# <ppt2.1>

# The Art of Life:

# The Rehabilitation and Training of Blind Adults

# in a Postmodern World

by

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Postmodernism and Blindness: From Conforming to Creating

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Abstract: *The training and rehabilitation of blind adults in the modernist era concentrated on conforming to life and work patterns but the postmodernist era requires much more flexibility and creativity so that people can be normatively self-identifying but this requires a high degree of self-understanding*

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## 1. Introduction

Almost every year my wife and I make something that is much more than a ritual journey to walk among the pictures in the Musée D'Orsay in Paris. These are by no means the finest pictures to be found even in Paris where the Louvre and the Musée Picasso offer their respective riches, nor are they even the finest pictures of their kind. There is something to be said for the quality of its Barbizon holdings but there are numerous places with a better representation of my favourite painter, Monet.

So why the Musée D'Orsay? Well, the simple answer is that it is the place which holds the largest number of pictures I know well; and I can comment even now on their comparative merits after more than 30 years of total blindness because I have cared enough to keep alive my precise perception of many paintings. At a very practical level, I find little difficulty in remembering Dutch and Flemish painting - even Breughel the Younger is manageable - and the same applies to other schools of realism and, at the other end of the spectrum, the formalism of 20th Century painting from Picasso to Mondrian, has stayed firmly in my collection; but there is something about the shifting perspective of the impressionists that requires constant attention.

In the context of life skills training, the most obvious thing to say at the outset is that a congenitally blind person could not have written this introduction which I have used as an example of the difference between the two kinds of blindness, the congenital and adventitious; and notice, my comments did not begin to be highly specific or technical: I did not make a single reference in my discussion of painting to a named colour, to the quality of light, to the illusion of depth, to conventions on line and form. My point is that to do so in the cause of deepening the aesthetic reach of congenitally blind people would be to embark on an extensive academic exercise, to help the person know why seeing people value painting; but to explain this point is nothing like explaining painting so that blind people can enjoy it. True art tells us about ourselves within a social framework; this kind of artistic explanation can only handle the social framework.

The understanding of the sense experience would also be problematic. What draws the eye in a sculpture is not what draws the unseeing hand; a line that exists through visual occlusion is not a line to a hand that cannot use hand-eye co-ordination to leap between points on that line; there is something eerily opposite between the luminosity of a mirror or a piece of glass to the eye and its lack of texture below the fingers, indeed, in some ways the experience is inverse; the better it looks, the more boring it feels. Which raises some very interesting questions about the way in which blind people are taught to touch, if, of course, they are taught at all. Sculpture, primarily concerned with line and proportion, is primarily a visual medium.

And so we would have to say in the context of total, congenital, blindness, that art appreciation classes would have to be highly specialised; whereas for me, as somebody who went blind after having a little, high quality, short range residual vision, the classes would need a little adjustment, much of which I would have to negotiate on an ad hoc basis depending on the subject: some topics, such as Renaissance religious art, would be simple enough; some, like the changing style of Picasso, would require some negotiation; but trying to imagine an unseen Jackson Pollock would be impossible. In this Lecture we are far away from any life science; we are involved in the art of life.

In this Lecture I will cover the following topics: <ppt2.2>

* Self-understanding and Empowerment
* Preference and relevance; and
* The Structure for life skills training; and I will then go on to some practical skills:
* The domestic environment
* Orientation & Mobility
* Communication
* Style; and
* Relationships

Picking up from my first Lecture, I want to make one preliminary remark: nobody should be allowed to qualify as a professional worker with blind people without formal training in description which should contain at least three facets: <ppt2.3>

* Description for people with standard vision
* Modifications for people with adventitious sight loss
* Further modifications for congenitally or paediatrically blind people

I understand that there is a whole infrastructure that must be put behind this: we need a much better understanding of gradation of vision, psychological outlook and how the two are connected. We need much more understanding of how low vision operates inside three metres and, even more so, inside one metre; but the main point holds in any case; we cannot expect severely visually impaired and blind people to understand the visual world, even in a rather formulaic fashion, unless professionals are equipped to describe it. And if they resist we must break the professional monopoly and import people who are properly qualified in description, such as journalists and novelists.

## 2. Self-Understanding and Empowerment

Blind people live in a surreally unreal world. Indeed that world is so unreal that some people think that viable integration is impossible and that blind people should operate solely with blind peers. I understand the logic behind this position but in a very real sense, society is full of people who do not fit properly; looked at the other way round, society only works because we are all different. There is, however, no doubt that the difference between blind people and those with standard vision is enormous and chronically under-estimated; it follows from this that the problems associated with this reality gap are also chronically under-estimated. Society is deeply disturbed by blindness to an extent greater than that for any other cluster of syndromes - those whom the gods do not kill they make blind - but the discomfort has never been fully rationalised; and so we view the condition with horror and then make very few allowances for those who suffer from it.

Not unnaturally - and this will be one of the underlying themes of my Lecture - the problem is much worse for congenitally than adventitiously blind people. There is a quite commonly held view that it is worse to lose something than not to know what you never had; but this can be objectively dismissed as sentimental, an attempt to make congenital blindness less awful than it really is.

