

The Able Privilege Scale:

A New Educational Tool

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The Able Privilege Scale (APS) is a theoretically derived reflexive instrument that asks participants to assess their level of personal power and privilege in relation to society depending upon the presence, and/or type, of disability. The 23-items on the APS are derived from McIntosh's concept of white privilege (1988) and adapted to reflect disability issues. The APS is administered in a group setting, and preliminary qualitative results show that the group debriefing process increases participants' self-awareness regarding their attitudes toward disability, in general, while at the same time improving empathy for people with disabilities. Participants also report that the APS has high educational value, and there is indication that it may also increase motivation for professional advocacy activities. Currently, the sole use of the APS is as a disability-related social justice educational tool, but it appears to have potential as a more formal assessment. Future research areas are recommended.

### The Able Privilege Scale: A New Educational Tool

Privilege is defined as a special right, advantage, or immunity available only to one person or group (*Oxford American college dictionary*, 2002). We are defining able privilege as unearned and invisible social advantages held by people who are able-bodied over people who are disabled. The Able Privilege Scale (APS) is a 23-item original educational tool designed to help people understand in a deeply personal way the reality that people with disabilities lack the privileges of able-bodied people. The purpose of this article is to introduce rehabilitation educators to this new educational tool. We will describe the APS instrument and discuss its origins, theoretical foundation, administration procedures, and some of the results we have found in its use, as well as potential future uses.

#### **Origins**

Our definition of able privilege is directly derived from McIntosh (1988), who defined white privilege as the unearned advantages held by people who are white over those who are non-white, and that these advantages are mostly invisible. In addition, the items on the APS are based upon a list of White privileges discussed in her article. Beyond these simple derivations, however, lies a deeper theoretical foundation.

The concept of able privilege is rooted in the social model of disability, which views disability as a social disadvantage added onto an individual's impairment (Tremain, 2005). Critical disability theory (CDT) takes this analysis one step further and views disability as a "social pathology" (Rioux & Valentine, 2006) resulting from societal structures that restrict people with disabilities from full participation in society. The result of this social structuring process is the current system that appears to those in power as sensitive and compassionate, but in reality is keeping people with disabilities in their disempowered status by not allowing their

full participation in society (Pothier & Devlin, 2006). This lack of full participation in society is termed by Rioux and Valentine as “dis-citizenship” (2006). Therefore, according to CDT, disability is an issue of politics and power; it is about the power of people without disabilities over people with disabilities, and the striving for equal power by people with disabilities (Pothier & Devlin, 2006). Furthermore, the goal of critical disability theory is not just to describe the relationship between an ableist society and the people with disabilities living in it, but to also create a barrier-free society in which all people, regardless of ability level, have full participatory citizenship.

A reading of McIntosh’s seminal article *White Privilege: Unpacking the Invisible Knapsack* (1988) with its listing of privileges led to the concept of able privilege and a listing of similar privileges. However, the prior knowledge of CDT led to the idea of creating a scaling exercise that could then be given to a class with follow-up discussion. From the beginning, the purpose was to educate students about able privilege so that they might go out and work to create a barrier-free society, this being consistent with the goal of CDT.

### **The Able Privilege Scale**

Just as the common first step in cultural awareness is to become aware of your own culture, the APS directs people to inventory their own privileges as a first step in privilege awareness. The APS is a reflective instrument with 23 items addressing personal power in relation to society, and how this personal power may fluctuate depending on the presence, and/or type, of disability. Thus the unit of analysis becomes the social structure, the relationship between the person with a particular disability and society’s response to that disability (Rioux & Valentine, 2006), not necessarily the attitudes toward any particular disability. See Table 1 for an example of the items on the APS.

< insert table 1 here >

### **Scale Administration**

The APS is administered in a group setting of 10-30 people, or more. From group initiation through debriefing takes approximately 75 minutes. The procedural sequence is as follows: An introductory statement is read explaining the concept of able privilege and instructions for completing the scale. When completing the scale, participants are first asked to reflect on how much power and privilege they currently have by placing a check mark next to any agreed upon statement. The participants then total how many statements they agreed with. Participants are then randomly assigned one of 12 pre-selected disabilities; they then complete the 23-statement checklist again as if they had that assigned disability. This process is repeated once more with another randomly assigned disability. At the conclusion of APS administration the each participant has three scores, one as he or she is now, and two with different disabilities. The difference in scores between when people are with and without disabilities is then discussed with the group.

The 12 disabilities assigned were purposefully selected by the authors to represent as wide an array of disability types as possible that covered both visible and invisible disabilities as well as mental and physical disabilities. Disability descriptions were made purposefully vague in order to have the participants project their personal knowledge about the disability onto their responses. See Table 2 for a list of the APS disabilities.

