# Comparing national disability policies through the prism of transnational flows. Argentina – Spain – Algeria

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To understand the specificity of the national disability policies, it is necessary to take into account international standards on disability, but also the spectrum of ideas promoted by transnational networks.

International texts are means of regulating the utopias of associative actors. These texts legitimized certain rights, but concealed others.

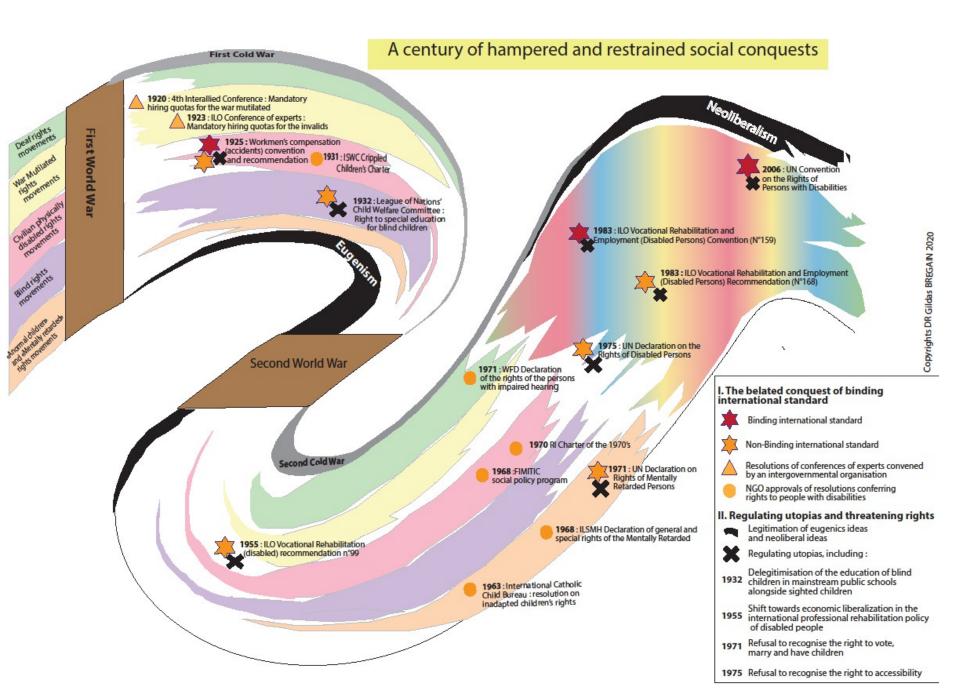
Explain the construction of national disability policies in three countries (Argentina, Spain and Algeria) taking into account two factors :

- the influence of international bodies, international standards, and transnational flows of ideas, materials and people.
- the influence of national associative mobilisations. We have to take into account the successful experiences, but also the failures of these mobilisations.

It will allow us to identify the convergences and divergences of these national policies in various countries.

#### **Sources:**

- Archives of the League of Nations, ILO, WHO, UN, UNESCO, archives of national administrative bodies and associations, association journals.
- Semi-directive interviews with former international civil servants and former association and administrative officials.



# The evolution of international disability policy during the 20th century

#### A) The ILO and interallied governments legitimized some rights for the war invalids :

The experts convened by the ILO in 1923 "affirmed that, to ensure the durable placement of the invalids in the work market, it was essential to have recourse to the legal obligation of employment of invalids ».

Objective: the equalization of the economic conditions of the war invalids with the others workers.

B) The League of Nation's Child Welfare Committee approved a resolution in april 1932 which guaranteed the rights to education for blind children: All blind children must benefit from a free and obligatory education, preferably in specialized institute for the blind or in specials classes.

This resolution legitimated the teaching of the Braille in specialized schools, while at the same time an educational alternative had existed for several decades, the teaching of the blind children with the sighted children in the public council schools, the teaching of the blind children in the coranic schools.

C) The Child Welfare Committee refused to study immediately the questions of the crippled children, the feeble minded children, and the deaf children, because they had more urgent questions.

# D) The ILO and the shift towards economic liberalization in the international professional rehabilitation policy of people with disabilities after World War II.