A person who is blind from birth can have no concrete idea about the impact of visual imagery on society: she only knows the theory of violence, pornography, ugliness and, the greatest deprivation of all, beauty. The effects of these deprivations are enormous.

It might be argued that to be protected from visual violence is a good thing; but it tends to generate naiveté which in turn often leads to apparent callousness: naiveté because such people cannot see the face pained or the body broken; callousness because war and death are simplified into generalised concepts. A seeing person retains thousands of images of different sufferers; and the seeing person revolts against the violence and wants to change it not just because of a theoretical principle but because this is reinforced by the visceral experience.

Again, some people might say that those who do not see sexualised imagery and pornography are better off; but its use is so ingrained that it must bear some strong relationship to natural human behaviour. Sexual experience confined to direct contact is necessarily much more limited and impoverished than the rich sexual experience of the visual world. How many of us, making love with a partner, have the image of somebody else in our head? There is a great deal of moralising about the depiction both of violence and sex but they are the foundation of much of our high culture as well as our popular entertainment.

The item that attracts least professional attention is the deprivation of beauty - the bodies of loved ones and strangers, the quality of light, the reflection of objects in water, the instant that a mass of elements coheres and then disintegrates; the sheer sublimity of expression and the immense power of chance. I will deal with this more fully in my final Lecture.

Much of what we think of as the exercise of vision, with people, screens, motor car driving, is relatively close but we must not forget the deprivation of distance vision. Many years ago I went to a conference which was in a multi storey hotel on an island between three major highways. I was trapped there for a week. At the airport at the end of the conference a colleague said to me: "You must have had a lovely week, that really beautiful interpreter could not take her eyes off you!" To which my sad reply was that I had no idea I had aroused any admiration; the young lady had certainly not said anything to me. Perhaps she did not realise that I could not pick up her signals. Often this lack of communication is summed up in the idea that blind people cannot read body language, not only that intended for them but also whole continents of behaviour that were not intended for us at all. Now widen the field of vision to crowds, and look over the rim of the stadium to the snow-capped mountains; or transport yourself to such a mountain and look across the countryside and the city to the sea.

One of the problems which I discussed in the first Lecture and which makes lives so impoverished is the lack of serendipity. Blind people can only grab what is within reach but lack the ability to move to vary reach. Perhaps, then, the greatest problem is limited scope. Without serendipity and the exercise of broad choice, people are limited to what comes their way or to what they can painstakingly reach. This in turn places a massive responsibility on educators and those who are involved in rehabilitation. From the time that a seeing child begins to learn to read, his basic incentive is rebellion. The great benefit of reading is the ability to access material which adults would prefer him not to see. Seeing children invariably read magazines designed for those older than themselves. As children grow older the need for rebellion, for heterodoxy, for subversion, for deceit, grow steadily until there is a major crisis in adolescence. It may go against the grain, but <ppt2.4> education, training and rehabilitation programmes for blind people should provide them with the maximum opportunity to use tools which will give them access to what others would not want them to access.

I realise that there are serious risks with this idea. Teenage girls might easily become entrapped in a chat room by an unscrupulous participant; but can we really advocate a situation either where the teenager can be subversive under surveillance; or not subversive at all?

If the foundation of subversiveness is not well established, trainers will spend the rest of a trainee's life trying to fix the problem. The inbuilt difficulties of exercising choice will be reinforced either by a stultifying conservatism or by a kind of inarticulate rage, the knowledge that one is deeply deprived without knowing precisely how.

This, inevitably, leads me to the core topic of self-understanding. Now there is an often quoted idea that people should simply develop themselves and not care greatly what other people think, but this is idealistic. We all make comparisons with other people; we imitate or choose not to imitate; we suffer from feelings of superiority and inferiority; we gauge consensus; we understand why wearing something or not wearing something might affect the way we are treated. the problem for blind people is that this set of comparators is reduced to an inflexible set of rules: don't wear jeans at a formal dinner; always behave formally at job interviews; be careful about using humour. Just to take these three: there are all kinds of trousers that might be described as jeans and it might not only be appropriate but stylish to wear certain kinds of jeans in a formal setting. In the second case, you have to think differently about an interview for a job in the civil service and in a public relations company. And in the third, not to use humour may sometimes be inappropriate. The problem is the accuracy of the balance that a blind person can strike between a general rule and the need to be flexible.

At this point we are on the border between congenital and adventitious blindness because both groups can suffer in this way; the main difference is that the adventitious person has some clues about the nature of conformity and variance. At the very least the person who goes blind is aware that there is a serious problem which will not be entirely overcome whereas the congenitally blind persons will struggle throughout life to understand what the problem really is.

In the end, it does not matter how hard we try as teachers and trainers, congenitally blind people will always have a relatively poor measure of self-understanding. Ideas such as beauty, elegance, chaos, metamorphosis, wonder will always be thin rather than rich, tending towards the abstract. How we fit into a world which demonstrates all these - and many other attributes - in people and in things but, above all, in ourselves, is a key social and personal preoccupation. What we must do, then is: <ppt2.5>

Professionals, carers and parents must explain to blind children when they are old enough and to adults the extent to which they must be careful to make an accurate assessment of their self-understanding.

