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Reading disability in Keller' *The story of my life* (1903) and Palacio' *Wonder* (2012)

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To *my partner*
Gaya

To *my beloved parents*
Yamina and Salah

To *my brother Abdeslam*
and my sister Asma

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Abstract

This research has explored the issue of disability in Keller's *The story of my life (2017)* and Palacio's *Wonder (2012)*, focusing on the personal struggles and social responses that shape the lived experience of the protagonists. The dissertation has investigated the complex relationship between the individual and society by revealing how impairments are not only medical conditions but also socially constructed identities. In the first chapter, I have examined the "medical model" of disability, analyzing how Helen's deafblindness and August's facial deformity are framed through diagnosis, treatment, and the search for normalization. This chapter highlights how both protagonists are shaped by medical authority, family intervention, and internalized expectations of "cure," reflecting the limitations of seeing disability purely as a physical defect. In the second chapter, I have focused on the "social model" of disability, particularly how Helen and August are marginalized, excluded and rejected because of societal attitudes. This analysis sheds light on the way social barriers such as prejudice, exclusion, and stigma play a significant role in shaping the challenges faced by disabled individuals. Throughout this research, I have borrowed my methodology primarily from Tobin Siebers' theory of disability and Peter Burke's sociological analysis of family dynamics. Additionally, I have incorporated critical references to Michel Foucault and Talcott Parsons to enhance my understanding of medicalization and deviance. This study has reached with the following findings. First, both Helen's and August's experiences reflect how the medical model can isolate individuals and reduce them to their impairments, as they are considered mere objects of medical intervention and correction. Second, both works illustrate the social model of disability, showing that exclusion and discrimination often arise not from the impairment itself, but from external societal factors. Thus, this study offers a new comparative perspective on how disability is constructed, resisted and redefined in literature across historical and cultural contexts.

Key words: Deafblindness, disability, facial deformity, marginalization, normalization.

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I. General Introduction

Throughout my enriching academic journey as a student in the department of English at Mouloud Mammeri University, literature has always been an endless source of fascination that allowed me to explore different worlds and understand the complexities of human nature. As I progressed in my studies, my appreciation for literature deepened even more, particularly when I was introduced to comparative literature during my Master Two studies majoring in the field of Literature and Civilization. This field highlighted the deep literary connections between texts belonging to different geographical locations and different time periods, which encouraged me to analyze literature with isolated texts. In the meantime, I also discovered how literature can portray the many layers of human experience, and I began to focus on areas with significant social importance.

One such area that captured my attention was disability studies. To expand my understanding of this topic even more, I conducted further research, which led me to choose a comparative study of the portrayal of disability in literature—something that resonated with me both personally and academically. Academically, I was first introduced to this field last year in the module of Contemporary British Literature, where we explored disability in literature through different works such as Lessing's *The fifth child* (1988). As for my personal experience, I grew up with a severely disabled uncle, and I witnessed the mental breakdowns, obstacles and societal judgments he faced and the way his voice was unheard even by his close family members. These experiences sparked my curiosity and motivated me to learn more about the challenges faced by people with either mental or physical impairments. Today, disability in literature is increasingly regarded as an important subject that sheds light on personal struggles as well as social perceptions. For these reasons, I chose to compare two prominent literary masterpieces that address this topic: Keller's *The story of my life* (2017) and Palacio's *Wonder* (2012). Despite being written in different time periods and shaped in different literary forms, both works offer profound explorations of disability, resilience, and societal acceptance, making them a perfect match for a comparative analysis.

The justification for comparing the aforementioned books, then, lies in my deep interest in the field of comparative literature and its methodologies in addition to my curiosity about disability studies. Moreover, I have decided to examine these works together due to their common thematic concerns, particularly their portrayal of disabled characters and their struggles because of social attitudes. Despite being produced in different decades, the two texts offer extraordinary depictions of disabled protagonists navigating between mental and social challenges. This study, therefore, focuses on literary similarities; it aims to demonstrate the similarities between the two literary works by emphasizing how they contribute in shaping reader's understanding of disability, resilience, acceptance and societal gaze.

1. The Review of Literature

It has been widely acknowledged that Keller's *The story of my life* and Palacio's *Wonder* are significant literary works that address deep and meaningful themes such as perseverance, identity, and social acceptance. On the one hand, Keller's autobiography, shaped by her extraordinary personal life and advocacy, has inspired generations of readers and captured their attention with her determination and the challenges she overcame despite her disability. On the other hand, Palacio's *Wonder* was inspired by a real-life encounter, and it has won numerous awards, including the prestigious Mark Twain Award. The work depicts the struggles of August Pullman, a kid born with a facial deformity and the way he navigates the complexities of social acceptance. Nevertheless, both works have received considerable literary criticism from different scholars and researchers.

