabled children and less with measures aimed at compensating them for their impairments (D'Alessio, 2008). As D'Alessio puts it, involving the entire society in the process of inclusion would make possible to generate a more radical and deep change of our social norms (ibid).
2.5 Employment of People with Disabilities and Social Policies in Italy

Around the world, different mechanisms have been used to address the barriers that people with disabilities face when trying to have access to the labour market. These includes anti-discrimination laws and affirmative action, vocational rehabilitation and training, social protection benefits and tailored interventions such as quotas, incentives to employers and supported employment. All these mechanisms are in line with Art.27 of the CRPD (2006) stating that:

"States Parties (...) shall safeguard and promote the realization of the right to work (...) by taking appropriate steps, (...) to:

a. Prohibit discrimination on the basis of disability with regard to all matters concerning all forms of employment, including conditions of recruitment, hiring and employment, continuance of employment, career advancement and safe and healthy working conditions;
b. Protect the rights of persons with disabilities, on an equal basis with others, to just and favourable conditions of work, including equal opportunities and equal remuneration for work of equal value, safe and healthy working conditions, including protection from harassment, and the redress of grievances;
c. (...)
d. Enable persons with disabilities to have effective access to general technical and vocational guidance programmes, placement services and vocational and continuing training;
e. Promote employment opportunities and career advancement for persons with disabilities in the labour market, as well as assistance in finding, obtaining, maintaining and returning to employment;
f. (...)
g. (...)
h. Promote the employment of persons with disabilities in the private sector through appropriate policies and measures, which may include affirmative action programmes, incentives and other measures;
i. Ensure that reasonable accommodation is provided to persons with disabilities in the workplace;
j. Promote the acquisition by persons with disabilities of work experience in the open labour market;
k. Promote vocational and professional rehabilitation, job retention and return-to-work programmes for persons with disabilities".
As it appears, the CRPD recognises the importance to protect discrimination against people with disabilities in the labour market by prescribing the modalities through which it can be done. This need is attached to the importance that working has in our society (De Robertis and Speziale, 2009; WB, 2011). Having a job, especially for disabled persons, is not simply essential to gain a living but it is also indispensable to increase their self-esteem, their capabilities, their autonomy and even their sense of human dignity and social cohesion (ibid.).

In addition, ensuring the inclusion of people with disabilities in the labour market is beneficial at the aggregate level also from an economic point of view (De Robertis and Speziale, 2009; WB, 2011). As a matter of fact, as more actors have access to job opportunities, human capital rises. This generates an increase in the national output and, consequently, in individual well-being (ibid.)

In Italy policies aimed at fostering the participation of people with disabilities in the labour force were already present in Law 104/92 (artt.17-22). In particular, Art.17 requires all regions to support the employment of people with disabilities by providing vocational training. Vocational training services are supposed to make disabled persons acquire those skills they will be demanded to enter the labour market.

Following Law 104/92, the most relevant piece of legislation regulating the right to work and employment for people with disabilities is Law 68/99. Its objective is to promote the right of disabled persons to have equal access to the labour market by means of targeted work placement. By targeted work placement the Law, "alongside the evaluation of the working capabilities of a disabled person", refers to the need of "analysing places of work, forms of support, positive actions and solutions to problems connected to work environments, and the means and the characteristics of interpersonal relations in the workplace, in order to find a suitable job" (Art.2, 1999; Ferrucci, 2014, p.191).

Furthermore, Italy has established quotas for the employment of people with disabilities in the public and private sectors (Art.3, 1999). According to Art.3 of Law 68/99, public and private employers, with at least 15 employees, have the obligation to include in their company people with disabilities officially registered at the job centres at province level (Centri Provinciali per l'impiego) (Ferrucci, 2014). More specifically, they must hire one worker if they have a minimum of 15 employees and a maximum of 35, two workers if their employees are in between 36 and 50 and the 7% of their workers if they have more than 50 employees (Art.3, 1999).

In addition, Art.13 of Law 68/99 guarantees economic incentives to employers in order to stimulate them to hire people with disabilities (Ferrucci, 2014). The rationale behind this is that tax
incentives are beneficial to employers insofar as they compensate them for the costs (additional labour costs) they might sustain when providing reasonable accommodations (ibid.)

Evidence suggests that Law 68/99 addressing discriminatory barriers to the labour market for people with disabilities is perfectly in line with Art.27 of the CRPD. Yet, as I showed in the first chapter, there are numerous obstacles to the participation of people with disabilities in the labour market.

One of the problems are environmental barriers, that is physical obstacles, which prevent them from being hired. In relation to this, I already discussed the political relevance of this issue in Italy earlier in the chapter. I critically analysed how Italy contributes to the removal of these impediments and how changes can take place in order to ensure an accessible and inclusive built environment.

If not enough is done politically to address environmental obstacles, the same can be said for the governmental, personal and attitudinal barriers causing inequality between disabled and non-disabled in the labour market. Political responses in Italy to these three issues are mainly contained in Law 68/99. For this reason, an analysis of the effects of this norm is beneficial to understand what has been done and what may be done to contrast discriminatory behaviours within the workplace.

Ferrucci (2014) shows that Law 68/99 has partly increased the employment opportunities available to persons with disabilities in the labour market (Figure 5).
As it can be observed in Figure 5, the role of the job centres at province level has been particularly relevant as channel of access to work for people with disabilities (Ferrucci, 2014). 10.1% of disabled people used them as a way to enter the world of work compared to 2.6% of non-disabled ones.

However, one needs to realise that it is still friendships and acquaintances that are mostly used by disabled people to participate in the labour market, followed by public competition, self-employment and direct application (ibid.).

Also, although thanks to Law 68/99 there has been an increase in job placements for people with disabilities (2001-2007), the opportunities provided to them in terms of access to the labour market are extremely few. In this respect, before looking at the responses given to personal and attitudinal barriers, I will focus on governmental obstacles.

It is interesting to notice that the very idea that the laws, the benefits and the employment schemes designed by the Italian government to favour the inclusion of people with disabilities may impede their access to the labour market. There are different factors that may explain this odd phenomenon.

In the first place, in contrast to Art.17 of Law 104/92, little attention is paid to the provision of vocational training to people with disabilities which is functional to their inclusion (De Robertis and Speziale, 2009). As a consequence of this, disabled people cannot acquire those skills that are required to them in the labour market. This creates in turn an unfavourable situation to them as employers are able to justify the rejection of their job applications by claiming they need skilled and not unskilled workers (ibid.).