Individually, this will often mean being careful not to under-estimate and, therefore, to under achieve, but this lack of self-understanding can produce the opposite effect.

This leads naturally to the second topic of this section, namely, empowerment which is based, critically, upon self-esteem: <ppt2.6>

Self-esteem, properly understood, is a balanced assessment of and exercise of one's individual and social worth.

At root, empowerment is a form of negotiation; even if you are standing at the front of a group, as I am now, making a speech, empowerment is enforcing a deal we have implicitly made that I talk and, for the time being at least, you listen.

The traditional approach to training - and to rehabilitation for that matter - is to supply blind people with mechanical skills but this has had such a low success rate in so many fields of life - work, travel, home care - that we need to take a fundamental look at what we need to do; and I suggest that the root of all our endeavour, closely related to my discussion on the three curricula in the first Lecture should be: <ppt2.7>

The basis of all education, training and rehabilitation for blind people must be their ability realistically to assess their own self-worth as individual and social beings.

We will come to many of these ideas again, so let me now pass on to those who lose their sight. I once made a presentation to Microsoft about how it might improve its performance in the market. As usual, I wrote a clear, analytical presentation; but it contained a good deal of very bad news. So, at the request of the meeting Chair, I began to list where the company was going seriously wrong. I had no idea how my analysis was being received until there was a little laughter almost at the end of my slot. In the give and take of a discussion it is much easier to work out what is going on, even if, as frequently happens, what people say contradicts what they really feel; but in this situation I was like a man in a radio studio talking to a distant audience. The only thing I can say is that at least I knew that was how difficult it was.

What counts with people who go blind is: <ppt2.8>

The degree to which they can assess the relevance to their current situation of what they once saw.

In the Microsoft situation there is no real distinction between congenital and adventitious blindness; but in most of life the seeing person carries a mass of knowledge with him into blindness. The trouble is that the world changes and self-understanding can become inaccurate. I term this concept Anachronescence, that over a period of time the seeing experience becomes anachronistic: film stars, pop singers, fashions, restaurants, one's own children, all change visually. The landscape that you knew is transformed by demolition and construction; your fine head of black hair turns grey; colours and styles go in and out of fashion; your television experience conveys fewer and fewer pictures.

And today we are passing from a temporary period of text centricity in society, back to the picture. Before the printing press it was real life pictures that informed decision making; that is why travel was so important, even though it was so difficult. Then came the printing press; but now written language is beginning to lose its richness, and multi culturalism is pulling us ever more towards the graphical. The cerebral world of text suited blind people admirably so that, for example, the blind English poet Milton was Foreign Secretary in the middle of the 17th Century. Until roughly the time of the industrial revolution it was possible for an educated man in his late 20's to have read every book that was worth reading. This tradition of cerebral, symbolic, articulate literacy gave bright blind people an opening; but the cultural balance is shifting ever more away from the word to the picture.

But it is even worse than this. Not only are the pictures multiplying and moving, giving rise to unlimited nuance; and not only are they moving but the movement is aleatoric and unpredictable; and not only are they unpredictable but their overlapping and cross reference is bewilderingly complex.

To recapitulate a theme in my first Lecture, whereas modernists worked within fixed and stated conventions, schemas, frameworks - whatever you like to call them - postmodern art, discourse, manners, are all shifting phenomena resulting from bricolage, we literally build your own life, culture, style and coherence. The peculiar problem for blind people is that they have a severe imaginative limitation: the congenital blind person cannot judge finely between two offerings of bricolage; and the adventitiously blind person can draw no very precise parallels between bricolage she saw and loved and what is being offered now.

Nonetheless, in spite of the graphic and the improvisatory nature of much of the cultural material we all have to deal with, the whole point of negotiating is to set out what we have and to make deals. The very fact that verbal articulacy is still going to be required in specialist fields means that blind people who develop these skills will have something to offer. What we need to think about, however, is not an autonomous exercise of skills, which is unrealistically restrictive, but teaching blind people to collaborate with others in a negotiated setting. Most of all, we need to understand in much greater depth how we can work with blind people to effect a successful collaboration between the visual and non-visual elements of our culture:

<ppt2.9>

Empowerment is a much broader idea than autonomy.

The visual impairment sector in general, and North America and Scandinavia in particular, have been unhealthily obsessed with autonomy which is an ideological fiction; very few seeing people wish to exercise uniform autonomy, they just wish to choose. Some people have been so obsessed that I have had to tell them the story of the disabled person who lived in an apartment block; when moving apartment, everybody else was allowed to ask for help; but not the disabled person. Even at a less extreme level, we must be careful not to rank autonomy above collaboration; the less good you are at collaboration the more you will value autonomy; but both must be deliberate choices.

Having said that, we do not know very much about the ability of blind people either to act autonomously or collaboratively. What we have tended to do is to identify a series of mechanical tasks and decide on a functional basis what should be undertaken autonomously or with help. A good deal of this parcelling out has been ideological. There has, for instance, been a much stronger ideological force behind independent mobility than there has been behind independent access to private correspondence even though in the past two decades the first has become much more difficult and the second much less.