< insert Table 2 here >

Operational definitions of the primary disability characteristics are: A physical disability has a primarily physical basis or cause; a mental disability has a primary mental basis or cause; a visible disability is quickly noticed during a brief interaction; an invisible disability is difficult to

notice, if at all, during a brief interaction. In order to try and assure random assignment of disabilities during APS administration, the 12 disabilities were divided into two groups, and each separate disability was printed on a small piece of paper that was folded and put into a hat. For the first APS disability participants would draw out of the hat holding group one and for the second APS disability participants would draw out of the hat holding group two.

### **Group Debriefing Process**

The key to the APS, and able privilege education, is the group debriefing. It begins by having each student announce what his/her score was as he/she is in the present followed by the first assigned disability and resulting score. For time purposes, we only do these two scores and not the second disability (third) score. The scores and corresponding disabilities are written in columns on the board for the whole group to see. We then review the scores with the group and note how big the difference is from “as you are now” to “as you are disabled.” The basic discussion starter question is: “Beyond the obvious addition of giving you a disability, what explains your loss of privileges from as you are now to as you are disabled?” Some follow up questions are listed below.

- “Where do privileges come from?”
- “How does it feel to lose privileges?”
- “What’s the difference between privilege and ability?”
- “What explains different disabilities getting different scores?”
- “What can you do to help people with disabilities gain privileges?”
- If someone is willing to disclose their disability, ask them to talk about their privileges or lack thereof.

**Themes.** As the discussion continues, some common themes tend to emerge. These themes are briefly listed below, but each group is different, so how many themes and how deeply some themes get explored and others don't tend to vary.

- How privileges vary by disability type (severity, visibility, etc.)
- Discrimination (race and gender as similar examples only; see cautions below)
- Societal privileges over individual abilities
- Societal power over individual privileges
- Validation of the disabled self, or lack of validation

The primary message we want students to take away from the group debriefing is that people with disabilities have the capability of being fully participating citizens in our society but it is primarily the way our society treats them that prevents this. The privileges listed on the APS are so basic as to be invisible to those that have them, the able-bodied, but when students come to realize that losing them restricts their societal participation those privileges suddenly become very visible. Each of the above themes directly relates to this primary message.

The absolute level of privilege varies by disability depending on its characteristics (i.e., mental, physical, visible, invisible, type, severity, etc.) and this helps students see the arbitrary nature of how society treats people with disabilities. Discrimination against people with disabilities becomes a much more personal issue for students when they see their own privileges reduced by the simple and random acquisition of a disability, especially through the group process. Society grants power in the form of privileges, and these privileges are more important than, yet not related to, individual abilities. Who you are as a person does not change with the random acquisition of a disability, thus validating the disabled self, yet society through the restriction of privilege can attempt to invalidate the disabled self.

A secondary, yet no less important, message we want students to take away from the APS exercise is that as they are likely part of the able-bodied privileged majority within the society, they are at least partly responsible for how society is structured. Society is not this powerful outside entity; they are society, and they have power. Thus, if they see something wrong with society then it is also their responsibility to use that power to try and change society and right that wrong. We have found the combination of the above themes and this message to have a very stimulating effect.

**Social Justice.** The APS and the themes elicited during the debriefing process are consistent with a social justice view of society. However, despite the consistencies between the two concepts, it should be noted that we avoid too direct a discussion of social justice as it relates to able privilege during the debriefing (see Cautions below). A thorough discussion of how the construct of able privilege fits within the framework of social justice is beyond the scope and purpose of the APS debriefing and this article, but a brief review is provided here for the purpose of providing conceptual context.

Lack of privilege can be viewed as a form of oppression (Young, 2010), and the debriefing process serves as a potential for the participants to “wake up” to the existence of that oppression, as described by Harro in his discussion of the cycle of liberation (2010), so that students begin to develop a liberatory consciousness (Love, 2010). The primary goal, in terms of social justice, is to create allies, who are defined as members of the advantaged (i.e., able-bodied) group who turn their energies to act against the forms of oppression from which they get their privileges (Hardiman, Jackson, & Griffin, 2010). The secondary social justice goal is to empower the (generally) few disabled participants in the group to reject their unprivileged status and work to overcome any internalized forms of oppression as they outwardly work for their

rightful privileges. Finally, the social justice movement today is aiming at creating connections across the categories of race, class, and gender as a means of bringing about social change (Collins, 2010), and the APS debriefing process treats disability as a new category of connection.