In the second place, another reason that may account for the unequal access of people with disabilities to the labour market is that Law 68/99 does not take into account the business reality in Italy (Ferrucci, 2014). As a matter of fact, the Law requires employers to integrate people with disabilities in their companies if they have at least 15 employees. The problem, however, is that of 4.5 million businesses working in 2008, only the 5 % of them has more than 10 employees. This implies that most firms in Italy do not have the obligation to hire people with disabilities. Therefore also the project of establishing quotas in order to avoid that employers discriminate against disabled people because of the belief they will be less productive fails to produce its effects (ibid.).

In the third place, although Law 68/99 encouraged employers to hire people with sensorial and intellectual impairments by means of economic incentives, discrimination continues (Ferrucci,
This happens because many employers prefer to incur the financial penalty rather than provide for the job placement of persons with disabilities (Angeloni, 2010 in Ferrucci, 2014). Furthermore, in some rulings between employers and disabled workers, the responsibility of employers is minimised because they are often asked to search for tasks that are compatible with the abilities of the worker within their company but not to modify the company's organisational structure itself (ibid.)

Alongside environmental and governmental barriers, personal ones are also relevant to the analysis of the social exclusion of disabled people. Personal barriers mainly refer to the low social capital people with disabilities possess, that is their low level of education. However, as I showed in the previous chapter, most of the disparities existing between disabled and non-disabled people in terms of education are not due to differences in ambitions but to unequal opportunities. Hence, without ensuring an adequate inclusion of disabled people in schools and universities, it is straightforward to expect they will be disadvantaged when searching for job opportunities.

Nevertheless, Ferrucci (2014) claims that even if personal barriers did not exist, the inclusion of people with impairments in the labour market would not be guaranteed. He argues that if disabled people were included more in the general education system, they would become more skilled and they would expect employers to allow them to compete for jobs as all the other members of their society. However, these expectations would not be met in reality because attitudinal barriers would still strongly impede their access to the labour market (ibid.)

In this realm, besides written provisions, government's policies aimed at challenging negative attitudes and misconceptions about disability in the work environment are almost non-existent (Ferrucci, 2014). This is of utmost importance as relying only on the law to fight discrimination against disabled people in the workplace is not sufficient. If the dominant paradigm in our society is still based on the idea that persons with disabilities do not have the same wants and ambitions of non-disabled people, that they are not capable to act as all the others, they will always be more likely to be rejected from job applications (ibid.)

To conclude, some recommendations can be made in order to stimulate further concrete actions aimed at fighting discrimination against disabled people in the labour market.

In the first place, with the objective of addressing governmental barriers, one suggestion could be to effectively ensure the provision of vocational training to people with disabilities as required by Art.17 of Law 104/92. In this way, it would be possible to enhance the skills they are requested
to possess in the labour market, thus increasing the probability they will be hired (De Robertis and Speziale, 2009).

In the second place, a proposal could be to revise Law 68/99 by guaranteeing that also companies with less than 15 employees have the obligation to hire people with disabilities. By so doing, the Law would reflect the current business reality in Italy and so contribute to prevent discrimination against them (De Robertis and Speziale, 2009).

With regard to personal barriers, ensuring an effective inclusive education of persons with disabilities both within schools and universities would be highly likely to increase their social capital and, accordingly, their probability to be hired in the labour market (De Robertis and Speziale, 2009).

However, as Ferrucci (2014) points out, more efforts could be made to transform the socio-cultural context in which people with disabilities live. In the current socio-cultural environment many non-disabled people consider that their disabled fellows cannot have the same needs, wants ambitions and capabilities which characterise human beings. Hence, they believe that persons with disabilities are not able to work as all the other members of their community (ibid).

For this reason, some converge on the need to change perceptions on disability at societal level (WB, 2011). In this respect, disabled people's organisations play a crucial role. By conducting large-scale awareness campaigns, non-governmental organisations can address misconceptions people have about disability. Making manifest what women and men with disabilities can do and the value they bring to employers would have the potential to show to employers the advantages their organisations would gain by hiring people with disabilities. In this way, launching initiatives aimed at sharing inclusive practices and raising awareness of the goals of the campaigns, people in society would be persuaded about the importance of providing employment opportunities to people with disabilities and businesses would be stimulated to see "disability in terms of equal opportunities, capability and investment in human potential rather than as quotas, medicine and incapacity" (WB, 2011, p.250)

2.6 Conclusion

Italy has one of the most progressive legislation in terms of rights granted to people with disabilities. Specific and detailed written provisions have been promulgated since 1960's in order to counter discrimination against people with disabilities in different areas, ranging from education
and employment to information and communication and public structures and services, including buildings, roads and transportation.

In this chapter, I focused on the different policies which have been made in Italy to foster the inclusion of people with disabilities in these various sectors. For this reason, I analysed existing laws by taking as point of reference the UN Convention on the Rights of People with Disabilities and I explained the reasons why discrimination is still significantly widespread despite the advanced Italian social legislation. With this objective, I showed that while Italy conforms in principle to the requirements established by the CRPD (2006), in most of cases the project of social inclusion of people with disabilities is hindered in practice by the lack of compliance with existing laws and by the presence of gaps in existing legislation.

In the first place, in relation to the lack of compliance with existing laws, I pointed out that the laws regulating the accessibility of the means of public transport, of public infrastructures and roads and of information and communication technologies are not always applied in contrast to Art.9 of the CRPD and to the principles of Universal Design. In contrast to Art. 24 and Art.27 of the CRPD, similar violations can be also observed in the application of the laws aimed at preventing discrimination of persons with disabilities in the education and in the employment sector. In particular, by exploring the educational practices in Italy, I highlighted that the effectiveness of the projects of social inclusion of disabled children is also undermined because regulations concerning the number of students per class, the number and the role of support teachers in classroom and even the creation of inclusive curricula are rarely respected. With regard to the employment system, I argued that as vocational training, for example, is not effectively provided, persons with disabilities are prevented from participating to opportunities where they could acquire the skills they are requested in the labour market.

For these reasons, I suggested that ensuring an effective monitoring system of current practices would enhance the respect of the law, thus favouring the social inclusion of people with disabilities.

In the second place, with reference to the gaps in existing laws, I showed that in the case of public transportation, buildings and roads designers do not have legal obligations to build infrastructures in accessible ways which are functional to make persons with disabilities live as all the other members of their community. Thus, I recommended that if a compulsory training on accessibility were required by law, it would be possible to fill existing legislative gaps.