My conclusion is that the issues we are about to discuss in detail are not ideological in the least; so let me sum up where I think we have got to: <ppt2.10>

To be ideological about life skills is to fall into the trap of defectology.

I can now sum this up in four principles: <ppt2.11>

* What matters is not autonomy per se but the ability to choose between autonomy and collaboration
* That choice will largely be a matter of environment and individual capability but
* Collaboration depends upon self-esteem which is the basis for any successful negotiation
* Negotiation requires that both sides have something to offer

Summary: trainers, carers, family must deepen and broaden the person’s self-understanding.

In turn we must look at individual and collaborative capacity and how this works in a culture. <ppt2.12>

Culture is not the same thing as conformity; people must be free not to conform as long as they understand the cost.

Here, then, in summary, is what each person must know: <ppt2.13>

* What is special to each as an individual as opposed to what is behaviour copied from culture
* The limits of culture within which individuals operate so that each can choose to conform, test boundaries to the limit or deliberately over-step
* The price of conformance and non-conformance

Leading to:

* Action resulting deliberatively not accidentally

One conclusion from this topic which I think is incontestable is that ideology fills a research vacuum. Very near the beginning of this Lecture I mentioned society's horror of blindness but its tendency to be harsh with the social ineptitudes of blind people; if I am right, collaboration, as well as autonomy, present us with a set of problems which require research rather than simple assertion.

Having established a broad framework, let us now look at preference and relevance.

## 3. Preference & Relevance

Talking about research, for six years I edited the *British Journal of Visual Impairment* and in that whole time my favourite quote came from a wonderful rehabilitation officer, John Crossland, who said: "As I carry out my duties I am more often asked how to roll a joint than bake a cake".

This leads us right to the core of our topic but, first, just a note about terminology. I recognise the classical distinction between the training of congenitally blind people and the rehabilitation of newly blinded adults but I will use the simple term life skills training for all cases and use the context to indicate the nature of the trainees.

The issue of trainee preference is a very difficult one. If a burglar goes blind and asks a rehabilitation worker to teach him how to climb ladders, force windows and pick locks then we would presume that the case is pretty clear cut; but if a trainee asks for the skills to do something in private which affects nobody else, such as, for example, rolling a joint, what is the response? On the one hand there is the principle that workers should not collaborate in preparing for activities which are known to be illegal; on the other hand, the worker is a facilitator who should not impose limitations on the trainee. As this is such a tasty little item that I am going to leave you with it as my task is to look at a practical framework; but it does highlight issues which are much less clear cut such as the access by blind people, particularly teenage children, to pornography or information which may be harmful. The trainee may also want to be taught to use dangerous machinery or to travel independently in a big city which may present dangers.

There are three linked principles here: <ppt2.14>

* Always tell the truth, particularly about the diagnostic prognostication of residual vision, unless there is a very strong professional reason not to do so;
* Be realistic in analysing trainee preference
* The trainee must have the last word unless there is strong professional advice to the contrary

Let me illustrate the first point with a story. When I was 18 the ophthalmologists agreed that sooner or later I would lose my residual vision, probably sooner. I undertook a full course of independent, long cane mobility under blindfold. Six years later I lost my sight and when I left the eye hospital after my blinded eye was removed I travelled home alone using my long cane.

Of course, facing blindness as a teenager or losing sight at any time is distressing but lying about it won't make it better. There is no point saying either that blindness isn't really a problem or that everything will be all right; because it is a problem and everything won't be. It is only on this basis that we can arrive at a consensus with the trainee on user preference.

A major component of preference is relevance or context. Here is another principle:

<ppt2.15>

Unless there is a specific indication from the trainee that matters are otherwise, it must be assumed that trainees want precisely what is peer normative.

Now, as we have noted, this can present something of a problem if the trainee is a member of a criminal gang but mostly context is the best starting point. For blind teenagers their real concern might be the difficulties of going clubbing. The major barrier here is that they can't lip read, so they are deaf as well as blind; so they cannot use a conversational strategy to make up for the loss of vision; they can neither select partners visually or aurally; so they must stand around waiting to be chosen; and the chances are that they will be so frozen by their inability to see or hear that they won't be chosen. There is absolutely no point in designing a strategy which simply shows these teenagers how to find the bar and the toilet while the club is closed and quiet. Even if they can manage these simple functions in loud noise, the object of clubbing is dancing, dating and mating. If I just want to dance, go with a group of friends; if I want to date, sort that out in advance; if I want a one night stand, find a different hunting environment, such as a bar where people are accustomed to moving about but where the music is not too loud. Some things can be adjusted on the spot, some things need a different environment. <ppt2.16>

To be blind is to live in a chronically, intensely ergonomic world of planning and severely restricted flexibility.

This clubbing situation would cause problems for any blind person and the experience on the surface would be similar; but of course there is a difference between trying something for the first time which turns out to be difficult or impossible and finding out that your loss of sight has made something difficult or impossible.

The concept we need to hold onto here is the difference between means and ends; if our end is dancing then it is possible in a club with some good friends; if our aim is dating then a club is not the only place to go; if your aim is mating then a club for a blind person would be the last place he would want to go; so we have to analyse the user preference very carefully.