**Cautions.** There are three common events we attempt to avoid or that need to be clarified during the debriefing. First and foremost, we keep the focus on disability issues. Specific issues of racial or gender discrimination come up regularly and can be very helpful to touch on *briefly*, but we have found that they are too easy and familiar for people to talk about compared to disability, so they quickly become distracting and the group can get stuck on them. Similarly, the broad issue of social justice is occasionally brought up and this can serve as a helpful way to frame the discussion, but except for talking about how lack of privilege can be viewed as a form of oppression we try to avoid the more abstract concepts and lingo associated with the social justice movement as described above. Instead, we try to keep the focus on how disability intersects with privilege so that participants can learn to relate to disability in a new way.

A second common issue we come across is that people may give themselves credit for their high privileges when able-bodied and blame society for their lack of privileges when disabled by saying something like, “Of course I have all these privileges now, but it’s not right that society takes them away once I become disabled.” This is a false distinction that needs to be clarified by pointing out that they are never separate from society, thus they always have a role to play in society regardless of their, or others, disability status.

A third common issue we find is how discussion of individual items on the APS can become distracting to the group. Discussing individual items can be helpful as a means of pointing out differences in privileges (and this is encouraged), but try to keep the focus on the bigger themes. Because these bigger themes can be difficult, however, the group may want to

get lost in the easier details. Finally, as in any good class discussion, it is always important to not let anyone dominate. Get as many students involved as is reasonable; their participation is key.

### **Effects**

We have administered the APS approximately a dozen times while in development, getting various forms of feedback from the participants each time (i.e., different questionnaires, collecting verbal comments, etc.). Some of this feedback has been on the instrument itself, with the result in its being altered and improved numerous times over the course of the piloting process. In addition, the APS has been used primarily as an educational tool and not a formal assessment. As such, no formal results are implied or intended here; however, we feel confident in reporting some general effects recorded as part of our ongoing collection of feedback comments.

An integral part of the piloting process included a qualitative questionnaire that participants completed after the group debriefing. This questionnaire was comprised of questions regarding the group debriefing as well as the APS instrument itself. Three questions were about the debriefing:

1. "Please tell us why it (the APS) felt important or not to you."
2. "What did you like or dislike about the experience?"
3. "In your own words, please tell us what you learned from the experience (if nothing, please say so)."

An informal qualitative analysis of the pooled responses from the above three questions reveals three distinct trends: (a) students report an increase in their self-awareness regarding their attitudes toward people with disabilities, (b) students have an increase in empathy for people

with disabilities, and (c) an appreciation for the overall educational value of the exercise.

Examples of each of these responses are noted below.

### **Self-awareness**

Here are some examples of students' quotes regarding their increase in self-awareness:

- "It made me re-evaluate how I really view people with disability."
- "It also showed me my biases and helped me realize that I need a change of mind."
- "Better understand just how high my own privilege and the great chasm that exists between me and disabled."
- "My subtle bias toward specific disabilities."
- "I have never really considered all the 'privileges' I have."
- "I need to learn more self-awareness; I do not know very much."

### **Empathy**

Here are some examples of students' quotes regarding their increase in empathy:

- "I get to see myself in someone else shoes."
- "It made me more aware of how I would feel if I was disabled. I also realized these feelings really don't make this [sic] much sense."
- "Of course, it's always important to be aware of other's and their disabilities, [because] it helps us to be more understanding and kind when we encounter others w/ disabilities."
- "I actually had to consider what things would be like if I had a disability."
- "I have more respect for [PWDs] ability to function in a society that was made for able-bodies [sic] people."

**Educational value**

Some examples of students' quotes regarding the educational value of the exercise are:

- “I feel that is important to know because you can see how people are left out in society and what they may face.”
- “I learned that society is what make [sic] disabled individuals not treated the same.”
- “I have never even considered this on the level of privilege and how it relates on a much larger scale in society.”
- “It’s not about disability or race it’s more about privilege.”
- “That privilege is far different from ability.”

One finding not evident in the written qualitative questionnaire responses but verbally made as part of our analysis of the debriefing sessions themselves was that the increase in self-awareness and empathy seemed to combine to naturally lead the discussion into talk about professional advocacy to increase the privileges (and rights) of people with disabilities. “We need to figure out ways to level the ‘privileges’ for everyone and not discriminate against others w/ disabilities” is a written example of the type of comments typically made verbally.

**Future Directions**

Based on our experience piloting the APS, it would appear to have a number of potential uses in addition to the educational benefits described above. The above quotes would seem to suggest that APS administration might alter attitudes toward people with disabilities. There is also the possibility that the APS might be able to quantitatively measure what CDT only subjectively describes. That is, the APS might be able to quantify privilege as an aspect of power. Each of these possibilities warrants a more in-depth exploration.

**Attitude Change**

Two of the most common methods of changing people's attitudes toward people with disabilities are disability awareness/education programs and disability simulations. Both of these methods focus on disability as impairment. In a general review of these types of programs, French (1994) found them to be relatively ineffective. More specifically, disability education and awareness programs have been shown to have only a short-term positive effect in improving attitudes toward people with disabilities (Altindag, Yanik, Ucok, Alpetkin, & Ozkan, 2006), and disability simulation programs can even have harmful effects on attitudes (French, 1992). Disability scholars are therefore rejecting the use of these types of programs (French, 1994).