Then, I made manifest that the law requires to promote incentives to provide captioning and sign languages only on public national broadcasting companies. As the right to the freedom of
expression and the right to access to free information are recognised by the CRPD as fundamental to the life of all citizens, I suggested that a valuable option would be to provide incentives in this sense also to private ones. In addition, I proposed to diffuse sign languages and to enact specific guidelines making available the usage of sign languages in official interactions in order to make these rights be also applied to persons with disabilities.

If I did not find legislative gaps concerning the right to education of people with disabilities, I made manifest that, on the contrary, there are several of them in the employment systems. More specifically, some parts of Law 68/99 do not reflect the current business reality in Italy by imposing the obligation to hire people with disabilities only on employers with at least 15 employees. As the 95% of businesses in Italy have less than 15 workers, I suggested that in order for the effectiveness of quotas not to be undermined, extending this obligation also to employers with less than 15 employees would greatly prevent the social exclusion of people with disabilities in the labour market.

However, following the reasoning of De Robertis and Speziale (2009), I claimed that even if all the laws enacted to prevent the social exclusion of people with disabilities were effectively applied, disabled people would still find themselves in a condition of disadvantage in all these sectors. This would happen both because people have misconceptions about disability and because other issues are considered more relevant to be prioritised and solved.

For this reason, I focused on the role that non-governmental organisations play in order to transform the often discriminatory socio-cultural climate that is present in our society. More specifically, I analysed the potential of educational campaigns in increasing awareness on: the difficulties that people with disabilities face when trying to have access to public services, the communicative problems they experience everyday as well as the discriminatory practices they are subject to within schools and universities and in the labour market.

On this account, in the third chapter I will present a case study on some concrete projects of social inclusion of people with disabilities which are promoted by ANFFAS, an Italian non-governmental organisation working for the rights of disabled people.
Chapter 3

Anffas and The Role of the Third Sector in Italy

3. Introduction

"We fight social exclusion, we promote participation, we call on public administration, we sensitise public opinion" (Anffas, 1974). This is one of the first campaign slogans used by Anffas in 1970's in order to raise awareness about the discrimination people with disabilities were subject to in their society. In Italy, in fact, individuals with physical, intellectual and/or sensorial impairments had not been considered 'normal' and able to 'function' as all the other members of their community until 1970's. For this reason, they were institutionalised into psychiatric hospitals where doctors could cure their illnesses and restore them to normality (Oliver, 1990 in Barnes, 2004). As they were assumed to be unable to work and be integrated in their society, the only feasible alternative was to segregate them "into workhouses, special schools, colonies for the feeble-minded and mentally defective" (Thomas, 2004; Goble, 2004, p.41).

Although the first legislative steps towards the inclusion of people with disabilities in Italy started taking place in 1970's, civil society and especially families with at least one impaired member started publicly expressing their discontent about the exclusion of their disabled sons and daughters already in 1950's. They did not accept that their children were rejected by their non-disabled peers and by their families because of their impairments and that, because of this, they could not live a decent life. Because of the belief that healthcare professionals were not the only ones who could take care of people with disabilities, they started claiming for their deinstitutionalisation and for the creation of adequate community health facilities. For this reason, in 1958 the mother of an impaired child, Maria Luisa Menegotto, followed by other parents united by the same values of equality and social justice, gathered in Rome and founded Anffas - National Organisation of Families with Persons with Intellectual and/or Relational Impairments.

In this chapter I will focus on the role that Anffas as non-profit organisation plays in Italy to safeguard both the civil and social rights of persons with impairments and prevent their social exclusion. I will show that Anffas carries on its activities by operating in two parallel directions: political and socio-cultural. From a political point of view, I will point out that Anffas aims at stimulating political institutions to respond to the needs of persons with disabilities by means of
legislation. In this context, I will refer to the project 'Shorten the distance' launched in 2009 in order to shorten the distance between civil society, political institutions and people with disabilities.

From a socio-cultural perspective, I will argue that its main objective is to provide support to people with disabilities and promote their social advancement by means of advocacy and concrete socio-educational and rehabilitating activities that directly empower them. More specifically, I will contend that its goal is to promote the principle of social inclusion in particular within schools and universities, by ensuring the right to vocational education of people with impairments and their insertion in the labour market. In this sense, I will focus on a project called 'I Citizen! Tools for the full participation, active citizenship and self-advocacy of persons with intellectual and/or relational disabilities' (2015) that contributes to make disabled people have their voice heard.

3.1 Project 'Shorten the Distance'

Prejudicial attitudes and discriminatory practices against people with impairments mainly arise because non-disabled people have misconceptions about disability. As Anffas has believed since its foundation that knowledge and information are powerful tools to counter discrimination against people with impairments, in 2010 it launched a project called 'Shorten the distance' co-financed by the Italian Ministry of Social Policies. The purpose of this project was to provide relevant information about the content of the UN Convention on the Rights of People with Disabilities to both the general public and to persons with impairments and their families.

Although this document had entered into force in Italy already in 2009, Anffas realised that the rights contained in the Convention were still largely unknown to most of citizens and that, also because of this, were not always respected. Civil society and institutions were considered distant from the everyday lives of people with disabilities and of their families. For this reason, the organisation felt the need to introduce an initiative aimed at promoting, simplifying and assimilating the content of the Convention. In this way, disabled people, their families and the society as a whole were expected to become more aware of the right to equal opportunities people with impairments have and of the importance that the respect of these rights has in order to further their social inclusion.

This project was also envisioned to act as a springboard for other initiatives that could help to favour the respect of human rights and the dignity of all human beings, the principles of inclusion and non-discrimination and the active participation of people with disabilities in the decision-
making process. With this objective, Anffas proposed to directly engage people with disabilities and their families in discussions on the Articles of the Convention that involved their doubts as well as their experiences. At local level, in fact, Anffas organised 7 informative and educational meetings with the objective to directly give voice to people with disabilities and their families by engaging them in thematic workshops. To begin with, all participants were allowed to explore the text of the Convention. Then, they could express themselves about whether and in which contexts they had experienced discrimination and social exclusion. At the end of each of these events, they were offered the opportunity to further contribute to the project by actively formulating proposals to improve their conditions and countering their marginalisation. In this way, it was possible to identify effective solutions and strategies that could shorten the distance between the rights granted in principle by the CRPD and their effective application to the everyday life of disabled people in Italy.

Starting from the personal experiences of people with disabilities, the initiative produced a short and simplified handbook entitled ‘What the Convention says, where we are in Italy, the proposals of our families’ (2009). The goal of this normative guide was to analyse each article of the CRPD and to contextualise their content by examining current laws on disability in Italy. For each article of the CRPD, the authors identified whether there are still gaps in existing legislation in Italy and how they could be practically filled. Then, they discussed in which ways laws are not always respected and suggested solutions that could help to ensure the effective application of the text of the Convention.

