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Art School

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Visualising a new model for conceptualising ability.
And how fine art is an effective way to communicate new ideas and
concepts.

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Artists have historically and still play a vital role in communicating new concepts and ideas. A concept as defined by the Oxford dictionary is 'an abstract idea' and to conceptualise is to 'form a concept or idea of something in your mind'. Artists strive to communicate what is often so hard to put into words.

To begin with I will demonstrate why a new model of ability is needed through referencing an art work that directly deals with disability, the current UK context of disability culture and theories including Shelly Tremain's work on disassembling the current binary disability description. I will also incorporate explanations of the two main models of disability currently used, along with critiques of them and how they are no longer fit for purpose.

In the second section I will talk about some contemporary art works and explore how and why they have created a lasting impression through kinaesthetic experiences. Along with discussing how some of these artists and art works have successfully communicated challenging concepts. I will give particular attention, but not exclusively, to the effectiveness of kinaesthetic or haptic learning, which is learning through multi-sensory experiences i.e. learning by doing. Also included is an explanation of kinaesthetic learning together with exploring some of the supporting science behind memory storage, cognition and long term memory storage as it affects the onlookers' ability to retain and process new concepts. I will explain why the visual artist is well placed to both construct and describe new conceptual models that people can understand, use and relate to.

In part three I will describe a new way to conceptualise ability and attempt to explain a new model for understanding and negotiating support and adaptation. I have chosen to discuss ability, as I am both disabled and a student artist. I intend to set out this new model of ability and discuss how fine art could be the best way to effectively communicate it. I have described ability as ever evolving, variable, overlapping infinite sets. I will include an explanation of what the model could look like using both a 3D diagram and how it could be practically applied to disability assessments. I do this describing how I would place myself within the model in order to access my university course. I will describe some of the art and philosophy theories I have used to decide upon the new model. I will explain the thinking behind the proposed new model as it will help demonstrate the usefulness of how artists and academic art theory supports the creation of accessible new concepts.

Due to the nature of the subject I have decided to predominantly focus on the theory and social context, as a way of showing how art can and does play an essential part in societies understating of ability.

Repeated exposure to either images, sculptures, performance or film depicting disabled people, their lives and experiences creates familiarity, which is an essential component required in order for people to be able to engage, understand and adapt. Art can give a voice to that which cannot be put into words. This might be a cliché but this is because it is the truth for so many people, especially people with impairments.

I will try to use accessible language and terminology in order to communicate more effectively and make it more available and easier to understand.

Part one.

Why a new model is needed.

“You are being watched now.

Any information gathered is used for a points system: and the more capable you appear to be, the more points you will lose. [...]

Many of you will fail, and there will be consequences.

You will, no doubt, feel violated, ashamed, and worried about how you will survive. [...]

“Give them yourself on a bad day”

If I do this, does it turn every day into this bad day? Why is my life measured by my worst days?



What will having a 'good day' mean for me, from now on?'

Figure 1: Anonymous Artist, Austerity Cuts (2017)
Extract from spoken word piece, Installation
Wellcome Collection

This artwork in the Wellcome Collection, originally created for and performed at the Sick of the Fringe festival in 2017, gives an insight into how it feels to go through and live with the consequences of Work Capability Assessments. 'I live in fear. Having to defend myself against the benefit system's unfair criteria is traumatic and exhausting and carries the risk of losing my means of survival.' (Figure 1) This fear and subsequent stress worsen most people's conditions and can make them not want to bother, which frequently leads to people not receiving adequate help and living in horrific conditions. This is not just the artist being dramatic. According to government sources 17,000 'sick and disabled people' have died as a result of delays to their benefit claims (Bluman, 2019). In this spoken word piece, the artist briefly describes a system where difference is something to be valued thus allowing him to work. 'I would earn money when working, and during those times, my benefit would be reduced by that amount.' A flexible system allowing him to work when he is able and rest when he is not, he feels 'would go towards creating a world that is unified by core values that include, connection, compassion, empathy and acceptance.' I agree with this statement particularly the part stating that if people are more used to working with varying abilities, the more they will be exposed to the fact that disabled people can be skilled and capable.

Although I am writing about the UK this new model could also be useful elsewhere. There is a particular toxic trope here regarding people in receipt of benefits, known as 'benefit scroungers', which has become increasingly prevalent with the advent of TV shows such as Channel 4's 'Benefit Street' and 'On Benefits and Proud'. In the 34th British Social Attitudes survey it was shown that '61% [of participants] think it is wrong for benefit claimants to use legal loopholes to increase their payments, compared with 48% thinking it is wrong to use legal loopholes to pay less tax' (Geiger. Reeves. de Vries, 2017) which displays a marked double standard operating in the public psyche when it comes to perceiving those in need of support.

Currently there are two widely recognised models of disability, the medical model and the social model. The 'medical model' as stated by Scope (the leading disability equality charity for England and Wales) 'the medical model of disability says people are disabled by their impairments or differences.' (Scope, no date) Whereas the 'social model' says that people are disabled by barriers in society, not by their impairment or difference.' In other words, the medical model looks at what is 'wrong with people' opposed to what is wrong with the environment around them that is causing their restrictions. (Scope, no date) While the social model is a massive step in the right direction it is a step in the journey rather than the final destination. The social model still has major flaws. Disability activists have reported experiencing vilification from their peers if they express problems with their personal impairments or express upset about subsequent limitations they are coping with. They are accused of letting the side down, even experiencing accusations of treachery. Also labelling can be problematic as labels can be double edge sword's, both reimagining, thus liberating and also confining the disabled person to the reimagined definition.

