Body Image Then and Now

My Experience of Disability in Argentina

by Sara Leiserson

Dans cet article, l'auteure compare la façon dont une personne handicapée est perçue en Argentine comparativement au Canada. En Argentine, par exemple, les récents développements politiques ont mené à une désintégration des services sociaux et par conséquent, les femmes handicapées se retrouvent dans une situation sociale et financière des plus précaire.

During a recent visit to my native country, I observed a significant difference in the way in which friends and others reacted to my disability, compared with friends and others in the Canadian environment. Argentine social services are on the "back burner," and support for persons with disabilities is largely unavailable. The importance and particular characteristics of the ideal body image for Argentine women is related to many factors—geography, tourist trade, gender relations, and other social, psychological and historical factors. There is an emphasis on 'beach activities,' which affects expectations for women and is connected to the marginality/invisibility of women with disabilities, and also to the status of Argentine women in general.

Some facts about my country

Considering the present economic situation, it is difficult for Argentines to remember that at the turn of the century Argentina ranked among the ten richest nations of the world. The last military dictatorship (from 1967 to 1983)— my reason for leaving the country—culminated in severe violations of human rights. Its attempt to regain control over the Malvinas (Falklands) Islands in 1982 led to a bloody war between Argentina and Great Britain that ended with Argentina's surrender and the country's complete economic bankruptcy.

Once democracy was restored in 1983, the country had to face an 'internal war'—a huge debt and an uneven distribution of wealth. The country's infrastructure has been deteriorating ever since. To complete this portrait, it is necessary to mention that the country does not have a welfare system. Argentina is a Catholic country which means that it assigns responsibility for the health, education, and welfare of the community to the Church. People without economic resources rely heavily on the Church or charitable organizations for assistance. On the other hand, the 'lucky' ten percent of the population that is well-off can afford a higher standard of living, better health care, and education, similar to the lifestyle the upper middle class enjoys in North America.

Lay charity fills in where the Church proves insufficient,

creating economic dependence on the wealthy oligarchy of Argentina. Government assistance is only possible when the country is economically affluent. The situation reverses completely during difficult economic periods, like the present one. During the polio epidemic in 1954, the country was living an economic bonanza. Consequently, many rehabilitation programs were organized, as well as massive free vaccination. The Centre for Disabled Rehabilitation (Centro de Rehabilitacion del Liciado) was founded then, and it still exists today in the same shape and form—but no new technology has been added since 1954.

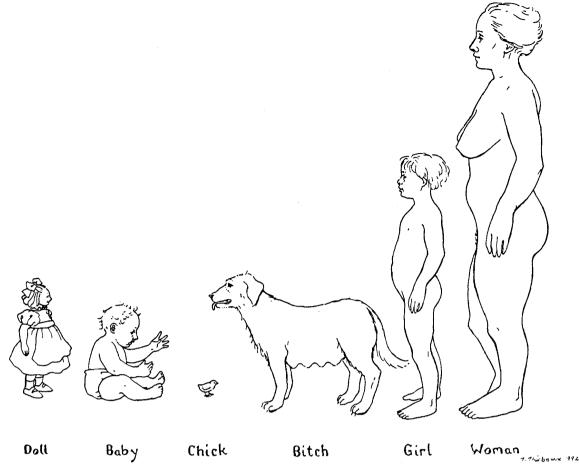
Dependence is the most striking difference I found between Argentine and Canadian women with disabling conditions. While in Canada we are involved in self-help and independent movements, in Argentina, women with disabilities are completely dependent on their family, partners, adult children, the church, charitable institutions, and so on. Upper and middle class women with disabilities, however, are able to afford help.

In a male chauvinistic country, like Argentina, women with disabilities are worse off than men with disabilities. Women become totally isolated, immobile, and confined to the house. It is much more difficult for a female than for a male with a disability to participate in public activities or meetings, unless special efforts are made to help her do so. For women, who usually do not do paid work, there is no disability allowance, no environmental adjustment, practically no access to education or training and therefore to employment, and no opportunity to become involved in self-help movements. Traditional patterns and deep-rooted prejudices against disability are far more intense in the rural areas and more difficult to change, making the situation of people with disabilities in rural areas intolerable.

Body-image and exaggerated fear of ridicule

Dressing fashionably is a national cult in Argentina. Every time the news is on T.V., it ends with a fashion show. This means that the public in Argentina is constantly bombarded with images of the commercialized ideal of womanhood — young, beautiful, active, and physically perfect—to an extent that strips the woman with a disability of her self-respect and sexuality, and presents her not as a person but as an object of charity and pity.

Most of my life I lived by the sea, where middle class Argentines spend their summer holidays. Women generally



work out all year in order to present an almost perfect body when they go to the seaside. There are 50,000 inhabitants in my home town and eight gyms! The centrality of body image in determining self-esteem varies from person to person. It is certainly more important to women than to men, given the emphasis that is placed on women's physical appearance, especially in the media.

For women in Argentina and in most of the western world, looking a certain way is seen as important in finding a male partner or husband. I've already mentioned how the stigma of disability in Argentina, with its myths and fears, increases women's social isolation. Having a relationship with someone depends on having the social opportunity to meet people which is practically impossible if one has a disability and is perpetually housebound. The fact that I am married was shocking news to my friends. Most of them felt sorry for my husband who had the "bad luck" of having to deal with a wife with a disability.

This was normal to me until I left. At that time, I was not disabled. I was diagnosed with multiple sclerosis in 1987. From this date on, every time I return to Argentina, the lack of facilities for people with disabilities strikes me. More than this, disability is not at all visible. During my stay last year, I travelled two thousand kilometres and never once met another person with a cane or in a wheelchair. Furthermore, I am not willing to take the pseudo-pity that some of my friends displayed. I did not choose my disability, but since I have it, I will deal with it as best I can.

It is true that having a disability is to be disadvantaged. It means being unable, most of the time, to participate in the social and economic activities that most people take for granted.

It means confronting the negative attitudes of others and sometimes internalizing those negative reactions until they become part of the disability itself. However, at the same time—and this is what my friends did not know—it means gaining the additional insight that comes from encountering a wider range of experiences. It can mean overcoming enormous challenges, leading to a sense of achievement and fulfillment. It also means a sense of solidarity with other oppressed people and the emergence of a social and political community with other people with disabilities.

Conclusion

On account of my disability my movements are very slow, I get tired very rapidly, and I need to sit down very often. This, in a way, gives me the opportunity to observe and think, something I did a lot of during my last visit to Argentina.

The Argentinean experience should serve as an example for Canada in these economically difficult times. We have already seen where the government's budget cuts are directed, and women are among the first targets. It is important for women with disabling conditions to defend the benefits we need. In Argentina, lack of economic resources completely destroyed the emerging welfare system. The same dangerous situation could happen in Canadian society.

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