In line with the principles of Universal Design contained in the CRPD, Anffas also created an easy to read version of the same handbook entitled 'Do you know what your rights are? An easy to read version of the UN Convention on the Rights of Persons with Disabilities' and a video based on this version. The goal of this short guide was to specifically target persons with disabilities and to transform them from passive to active citizens. This was done by ensuring that they understood the rights they are guaranteed by the CRPD and that they comprehended all the options available to them to lay claim to their respect and recognition as human beings.

In conclusion, this project was judged effective in achieving two fundamental objectives. First, it empowered people with disabilities by engaging them in discussions on their rights and by adapting existing socio-educational tools to their single abilities. Secondly, it contributed to raise awareness in society about the discrimination people with disabilities face in different contexts and stimulated political institutions to increasingly forward their social inclusion.
3.2 Project 'I Citizen!'

On 10 December 2015 it was the International Human Rights Day. On the same day, Anffas launched a new project called 'I Citizen! Tools for the Full Participation, Active Citizenship and Self-advocacy of People with Intellectual and/or Relational Impairments' co-financed by the Italian Ministry of Social Policy. The main objective of this initiative - which is still underway and is expected to be completed by 2016 - is to enable the creation of the first self-advocacy group in Italy made up of people with intellectual and/or relational disabilities. For this purpose, Anffas has committed itself to ensure that people with impairments understand that they can fully participate in society and take their own decisions by means of self-advocacy (Canistracci, 2015).

Self-advocacy is publicly recognised as a powerful tool in the hands of people with intellectual impairments as they can learn to speak up for themselves. It allows them to consider their impairment as part of their identity and stimulates them to strive to be accepted for what they are. Despite the widespread recognition of its potential, in Italy initiatives born with the idea of promoting self-advocacy have never existed until Anffas proposed this project. Anffas is being driven by the belief that, thanks to these groups, people with impairments would be allowed to have a say in the decisions that affect them and feel more powerful to react to abuse and marginalisation.

This project aims, in fact, at shifting the role of people with impairments in society from passive to active citizens by collectively promoting their personal empowerment. The idea is to give them the means to enhance their capabilities in order to make them become more confident in their abilities and act to represent their interests. Providing them with the opportunity to claim "their rights to self-determination, participation and social inclusion" is, in fact, deemed to be functional to enable them to control their own life and, so, to encourage their independence (Canistracci, 2015, p.8).

On this account, one of the fundamental goals of this initiative is to find a way to overcome the medical model of disability and to fight the stigmatisation of people with impairments. For this reason, Anffas has decided to make use of the methodologies of self-advocacy already adopted at international level and to incorporate in the project the personal experiences of impaired people who have become self-advocates. More specifically, the project had envisaged to engage several European self-advocates and representatives of the European Platform of Self-Advocates (EPSA). Their role is to stand up for their Italian peers and exchange their experiences in order to show how they can have their voices heard (Canistracci, 2015).
With the aim of directly engaging people with impairments, the project has entailed the creation of 8 pilot groups in the North, the Centre and the South of Italy made up of 20 non-disabled people and 60 people with intellectual impairments acting as self-advocates. In the first phase of the project, people with impairments have been supported to "advocate their own rights" and to express their commitment to make their needs and wants be respected by their society (Canistracci, 2015, p.8).

In the second phase of the project, which is currently underway, these pilot groups are expected to come to form "the first National Platform of Italian Self-Advocates". In particular, 8 people with intellectual and/or relational impairments are being chosen to represent the claims of the group in which they have been elected. Their task will be, then, to advocate the interests of their local members and advance their proposals at national level. Finally, one of them will be granted the opportunity to join the European Platform of Self-Advocacy (Canistracci, 2015).

Starting from the personal experiences of people with intellectual impairments, Anffas is also working at creating an awareness-raising campaign called “I, citizen!”. The goal of this campaign is to show to civil society the impact that this project of self-advocacy is having on the lives of people with impairments. The intention is to make clear that the tools of self-advocacy can empower people with impairments to become active citizens and to refuse to be taken advantage of by others because they have come to know what their rights are.

3.3 Conclusion

In 1950's civil society and political institutions in Italy still viewed disability as a tragedy. They believed that people with impairments were "by nature weak, vulnerable, imperfect, unproductive and socially dependent" (French and Swain, 2004; Finkelstein, 2004). For this reason, they claimed that they were to be assisted and cured in psychiatric hospitals. This claim for the institutionalisation of impaired people was largely influenced by the medical model of disability. This was, in turn, driven by the cultural belief that people with impairments could not take decisions and could not control their own life.

Since 1958, however, Anffas has contrasted this conception of disability by claiming that there is no need to restore people with impairments to normality simply because they are not 'abnormal'. Since its foundation, in fact, Anffas has fought the segregation of people with impairments by advocating their right to social inclusion and equal opportunities.
In this chapter I focused on two projects funded by the Italian Ministry of Social Policy that Anffas has recently launched in order to defend these rights.

The first project I analysed is called 'Shorten the Distance' (2009). I reported that it aimed at creating a simplified version of the content of the UN Convention on the Rights of People with Disabilities. In this respect, I pointed out that, given the frequent disrespect of the CRPD, this initiative was promoted in order to ensure that the legislative requirements of the CRPD ratified in Italy through Law 18/09 were also fulfilled in practice.

This project stimulated an open debate between people with impairments, non-disabled people and political institutions about the importance of respecting the rights of the CRPD. In this regard, I emphasized that what made possible these interactions was the direct involvement of people with impairments in public thematic workshops. I showed that in these contexts Anffas promoted, in the first place, a detailed analysis of the articles of the CRPD. In the second place, it allowed people with impairments to freely express their opinions, recount their experiences and suggest possible ways to improve current laws on disability and ensure their application to counter their discrimination.

I concluded by claiming that this project was able to empower people with impairments through their direct contributions and to make non-disabled people more conscious of the fact that their rights are not different from those of disabled people.

In the last paragraph I wrote about a social project called 'I Citizen! Tools for the Full Participation, Active Citizenship and Self-advocacy of People with Intellectual and/or Relational Impairments' that Anffas is currently working at in collaboration with the European Union. To begin with, I pointed out that this initiative is aimed at establishing in Italy the first self-advocacy group of people with intellectual impairments by using the tools of self-advocacy to empower people with intellectual impairments. I explained that the process of empowerment consists in providing them with the opportunity to know what their rights are and to allow them to speak up for themselves without depending on others. In this respect, I reported that Anffas has organised 8 pilot groups. In these groups, people with intellectual impairments are learning that having an impairment is not a problem and that instead of concealing themselves they can become self-advocates. Also, all groups are electing one person among their members who will represent their interests at national level.