Another point to be borne in mind which is frequently overlooked is that: <ppt2.17>

* Trainees should not usually be trained in a sealed environment
* Training without family, peers and carers is unrealistically difficult

We also have to remember that what is relevant changes.

The model for training which is currently in use in most countries was inherited from medicine; the social services ethic borrows from the centrality of the confidential doctor/patient relationship; we do not share our problems, we hide them. This might be appropriate for the treatment of mental illness or a sexually transmitted disease but it doesn't work in life skills training. Pursuing that medical model, the idea that a blind person can undertake one training course, as if it were a single episode illness, and then live the rest of her life without any more help is clearly incorrect. We also have to deal with changing circumstances; we will go on to see in later section that: takeaway meals are useful; fashions change; and the benign urban independent travel conditions of the 1960s have long gone.

Finally, on the question of relevance, having thought about individual trainee need over time in the light of personal and external circumstances, we have always to return to the possible. Not only is the trainee's time and capacity limited, so are public resources. It is foolish to pretend otherwise. This means that we have to articulate the need for life skills training in a way that accords with public policy. The idea that we can assert a right in this respect is only viable as long as we are not competing with other assertions of rights. the positive side is that dealing with a low incidence problem like blindness does not cost much compared with other problems but the negative side is that it does not really count politically. But looking at life skills training in our sector across the developed world, it is clear that we have serious under performance. I believe this is because the approach has been unsystematic; and so I want to turn to proposals for a rational structure for life skills training.

## 4. A Structure for Life Skills Training

When I finally lost my sight I never undertook formal training. Apart from the video analysis which I will talk about later, I never even undertook informal training. What I was offered was inflexible, traditional, mechanistic training in a residential home; but, as I said earlier, I did have independent mobility skills learned under blindfold. This has changed over the last 30 years but not by as much as I would like. It is still easy, even in Western Europe and North America, to see extremely traditional training based on the residential centre and it is still the norm almost everywhere else. Again, as in the previous section, the problem is that tradition fills the research vacuum.

In an attempt to start us off constructively, let me sketch four, simple, over-arching principles: <ppt2.18>

* Keep everything as simple as possible
* Rank trainee priorities
* Match priorities against input and trainee resources
* Decide what the trainee can control and what must be negotiated

These principles may seem obvious when put down in this way but the process is usually not so disciplined and sequential.

Let us take two cases, a blind school leaver looking for her first job and a person in their mid '40s blinded in an accident.

What the first person needs above everything else is a firm platform of self-confidence that will enable her to face an unpredictable world of relationships and work. The newly blinded person will, above all else, need to stay precisely where he is, in the same relationships, in the same house, in the same job. The school leaver will have urgent needs but these can be treated on an agreed schedule which sets sequential priorities within some sort of theoretically logical framework and will need to learn about herself before we can work out how she will fit into the world. But the recently blinded person will have no time for elegant theory but will need whirlwind rehabilitation: <ppt2.19>

* The current employer, bewildered and instinctively wanting to fire the 'incapacitated' employee, will need some kind of guarantees of competence over a fixed time period, a good example of my earlier point that training must be opened to all concerned parties
* The family will need to know how far it must intervene and when it must stand back, particularly if there are children who tend to be generous in front of outsiders before reverting to selfish and manipulative behaviour in private
* Transport for basic needs will need to be worked out before independent mobility training can be considered

This contrast highlights the importance of simplicity and ranking. The usual life skills training frameworks are both too complex and too rigid.

The third Principle, putting the needs ranking alongside resources, is also underlined in these two cases. As we noted earlier, the teenage blind trainee may have totally unrealistic expectations which rational ranking may down play; in the second case the emotional state of the trainee may well limit trainer inputs. It is important always to remember that the trainee as well as the service provider, has limited resources.

If we look objectively at the history of life skills training during the last fifty years I am sorry to say that the twin pillars of braille literacy and independent mobility with a long cane or a guide dog are way out in front of any other subjects. These are immensely resource consuming for the provider and the trainee and are disproportionately consuming for the newly blinded person trying to hold on to a job; and they are often, incidentally, far too resource consuming for post school trainees.

I have already made reference to the fourth principle, about establishing the degree of trainee control and the balance between autonomy and collaboration but this needs a little more elaboration. Collaboration critically depends upon communication but both categories of blind people are immensely prone to poor communication. The congenitally blind person is frequently never taught how to self-communicate effectively and the newly blinded person too easily slips into the same wooden facial expression and posture. This is more than an aesthetic problem; it severely undercuts negotiating effectiveness because it is one of those areas where society, irrationally, does not make allowances. It can, for example, be extremely difficult for a blind person to know when a neighbour has finished talking so that it is possible to reply; but speech patterns are so different and many people speak so poorly that it is all too easy to interrupt and this error is severely punished.

The natural reaction to this set of problems is to put the emphasis on autonomy and that has been the key failure in the sector. Blind people are not largely autonomous out of choice; they lack the basic skills for collaboration with their seeing peers and they are often deprived of the financial and infrastructural resources for collaboration.