ILO recommendation n°99: Institutionalization of a liberal legality in the field of employment of the disabled:

- · Devaluation of the idea of compulsory hiring of disabled people by private companies
- · Selective placement of disabled competitive persons
- · Promotion of sheltered workshops for low-productivity and unemployed disabled people

### E) Mass media diffusion of the idea of disability rights by NGOs (1967-1983)

Each sector (blind, deaf, mentally handicapped, etc...) wants to have an international declaration approved which would grant them specific rights.

The Declaration of the Rights of Mentally Retarded Persons (UN, 1971) does not recognise the right to marry or to have children.

1975 Declaration of the Rights of Disabled Persons: denial of the right to accessibility. Tendency to equalise the rights of all categories of persons with disabilities.

With these declarations, the UN becomes an institution promoting rights, but not a guarantor of these rights. These declarations have no binding effect.

Evolution of international disability policies in the 20th century.

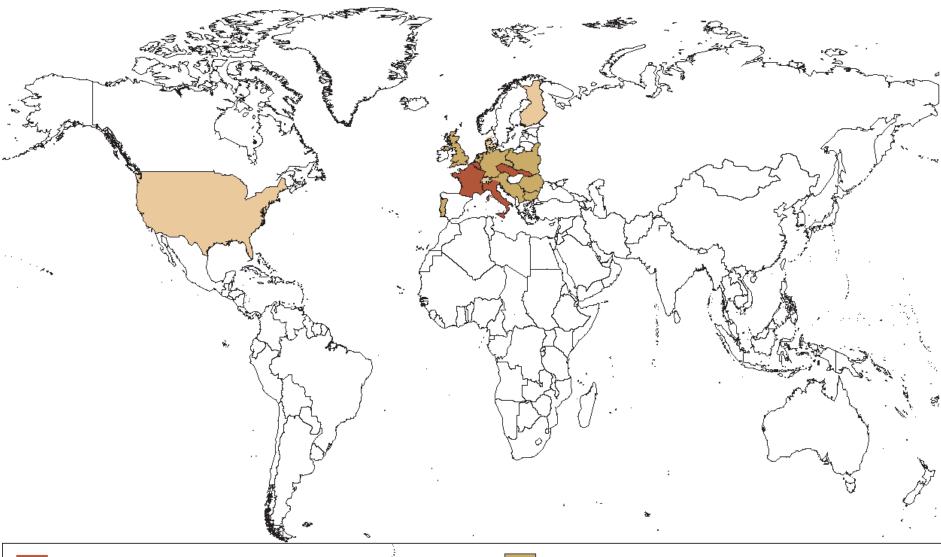
Schematically, it can be considered that international disability policies were inspired by the European experiences of the rehabilitation of war-disabled people during the 1920s, with the promotion of the idea of compulsory employment quotas for war-disabled people in public administrations and private companies.

On the contrary, at the beginning of the 1950s, these policies were inspired by Anglo-Saxon and Nordic experiences in the field of rehabilitation:

- · Unification and coordination of sectoral disability policies
- Equalization of the rights of different categories of people with disabilities
- the shift towards economic liberalization in the international professional rehabilitation policy of people with disabilities

During the 1970s, international organizations such as the ILO and WHO, the UN promote other models of rehabilitation, based on socialist experiences (such as disability cooperatives) or based on the experiences of developing countries, with simplified vocational rehabilitation in agriculture or simplified rehabilitation in sheltered workshops.

The beginning of an european project of rehabilitation (rééducation in french) modernization of war-disabled (early 1920's).



Founding countries of the European project of rehabilitation modernization: Countries represented in at least three specialized NGOs (Interallied Federation of War Veterans Organisations (FIDAC), Interallied Federation of War disabled (FIIG), Internationale des anciens combattants, or Conférence internationale des associations de mutilés de guerre et d'anciens combattants (CIAMAC), and members of the Permanent Inter-Allied Committee.



Highly contributing countries: Countries represented in two NGOs (FIDAC, Internationale des anciens combattants, or FIIG or CIAMAC).



Low contributing countries: Countries represented in one NGO (FIDAC, FIIG or CIAMAC).