In Shelly Tremain's 'The subject of impairment' she argues that the emergence of the 'category of impairment' has further 'legitimized the disciplinary regime' that the social model was created to fight against. Meaning people still have to give 'testimonials' and 'perform' their impairment with a clear distinction that it is their impairment which they are referring to rather than the disability that society has imposed on them. (Tremain, 2001) For example, having to perform and demonstrate the functional effects of a medical diagnosis for disability benefit assessments.

'Bill Hughes and Kevin Paterson have pointed out, for example, that although the impairment-disability distinction demedicalises disability, it renders the impaired body the exclusive jurisdiction of medical interpretation (Hughes & Paterson). I contend that this amounts to a failure to analyse how the sort of biomedical practices in whose analysis Foucault specialised have been complicit in historical emergence of the category of impairment and contribute to its persistence.' (Tremain, 2001)

Dr Janine Owen, a lecturer in disability and dental public health at the University of Sheffield, wrote in her paper on 'Exploring the critiques of the social model of disability' says 'if society did not create dependency then disability would disappear.' (Owens. 2014) but argues that 'using the terms 'social and individual models of disability' has become a double-edged sword' because, whilst useful for political change, it has created 'conflict' surrounding how further studies of disability and the body should be conducted.

The social model of disability has been revolutionary in the way society and individuals have thought about impairment and disability. Many people report that when told it is not them that constitutes the problem but society, it significantly reduces the guilt that comes from always feeling like a burden. The social model as it stands today was conceptualised in the 1970's as a result of the ever-growing disability rights movement. Whilst a significant step in the right direction it is, nonetheless, a step in the journey of disability equality and equal opportunity rather than the final destination. As social thinking around diversity and equality has evolved it is time for the social model to also evolve.

"In the UK social model, disability is seen as a social construct and any differences, physical, cognitive or behavioural, are defined by whatever label is applied. An individual is evaluated and labelled through a process of power which then serves to separate them from mainstream society, education, work or social interaction, because they deviate from the dominant norm and difference is not valued." (Owens. 2014)

Disability provisions, as they are currently, categorise people into boxes, which results in inappropriate and inefficient forms of support along with suggesting that said provider understands the needs of the person they are supporting. This gives rise to vague and frequently demeaning provision, which further disables the recipient. This wastes time, money and energy. A much more highly detailed investigation of any individual's problems, strengths, impairments and abilities would mean more work initially but would save time and money in the long run. It would also be far more empowering for the recipient and easier for providers. We know there are infinite ways in which ability manifests and just like our more recent understanding of Autistic Spectrum Disorder (ASD), which now models on a

spectrum, so should any ability. Getting specific and detailed also gives the individual greater agency and responsibility. They would need to negotiate specific evolving support.

In changing the current conceptual model we change the way we get individuals to evaluate their abilities which leads them to describe their experience differently and therefore make variable specific person centred adaptations. A highly detailed examination followed by agreements regarding exactly which adaptations would help in any given situation would reduce resentment and judgment. An example could be where a student occasionally uses a scribe for specific time sensitive situations rather than having a full-time personal assistant accompanying them all the time. If they had the freedom to arrange for the scribe or assistant for the particular occasions where it could level the playing field rather than afford them extra advantage. Another example is where a specific chair might prevent hip subluxation rather than just being an apparently comfier chair than everyone else has. Talking about abilities in this new way contributes to creating a new and different cultural relationship with ability awareness.

In recent years there has been a significant shift in thinking around sexuality and gender as a spectrum verses a binary. Many things have contributed to this shift in public thinking, including Drs Alfred Kinsey, Wardell Pomeroy, and Clyde Martin's 'Kinsey Scale' and philosophical writings such as Foucault's 'the use of pleasure' amongst many others. In a '2015 Fusion Millennial poll of adults ages 18-34 in the USA found that the majority see gender as a spectrum, rather than a man/woman binary.' (Gender Spectrum. 2019) I think there is a real need for a change in thinking of dis/ability along similar lines.

Part Two - Artists, art works and Kinaesthetic learning

Kim Amis, a sculptor and tutor at City & Guilds of London Art School, is a prime example of an artist creating work that has been used as tools for communicating concepts. Amis works in collaboration with researchers and doctors at University College London to create 'tissue-equivalent *Phantoms*' for medical research and training. These *Phantoms* are particularly used to help get accurate brain scans and thus accurately target effective treatment of premature babies. This is essential because they 'often have abnormal brain

oxygenation which can lead to brain damage.’ (Amis, 2019). Depending on the type of scan, the *Phantoms* are made of a latex shell which is filled with a compressible polyvinyl acetate gel which makes a soft *Phantom* (figure 3) or solid *Phantom* is made using either epoxy or polyester resin. (figure 4) Both have ‘scattering and absorbing substances’ added to them which can mimic a brain bleed or damage. One of the uses of the *Phantoms* is to more accurately tune the scanner to babies’ heads by putting the *Phantoms* in first to adjust how and where to focus the imaging.

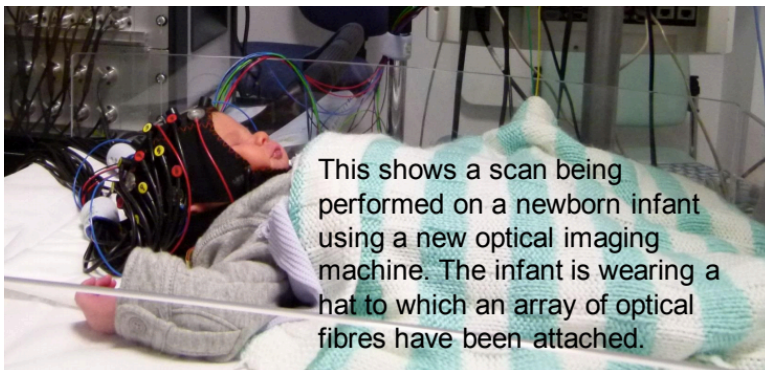


Figure 2, 3: Kim Amis, *Phantoms* (2006 - Present)
Latex, polyvinyl acetate gel, epoxy resin, polyester resin