To begin with, Keller's *The story of my life* has been widely recognized and studied as a notable autobiography of the early twentieth century. This popularity made it a target of a great deal of criticism. Kleege (2000), in her essay "Helen Keller and 'the empire of the normal'" critiqued *The story of my life* as a quintessential "triumph over adversity" (Kleege, 2000, p.322) narrative that shifts focus from Helen Keller herself to her mentor and teacher, Anne Sullivan. According to her, Keller, in an attempt to make her autobiography accessible to seeing-hearing readers, depicts Sullivan as the true protagonist, implying that her success resulted primarily from her teacher's dedication and guidance rather than from her own intellectual and sensory experiences. Kleege asserted that Keller "represents Sullivan as her savior who first liberated her from darkness and silence through the gift of language and then championed her cause against individuals and institutions that stood in the way of her educational goals" (p. 322). While contributing to the book's widespread appeal, this portrayal raises concerns regarding Keller's autonomy, as it reinforces the idea that her achievements were dependent on external guidance rather than personal capability. In addition, Kleege discussed the long-standing controversy over the authenticity of Keller's narrative, particularly the way she described sensory experiences she could not have directly perceived. Critics questioned how Keller, as a deaf-blind writer, could vividly depict colors, sounds, and visual imagery, leading to doubts about whether her knowledge was genuinely her own or simply communicated through her teacher Anne Sullivan. Kleege argued that "since Keller is at such pains to express her gratitude and devotion to Anne Sullivan, it is easy to get the impression that she had no true first-hand experience" (p. 323). This criticism raises serious questions about the nature of Keller's autobiography, suggesting that while *The story of my life* remains an inspiring tale, its authenticity as a completely and purely personal narrative has been a subject of debate.

Building on this scholarly discussion, another researcher who has examined Keller's work is Nielsen (2009) in her journal article entitled "Using biography to teach disability history". In her analysis, Nielsen argued that biographies can be used as a powerful tool to teach disability history, but they often reduce figures like Helen Keller to simple stories of inspiration. She criticized the way Keller's *The story of my life* is used in classrooms, explaining that it is often framed as a motivational tale rather than a material for historical analysis. She stated,

> This method may make for a more manageable student body, but it teaches nothing about United States history. Moreover, it disparages people with disabilities while reducing them to one-dimensional characters. Though students often assume that disability is an identity that trumps all others, people with disabilities, just like those without, characterize themselves in multiple ways—by marital or parental status, as a member of a certain career, by racial or sex category, by religious or political affiliation, by region, or simply as enjoyers of a specific hobby. (p. 41)

By focusing only on Keller's struggles and triumphs, these narratives ignore the complexities of her life and fail to acknowledge the broader social and historical forces that influenced her experiences. Instead of presenting Keller's story as one of personal perseverance, Nielsen calls for a deeper perspective, emphasizing that disability itself is not a fixed concept but one that changes over time. As she put it, "Strong (auto)biographies show that even definitions of disability change over time because they are shaped by both large structural factors and the physical bodies of individuals" (p. 41). This means that how society understood and responded to disability evolved across history, and by studying Keller's life in this broader way, we can gain a more meaningful understanding of how disability is shaped by cultural and historical factors rather than seeing it as merely a personal obstacle.

Likewise, Palacio's *Wonder* achieved remarkable popularity upon its publication and has since become the subject of significant criticism, with scholars investigating its portrayal of disability and disfigurement. Among these scholars there is Wheeler (2013), who argued that *Wonder* engages with three competing models of disability: the "medical model", the "social model", and what she introduces as the "monster model", In her article entitled "No monster in the fairytale: Wonder and the new children's literature". She explained that while the medical model isolates August Pullman due to his surgeries and hospital years, and the social model suggests that it was society's reaction and attitudes that disabled him, the monster model reflects the way other people viewed his appearance. Wheeler emphasized that Palacio challenges and eventually destroys this monster model as August went from being regarded as a source of fear to becoming a completely accepted member of his community. She declares,

> By invoking the creatures of fantasy, Palacio speaks in the native language of twenty-first-century kids raised on movies, comics, and video games. Wonder takes too-familiar stories off of August's shoulders, as if removing a Halloween costume. When other kids look at him, grotesque figures from popular culture emerge from their subconscious. (p. 345)

By calling upon and then subverting these horror-related images, Palacio shifts the narrative from alienation and bullying to acceptance and thereby reinforces the novel's overall message of inclusion.

Another scholar who has analyzed the novel is Casalme (2016), in her study "Engaging children in discussions of disfigurement and disability: the wonder of Palacio's Wonder", where she investigated how children interacted with *Wonder*, specifically in discussions of disfigurement and disability. Through interviews and focus groups with middle school students, she discovered that children's perspectives shift when critically discussing the novel. She contended that while *Wonder* follows the problematic trope of depicting disabled individuals as sources of inspiration, it also challenges social perceptions by demonstrating that "societal attitudes are more disabling than the disfigurement itself"(p.35). Furthermore, she argued that readers tend to simplify themes of bullying and disability until guided toward deeper reflections. Casalme (2016) stated, "These associations led them to separate Auggie from the disfigurement as opposed to untangling their own biases towards disfigurement"(p. 35). This indicates that while *Wonder* initiates important conversations, structured discussion is essential for young readers to grasp the complexities of disability representation.

2. Issue in Context

From the above review of literature, it is clear that the two selected books have been widely analyzed from different angles and perspectives. However, to date and to our best knowledge, no study has so far ventured to compare the two books together through the lens of disability studies. Thus, this study seeks to investigate how both protagonists are portrayed within the context of disability, personal growth and the influence of their social environments.