In conclusion, I argued that the belief that people with impairments are not able to fully participate in society and that they are to be cared for by others is progressively disempowering
them as it carries a strong message of inferiority. For this reason, empowering projects, like this, which aim at discarding these beliefs have a great potential to contribute to build an inclusive society.
Conclusion

Confusion and prejudice about disability are the main drivers of the discrimination against people with impairments. Discrimination against them is particularly widespread in several countries, including Italy, and yet, it is a phenomenon largely unknown to civil society. The goal of this dissertation has been to show that the exclusion of impaired people by civil society is not an isolated and sporadic event but a systematic phenomenon. In this respect, I explained that this happens because it is rooted in a disabling social structure that make the isolation of people with impairments appear sensible, peaceful and natural while, in reality, it is not.

In the first part of the dissertation, I analysed the factors that have triggered and still trigger the stigmatisation of people with physical and intellectual impairments. More specifically, in the first chapter, I started clarifying that being impaired is different from being disabled because the impairment is a physical and/or psychological condition that anyone might have, disability is a social disadvantage that is imposed on people with impairments by non-disabled people. That being so, I showed that prejudice and discriminatory practices emerge because the bodily and/or psychological features of people with impairments clash with the concept of 'normality' that has been socially constructed by non-disabled people. In this regard, I explained that the physical and/or mental ableness paradigm has been influenced by the medical model of disability whose objective is to restore to normality people with impairments as they are suffering a 'personal tragedy'. In addition, I highlighted that the advent of capitalism further marginalised people with impairments because they were assumed to be unable to sell their labour on 'normal' and average terms. Because they were deemed unproductive and socially dependent, they were institutionalised into psychiatric hospitals until the social model started claiming that it is society that disables people with impairments by restricting their activities and violating their rights. In this respect, I pointed out that in Italy their full participation to the activities of their society is undermined by the inaccessibility of their public environments, including public buildings and roads, public transportation and information and communication technological systems, and by the lack of inclusive practices of people within the education and employment systems.

In the second chapter, I discussed the policies implemented in Italy to prevent the marginalisation of people with impairments and advance their inclusion in all these areas. In this regard, I analysed current laws on disability in light of the principles of Universal Design and the UN Convention on the Rights of People with Disabilities (2006). On this account, I explained that
Italy has an highly progressive social legislation in terms of matters concerning disability as it recognises the right to mobility, the right to information and communication and the rights to inclusion and equal opportunities in schools and in the labour market of people with impairments. Yet, I provided evidence that discrimination persists because, in most of cases, laws are not adequately enforced. For this reason, I suggested specific solutions that might be applied to all these areas. However, I explained that the issue of discrimination cannot be solved simply by means of legislation as it is a profound cultural problem. I argued, in fact, that the social exclusion of people with impairments will not end unless political institutions started addressing the cultural dimension of the issue.

In order to obviate this problem, in the third chapter I proposed an alternative or, at least, a complementary path to the one which is being followed in Italy to fight the unequal power relations between disabled and non-disabled people. I focused on the role that Anffas as non-profit organisation plays in order to transform the often discriminatory socio-cultural climate that is present in the Italian society. More specifically, I analysed two projects recently launched by Anffas called 'Shorten the Distance' and 'I Citizen! Tools for the Full Participation, Active Citizenship and Self-Advocacy of People with Intellectual and/or Relational Impairments'. I showed that these initiatives are effective in building a more inclusive society. I pointed out, in fact, that Anffas meets this objective by directly engaging people with impairments. This implies providing them with the instruments to speak up for themselves and allowing them to recount their experiences. By so doing, people with impairments become aware of their rights and can challenge the misconceptions that others might have about them, thus countering their stigmatisation.

I concluded by recommending that cultural initiatives as the ones promoted by Anffas be incentivised because of the potential they have to empower people with impairments to react to stigmatisation and to discard civil society's prejudicial cultural beliefs about disability.
Bibliography


**Sitography**

• http://www.anffas.net/Page.asp?id=243/l-associazione

• http://www.anffas.net/Page.asp?id=624/progetto-accorciamo-le-distanze

• http://www.anffas.net/dld/files/IO_CITTADINO_WEB_NO_ETR.pdf

• http://www.camera.it/parlam/leggi/04004l.htm

• http://www.handylex.org/stato/l050292.shtml

• http://www.handylex.org/stato/l300371.shtml
- http://www.parlamento.it/parlam/leggi/99017l.htm
- http://archivio.pubblica.istruzione.it/mpi/progettoscuola/allegati/legge53_03.pdf
- http://www.parlamento.it/parlam/leggi/97449l.htm
- http://www.camera.it/parlam/leggi/99144l.htm
- https://www.senato.it/1025?sezione=121&articolo_numero_articolo=34
- http://www.handylex.org/stato/l040877.shtml
- http://www.camera.it/parlam/leggi/deleghe/05077dl.htm
- http://www.parlamento.it/parlam/leggi/99068l.htm
"La disabilità non è qualcosa che possediamo noi, ma qualcosa che possiede la nostra società" (Leaman, 1981 in Finkelstein, 2004:14).

La diseguaglianza e i diritti sociali, la discriminazione e l'emarginazione, l'esclusione e lo svantaggio sociale sono temi ai quali la società civile e le istituzioni politiche concludono un ampio spazio di discussione quando a costituire l'oggetto del dibattito sono degli atteggiamenti e delle pratiche di natura sessista e razzista. Non altrettanta attenzione si presta, però, al problema, oggi più che mai diffuso, della segregazione delle persone con handicap fisico e/o intellettivo, alle quali vengono spesso negati dei diritti che la legge riconosce come fondamentali in quanto cittadini ed esseri umani e a cui, di frequente, vengono intenzionalmente riservati dei trattamenti diversi perché dettati da pregiudizi e luoghi comuni sulla disabilità.

A causa della scarsa visibilità che il fenomeno della discriminazione nei confronti delle persone con handicap assume a livello politico e socio-culturale, questa tesi di laurea si pone come obiettivo primario quello di analizzare le cause che hanno determinato e che tutt'ora determinano il progressivo isolamento delle persone con handicap all'interno della società, in particolar modo in quella italiana. Partendo dall'analisi delle logiche socio-culturali che sottendono le pratiche discriminatorie nei riguardi delle persone con handicap, il progetto di ricerca si propone, in aggiunta, di investigare il ruolo della politica italiana nel contrastare le barriere disabilitanti esistenti nella società e, consequentemente, di identificare possibili soluzioni volte a favorire l'inclusione sociale delle persone con handicap attraverso l'individuazione di alternative concrete a modelli di tipo assistenzialista e ad approcci puramente compensatori come quelli adottati in Italia.