#### Diagram of social innovation projects promoted by intergovernmental organisations

IPC

ILO

#### European project of rehabilitation modernisation of war-disabled persons

- Development of functional work prostheses
- Mandatory hiring of a high quota of disabled people in private companies and public administrations, with full salary maintenance.
- Development of certain medical specialities: Orthopaedic and Trauma Surgery (SICOT), Physical Medicine and Physiotherapy (AIMPP).

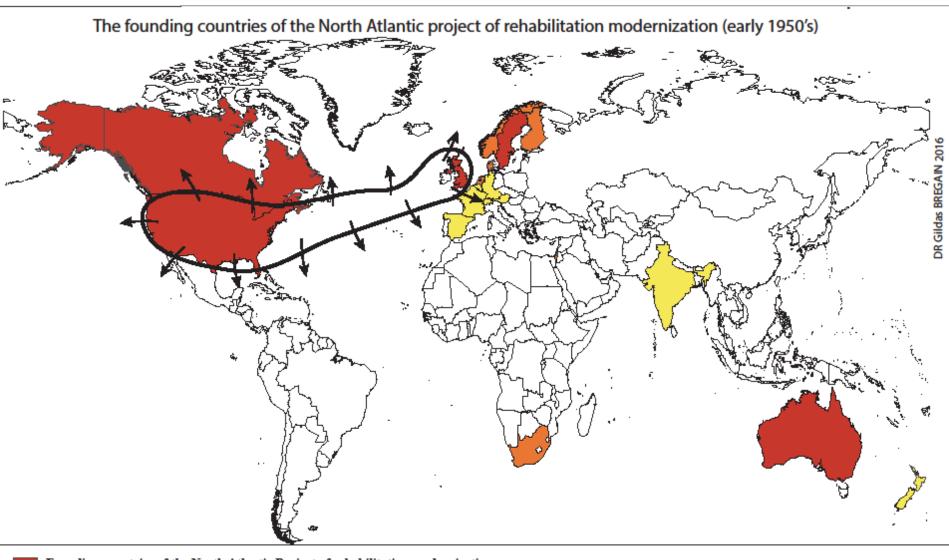
1930

1920

**LNHO** 

### Anglo-saxon project for the social protection of the Blind

- Selective placement of competent blind workers in ordinary factories
- Braille teaching in special schools in mainstream institutions
- Creation of special classes to educate children with low vision



Founding countries of the North Atlantic Project of rehabilitation modernization
These countries are among the founding members of the International Federation of Physical
Medicine (IFPM), of the World Federation of Occupational Therapy (WFOT), of the World
Confederation of Physical Therapy (WCPT). They developed a policy of selective placement,
and most of them were represented at the Stoke Mandeville Games in 1953.

Low-contributing countries.

These countries are among the founding members of the IFPM or were represented at the Stoke Mandeville Games in 1953.



#### High-contributing countries.

These countries are among the founding members of one or two NGOs (IFPM, WFOT, WCPT), and were either represented at the Stoke Mandeville Games in 1953, or have developed a selective placement policy (Norvège, Pays-Bas).



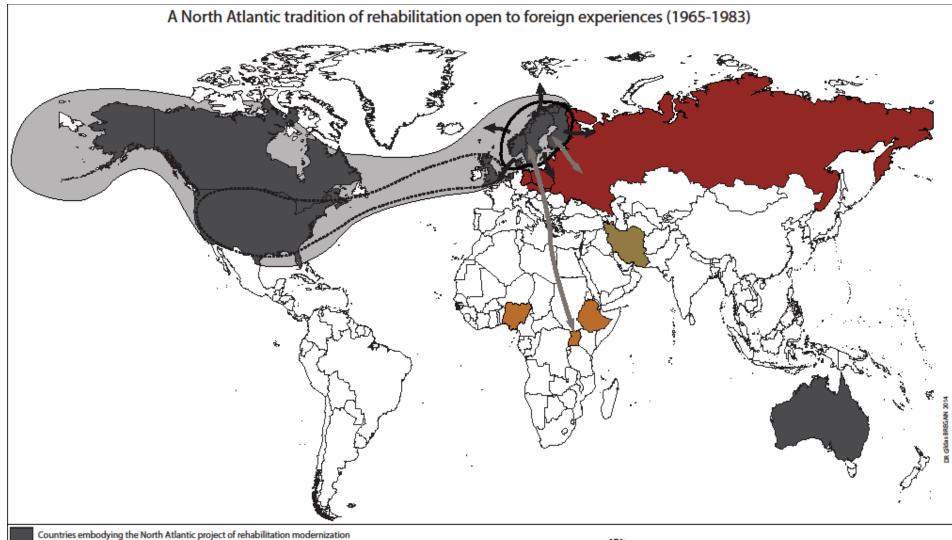
Centre of the North Atlantic Project of rehabilitation modernization