An alternative to disability awareness training and simulations is disability equality training, where people are exposed to the inequalities experienced by PWD (French, 1994). Such trainings focus not on disability as impairment but on the barriers society places in the way of people with disabilities that prevent them from being able to fully participate in their citizenship, and how these barriers permeate every aspect of people's lives, both physical and social. Disability scholars prefer these types of programs as better for improving attitudes toward people with disabilities (Johnson, 2006). It's proposed that the administration and debriefing of the APS as a new form of equality training with the potential to improve attitudes.

In an effort to investigate this possibility we conducted two brief experiments. In the first experiment we hypothesized that the APS might decrease social distance (Bogardus, 1925) between people with and without disabilities, and in the second experiment we hypothesized that it would improve attitudes toward disablement (Antonak & Livneh, 1988). Neither experiment resulted in any significant findings. Despite this early lack of significance, however, further

research into the potential of the APS to improve attitudes appears warranted and is recommended.

### **Quantifying Privilege**

Another promising future possibility for the APS is as a formal assessment attempting to measure what CDT only implies. To date, all of the literature on CDT appears to be only theoretical in nature. No empirical research has been found that attempted to identify or measure the specific power and privilege concepts inherent in CDT. Such research is recommended.

The APS may also have potential in some areas of correlation research. Specifically, there has been discussion in the literature regarding a hierarchy of disability, how some disabilities are stigmatized more by society than others (Tringo, 1970). The APS may be a useful instrument to compare the disability hierarchy with the privilege hierarchy for disabilities. In other words, how well would a ranking of disabilities by degree of stigma correlate with a ranking of disabilities by degree of privilege?

Additionally, the APS may be useful in investigating the accuracy regarding the levels of perceived privilege of able-bodied people taking the APS compared with the actual levels of privilege reported by people with those disabilities. In other words, how well does the perceived level of privilege for a sighted person correlate with the actual privilege level reported by a person who is blind?

Accompanying variations for all the different disabilities would also be implied. Item analysis of each of the privileges may also be worth investigating. In other words, which specific privileges go with which specific disabilities?

There are a number of limitations to future use of the APS as a formal assessment, however. First, the current list of privileges may not be exhaustive, or even potentially

indicative, of actual reported privileges by people with disabilities. The current items are derived from an article (McIntosh, 1988) not intended as an assessment and thus have not been empirically validated. Second, participants to date have been either college students or rehabilitation professionals, thus the results derived from these select groups may not generalize to the general population. Finally, a formal evaluation of the reliability and validity of the APS is under way. Such use has not been its focus to date, but its potential as a future assessment tool in the above areas dictates that we suggest that type of research.

In conclusion, the Able Privilege Scale is presented as a theory-based educational tool. It is a 23-item reflective instrument designed to help participants to understand the role that privileges, or lack thereof, play in the lives of people with disabilities who are struggling to act as fully participating citizens in our society. Essential to this understanding is group administration, not individual assessment, so that those who engage in the process gain self-awareness and empathy, with a targeted resulting action towards advocacy. In addition to its educational utility, the APS process may also have potential as a formal quantitative research instrument; however, future reliability and validity studies are needed before we can support this outcome.

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Table 1

*Example of items and scoring of the Able Privilege Scale*

You Now	Disability #1	Disability #2	Privileges
			1. I can arrange to be in the company of people of my level of ability most of the time an with relative ease
			2. If I should need to move my residence, I can be pretty sure of renting a house or apartment that will accommodate me physically
			3. I can be pretty sure that my new neighbors will be neutral or pleasant to me
			4. I can turn on the television or open the newspaper and see people of similar ability to me widely represented
			5. I am familiar with the history of people similar to me in ability
			6. I can be pretty sure of my ability to have my voice heard in a group in which I am the only person with my level of ability
			7. I can do well in a challenging situation without being called a credit to my level of ability
			8. I am never asked to speak for all people of my ability group

Note: In an effort to minimize response bias, actual scoring is done on a separate page for each of the three times participants complete the scale

Table 2

*List of disabilities assigned as part of the Able Privilege Scale*

Disability Characteristics	Visible	Invisible
Physical	Blindness Cerebral palsy – ambulatory Deaf Wheelchair-user	Heart condition Traumatic brain injury Chronic pain syndrome Diabetes – insulin dependent
Mental	Severe depression Schizophrenia Bipolar Down’s syndrome	Addiction – in recovery Dyslexia Moderate intellectual disability (MR) Anxiety disorder