Another use that came from having the *Phantoms* was helping to explain to the parents of the babies’ what was going on with their children’s brains and what the medics



Figure 4: Kim Amis, *Phantoms* (2006 - Present)
Latex, polyvinyl acetate gel,

needed to do. It was reported that having physical objects to interact with parents got a better grasp of the abstract concepts that were being explained to them. Through handling and interacting with the *Phantoms* parents were better equipped to participate in their babies treatment and found the treatments less disturbing. It was observed that in some cases parents who were more involved were able to better deal with some of the more traumatic experiences. (Amis 2019) Kim’s knowledge and understanding of materials, making and how people relate to objects were intrinsic in creating these

invaluable sculptured *Phantoms*. The *Phantoms* were also put together for an art exhibition held at the hospital.

Artists have experience of conceptualising ideas and then imagining, designing and creating representations of those ideas. They are used to choosing appropriate materials, understanding spaces and holding images and shapes in their minds in sufficient detail needed to realise and effectively communicate those ideas.

Kinaesthetic learning

“Kinesthetics is the study of touch, space, and motion. Kinesthetic learning, then, is learning through touch, space, and motion or learning by physically doing. [...] Kinesthetic learning is a type of active learning that uses body movements with a hands-on approach. The cerebellum is much more active with motor movements involved in kinesthetic learning.” (Craig, 2003)

“Kinesthetic learning is very brain compatible because of the high amount of sensory input that occurs.” (Craig, 2003)

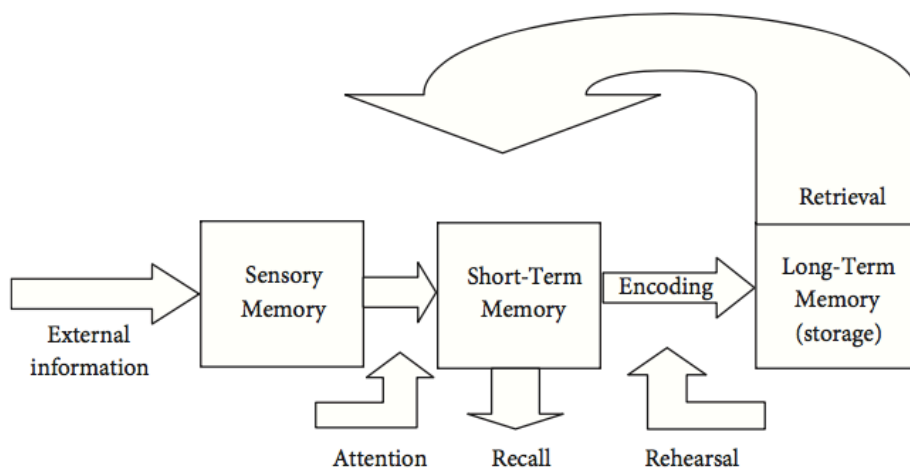


Figure 5: Richard C. Atkinson and Richard M. Shiffrin. The modal model of memory (1968)

In a healthy functioning brain memory storage works in stages, initially there is an experience containing information which is initially processed in the sensory memory. This

has all the 'detail and richness' of the original experience but only for a short period, 'no more than three or four seconds' (SUTTON. HARRIS. BARNIER.) Most of the sensory information is lost after this. The information that receives attention from us is passed into the short-term memory, which usually lasts between 15 and 20 seconds. The information can then be 'encoded' into the long-term memory. The process of becoming permanently anchored happens through 'rehearsal' or action and recall of the information. (Figure 5) The information stored in the long-term memory can be recalled into the future, years after the original experience.

"The brain learns best and retains most when the organism is actively involved in exploring physical sites and materials and asking questions to which it actually craves answers." (Gardner, 1999)

While visiting exhibitions and museums I have found that often the most effective communications, resonant and memorable works for me have been ones which the viewer can interact with or move through in some way. They also seem to be the most popular. While that popularity could be explained by these works looking good in photos, e.g. Eliasson's *In Real Life* or Gormley's *Clearing*, I also think it is due to being able to put yourself within the work. This kinaesthetic aspect of the work seems to make it more accessible to people who do not often engage with art.

One of the most memorable pieces that clearly demonstrates my point of kinaesthetic learning is an institutional installation, that can be seen as an art work, which I first saw in the natural history museum as a young child. In the Volcanoes and Earthquakes gallery of the Natural History Museum there is one display that everyone wants to linger on. As you walk through the displays and diagrams of tectonic plates and molten lava there is an interior of a Japanese supermarket. Nestled in amongst the bread and soup there are monitors showing CCTV recordings of the moment when the magnitude 9 earthquake struck Japan in 2011. (Figure 6) As you stand in this supermarket the floor starts jerking from side to side. The walls start wobbling and you can hear objects being thrust off the shelves hit the floor. As the onlooker physically experiences some of the recreated physical sensations

and sees and hears aspects of this multi-sensory instillation the overall experience is lodged and anchored in a unique manner.



Figure 6: Natural History Museum, Earthquake Simulator (2014)
Mixed Media

“The earthquake room was an eye opener. obviously no where near as devastating if it were to happen for real but does give a better insight as to what happens.” (Sonny G. 2018)

“[...] digging into my memory of the earthquakes gallery, all that I could drag forth was a dusty recollection of an earthquake simulator.” (Davis. 2014)

Antony Gormley’s art can be seen as very kinaesthetic, in particular *Clearing VII* and *Cave*. These are good examples of how work can be both powerful and memorable. Viewers can often recall intricate details of his pieces. Both *Clearing VII* and *Cave* force the audience to be aware of their bodies and how they move through the sculptures. Incidentally these works were also intended by the artist to be accessible. Unfortunately the Royal Academy staff are less well prepared as people in wheelchairs were turned away when trying to experience ‘Cave’. (Figure 7) (Garden 2019). Gormley has spoken about his work,

and art in general, having the ability to start where language ends. This was a particular theme he worked on throughout the making for his Royal Academy show.