Throughout this research, I will explore how *The story of my life* and *Wonder* depict disability not only as a pathology, but also as an experience constructed by societal influences. To accomplish this, I will first examine how both texts depict disability through a medical lens by focusing on diagnosis, treatment and the role of expert intervention in shaping personal identity. This includes analyzing how Keller and August navigate medical authority, rehabilitation and expectations regarding cure, adaptation and normalization. Second, I will consider the social dimensions of disability, concentrating mainly on the challenges of exclusion, stigma and societal expectations placed on disabled individuals. This part of the research will examine how education, family dynamics and peer relationships affect Keller's and Auggie's experiences, as well as how they conform to or resist dominant narratives of disability and difference. Furthermore, I will highlight how both texts give a voice to disabled individuals by using non-traditional and sometimes unreliable narrators. Both Keller and August challenge conventional portrayals of disability by telling their own story in an attempt to engage readers deeply with their experiences.

Without further ado, this research aims to provide a new viewpoint on the representation of disability by putting *The story of my life* and *Wonder* under a comparative analysis. By doing so, this study will offer new insights into how texts of literature belonging to different genres and historical periods construct and challenge the meaning of disability and the way such works function as motivational stories that aim at giving voice to disabled individuals who are often unheard of and marginalized.

In this context, I will take my theoretical bearings from a range of critical perspectives that provide insight into the ways disability is constructed, represented and experienced. First, I will employ Siebers' *Disability theory* (2008) to examine how *The story of my life* and *Wonder* present disability by emphasizing the role of societal perceptions, medical intervention and personal determination in shaping the lives of both protagonists. Second, I will rely on Burke's *Brothers and Sisters of Disabled Children* (2004) to examine the role of family relationships in both literary works, particularly how Keller's and Auggie's families deal with the challenges of disability and contribute to their social inclusion or exclusion. These perspectives will pave the way for a deeper understanding of how the two texts represent disability within their unique cultural and historical contexts. This can also be analyzed through other relevant theories when needed, such as Parson's *Social system of deviance* (2005) and Foucault's *The birth of the clinic* (1993)*, The eye of power* (1980) and *Discipline and punish* (1991).

II. Methods & Materials

A- Methods

Disability studies is a relatively new field of study in literary criticism and social theory. It allows readers to discover how authors use different literary genres such as fiction, poetry, autobiographies…etc to portray characters with disabilities by highlighting their struggles and how they manage to survive in a world suffocated by social injustice. It has to be noted that individuals with physical or mental impairments did not have any voice before; they were all the time neglected and mainly isolated from ordinary people. Thus, Disability studies came to give a voice to the voiceless and to create a record of their real life experiences. In the case of my research which compares Keller's *The story of my life* and Palacio's *Wonder*, I likely focused on two prominent literary theories that appeared to be suitable for my topic, which is analyzing both the medical and social models of disability. In addition to that, I relied on other secondary theories to support my study and further sustain the research objectives. Building on what has been previously stated, my research is based on Tobin Siebers' *Disability theory* (2008) and Peter Burke's *Brothers and sisters of disabled children* (2004), along with Talcott Parson's *The social system* (2005) and Michel Foucault's *The birth of the clinic* (1993), *The eye of power* (1980) and *Discipline and punish* (1991).

1- **Tobin Siebers' *Disability theory* (2008)**

Tobin Sierbers (1953-2015) is a distinguished scholar within the field of Disability Studies. He is particularly known for his influential literary work, *Disability theory* (2008). In his book, Siebers criticizes the conventional conceptualization of disability and claims that disability should not be seen as just a physical or mental impairment, but also as a social phenomenon that is influenced by culture and social attitudes. In this context, Siebers (2008) wrote,

> Disability studies does not treat disease of disability, hoping to cure or avoid them; it studies the social meanings, symbols, and stigmas attached to disability identity and asks how they can relate to enforced systems of exclusion and oppression, attacking the widespread belief that having an able body and mind determines whether one is a quality human being. (pp.3-4).

One of the key arguments of Siebers' book is that the concept of ability itself is socially built. To explain this point, Siebers (2008) noted that "the ideology of ability at its simplest is the preference for able-bodiedness[….]it defines the baseline by which humanness is determined, setting the measures for body and mind that gives or denies human status to individual persons" (p.8). This reveals that social values have placed able-bodiedness as the standard of what is considered fully human and normal which eventually leads to the marginalization and isolation of disabled individuals. He argues that societies support able-bodied standards which causes the increase of exclusion and social discrimination by promoting the idea that disability is equal to insufficiency or weakness.

This ideology of ability has been clearly observed in my research of Keller's *The story of my life* and Palacio's *Wonder*. Both books in fact portray protagonists who are marginalized and isolated by the social expectations attached to physical appearances and ability. As Siebers (2008) explained, "disability defines the invisible center around which our contradictory ideology about human ability revolves. For the ideology of ability makes us fear disability, requiring that we imagine our bodies are of no consequence while dreaming at the same time that we might perfect them" (pp.8-9). This means that societal values create contradictory standards through the glorification of physical perfection and the stigmatization of bodily different people. In *The story of my life*, for example, Helen's deafblindness puts her in the position of an outsider in an able-bodied world, while in *Wonder*, August witnesses daily exclusion and bullying because of his facial deformity. Both characters must navigate and negotiate environments built upon this invisible ideology, and this confirms Siebers' argument that such norms govern how disability is perceived, feared and socially alienated.

