

Comparison of the differences between IL vs. the medical model

	MEDICAL MODEL	INDEPENDENT LIVING
How problems are viewed...	the person needs to be “fixed” or “cured” to “fit” into society	persons with disabilities can exist & function by themselves in various environments including the socio-economic, political, and cultural
Solution to the problem...	treatments, case management, volunteer or other work based on pity	consumer control over options & services, peer role models/leaders, advocacy, barrier removal, self help
Role of the person...	person with the disability is a “patient”, “client”, or needs to receive charity	“consumers”, “customers”, or “users” of services and products just like anyone else
Who is in control?	professionals	the person with the disability or his/her choice of another individual or group
Desired goals...	maximum self-care with ADL’s (activities of daily living), employment via the VR system, no “social misfits” or “manipulative clients”	INDEPENDENCE occurs because of control over options for living in an integrated community of choice, pride in unique talents, identity about disability is positive