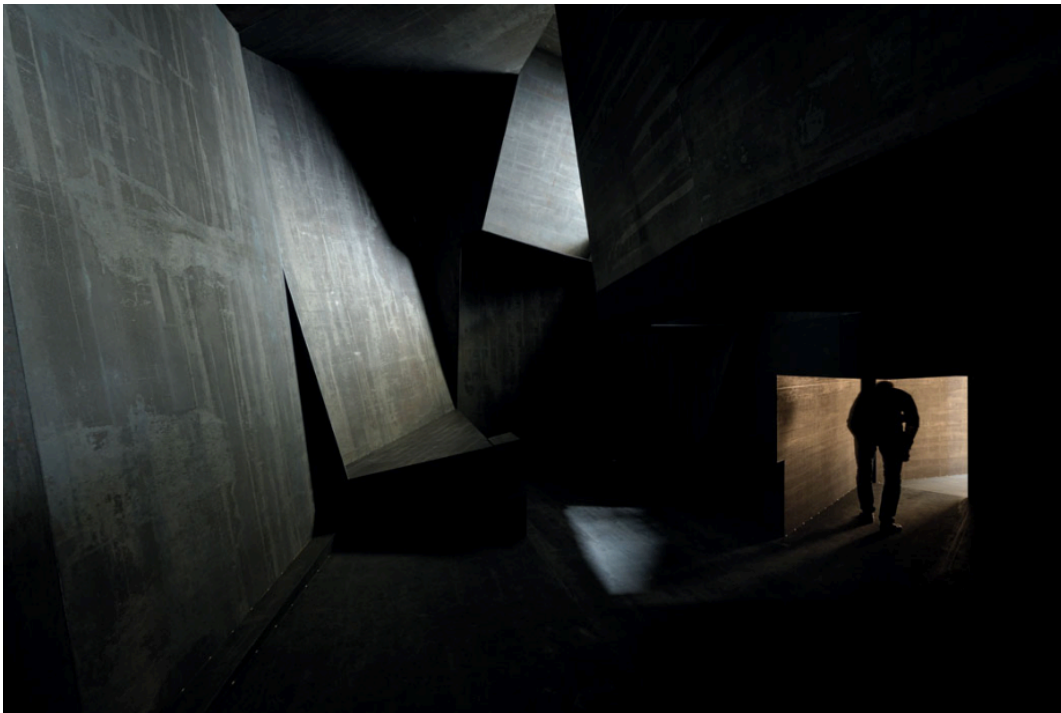


Figure 7: Antony Gormley, *Cave* (2019)
8 mm weathering steel 1411 x 1137 x 734 cm

As you approach the doorway to '*Clearing VII*' (figure 8) a vast network of thick steel wire looms ahead. At first it appears as though this overwhelming maze of lines is not passable and is definitely not accessible. You can either try to immediately dive in and tackle this three-dimensional 'drawing' or you can move around the edge. In methodically moving into the space you will find more accessible openings in order to fully experience the drawing. When asked at a talk in the Royal Academy, Gormley stated that he thought it would 'probably be safer if someone went through *Cave* in a wheelchair' as they were less likely to hit their heads on the low ceiling within the piece. (Gormley, 2019) As written in the RA catalogue, 'As we enter, we activate this bundle of nothing.' 'Entangled, your body becomes part of the work, you feel it, and others see it as such, [...]' (Caiger-Smith, 2019)

From my experience, the nature of moving through and being part of the work brought an awareness to my movement that made me concentrate on the art in a way that is unattainable from a work that I would purely observe. I have to always be aware of my

body due to my condition and how easily I am injured. By making that self-awareness part of the work I didn't feel like I was constantly fighting to keep my concentration on the art because my body was a part of it. Able-bodied people can gain insight into how it feels to have to constantly be aware of your body in order to avoid injury, while moving through this 'field that involves an effort of the whole body as you push past or step through, parting the swaying coils that tremble to the touch'. (Caiger-Smith, 2019) I know this description makes *Clearing VII* sound highly inaccessible but this is part of the beauty of the work as it is actually accessible. I have had friends go through in wheelchairs and mobility scooters without issue. Gormley himself said at the RA talk; that he would be 'very upset if a wheelchair user couldn't get through *Clearing*' and experience the exhibition fully. (Gormley, 2019)

An able-bodied person who has been through this sculpture may subsequently have a visceral kinaesthetic experience lodged in their long-term memory. This bodily understanding of my everyday reality could not be so effectively communicated through a two-dimensional, spoken auditory or written description of constantly negotiating physical safety. While Gormley's works are not dealing directly with accessibility, by having the idea of keeping his art accessible to as many people as possible he has been able to make work that is not only inclusive but also can give a kinaesthetic experience that is beautifully powerful and potentially educational.