The Construct of Ability and Social Barriers

Siebers introduces the idea that society's framework of valuing ability establishes unachievable expectations, as disabled individuals were mainly positioned as inherently inferior. As he clearly explained, "disability has been a medical matter for as long as human beings have sought to escape the stigma of death, disease, and injury. The medical model defines disability as an individual defect lodged in the person, a defect that must be cured or eliminated if the person is to achieve full capacity as a human being" (p.3). In other words, Siebers views that this ideology reinforces discriminatory behaviors and alienates people who do not conform to traditional ideals of ability. This is why he calls for an examination of the power of social norms that structure ability in order to expose how they create perceptions of disability and perpetuate social injustice. To clarify further, Siebers observes that disability is not merely a lack of ability, but rather a socially reinforced judgment that encourages exclusion and prejudice by prioritizing idealized norms. Therefore, disabled individuals face social bias as they are considered inferior and not worthy of equal treatment within society.

Social Identity and the Disabled Experience

From of Siebers' perspective, disability is considered as a form of minority instead of being regarded as a medical condition, and disabled individuals are often viewed as outsiders. He contended, "disability is not a physical or mental defect but a cultural and minority identity" (p.4). This stereotype generates otherness in their interactions, identity and sense of self. This viewpoint on minority identity considers disability as a socially constructed status rather than a biological one (pathology). Therefore, Siebers clearly encourages the idea that disability must be recognized as a cultural identity and challenges the medicalized view of individuals with impairments. In other words, considering disability as a cultural identity provides disabled people independence and self-appreciation, instead of mirroring them as things that need repairing. Siebers (2008) also added that, “As documented in the case of other minority identities, individuals who identify positively rather than negatively with their disability status lead more productive and happier lives, feminism, the black and the red movement, as well as gay and disability pride” (p.11). This quote highlights the transformative power of positive identity formation. When individuals with disabilities embrace and accept their status and feel proud of their identities, just like every other marginalized group, they witness strong feelings of fulfillment and strength. This shift in their self-perception challenges societal judgments and encourages personal growth. Therefore, the recognition and celebration of disability as part of one’s identity is significant for a just society since it defies societal prejudice and advocates for personal development.

2- Peter Burke’s *Brothers and sisters of disabled children* (2004)

Peter Burke is a British polymath, historian, professor and sociologist who has significantly contributed to understanding disability in relation family dynamics. In his book, *Brothers and sisters of disabled children* (2004), Burke highlights the influence of having a disabled child on familial dynamics. He focuses mainly on how normal (non-disabled) siblings react and act with their impaired siblings. he claims that the presence of a disabled child within a family rises some serious and unique challenges. These challenges occur mainly with their siblings, who often opt for taking the responsibility of caregiving in order to help their parents and lessen their struggles. Such situations can unfortunately influence the siblings' emotional and social development in a very deep way. Moreover, they can affect their understanding of disability within their family unit. Burke observed that, "Having a disabled brother or sister was widely reported as affecting the way children felt about themselves, their parents and their family life" (p.45). This suggests that siblings may feel less important or neglected because of the full attention given to the disabled child. They can also develop a sense of maturity earlier than children of their age, as a way to help their family and reduce the pressure on their parents.

Caregiving Responsibilities and Emotional Impact

Within families of impaired children, siblings may spontaneously step into supportive roles. For instance, they start helping with the daily tasks and responsibilities of the household. This type of involvement can help siblings develop feelings of empathy, strength and self-reliance, but it can also push them towards having feelings of neglect or unimportance if they receive any form of inequality or lack of attention from their parents. Burke asserted that, "It appears that the time available to the non-disabled child is an inverse ratio to the needs of the disabled child: the greater the needs of the child with a disability, the greater the reduction in time available to the parent in caring for siblings" (p.53). Thus, it can be said that Burke's work demonstrates how these roles, apart from shaping familial dynamics, influence the siblings' sense of self and identity.

Shaping Identity and Social Adaptation

Furthermore, Burke investigates in his work how growing up with a physically or mentally disabled sibling affects the development of identity and skills. He explains that siblings frequently develop high maturity and a great sense of responsibility. Yet, they may struggle to communicate with their peers because of societal views of disability. He pointed out that, “siblings often experience difficulty in explaining their brother’s or sister’s disability to their friends, leaving them feeling socially isolated or different” (p.71). In other words, though these dynamics insert feelings of growth and strength, they also cause the creation of challenges and obstacles related to social acceptance and self-esteem.

These ideas presented by Burke help shed light on the way disability affects families in both *The story of my life* (1903) and *Wonder* (2012). In the books, the presence of a disabled child changes the family dynamics, and the siblings and parents try to adapt both emotionally and socially to such a condition. The kinds of responsibilities, the feelings of neglect and isolation, and identity struggles that Burke highlights are strongly reflected in the experiences of the characters. This shows how deeply disability shapes family life and influences the roles, emotions and relationships of both parents and siblings.