All'interno del primo capitolo, si esplorano le origini dell'emarginazione sociale delle persone con handicap analizzando in primis il processo di oggettivazione del concetto di 'normalità' fisica e/o intellettiva per poi procedere con lo studio dei fattori che lo hanno portato a radicarsi nella struttura sociale della comunità a tal punto da divenire un paradigma dominante. Tra questi, ampio spazio è dedicato all'analisi del modello medico di disabilità il quale, considerando equivalenti le espressioni 'handicap' e 'disabilità', afferma che gli individui affetti da deficit fisici e/o intellettivi vivono quotidianamente una 'tragedia personale' perché limitati nell'agire in società dalle loro disabilità. Giudicando le persone con disabilità incapaci di esercitare i propri diritti e di assolvere i propri doveri e, quindi, diversamente dai 'normodotati', incapaci di condurre una vita 'normale' e indipendente, questo approccio considera inevitabile l'istituzionalizzazione delle persone disabili in
strutture specializzate nelle quali i disabili, ormai 'pazienti', sottoponendosi a trattamenti medici specifici, possano essere curati dalla loro disabilità e dalla loro condizione di 'anormalità'.

A rafforzare l'idea che il problema risiede nell'individuo con disabilità, e in particolare nel suo deficit fisico e/o intellettivo, è stato l'avvento del capitalismo come forza socio-economica e culturale, in quanto basato su regole di produzione che hanno sempre più contribuito a proporre un'immagine negativa del disabile, rappresentandolo come un individuo improduttivo e dipendente perché incapace di 'vendere' la propria forza-lavoro nei tempi e nelle modalità giudicate 'normali' dal sistema.

A contrastare la logica del modello medico che vede le persone con handicap incapaci e inadatte a vivere in società al pari degli altri è il modello sociale di disabilità il quale, mettendo in discussione l'equivalenza 'handicap' - 'disabilità', sposta la radice del problema dall'individuo con handicap alla struttura disabilitante della società, sostenendo che, mentre l'handicap può essere considerato un evento incontrollabile e casuale, la disabilità è, come Barnes and Mercer sottolineano, "una forma di oppressione, di esclusione sociale, e di svantaggio esercitata sulle persone con handicap dagli altri membri della loro società". Ribaltando l'idea incorporata nel modello medico secondo cui sono i deficit fisici e/o intellettivi delle persone con handicap a restringere le loro attività in società, il modello sociale è capace di mostrare che "la disabilità è interamente causata dalla società" (Thomas, 1999), spiegando che, infatti, la società, insieme alla sua cultura dominante, a disabilitare le persone con handicap tramite dei costrutti sociali che mirano a fissare degli standard di normalità psico-fisica ai quali tutti devono necessariamente uniformarsi.

Con l'obiettivo di individuare degli strumenti che possano trasformare le diseguaglianze presenti nelle relazioni di potere e nelle strutture fondanti della società, in questa tesi si propone, quindi, l'approccio sociale alla disabilità come chiave di lettura dell'intero progetto di ricerca e, di conseguenza, come modello di interpretazione delle cause che hanno alimentato e tutt'ora nutrono i preconcetti sulla disabilità. Su questa linea di pensiero, è rilevante sottolineare che il modello sociale contesta i presupposti del modello medico in quanto motore ispiratore di pregiudizi sulla disabilità e forza generatrice di attitudini e pratiche che hanno gradualmente determinato la segregazione e l'esclusione sociale delle persone con handicap, facendo apparire il loro isolamento naturale, ragionevole, non problematico, e, soprattutto, rendendo la loro dipendenza necessaria e funzionale alla loro normalizzazione. Secondo il modello sociale, infatti, il problema non risiede nell'incapacità delle persone con handicap di vivere in società, ma nella struttura della società che si rivela incapace di soddisfare i bisogni e le esigenze delle persone con handicap a causa delle
modalità attraverso le quali il lavoro, i mezzi di trasporto, il sistema d'istruzione e le relazioni sociali sono organizzati a livello sistemico.

All'interno del primo capitolo si sottolinea, a questo proposito, che la società, soprattutto quella italiana, è permeata da numerosissimi ostacoli che disabilitano le persone con handicap nell'ambito dei trasporti, delle strade e delle infrastrutture, dei sistemi informatici e di comunicazione e, in aggiunta, nel settore dell'istruzione e nel mercato del lavoro. Per questi motivi, partendo dall'analisi delle barriere architettoniche presenti in Italia, si discute, in primo luogo, del problema costituito dall'inaccessibilità delle strade, delle infrastrutture pubbliche e dei mezzi di trasporto pubblici. In tale contesto, le principali problematiche riscontrate quotidianamente dalle persone con invalidità fisica in Italia si individuano, rispettivamente, nella mancanza di scivoli nelle parti delle sedi stradali riservate al transito dei pedoni, nell'irregolarità delle pavimentazioni stradali e nell'assenza o, mal funzionamento, di apposite rampe sui mezzi di trasporto pubblici che, conseguentemente, limitano il loro diritto alla mobilità e aumentano il loro isolamento.

Successivamente, si dedica ampio spazio all'analisi della discriminazione nei confronti delle persone con handicap e alla mancanza di opportunità educative a loro riservate all'interno delle scuole e delle università. Tra queste si fa riferimento, in primo luogo, a barriere di tipo attitudinale che si rivelano responsabili di atti di violenza, abuso e bullismo ai quali le persone con handicap vengono soggetti dai loro coetanei. In secondo luogo, si pone l'accento sui problemi che ostacolano la piena inclusione dei bambini con handicap nelle scuole italiane, a partire dalla mancanza di risorse destinate alle istituzioni scolastiche per favorire una formazione educativa inclusiva, fino alla spesso inadeguata preparazione degli insegnanti curriculari che dovrebbero partecipare, in maniera corresponsabile all'insegnante di sostegno, all'apprendimento del bambino con handicap e, inoltre, all'elaborazione di programmi scolastici che risultano inflessibili e standardizzati piuttosto che essere individualizzati.