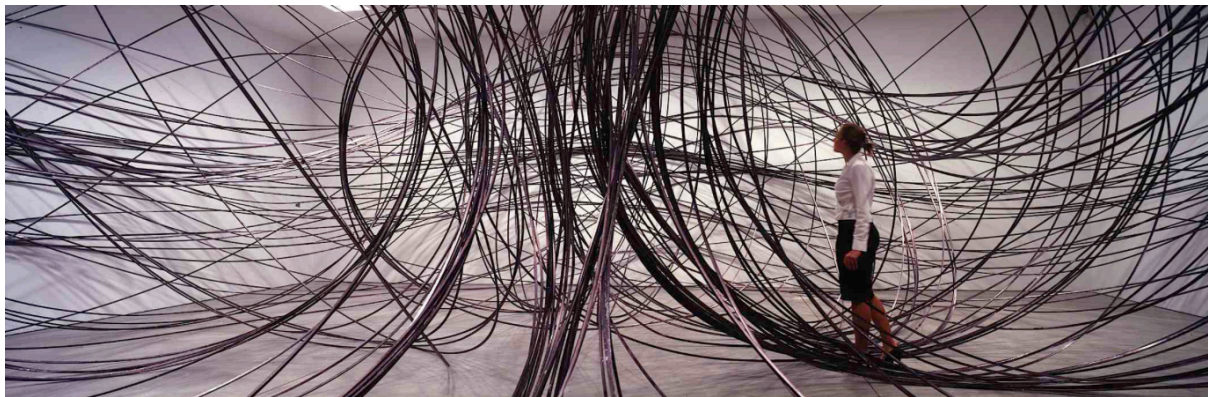


Figure 8: Antony Gormley, *Clearing VII* (2004-19)
Seven kilometres of steel wire – Dimensions vary

It is important to note that while I am saying that artworks, particularly works with kinaesthetic elements, can be seen through this prism of communicating concepts and ability in a way that is positively informing people; I am definitely not saying all artwork does this.

Unlike Gormley's *Clearing VII*, one of the criticisms of Olafur Elissons 'In Real Life' 2019 exhibition at Tate Modern has been how easy it could have been made fully accessible but fell short due to the work, *Your Spiral View* (2002), (figure 9 & 10) being completely inaccessible due two steps you are required to climb to walk through the eight-meter-long tunnel. The tunnel consists of polished steel sheets welled together to resemble a giant kaleidoscope. It's not only the steps that make this piece inaccessible but also the platform in which you walk on inside the work, a 'gridded' metal surface makes it impossible for guide dogs to walk on it as well as walking aids such as crutches or walking sticks struggling with the gaps in the metal. By making people so hyper aware of their body's limitations a barrier is created between them and the experience the artist wanted to portray.

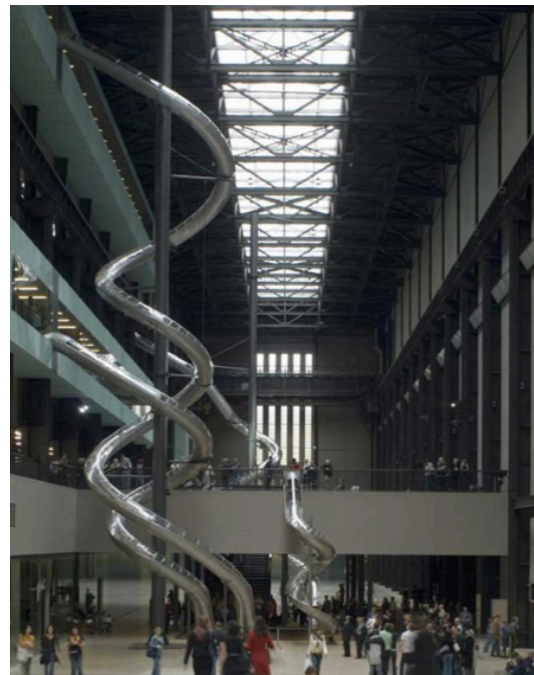


This is also the case in many relational aesthetics art pieces such as Superflex's 'One. Two. Three. Swing!' (figure 11) and Carsten Höller's 'Test Site'. (figure 12) 'One. Two. Three. Swing!' Was the third Hyundai commission for the Turbine Hall which opened in 2017. It consisted of orange and grey bars strewn randomly across the hall, connecting at different heights with horizontal bars. The three-person swings swung from these bars with metal chains attaching. 'Test Site' was another Tate Modern Turbine hall commission. Taking place in 2006 'Test Site' was an installation of metal tubular slides placed around the hall coming from the all different floors, all ending beneath mezzanine of the hall. Both of these

works are supposed to address bringing people together through 'interaction' and 'play' but don't take into consideration that not everyone can slide down a slide or swing on a swing.



(Above) Figure 11: One. Two. Three. Swing!
Superflex, (2017)
Wood, Steel - Dimensions vary
(Right) Figure 12: Test Site. Carsten Höller (2004)
Steel



In contrast, Banksy's '*Dismaland*' which opened to the public in the summer of 2015, contained highly accessible kinaesthetic elements. While the whole 'Bemusement Park' was an interactive wonderland that put across many pertinent political points, there was one stand out piece. Floating in what looked like a hastily put together breeze block pool are four small remote-controlled boats, three are packed full of migrants and the fourth is a grey yacht. In front of the pool are steering wheels which you can use to operate the boats. (figure 13 &14) When you go to control a boat there is no way to know which boat you will be operating and the boat that you are controlling randomly changes. This, as described by Banksy himself gives the sense that 'you have no control over whether your destiny is to be an asylum seeker or a western super-power.' (Banksy 2019) This was one of the most controversial works in the park. While I was there I found the atmosphere around the work particularly tense. This was possibly due to the ambiguity and confusion of the piece.

There was no description next to the work and as *Dismaland* was set out as a theme park. It was unclear if the people operating the boats were meant to help the refugee boats or push them away. Was it a game? No one could tell. I think the stress of possibly being judged while not being able to know what to do, conflicted with having fun operating toy

boats. This in turn lead to an incredibly successful kinaesthetic art work that really communicated the uncertainty felt by refugees who have had to risk boarding these kinds of boats in the hope of a safer life.