B- Materials

The lives and Times of Helen Keller and Raquel J. Palacio

1- The Life and Times of Helen Keller

Helen Keller was born on June 27, 1880, in Tuscumbia, Alabama, fifteen years after the end of The Civil War in 1965. She is an American writer, activist and lecturer who faced considerable difficulties. At just nineteen months old, she contracted an illness described by modern physicians as likely to be either scarlet fever or meningitis which permanently left her blind and deaf. Yet, she did not let that define her. With the support and help of her dedicated teacher, Miss Sullivan, Keller learned how to communicate and ultimately became the first deaf-blind person to get a Bachelor of Arts degree from Radcliffe college in 1904.

Throughout her life, Keller wrote 12 books and more than 400 articles. She used her platform to advocate for social issues such as the rights of disabled people, women suffrage and legalized birth control. She supported the labor union movement, striking workers unemployment benefits, social security, and was a defender of the radical industrial workers or the World union. She also became a key figure in the American Foundation for the Blind, where she worked intensively to improve education and accessibility for disabled individuals. Over the years, she met several prominent figures who admired her determination, including Mark Twain, Alexander Graham Bell, Franklin D. Roosevelt and Winston Churchill. Keller passed away in 1968, just a few weeks before her 88th birthday, leaving behind a legacy of determination and hope (Diversity-Helen Keller, n.d.).

2- A short synopsis of *The story of my life* (2017)

In *The story of my life*, Keller shares her journey from isolation caused by her disability to a life full of hope, learning and achievement. At an early age, an illness left Keller both deaf and blind, drowning her in a world of silence and darkness. Deprived of language, she faced many obstacles and often expressed herself through breakdowns and tantrums. She struggled a lot to understand people around her, and she often tried to touch their faces in order to understand what they might be saying. In many situations, she found herself dominated by feelings of frustration and anger, and used to vent her pressure through pranks that she considered funny and joyful. One of the moments that she shared in her story was the day she trapped her mother in the pantry for hours after closing the door.

It was only with the arrival of her teacher, Anne Sullivan, that Keller's life changed completely. Miss Sullivan, whom Keller's beloved mother brought to help her, arrived to Alabama when Keller was around seven years old, and she directly introduced her to language by spelling words into her hand using the manual alphabet, helping her to associate objects with their names. Initially, Keller struggled to understand this new system of communication, but the breakthrough came when she connected the word "water" with the sensation of it flowing over her hand. This moment unlocked Keller's understanding of language, and she eagerly started learning new words.

Filled with enthusiasm and curiosity, Keller progressed rapidly, learning how to read, write and even speak with dedication. However, being disabled was not easy at all, and Keller found herself in difficult situations most of the time. In one of the passages of her book, she recalled the day she and her teacher were sitting on a tree, and Miss Sullivan left to bring something from the house. While she was sitting there alone, a sudden storm came and the strong wind shook the tree branches aggressively. In that moment, Keller felt very helpless and terrified and this experience taught her how difficult and frightening life can be for people like her. Later on, her thirst for knowledge led her to attend The Perkins School for the blind, where she excelled and proved herself. After that, she attended The Cambridge School for young ladies and, eventually, Radcliffe College, where she became the first deaf-blind person to ever earn a Bachelor of Arts Degree. However, her education was far from being easy. She relied entirely on her teacher who spelled lectures into her hand, and struggled to keep up with complicated subjects that were not designed for someone with her disabilities such as geometry and algebra.

Despite these accumulating difficulties, she kept going with great determination and hope. One of the greatest obstacles that Keller faced and mentioned in a detailed way in her book were the accusations of plagiarism. At the age of twelve, she attempted to write a short story entitled *The frost king,* and once finished she shared it directly with Mr. Anagnos, the director of the Perkin school. The story was a success, and it was well received until it was discovered that it resembles Margaret Canby's *The frost fairies,* a story that Keller had been exposed to but had forgotten. Consequently, she was accused of plagiarism and received an interrogation from a panel of teachers. This incident deeply traumatized her to the point that she became fearful of writing for many years, but she managed to overcome this difficulty with the help of Sullivan.

Keller continued to develop her writing and eventually became a published author. She learned many languages, including French, German and Latin; she studied philosophy and became an advocate for social issues. Throughout her life, she confronted doubt and discrimination from people who believed that a deaf-blind person can never achieve intellectual success. However, her determination was much stronger, and she constantly proved them wrong.

3- The Life and Times of Raquel J. Palacio

R. J. Palacio is an American graphic designer and *New York Times* bestselling author. She was born on july13, 1963, in New York City and she currently lives in Brooklyn, NY. She attended the high school of Arts and design in Manhattan and later pursued the major of illustration at the Parsons school of design. She then studied at the American University in Paris (De Ocampo,2020). The idea of her book, *Wonder*, came from a personal experience when Palacio, along with her two sons, encountered a child with a facial deformity. Her youngest son started crying and she quickly left the scene without saying anything. Reflecting on this incident during an NPR interview, she said,

> I was really angry at myself afterwards for the way I had responded because I had - what I should have done is simply turn to the little girl and started up a conversation, and shown my kids that there was nothing to be afraid of. But instead, what I ended up doing was leaving the scene so quickly that I missed that opportunity to turn the situation into a great teaching moment for my kids. And that got me thinking a lot about what it must be like to - basically to have to face a world every day that doesn't know how to face you back [sic] (Palacio, 2013, para.3).