### Diagram of social innovation projects promoted by intergovernmental organisations

1950 WHO UNICEF ILO North Atlantic Project of rehabilitation modernization of disabled persons Coordination of all disability policies and equalization of the rights of all categories of disabled people Creation of a National Centre for Integral Rehabilitation in the capital city - Development of new medical specialities: Physiatrists (IFPM), Occupational Therapists (WFOT), Physical Therapists (WCPT). - Institutionalisation of a liberal legality in the field of employment of the disabled Devaluation of the idea of compulsory hiring of disabled people by private companies - Selective placement of disabled competitive persons 1960 Promotion of sheltered workshops for low-productivity and unemployed disabled people ILO ILO Socialist **Simplified** project of rehabilitation Rehabilitation project in developing countries Valorisation of the Role of the State in steering and financing rehabilita-WHO tion and special education services - Simplified Vocational (role of social security). Rehabilitation in agriculture - Cooperatives of disabled - Simplified sheltered workshops - Free rehabilitation, free - Simplified Rehabilisation servigoods (cars, protheses). ces, based on the rural community - Role of Social Security Community based rehabilitation

1970

1980





Countries developing a project of «socialist» innovations in the field of rehabilitation

Countries developing with the help of NGOs (RCSB, WCWB) and intergovernmental organisations a project of alternative innovations in the field of rehabilitation, adapted to predominantly rural developing countries, with a view to serving as example in the world.

Countries hosting the INternational Institute for the Rehabilitation of Disabled Persons in Developing countries, with the support of UNDP, specialized agencies (ILO, WHO), and NGOs (RI).



Former centre of the North Atlantic Project of rehabilitation

New centrality of the North Atlantic tradition of rehabilitation



Exchange axis of the North Atlantic tradition with other world-renowned innovation projects in the field of rehabilitation

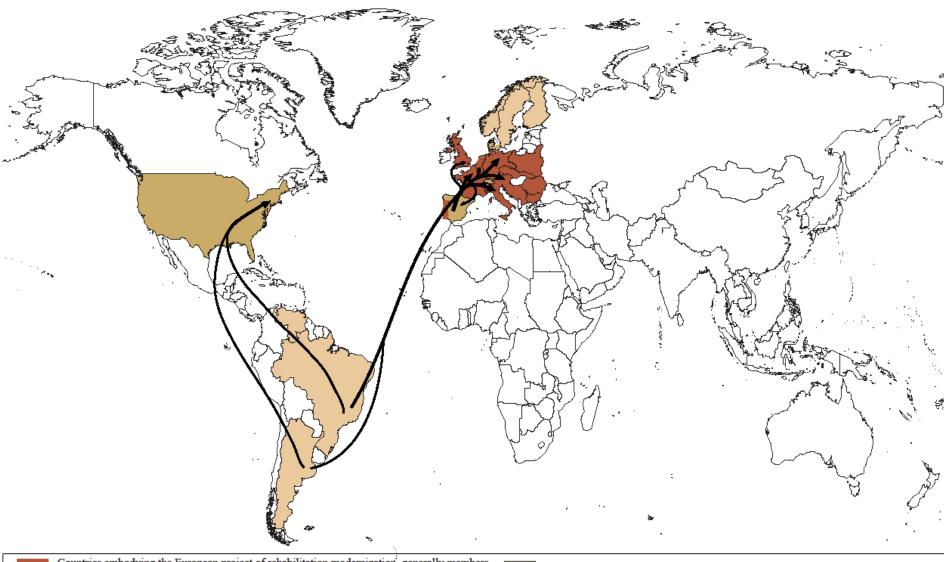
- II. Transnational circulation and influence of European and North Atlantic projects on the construction of national policies (Argentina / Spain / Algeria)
- A) The rapid integration of Spanish and Argentinean doctors into European rehabilitation networks (1910's-1940's).