The major question at the conclusion of this largely theoretical discussion is whether the pursuit of autonomy has metamorphosed from being perceived as an unfortunate necessity into being a core ideology. My suspicion is that so much training has been historically formulated to deal with the graduates of residential schools for blind children and has been seen to fail in the key task of collaboration that autonomy has been elevated into an ideology. In a rather strange way, which I hope will emerge from the practical section of the Lecture which is to follow, collaboration is more difficult but it is also much more rewarding than autonomy.

## 5. Practical Skills

I only have time to say a few sentences about my list of practical topics until I come to relationships, when I will try to link the first half of this Lecture with the conclusion.

### 5a) The Domestic Environment

There is no place, we might think, as safe as home, but in fact the opposite is true. Cookers, electric irons, kettles, dangerous machinery, half open doors, greasy floors, electric cables, rucked carpets, cooking knives, are just a few of the dangerous hazards that come to mind; but, behind this, perhaps the worst problem is that home is where we relax, where we stop concentrating, where we smoke and get drunk, where we get out of bed in the middle of the night, where our children feel free to be untidy; and it is also the place where there are the highest expectations of us. We might struggle at work or in the street but we are supposed to master the domestic environment as part of our personal competence rating.

When I was at school I was taught all kinds of home skills but when I lived on my own the two problems I faced were broken glass and butter, neither of which were on the curriculum. All the training I have seen is much too clinical, ordered, sequential; it is like learning how to dance; the choreography is pre-determined, sequential; there are no bystanders throwing beer onto the dance floor and all the other dancers behave nicely; you occasionally tread on your partners' foot or vice versa but that is the worst thing that happens.

For congenitally blind trainees there must be a high level of danger and randomness under supervision; for the newly blinded person there must be constant reminders of danger.

For both groups, the key is self-organisation. I cannot live in a house where I do not control the cupboards and the freezer. For most people who can see, tidiness means putting things where you can't see them; for a blind person orderliness means knowing where everything is as the basis for ergonomic activity.

### 5b) Orientation & Mobility

Unlike the domestic environment where a good deal of routine, tedium and risk is unavoidable, we are allowing, even encouraging, blind people to suffer far too much routine, tedium and risk out in the streets.

The first, and critical point to make, is that the discipline which allows independent travel is known as "Orientation & Mobility" but there is far too little emphasis on the first at the expense of the second. This leads to a micro-management approach to travel which is very similar to the map reader's problem.

If a person has poor orientation they naturally turn to a map. they then spend all their energy on decoding the map instead of using the limited orientation capacity which they have; so the map use complicates the issue rather than simplifying it.

On a broader canvas, although public transport is more widely used in Western Europe more so than in North America, the concentration of energy and resources on independent travel either with a long cane or a guide dog is not unjustified by the demographics: <ppt2.20>

* First, a majority of blind people (approximately 90%) will never achieve the independence goal
* Secondly, there are better things to do with the time and the money than this intensive skills acquisition
* Thirdly, too often the ranking of the skill depends upon professional self-identity rather than client need.

Let me start my critique from one simple position: <ppt2.21>

Blind people want what their peers want; and what their peers want, by and large, is door to door travel in a motor car.

A tiny minority may well want to use public transport, particularly in the inner cities and on occasions where alcohol is to be consumed but sighted people are modest public transport users. Independent travel is both time consuming and stressful and it gets more difficult as one gets older and takes on additional responsibility. Personally, I find in myself a world of difference between an adrenalin-saturated young man, bent on maximum independence, with a high concentration level, few responsibilities and electric reflexes; and the man I am now, risk averse, more concerned with outputs than inputs, with great responsibility and slowing reflexes.

My default position, then, is that: <ppt2.22>

All blind people should be entitled to a taxi service responsive to their basic education, employment and lifestyle needs.

I short, we need to <ppt2.23> take a much more rational view of mobility, including

* The cost/benefit of current services,
* The economics of a taxi service and
* A true assessment of stress levels

In short, we need to turn travel from being a blindness icon into being a servant of chosen ends.

### 5c) Communication

Having dealt with the iconic status of independent travel, I simply want to remind us of the professional self-identifying role of braille dealt with in my first Lecture and I therefore only need to make three points: <ppt2.24>

* Communications strategy should start with a needs analysis
* That analysis will demonstrate that reading and writing contracted braille is only appropriate for a tiny minority of academic and professional environments for both blind trainees and newly blinded older people
* The time and resources for learning the braille must be assessed against other client needs

There are clear differences here between congenitally and adventitiously blind people which will be immediately apparent when I set out some basic communications principles: <ppt2.25>

* Communication consists of accessing, processing and creating information products
* Effective communication requires a high level of media literacy which enables the user to assign weight and value to content
* Effectiveness depends critically upon integrating information in collage or in even more holistic fusions

We can see immediately that these three propositions present all blind people with problems but the problems for congenitally blind people are much more acute.

As a starting point, we can see that integrating text with other text presents some mechanical problems but, intellectually, it is not very daunting; it is the way we write essays and the way in which we adjust our opinions through time; in this context we both observe and deliberately break rules. The same process goes for music where we can see how different tunes relate and might be merged; we can learn the rules for the sonata and then break them. For the person who can see the same process obtains for the visual arts; images can be fragmented, superimposed, enlarged, contracted and overlapped; and, again, there are visual rules which can be observed or broken as, for instance, in the notable case of Escher.