This experience inspired her to write a story about a boy dealing with a visible disability and the challenges and obstacles he faces. Palacio focuses on themes of empathy, acceptance, kindness and the influence of social judgments, and she has become a leading voice in children’s literature for raising awareness concerning disability. When her book, *Wonder*, was published in 2012, it quickly became a bestseller, touching millions of hearts all across the world. The success of the book resulted in a major movie adaptation in 2017 which had been praised for its honest and compassionate portrayal of living with a disability and facing social bullying and exclusion.

4- A short synopsis of *Wonder* (2012)

Wonder follows the story of August Pullman, a young boy born with a rare “craniofacial deformity” known as Treacher Collins Syndrome. He has had many surgeries and spent a lot of time in the hospital to repair his ability to breathe and to change his face to look as normal as possible. Auggie's parents and sister, Via, love and support him with all their hearts. Yet Via sometimes struggles with her own feelings, particularly when she first starts high school and does not want to talk about her brother Auggie, wanting to be seen as just her own self, instead of always being recognized as Auggie’s sister.

Due to his condition, Auggie has been home schooled all his life, but when he turns ten, his parents decide to enroll him in Beecher Prep, a private school, hoping that he will integrate with kids of his age. School is certainly not easy. Auggie encounters classmates who not only stare at him but also whisper about him; they are even rude enough to point at him when they think he cannot see or hear them. Auggie knows that they think he is a "freak.". Yet manages to ignore their attitudes. Even with all these challenges, Auggie succeeds to make friends, particularly Summer and Jack Will. Nevertheless, his newfound friendship with Jack is tested when he accidentally overhears Jack talking on his back in a negative way on Halloween, not realizing that the kid in the Bleeding Scream was him. Auggie becomes very hurt and for a while considers not returning to school, but in the course of staying home, his father and mother provide encouragement and support, which help Auggie decide to try again. Later in the school year, Auggie goes through an even worse experience during a camp trip organized by the school. While being in the woods with his friend Jack, a group of older kids from a different school encounter him. Their reactions to his deformity were very brutal and they said mean things that left Auggie shattered. However, a few of his schoolmates, including Jack and some other kids who were nearby, stand up for him because they wanted to protect him from the bullies. This incident portrays a transformative point for Auggie, and it makes him realize that while people may still notice his facial impairment, many of them have gotten used to his face over time, and they even offer help and support when needed. It ensures him that though people still value appearance, kindness and acceptance can defeat social judgment.

The novel’s narrative style is exceptional in that it shifts perspectives between characters which allows the readers to have a fuller view of the impact of Auggie's presence on the people around him. The prominent parts of the book are told from Auggie's perspective, so we can deeply feel what it is like to go through his struggles and successes. Throughout the story, Auggie experiences bullying, prejudice, and social exclusion, but most importantly his determination and the unwavering support of family and friends pull him through. Eventually, more of Auggie's classmates get used to his face, and over time he falls into acceptance. At the end of the story, Auggie's bravery and kindness earn him a standing ovation at the ceremony of the school's end of year, bringing him joy and proving that he is indeed a "wonder."

III. Results and Discussion

1. Results

In my journey of analyzing Keller's *The story of my life* and Palacio's *Wonder*, I found that the works portray disability through two main types: the medical and the social model. In other words, this comparative study has shown that while Helen and August face numerous challenges related to their impairments, the social reactions and judgments play a crucial role in shaping their personalities as well as real life experiences.

To begin with, it has become clear to me that these works portray the protagonists through the medical model of disability. Helen's early life as a child is marked by desperate attempts to manage and even cure her condition through the medical intervention of experts. In a similar way, August goes through multiple surgeries and spends many years in hospital just to improve his appearance and look normal. In both cases, disability is framed as a biological problem that requires medical solutions. However, despite all the efforts and attempts that were made, neither Helen nor August succeed in finding a permanent and complete resolution to their disabilities through medicinal solutions only.

Moreover, I have come to realize that the stories of Helen and August go hand in hand with the social model of disability. Both characters face marginalization, exclusion, bullying and prejudice because of societal attitudes to their impairments. On the one hand, Helen's inability to talk or see isolates her from the world. Yet, the arrival of Anne Sullivan, her beloved teacher, has changed the course of events as it gave Helen the motivation to get out of her darkness. On the other hand, August's classmates initially rejected him as they gave him some really horrible names such as "freak" and "alien", but eventually the situation changes since he no longer feels excluded. These experiences emphasize how external perceptions of disability can create barriers that are often more restrictive and hostile than the pathological condition itself.