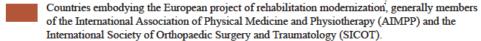
In Argentina and Spain, we can see that doctors are very quickly becoming part of the European rehabilitation networks. They are members of the International Association of Physical Medicine and Physiotherapy and the International Society of Orthopaedic Surgery and Traumatology.

# B) Circulations centred on the French metropolis in Algeria during the colonial period

In Algeria, many actors regularly travelled to the French metropolis during the colonial period: blind students, blind association leaders, association leaders disabled by war, nurses, teachers.

The import of european project of rehabilitation (rééducation) modernization in Spain, Argentina and Brazil







Country represented in one NGO of rehabilitation professionals (AIMPP and SICOT) during the 1930s.



Countries represented in the two NGOs of rehabilitation professionals (AIMPP and SICOT) during the 1930's.

International circulation of Spanish, Argentinean and Brazilian doctors specializing in orthopaedic and trauma surgery (1910's-1940's)

• C) The influence of international organisations in the orientation of national disability policies after the 1950's.

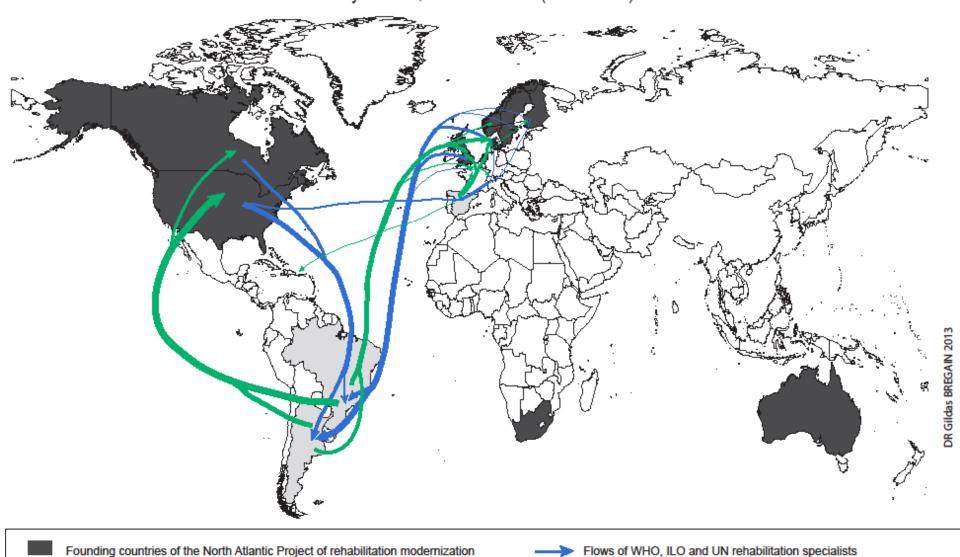
From the 1950s onwards, the intervention of international organisations changed the orientation of national disability policies. WHO, ILO and the UN provided technical assistance to the countries concerned, sending experts in vocational rehabilitation and offering scholarships for specialisation in rehabilitation.

# The technical assistance distributed by international agencies is not homogeneous at the international level, but is multifaceted.

The technical assistance provided to Latin American countries and Spain is very much inspired by the experiences of Anglo-Saxon and Nordic countries, and therefore has an economic liberal orientation.

Conversely, when this technical assistance is provided to a socialist country such as Algeria, it is much more complex, drawing on the experiences of European, socialist and, to a lesser extent, Anglo-Saxon countries.