Procedendo nell'analisi, lo studio si concentra sulla diseguaglianza esistente tra le persone disabili e quelle non disabili nel mercato del lavoro e, specialmente, sulle cause delle loro differenze salariali. A questo proposito, si contrasta l'idea secondo cui l'improduttività delle persone con handicap determina la loro scarsa partecipazione alle opportunità nel mondo del lavoro e il loro basso salario. Si portano alla luce, infatti, una serie di altri fattori che, prescindendo dalla loro produttività, impediscono la loro assunzione lavorativa e contribuiscono a renderli maggiormente vittime di discriminazione, tra i quali si evidenziano non solo un minore capitale sociale ma anche numerosi preconcetti e luoghi comuni sulla disabilità.
Poiché la discriminazione nei confronti delle persone con handicap fisica e/o intellettiva in Italia è profondamente radicata in delle norme sociali che perpetuano il paradigma dominante della cosiddetta 'normalità psicofisica', nel 2009 anche l'Italia ha ratificato con la legge 18/09 la Convenzione Onu sui Diritti delle Persone con Disabilità (CRPD) promulgata nel 2006 per garantire l'effettivo riconoscimento dei diritti delle persone con handicap e prevenire la loro violazione. A questo proposito, nel secondo capitolo di questa tesi, si discutono le politiche messe in campo in Italia per favorire l'inclusione sociale delle persone con handicap, esplorando in maniera dettagliata il contenuto delle normative esistenti in materia di disabilità utilizzando come punto di riferimento la CRPD. L'analisi rivela che l'Italia dispone di una delle legislazioni più progressive in materia di disabilità, grazie alla presenza di normative specifiche e dettagliate, già elaborate nei primi decenni degli anni '60, volte a contrastare la discriminazione nei confronti delle persone con handicap nelle aree più diverse. Tra queste sono presenti norme che prevedono l'obbligo di favorire sia l'inclusione scolastica e lavorativa delle persone con handicap sia di facilitare l'accessibilità dei mezzi di informazione e di comunicazione, delle strutture e dei servizi pubblici attraverso l'eliminazione di eventuali barriere architettoniche nel settore dei trasporti, delle strade e delle infrastrutture pubbliche.

Nonostante la legislazione italiana in materia di disabilità sia una delle più avanzate e garantisca in principio il rispetto dei diritti delle persone con handicap, l'esclusione sociale delle persone con handicap è ancora particolarmente diffusa nei settori sopra menzionati. Nel terzo capitolo della tesi si mostra che, mentre l'Italia si conforma in linea di principio con le normative presenti nella CRPD (2006), nella maggioranza dei casi il progetto di inclusione sociale delle persone con handicap è ostacolato nella pratica dalla mancata attuazione delle leggi esistenti e dalla presenza di gap legislativi nella normativa attuale.

In primo luogo, per ciò che concerne la mancata attuazione delle leggi esistenti, si evidenzia che le leggi regolanti l'accessibilità dei mezzi di trasporto pubblici, delle infrastrutture pubbliche e delle strade e, delle tecnologie informatiche e comunicative, non vengono sempre rispettate contrariamente a quanto prescritto dall'art.9 della CRPD e ai principi di Progettazione Universale. In aggiunta, contrariamente a quanto stabilito dagli artt.24 e 27 della CRPD, si osservano simili violazioni nell'attuazione di tutte quelle leggi volte a prevenire la discriminazione delle persone con handicap nei settori dell'istruzione e dell'occupazione. Relativamente al settore dell'occupazione, si segnala infatti che, ad esempio, i corsi di formazione professionale che dovrebbero essere garantiti alle persone con handicap non vengono spesso forniti, impedendo loro in questo modo la possibilità
di acquisire e migliorare quelle abilità che si richiedono nel mercato del lavoro. Inoltre, da un'attenta analisi delle pratiche attualmente in uso nelle scuole italiane risulta che l'effettività dei progetti di inclusione sociale dei bambini con handicap è spesso significativamente inibita dal mancato rispetto delle normative nazionali che specificano il numero massimo di studenti da inserirsi nelle classi in cui sia presente uno studente con handicap, il numero e il ruolo che gli insegnanti di sostegno dovrebbero svolgere all'interno delle aule scolastiche e che prevedono la creazione di programmi scolastici inclusivi e individualizzati. A questo proposito, infatti, si evidenzia in primo luogo che le classi risultano sovente sovrappopolate, impedendo in questo modo l'apprendimento dell'alunno con handicap; in secondo luogo, si nota che il numero degli insegnanti di sostegno e le ore da loro dedicate agli studenti con handicap vengono progressivamente ridotte a causa dei tagli operati dal governo in questo settore e, inoltre, che l'insegnamento rivolto agli alunni con handicap viene spesso delegato solo agli insegnanti di sostegno i quali dovrebbero svolgere le proprie funzioni in maniera corresponsabile ai docenti curriculari; in terzo luogo, si sottolinea che i programmi scolastici vengono creati non solo in maniera standardizzata, non rispettando le esigenze degli studenti con handicap, ma soprattutto con l'obiettivo di accumulare la base nozionistica degli alunni con handicap senza però verificare il loro reale apprendimento attraverso interventi individualizzati.

Per questi motivi, si suggerisce di assicurare un effettivo sistema di controllo che miri a monitorare l'attuale modus operandi nei vari settori analizzati al fine di incrementare il rispetto delle normative attuali, favorendo così l'inclusione sociale delle persone con handicap.

In secondo luogo, per ciò che riguarda i gap legislativi nella normativa italiana in materia di disabilità, si mostra che nel settore dei trasporti pubblici, delle costruzioni e delle strade, gli architetti e gli ingegneri progettisti non possiedono alcun tipo di obbligo legale a costruire delle infrastrutture in maniera universalmente accessibile, impedendo quindi alle persone con handicap di vivere al pari di tutti gli altri cittadini. Di conseguenza, si propone di modificare le normative regolanti l'accessibilità degli ambienti pubblici comuni attraverso l'inserimento obbligatorio di corsi di formazione sulla progettazione universale all'interno del curriculum di tutti i progettisti affinché si possano realizzare gli obiettivi esplicitati in questo contesto nella CRPD.

Successivamente, si sottolinea che la legislazione italiana in materia di disabilità prevede la promozione di incentivi da parte del governo solo alle società nazionali incaricate di fornire servizi radiotelevisivi pubblici e non privati affinché garantiscano dei programmi con l'aggiunta di sottotitoli e linguaggi dei segni in linea con i principi della CRPD. A questo proposito,
riconoscendo la rilevanza che il diritto alla libertà d'espressione e il diritto alla libertà d'informazione hanno per la vita di tutti i cittadini e, quindi, anche per le persone con handicap, si propone di favorire la promozione di simili incentivi da parte del governo anche alle società radiotelevisive private. Inoltre, si suggerisce di incrementare la diffusione e di facilitare l'istituzionalizzazione del linguaggio dei segni, così come richiesto dalla CRPD, al fine di assicurare un reale esercizio dei diritti sopracitati anche da parte delle persone con handicap.