Overall, *The story of my life* and *Wonder* demonstrate that disability is not only a biological (medical) issue or pathology, but also a social construct influenced by external circumstances and conditions. Hence, both books defy the traditional classification based on mental and physical impairments by showing that with proper support, education and social acceptance, disabled individuals can successfully feel integrated. This study, then, offers new insights into how both stories promote personal resistance and the transformative power of social acceptance and inclusion. It also highlights the importance of giving a voice to people with disabilities and advocating for their rights as normal human beings who deserve recognition and equality.

2. Discussion

Chapter One: The Medical Model of Disability in Keller's *The story of my life* and Palacio's *Wonder*

Introduction

The "medical model" of disability has been a dominant point of view in the field of disability studies for many years. This model views disabled individuals as mere objects that must be either fixed or treated. Disabled people are believed to have a flaw or a defect in their bodies, which is a medical condition that needs to be corrected or restored to their normal state. As Siebers (2008) wrote, "the medical model defines disability as a property of the individual body that requires medical intervention. The medical model has a biological orientation, focusing almost exclusively on disability as embodiment" (p.25). By portraying their disabilities as personal deficiencies, this perspective alienates disabled people, neglects the larger social and cultural factors that led to their marginalization and creates an environment in which disability is feared, pitied and managed instead of being accepted or adapted.

In this chapter, I will explore the way the aforementioned authors portray their protagonists through the medical model, with a focus on the efforts to cure and overcome disability rather than accepting it. This perception is strongly represented in *The story of my life* (2017) and *Wonder (2012)*, which show how society and the medical discourse frame disabilities as pathologies that must be managed, cured or surpassed. The aim of this chapter is to analyse in depth how the two texts represent disability as an individual medical issue and to demonstrate that the medical model does not only influence the way both protagonists, Helen and August, are dealing with their physical impairments, but also supports and strengthens the domination of the medical authority, which controls and decides what is normal and what should be fixed. Thus, it can be said that this medicalized view emphasizes disability as a defect or flaw, and it often results in the alienation of the disabled characters and limits their chances to be accepted or included.

The Medical Cases in their works

Keller's *The story of my life* serves as one of the earliest examples of how the medical model of disability portray disabled individuals as subjects of medical intervention. By the beginning of the book, Helen gives us glimpses of how her life was before her illness, as she was living a simple and happy life like any other children of her age. She wrote, "the beginning of my life was simple and much like every other little life. I came, I saw, I conquered, as the first baby in the family always does" (p.27). This demonstrates that Helen's life began in an ordinary way and she was surrounded by her family members who showed her lots of love and care since she was the first daughter of her family. In addition, Helen was not only a child full of life and excitement but she also showed signs of intelligence and curiosity from an early age. Her eagerness to learn and explore everything around her is clear when she said,

> I am told that while I was still in long dresses I showed many signs of an eager, self-asserting disposition. Everything that I saw other people do I insist upon imitating. At six months I could pipe out "How d'ye," and one day I attracted every one's attention by saying "Tea, tea, tea" quite plainly (p.28).

These early impressions about her not only emphasize her positive energy and lively character but also show that she had great potential and determination even before the emergence of her illness.

Subsequently, Helen started talking about her illness, which she caught at just nineteen months old, using a medical description. She stated, "In the dreary month of February, came the illness which closed my eyes and ears and plunged me into the unconsciousness of a new born baby. They called it acute congestion of the stomach and brain” (p.28). This first look at her condition frames her disability as a clear example of the medical model that must be fixed or cured immediately and reflects how her story has been molded by the gaze of doctors and diagnosis. Medically speaking, Helen's condition is considered as an acquired deafblindness, which is a serious and permanent dual sensory loss that results from severe illness. As it has been mentioned before, Helen caught this illness at the age of nineteen months old, which is around a year and a half old, and she described it as "acute congestion of the stomach and brain" (Keller, 2017, p.28). This term was generally used by doctors and physicians in the nineteenth century to describe medical conditions like scarlet fever or meningitis, as both illnesses have been associated with encephalitis and meningeal inflammation, and this can ultimately lead to permanent optic and auditory nerve damage that is impossible to be fixed. Nowadays, her sickness is known in medical jargon as bilateral sensorineural hearing loss and complete impairment of the vision, and this categorizes her as a patient with a lifelong, passive neurological disability. Thus, this condition necessitates permanent care and puts the person carrying it under medical observation and correction (Meningitis Research Foundation, 2020).

So, when it comes to analyzing Helen's condition through the perspective of Siebers (2008), it can be said that her dual sensory loss is both a medical diagnosis of her disability and a strong evidence of how the ideology of ability works. Siebers (2008), in his work *Disability theory*, argued that this ideology of ability considers able-bodiedness as the normal and natural condition of human beings and portrays impairment as an issue that needs immediate correction (p.8). From this framework, it is made clear that Helen's disability functions as a clear example of a body deviation, which is a condition that requires full and instant medical care and rehabilitation efforts. In other words, her identity is defined by the expectations of overcoming her physical impairment, and her value is determined by how close enough she can get to becoming a “normal” person who can perform “normal” tasks like speaking, reading and writing. In other words, the focus on Helen's learning and growth is not just presented as a normal progress but as a proof that she is capable of reaching the physical and intellectual standards of non-disabled individuals. Her ability to talk, read and write is considered as an indicator of her value since it highlights her ability to adapt to the expectations of able-bodiedness. This represents a medicalized view of disability in which the body is seen as a defect that must be fixed. As Siebers (2008) contended, “disability marks the last frontier of unquestioned inferiority because the preference for able-bodiedness makes it extremely difficult to embrace disabled people and to recognize their unnecessary and violent exclusion from society” (p.6). In this context, Helen's personal achievements are celebrated not because of her massive efforts and determination, but because they emphasized that her disability is something that can be fixed and surpassed. To say it more explicitly, the medical model does not see her impairment as part of a human variation. Instead, it is considered as a flaw that requires reduction and elimination. Her body is regarded as incomplete and abnormal and this can only be changed if she proves that she is able to function according to the conventional expectations. Therefore, the ideology of ability has become a tool that asks for improvement and recovery, and this unfortunately left no room for accepting disability as it is, being a natural thing that can happen to any human being in the world.