The promotion of the North-Atlantic Project of rehabilitation modernization in Argentina, Brazil and Spain by the UN, WHO and ILO (1956-1968)

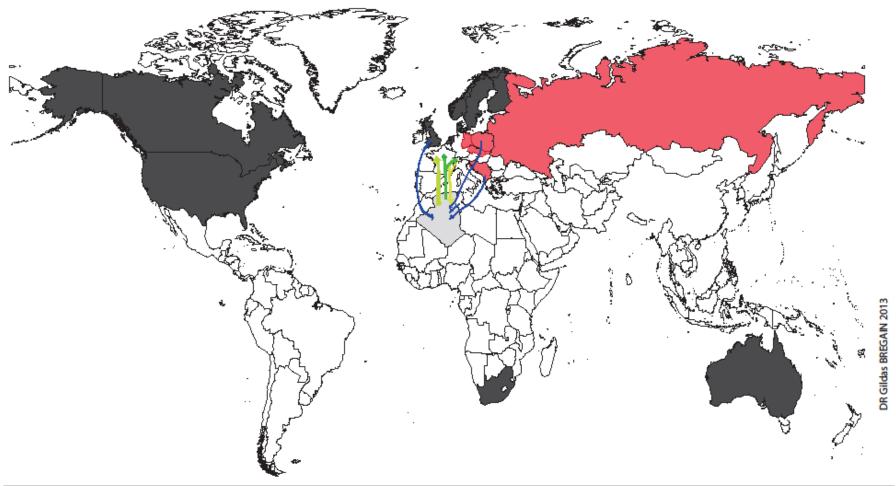


Founding countries of the North Atlantic Project of rehabilitation modernization

Flows of UN, WHO and ILO fellowships

Coundries under study receiving technical assistance from one or more intergovernmental organizations (UN, WHO, ILO)

The promotion of socialist and european rehabilitation projects in socialist Algeria by the WHO and the ILO (1962-1980's)





Countries developing a project of socialist innovations in the field of rehabilitation



Exile in France of rehabilitation and special education specialists

Flow of WHO and ILO rehabilitation specialists

Flow of WHO and ILO fellowships

# Diagram of the influence of rehabilitation modernization projects on the construction of public disability policies in Spain and Argentina

1920

#### **SPAIN**

# Strong influence of the European project of rehabilitation

Creation of the Institute for Vocational Rehabilitation of the Injured Workers (1924)

Development of orthopaedic and trauma surgery, physical medicine and physiotherapy.

Compulsory hiring of a high quota of Franco's war disabled in private companies and public administrations.

1940

1950

# UNICEF WHO UN

# Difficult reorientation towards the North Atlantic rehabilitation project:

Elements of convergence:

- Creation of the specialities of occupational therapy, physiotherapy and rehabilitation medicine

(rééducation) modernization

- Modest involvement of social security
- Legislation favouring the employment of the disabled, without strong constraints for private companies. Promotion of sheltered workshops

#### Elements of divergence:

- Difficulty in coordinating public disability policies until the end of the 1970s
- Failure to set up a national rehabilitation reference centre
- Refusal to include vocational rehabilitation in the benefits provided until the 1970s.
- Residual provision of rehabilitation and special education services

#### **ARGENTINA**

# Weak influence of the European project of rehabilitation modernization

Slight development of orthopaedic and trauma surgery, physical medicine and physiotherapy.

Absence of legislation determining the obligation to employ wardisabled persons.

Absence of a policy for the rehabilitation of injured workers.

# WHO ILO UN

# Very strong influence of the North Atlantic rehabilitation project: Elements of convergence:

- Creation of a model National Rehabilitation Institute on a national scale.
- Creation of the specialties of occupational therapy, physiotherapy and rehabilitation medicine
- Tendency for non-discrimination of beneficiaries
- Legislation favouring the employment of the disabled, without any constraint for the private sector

#### Elements of divergence:

- No obligation for social security bodies to finance rehabilitation and special education centres.
- Very weak coordination of public disability policies.
- Residual provision of rehabilitation and special education services

#### Diagram of the influence of rehabilitation modernization projects on the construction of public disability policies in Algeria

#### Traditional muslim practices of assistance to the blind and cripples (zakât, education for the blind child in coranic school, etc.)

Moderate influence of the European project of rehabilitation (rééducation) modernization

Development of orthopaedic surgery

Specific policy for the war mutilated.

Creation of Vocational rehabilitation centre for war mutilated (1917-1922)

1930 Legislation determining the reservation of subaltern vacancies in public administrations for war mutilated (especially for qualified and graduated europeans). Discrimination against indigenous mutilated persons, who have less access to employment (sheikh, Amines in administrations, reservation of Moorish coffee shops and import of eggs).

2) Specific policy for the injured workers.

Right to economic compensation for a limited number of beneficiaries.