Figure 13 & 14: Banksy, Remote control boats at Dismaland (2015)
Mixed media,



Figure 15: Marina Abramović, The Artist is Present (2009)

In *'the artist is present'* (2009) Marina Abramović used her body as part of the work. Spending 8 hours, without breaks, a day sat on a wooden chair. (figure 15) During this, spectators were invited to become part of the performance. Intermittently they would sit opposite her on an identical chair and share a pure human connection by 'locking eyes' each other. While you

are put in scenario where there is an illusion of equality, same uncomfortable chair in the same space at the same time, but she is still in control of the situation that is the artwork. Described by one participant as 'an amazing journey to be able to experience and participate in the piece.' Essentially very simple, this work can be seen as how we communicate

something so abstract through creating a kinaesthetic experience using just the artist's body and the spectacle of the performance.

Artists frequently examine people, objects, places and issues in minute details giving attention and consideration to details frequently either overlooked, seen as irrelevant or unimportant. This habit or practice of both reimagining and reframing the 'everyday' can result in useful repurposing and seeing previously unimagined solutions.

Part Three - The model

(As I explain this new model, please refer to the three-dimensional visual model that accompanies this thesis.)

In order to best demonstrate this new model I have included an example of a three-dimensional model of how ability assessment could be recorded and used. I have used myself focusing on my accessing a degree course. The model is a tool that can be used to conceptualise, understand and then action useful adaptation and support.

Mathematic set theory is an area of maths described by Encyclopaedia Britannica as dealing with 'the properties of well-defined collections of objects, which may or may not be of a mathematical nature,' In the case of the properties new model the 'collection of objects' or 'sets' are the assesses' abilities and the 'properties' are how their abilities affect them.

Conceptually the model of ability is represented as ever evolving and changing, overlapping infinite sets; the sets are globe shaped. Each person's abilities are infinitely expanding and contracting globes. The contraction signifies the person's abilities becoming greater, greater choice, agency and independence. The smaller the globe the less of an obstacle or issues it is. The expansion signifies the person's abilities becoming restricted or requiring more attention, adaptation or requiring more support. The bigger the globe the bigger the obstacle it is and the more cumbersome it is to carry around. It is possible for the globes to be both expanding and contracting at the same time. I have a condition called

Ehlers Danlos Syndrome, a connective tissue disorder that leads to fluctuating levels of chronic pain and fatigue so, for example, when I do my physiotherapy I am simultaneously making my joints more stable which improves my mobility but I am also increasing my pain because any movement, particularly strenuous, will cause more micro injuries and uses up my limited energy.

Practical application of the model - Each person has the possibility of infinite globes, but for practical application they can put each issue/ability into a globe. The recorded content of the globe would only ever be an indicator or signpost symbolising what requires consideration. The more detailed the information is, the more detailed the resultant adaptation could be. Some of my globes would be; Pain, Fatigue, Mobility, Nausea, Cognitive Processing Disorder, Brain Fog, Reactivity and Auto-Immune Dysfunction. All of the globes can also overlap to varying degrees. (figure 16 & 17) Variables can have either positive or detrimental effects on the globes causing expansion and contraction of them. Some these variables can be; Disability Awareness, Accessibility, Stressors, Finance and Diet & Medication. (figure 18 & 19) When it comes to assessment and acquiring appropriate support, it could be the responsibility of the owner of the globes to describe them as accurately as possible and to update this information regularly with agreed evaluation dates. Where an individual may have, for example, a learning disability or possibly be newly diagnosed, an experienced and qualified professional or advocate would be needed to step in to support and document relevant details. They should communicate as best as they can what adaptations are required. The adaptation provider needs to understand, record and provide reasonable adaptation and regularly monitor and evaluate them in collaboration with the assessee. (figure 20 & 21) The adaptation provider needs to know what adaptations are potentially available and training in how to select, utilise and maintain them or where to get the necessary help to do so. Adaptations can never be perfect and need to be constantly reviewed. Both parties have to take responsibility for their effectiveness. It is a negotiation.

As shown in the three-dimensional model, different abilities/issue requiring attention will be recorded on the clear acetates and the variables affecting these abilities will be on coloured acetates. Potential adaptations could be stuck onto the clear globes and moved around, updated or expanded as the situation develops.

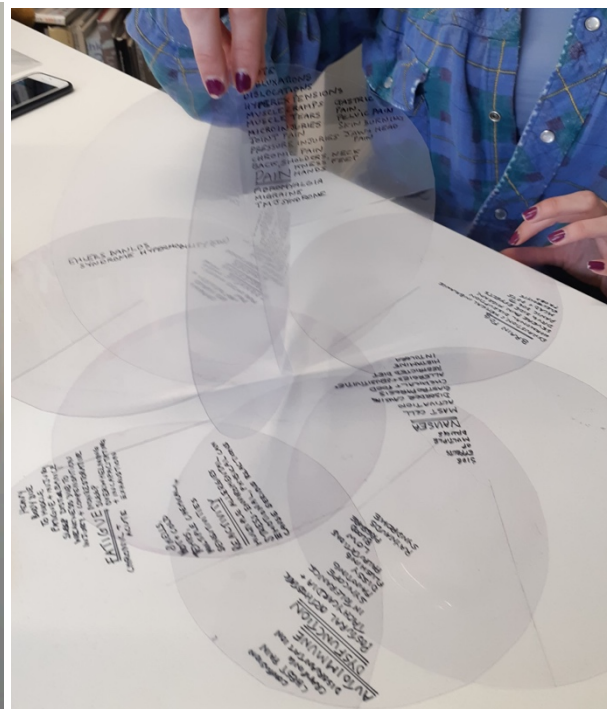
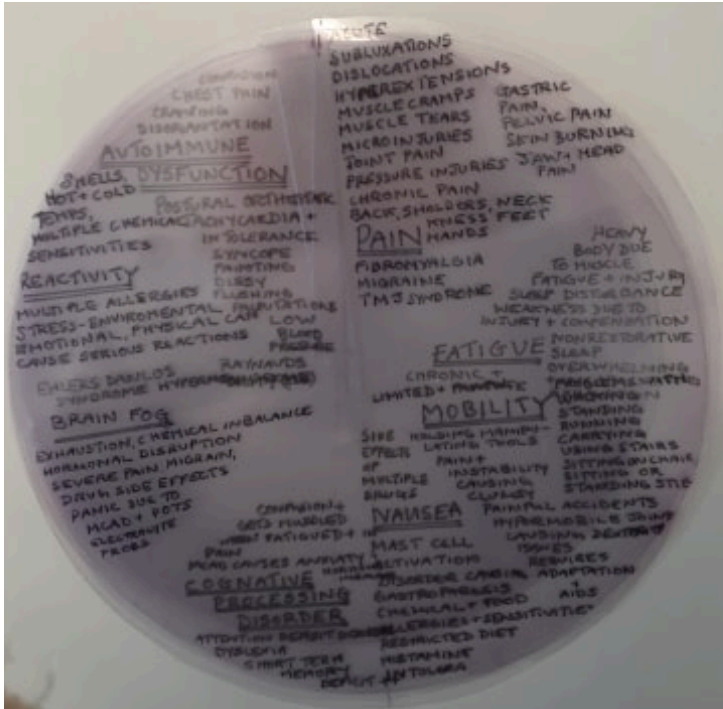