We have already noted how blind people are deprived if they lack useful residual vision but the problem is complicated by the way in which we mix our media. We do not just talk like our television celebrities, we imitate their facial expressions and their gestures; we use graphical shorthand for huge tranches of prose; the old saying is that a picture is worth more than a thousand words but I might now say that a logo is worth 100 Euros.

Not only do we live in an intensely multimedia world but we are now in postmodern culture: most of what we build is bricolage; we are intensely self-conscious; the layers of parody and self-deprecation are multiple; the Danish cartoons of the Prophet flash round the globe and are added to by a French cartoon much more offensive than the originals; people who apparently have nothing useful to say become world celebrities.

Underlying this richness is the human need to exercise our most distinct faculty, that of pattern recognition. Blind people can be taught how to exercise this faculty in language and text but in multimedia the task is daunting and blind people are surely a prey to naive, over-simplified, pattern presentation.

Faced with this complexity our response has been rather feeble. For the past decade we have concentrated on web accessibility as if it were the holy grail. In the rather narrow sense of access to text, of course web accessibility is crucial as it will, for example, greatly enrich the braille and enlarged print experience and open up global text libraries in synthetic speech; but we should not concentrate on this to the detriment of giving blind people some understanding of the multimedia world in which they live.

Further, the concentration on accessing and processing has led us to place less value than we should on creativity.

As we know, creativity has two major dimensions: first, it give pleasure to the creator; secondly, it gives the creator worth in the perception of peers. I fear that we are so embarrassed about the doubtful outcome in the case of peers that we forget the intrinsic pleasure of creativity. As I have already noted, to be blind is to live in a highly organised, somewhat bleak physical, emotional and intellectual environment where creative outputs would be of immense assistance. And, as I said in my first Lecture, I have often wondered why the proportion of blind musicians who explore music through jazz is such a small percentage. For it is, after all, in creativity where we give instead of just taking as assessors and processors. I talked earlier about our problem with understanding our world but part of the way we can compensate for this lack is by learning how to project ourselves self critically into the world and that means that we must learn to create ourselves and to create output which we can use in negotiation.

This must start at a very basic level. When I lost my residual vision I went to a friend who was an out of work film maker. He shot video of me for days on end, pointing out where I was making incorrect gestures. Before you can do it right you have to make sure you are not doing it wrong. Fortunately, as my experience shows, much of this can be taught. Creativity is not the preserve of Beethoven, Shakespeare, Titian, Kundera and Smetana.

If we are to get the balance right we need to be much more constructive and this essentially means exploring creativity in two ways: first, the best form of assessment is peer review, so blind people should be encouraged to enjoy the work of other blind people but; secondly, public creativity requires a degree of empathy with the public and this needs to be taught; in many ways to make a pot requires the same kind of judgment as to buy a dress.

My fourth Lecture will deal with information technology and its role in education, training, rehabilitation and employment.

## 6. Style & Relationships

Before coming to some conclusions, I want to leave hard topics to one side and deal briefly with two rather softer but important subject, Style and Relationships.

### 6a) Style

This Lecture has been peppered with references to style. You can see why it is such a difficult subject for blind people. In earlier times style was the preserve of the wealthy but it is now a universal preoccupation which is inseparably bound up with individual and social worth.

I have already mentioned the logo; I might equally have referred to the lacing of trainers, the orientation of furniture, the colour of nail varnish, the shape of wine glasses, the angle of a hat, the vogue in fitness, the reach of a celebrity, the selection of clip art, the length of a skirt, the way to eat chicken. The list is endless but each component says something not so much about us as about our relationship to the world and the way we choose to conform or rebel, the extent to which we choose to change with the times or refuse to change, the degree to which we are prepared to ease relations or keep them tense, the level of control we wish to assert. In other words, style is a plastic phenomenon which therefore requires constant nuance; and, as we have seen, blind people are bad at nuance. This is an area where no amount of effort or rule making can quite pay off. It is an area where autonomy is most desired but where an intermediate intelligence is most vital.

So far I have not talked specifically about intermediate intelligence but it might just be the one idea which sums up all the principles I set down earlier: <ppt2.26>

Blind people do not need rigid, self-regarding, self-consciously professionalised trainers; they need strong, rational, sympathetic intermediate intelligence.

As in so many other sectors in the postmodern world, the supply side of life is so demanding that we need brokers.

### 6b) Relationships

There is one area where intermediate intelligence is most needed and least wanted and that is in our development of personal relationships.

This is a highly technical area which demands a lecture all to itself but I will deal with some aspects of the problem in my highly personal fifth Lecture; so I will satisfy myself here with two basic principles: <ppt2.27>

There is no such thing as a perfect, multi-faceted relationship and, therefore

* Blind people are not necessarily limited to less successful relationships than seeing peers; but
* They will have to maximise their strong points and compensate for their weak points.

For people who go blind the problem is adjustment to a new world of narrower options of expression and empathy, for a person who is congenitally blind the problem is learning a grammar of physical and emotional expression that is flexible enough to be viable until such time as mutual rule making is a stable phenomenon.