Se nell'analisi effettuata non si riscontrano gap legislativi all'interno della normativa italiana relativa al diritto d'istruzione degli studenti con disabilità, lo stesso non può dirsi per il settore dell'occupazione nel quale si individuano una serie di mancanze legislative che ostacolano l'inclusione lavorativa delle persone con handicap. Più specificatamente, si evidenzia che alcune parti della legge 68/99 non riflettono l'attuale realtà d'impresa in Italia perché l'obbligo di assunzione di persone con handicap prescritto dalla legge risulta valido solo per quelle imprese che impiegano almeno 15 lavoratori, nonostante i dati raccolti portino alla luce che il 95% delle imprese italiane possiede, al contrario, meno di 15 lavoratori. Con il fine, quindi, di rendere efficace il sistema di quote previsto dalla legge per facilitare l'inclusione lavorativa delle persone con handicap, si propone di operare una modifica della legge in questione affinché si possa estendere l'obbligo di assunzione di persone con handicap anche ad imprese che possiedono meno di 15 lavoratori, contribuendo in questo modo a prevenire l'esclusione sociale delle persone con handicap nel mercato del lavoro.

E' importante sottolineare, però, che anche se tutte le normative esistenti in materia di disabilità trovassero facile attuazione nella pratica, lo svantaggio sociale imposto alle persone con handicap in Italia nei settori studiati non verrebbe meno del tutto perché le politiche tutt'ora implementate in Italia ricercano le cause della loro esclusione sociale solo nel mancato rispetto delle leggi, oscurando così le radici profonde del problema che affondano, al contrario, in un contesto socio-culturale in cui abbondano preconcetti e luoghi comuni sulla disabilità.

Giudicando quindi insufficienti gli interventi di natura socio-culturale messi in campo dalla politica italiana per prevenire la discriminazione delle persone con handicap, il terzo capitolo di questa tesi si pone come obiettivo quello di evidenziare il ruolo che il terzo settore svolge in Italia allo scopo di trasformare l'attuale clima socio-culturale in quanto principale responsabile del pregiudizio e del conseguente isolamento delle persone con handicap nella società italiana. Più nello specifico, lo studio si focalizza sul contributo che Anffas Onlus - Associazione Nazionale di Famiglie di Persone con Disabilità Intellettive e/o Relazionali - fornisce in quanto organizzazione
non-governativa operante nel terzo settore a salvaguardare i diritti civili e sociali delle persone con handicap, promuovendo la loro inclusione sociale e prevenendo la loro esclusione soprattutto nelle scuole, nelle università e nel mercato del lavoro. A questo proposito, il presente progetto di ricerca si concentra, in particolare modo, sull'analisi di due progetti di natura socio-culturale che, cofinanziati dal Ministero delle Politiche Sociali in seguito alla ratifica in Italia della CRPD, sono stati promossi recentemente dall'Anffas per contrastare l'idea che le persone con handicap non siano capaci di prendere parte al processo decisionale che li riguarda.

Il primo progetto, 'Accorciamo le distanze', si presenta come un'iniziativa volta a realizzare un percorso di promozione, semplificazione e assimilazione del contenuto della CRPD rivolta alle persone con handicap così come alla società civile al fine di facilitare la conoscenza e la comprensione dei diritti sanciti da questo documento che spesso vengono violati. Con l'obiettivo di ridurre le distanze tra la società civile, le istituzioni politiche e le persone con handicap intellettuale, questo progetto ha previsto dei percorsi formativi, informativi e di confronto e partecipazione diretta delle persone con handicap alle quali è stata offerta la possibilità di parlare in prima persona, di raccontare le loro personali esperienze e suggerire possibili proposte per migliorare l'attuale legislazione in materia di disabilità e garantire la loro attuazione per contrastare la discriminazione nei loro confronti. L'analisi del progetto evidenzia i risultati positivi che quest'iniziativa ha avuto, in primo luogo, nel favorire il processo di empowerment delle persone con handicap attraverso un loro attivo coinvolgimento e, in secondo luogo, nel sensibilizzare l'opinione pubblica ad acquisire maggiore consapevolezza sul fatto che i diritti delle persone con handicap non siano diversi da quelli dei 'normodotati'.

Il secondo progetto, 'Io Cittadino! Strumenti per la Piena Partecipazione, Cittadinanza Attiva e Auto-Rappresentanza delle Persone con Disabilità Intellettiva e/o Relazionale', è un'iniziativa in corso che, promossa da Anffas in collaborazione con l'Unione Europea, in particolare modo con EPSA, Piattaforma Europea degli Auto-rappresentanti, si pone come obiettivo quello di facilitare l'auto-rappresentanza delle persone con handicap intellettivi e/o relazionali come strumento atto a "promuovere i loro diritti civili ed umani, contrastare le discriminazioni e la stigmatizzazione che hanno vissuto e vivono, soprattutto a causa della difficoltà di superamento del modello medico e alla visione negativa della disabilità". Nato con lo scopo di creare la prima associazione di auto-rappresentanti in Italia costituita da persone con handicap intellettivi e/o relazionale, Anffas ha deciso di coinvolgere attivamente le persone con handicap costituendo 8 gruppi pilota presenti su tutto il territorio italiano nei quali supportarli ad affermare il loro diritto all'autodeterminazione, alla
partecipazione e all'inclusione nella società in quanto cittadini attivi. All'interno di ciascuno di questi gruppi si stanno attualmente eleggendo dei leader che avranno il compito di rappresentare a livello nazionale gli interessi e le proposte dei membri appartenenti ai rispettivi gruppi locali con l'obiettivo di influenzare il processo decisionale e le politiche che riguardano direttamente le persone con handicap.

In questo modo, quest'iniziativa si rivela capace di favorire non solo il processo di empowerment delle persone con handicap, permettendo di conoscere loro i diritti sanciti nella CRPD e gli strumenti disponibili affinché possano propugnarli in modo tale da reagire ad abusi ed esclusione sociale, ma anche di scardinare il luogo comune che vede le persone con handicap deboli, vulnerabili, imperfette, improduttive e dipendenti dagli altri e, quindi, incapaci di vivere in società. Dato quindi il potenziale di progetti come questi, si suggerisce di incentivare iniziative di questo tipo affinché si possano sradicare i pregiudizi e i preconcetti sulla disabilità a livello della società civile e costruire, quindi, una società più inclusiva.