Absence of Vocational Rehabilitation school for Injured Workers.

Specific rights for the blind during the 1940's and early 1950's. Legislation for social protection.

1111

Discontinuities: Departure of professionals (specialized teachers, nurses, professor of medicine)

Strengthening of the European project of rehabilitation during decolonisation

llind ·

ILO

WHO

AFOB/ Swiss federation

Confirmation of the specific rights allocated to each category: Moudjahideen / Blind:

Preferential rights given to Mujahideen of the War of Independence (pension, employment, access to rehabilitation centres, vo cational rehabilitation). Reinforcement of the Rights of the Blind (allowance, exemption of fees, obligation for administrations to purchase products manufactured by the

1970 blind

1920

1950

1960

1980

Creation of brushing cooperatives (3600 blind brushing workers at the end of the 1980's). Conservation of the orientation of the Blind towards brushing and telephone switchboard

Late and difficult reorientation towards the North Atlantic rehabilitation project.

(II)

**PNUD** 

#### 1989 : Change of economic orientation from socialism to economic liberalism :

#### Elements of convergence:

- Partial equalization of the rights of physically disabled people (excluding moudjahideen and blind) since 1978 / 1982.
- Creation of the specialities of occupational therapy, physiotherapy and rehabilitation medicine since the 1980's.
- Legislation of 2002 favouring the employment of the disabled, without strong constraints for private companies (only 1% of the posts).

#### 2000 Elements of divergence:

- Fossilization of the orientation of the blind towards brushing in Algeria. ENABROS face competition from foreign production since 1991. Closure of blind brush-makers cooperatives in 2009.
- Creation of a model National Rehabilitation Institute on a national scale. Failure to set up a national rehabilitation reference centre
- Weak coordination of public policies until the end of the 2010s. Attempt of inter-ministerial coordination of sectoral disability policies remains very limited, as it comes up against the will of several ministries (Health, Labour and Social Affairs, Former Mujahideen) to maintain complete autonomy.

# III. The importance of political regimes

# A) Colonial authorities concerned about saving money and motivated by the gain of political support

The ministries of the metropolis generally minimized needs and refused responsibility for expenses incurred. Colonial Algerian authorities granted measures in favour of the blind with budgetary implications only under intense associative and political pressure.

# B) Democracies, moments of protests and social innovation.

Democratic periods in Argentina, such as Péron's Argentina, are moments of social innovation, during which governments promote new social legislation in favour of people with disabilities.

# C) Dictatorships, moments of adjustment to the liberal credo in Argentina.

The provision of services remains charitable and weak under the dictatorships.

Under dictatorships, as in Argentina de VIdela, the liberal economic orientation of the government led to a significant change in legislation. In 1981, the new law adopted by the government provided only for compulsory employment in public administrations, whereas previous legislation adopted during the Peronist regime provided for compulsory employment in private companies and public administrations

### For more informations:

- · Gildas Brégain, *Une histoire du handicap au XXe siècle. Approches transnationales (Europe et Amériques)*, Rennes, PUR, janvier 2018.
- Gildas Brégain, « Colonialism and disability : the situation of the Blind in colonised Algeria », *ALTER*, *European Journal of Disability Research*, vol. 10, 2016, pp. 148-167
- Gildas Brégain, « Reintegrating without changing colonial hierarchies? Ethnic and territorial inequalities in the policies to assist war-disabled men from the French colonial Empire (1916-1939) », *ALTER European Journal of Disability Research*, volume 13, Issue 4, 2019, p. 244-262.
- Gildas Brégain, « An entangled perspective on disability history: The disability protests in Argentina, Brazil and Spain, 1968-1982 », in Sebastian Barsch, Anne Klein and Pieter Verstraete (dir.), *The Imperfect Historian : Disability Histories in Europe*, Peter Lang, Frankfurt am Main, 2013, pp. 133-154.
- Gildas Brégain, « The ILO and the shift towards economic liberalization in the international professional rehabilitation policies of people with disabilities after World War II », in Monika Baar, Paul Van Trigt (dir.), *Marginalized Groups, Inequalities and the Post-War Welfare State. Whose welfare?*, London and New York, Routledge Press (Routledge Studies in Modern History), 2020, pp. 49-68.