Although the raw material of such a subject is love, the ecology is competitive. Perhaps the best that can be said is that much of what we do in forming and maintaining relationships relies upon self-modified behaviour which we learn and which, to some extent, can be taught but, after that, we are on our own.

That is the modernist theory but I do not think that we can limit ourselves to it any longer. When relationships started with the nucleus of the family and radiated outwards through mediating structures like the town, the church, the place of work, gradualist self-sufficiency was, at the very least, theoretically possible. Blind people might be over patronised, misunderstood, less prosperous than their peers, but they were, if in a rather impoverished way, viable. In our world of almost universal automobile ownership, massive social mobility, episodic and often overlapping intimate relationships, multiple complex dependency networks, all within a context of voluntary, unpredictable, behavioural norms, the modernist, structuralist approach is totally inadequate.

Working out of an institutional base we are not in a very strong position to deal with this new culture and there are no easy solutions. This is an area which requires a great deal more thought than we can give it today.

Underlying all the practical problems that blind people face, however, there is one topic which is hardly ever openly discussed and that is the issue of the power deficit.

## 7. The Power Deficit

Interestingly, as a side line, the move to establish what we call "integrated education" for blind children borrowed its language from the race politics of the United States where the Civil Rights movement was calling for racial integration in schools; another term to emerge from this broad political movement was "Black Power" which, in the feminist movement, modulated into the term "Empowerment".

The word has hardly infiltrated into the blind and visual impairment sector. There has been a good deal of rhetoric about organisations "of" and "for" blind people in which the ideology of consumer control in the organisation "of" has been dominant in the last three decades, but if we look at products, outputs, training regimes, the two kinds of organisation are just about indistinguishable. Where power has been exercised by blind people it has been in organisational governance, a kind of sublimation of more worldly desires.

In a world which works on power relationships I am deeply suspicious of any discussion of the disadvantages of being blind that does not deal with the issue of power.

There are always the irritating and trivial problems of having to wait for people, being stranded in strange space, being served food without explanation, in other words, being on the wrong end of all kinds of carelessness, thoughtlessness and disrespect.

But the question I often think about is this; if you are negotiating a hard bargain with another person, how are your power relationships affected if you need his help to find the toilet? I suspect it might be a "him" thing; I would like to think that women negotiators are more humane, more fair, more respectful; but the root problem is the same. No matter how effective the training may be in autonomy and collaboration, no matter how well we help blind people to acquire self-esteem and as great a degree of self-understanding as possible, there is still the chronic power deficit. Again, some moralists will say that the deprivation of power, like the protection from depictions of violence and pornography, may be a good thing, but meekness is a voluntary virtue quite different from enforced powerlessness.

The apparent answer is for people in a negotiating position to concede a degree of power, to accept the power assertion of blind people, but that may be regarded, in itself, as artificial. Still, I suspect that is the best one can hope for.

It is in the nature of the exercise of power that the main purpose of constructing society is to limit how it is exercised and, in the best of circumstances, to cultivate self-limitation.

There are two quite proper responses to this problem: the first is to accept the natural limits of one's power. Blind people are by no means unique in suffering from an intrinsic power deficit. The proper reaction is to make alliances with other people with power deficits so that the sector of the population with a natural or acquired power surplus are forced to limit their advantage. This is why it is in the interests of blind people to make alliances not only with disabled people but with ethnic minorities, poor people and women.

The second quite proper reaction, which we have concentrated on in this Lecture, is to analyse individual power advantages. This has often emerged in the distorted form of assuming that blind people have peculiarly sensitive hearing or even "A sixth sense". Now we may be annoyed by these ideas but they do at least reflect society's wish that we should have some inbuilt advantages to compensate for our deficits. This point simply underlines the importance of working through the whole set of competences of blind people to analyse and develop their strengths.

Of course, nobody would argue that exercising economic power will compensate for a power deficit but it surely helps. Again, it might be argued that this is the granting of a concession but the people who usually argue this point are the richest blind people, safe with their institutional salaries; I have never heard it argued by the poor.

Perhaps the central problem is that until blind people can be honest about their disabilities and separate those caused by their impairment from those caused by other factors, it is difficult for professionals to be honest in what is an ideologically oriented consumer forum. As I will show in my final Lecture, the sector - mirroring much of the rest of society - is held back by prejudice, process and mediocrity.

Before ending on a personal note, I would sum up the situation as follows: <ppt2.28>

* Blindness is one of a range of characteristics that generates a social and economic power deficit
* Good analysis and state provision can mitigate some disadvantage; but
* Integrity and calculated risk are essential additional factors

## 8. Conclusion

Which brings us back almost to where we began. At the very heart of our enterprise to help blind people to enjoy fuller lives as citizens, creators, consumers, partners' family members and friends, the central concept we need to hold onto is the development of a clear, complex and reflexive self-understanding which relates to the rapidly changing, complex and self-consciously ironic environment in which we live.

As we saw in my first Lecture and will see again in my Third, we are moving from the concreteness of modernity to the plasticity of postmodernity but before we can look for new solutions for new problems we need to understand the novelty of our underlying and overarching condition.