Figure 16 & 17: Sorcha Jewell, New 3D Model of Ability in use – ‘Globes/Abilities’ - First Draft (2020)

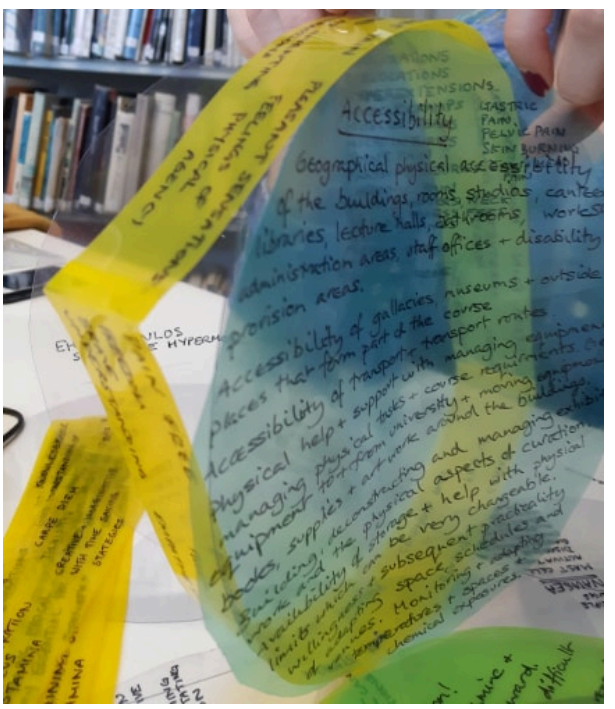
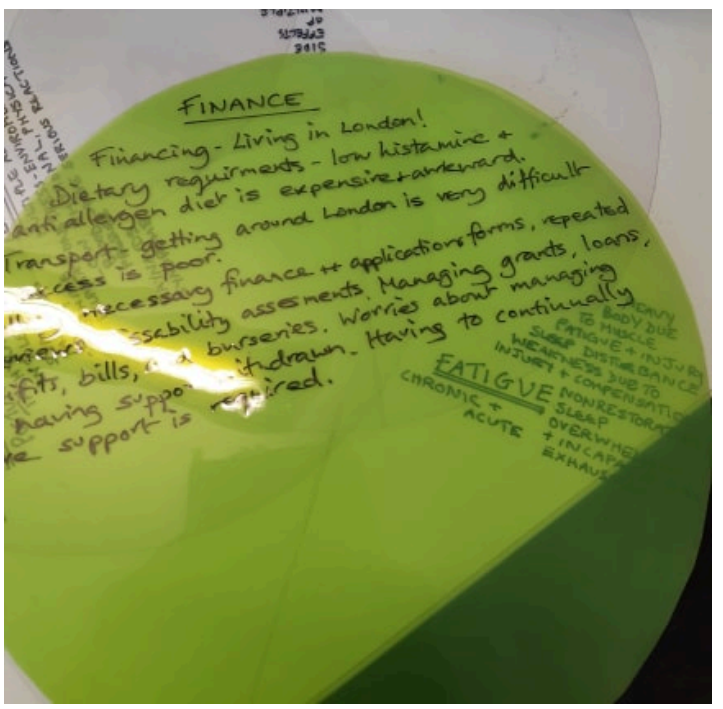


Figure 18 & 19: Sorcha Jewell, New 3D Model of Ability in use – ‘Variables’ First Draft (2020) Maker on coloured acetate

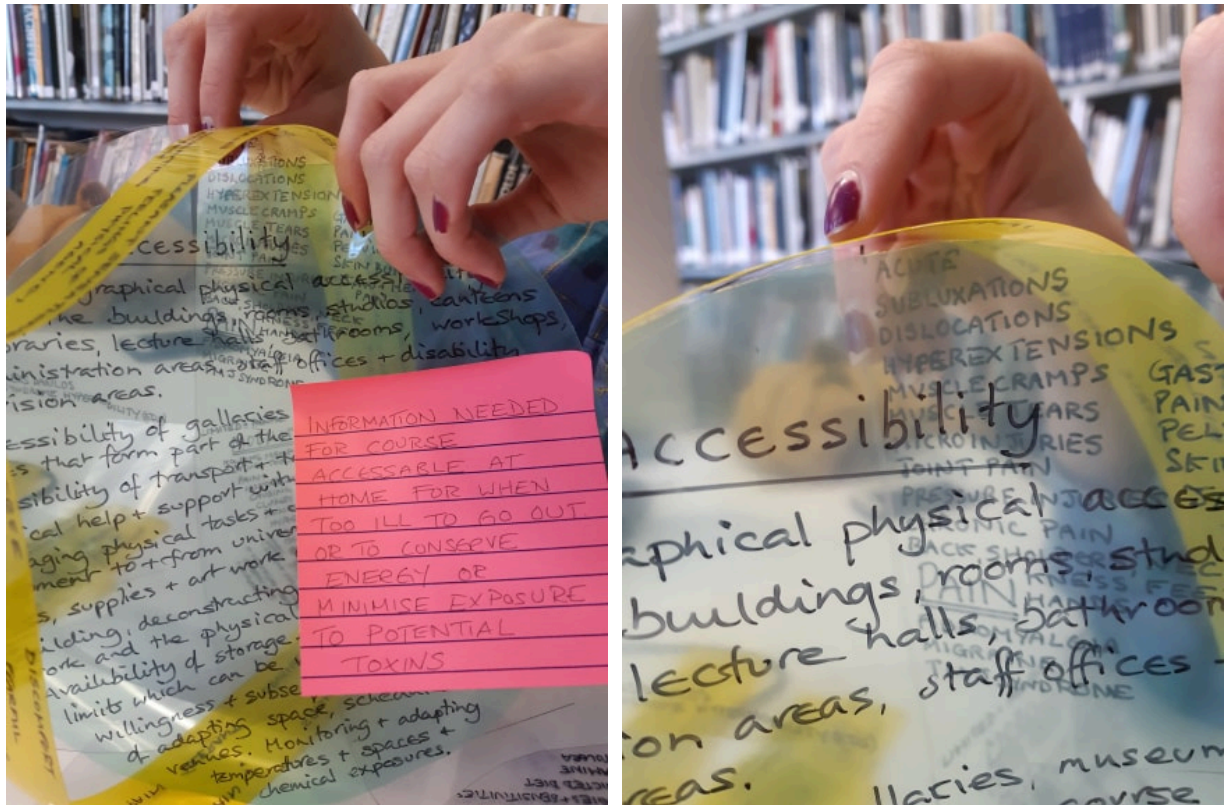


Figure 20 & 21: Sorcha Jewell, New 3D Model of Ability in use – Variables and Globes/Abilities with adaptations - First Draft (2020)
 Maker on coloured acetate and clear

When talking about one's limitations due to impairments there is often a tendency to minimise the severity of the limitations. This can be very detrimental when it comes to getting tailored and necessary support. This model encourages both the person with the impairments and the assessor to be truly honest with the realities of their current situation. This can be traumatic for a lot of people; particularly if the reality is ever expanding globes such as can be the case with progressively degenerating conditions. This requires an assessor with the sensitivity, emotional intelligence and knowledge to be able support each person through the assessment process.

While people can place themselves on the continuum of either gender identity or autistic spectrum disorder (ASD), when it comes to a person placing themselves on an ability continuum it becomes trickier due to the fluctuating nature of ability and health. Placing one's self on that same continuum will fluctuate from day to day meaning the placement has to be fluid; it can never truly be static.

As partially explained earlier, the artist can help create this new model/map based on ability as infinite overlapping sets, which could help organisations or individuals to effectively demonstrate the ability or impairments they experience and thus negotiate effective support. The artist or sculptor's role is to create a kinaesthetic experience on which information could be placed where by solutions could present themselves and be effectively managed, monitored, evaluated and updated. The individual and the organisation could both take ownership of the model and it would be a far better tool, as it would be person specific rather than disability or impairment specific.

Conclusion

In conclusion I have explained why I think artists are particularly well placed to effectively communicate new concepts and ideas and why they can play an invaluable role in helping and collaborating with many disciplines in order to introduce new ways of conceptualising, communicating and explaining potentially useful new systems and or adaptations.

I have talked about some potential new ways of describing, recording and monitoring abilities as an example of how artists can contribute to this discourse and explained some of the theory supporting both the need for a new model and some of the theory involved in constructing the model.

I have given some examples of works of art that have successfully communicated complicated, nuanced, esoteric and even quite challenging concepts along with a couple which did not.

Artists can help create cultures, models and environments which help individuals move from a space of survival into a space in which they can potentially flourish.

One last argument for why fine art could be particularly effective for communicating the concepts I have referred to is the state of mind you have when viewing art. One could ask why is this not necessarily the case with say architecture? Buildings are also spaces you have to negotiate through in a way that can make you aware of your body and its potential limitations. The appreciative and inquisitive state of mind we have to bring to

artworks, we do not always bring when moving through buildings. This is due to the fact we have to negotiate those spaces on a routine basis. With most buildings you are not usually there to specifically observe the structure you are moving through. Even when a building is making you aware of your body due to inaccessibility, you are still trying to get through it as fast as possible and with as little pain and exhaustion as possible. If a space's barriers to access are taken away there is usually little appreciation of the space as one is likely think even less about the building or oneself within it due to the journey being made more seamless.

One of the reasons I chose to use a disability model as an example of re-conceptualising is, it addresses the usefulness of including people with creative backgrounds in a multi-disciplinary approach. Artists can usefully contribute to how we form new institutional structures and innovative solutions which could then be more likely to be successfully communicated, ultimately resulting in an enriched, more insightful society.

For this to happen a shift in how we value the role of the arts and the intrinsic role artists can play in a wider society could really help. As a society we need to talk about ability in a way that does not other and isolate people. This could possibly result in making it more likely that disabled people would actually want to participate in areas that have previously been inaccessible.

It is clear that a revolution in ability based thinking is long overdue. A new continuum based model might even usefully contribute to a change in attitude.

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