Her family, on their part, made a lot of efforts and tried to help their daughter overcome her illness through consulting of different physicians and specialists. They even contacted Alexander Graham Bell who was a prominent figure and specialist of his time. Helen wrote,

> Acting on the doctor’s advice, we went immediately to Washington to see Dr. Bell, my father with a sad heart and many misgivings, I wholly conscious of his anguish, finding pleasure in the excitement of moving from place to place (p.37).

This situation aligns perfectly with Siebers’ (2008) idea of the medicalized nature of disability. In his work, he argued that the medical model reduces disability to a flaw located in the body, which must be fixed rather than accepted within a broader social context (p.26). Helen’s own personal experience also indicates what it feels like to live in a society that looks at disability as a weakness rather than considering it as a natural thing and a different way of living. Her deafblindness became the center of focus, and her achievements were considered as impossible for a person like her. To explain this even more, ordinary people view disability as something peculiar and absolutely wrong and as a personal problem which requires its carriers to accommodate their own needs, and this influences them deeply and makes them feel like intruders.

Furthermore, Burke (2004) pointed out that families of disabled children frequently experience immense challenges in navigating the medical system, which is established to treat disabilities rather than understanding them form a social standpoint (p.54). In *The story of my life*, Helen’s family, like many families of their time, expressed their reliance on medical interventions. They contacted many experts and specialists in the hope of finding a final solution for their daughter’s illness. In the book, Helen stated, “When I was about six years old, my father heard of an eminent oculist in Baltimore, who has been successful in many cases that had seemed hopeless. My parents at once determined to take me to Baltimore to see if anything could be done for my eyes” (p.36). This statement emphasizes the desperate situation of Helen’s parents, as they were wandering from one doctor to another in order to find a cure and give their daughter a new start and a new life. In the midst of these immense efforts, Helen’s personal experience showed the struggle and the dangers she faced in her early life, as she recalled,

> Many incidents of those early years are fixed in my memory, isolated, but clear and distinct…. One day I happened to spill water on my apron, and I spread it out to dry before the fire which was flickering on the setting-room hearth. The apron did not dry quickly enough to suit me, so I drew nearer and threw it right over the hot ashes. The fire leaped into life; the flames encircled me so that in a moment my clothes were blazing. I made a terrified noise that brought, Viny, my old nurse, to the rescue. Throwing a blanket over me, she almost suffocated me, but she put out the fire. Except for my hands and hair I was not badly burned (p.33).

This moment demonstrates how vulnerable Helen was because of the lack of sensory perception and appropriate communication skills. She was unable to hear or see anything around her and this made the most basic daily activities dangerous and life-threatening. This vulnerability strongly highlights the fact that the medical procedures that were taken into consideration were somehow inefficient and failed to treat her illness or protect her from this type of incidents or even grant her some sense of independence. Thus, it can be said that the emphasis on cure and treatment in Helen's early life reinforces the medical aspect of the model's propensity to focus on the defects of the body rather than the individual who is in an actual interaction with the outside world.

After living in total darkness for seven years, Helen realized that her true progress in life did not come from medicinal solutions but from her connection with her beloved teacher, Anne Sullivan, who came to Tuscumbia in the spring of 1887. Helen wrote,

> At the beginning I was only a little mass of possibilities. It was my teacher who unfolded and developed them. When she came, everything about me breathed of love and joy and was full of meaning. She has never since let pass any opportunity to point out the beauty that is in everything, nor has she ceased trying in thought and action and example to make my life sweet and useful (p.52)

In this quote, we see the deep impact of the arrival of Anne Sullivan on Helen's life, and the feelings of joy and gratitude she was experiencing as she was certain that her sufferings were about to end. This shows that it was thanks to the emotional and intellectual connection with her teacher that Helen was able to progress and bloom, rather that the medical aspect and the intervention of experts. This moment can also be interpreted through what Burke (2004) discussed in his book about the emotional and long-term responsibility of caring for a disabled child. He pointed out that caregiving for an impaired child does not only require routine support, but also continuous emotional care, everyday practical assistance and an unlimited sense of responsibility for the growth of the child, especially when medical interventions and attempts of correction fail to fulfill these tasks (p.41). In the case of Helen, Sullivan managed to successfully fulfill this responsibility. Even though she was not part of the Keller family and she came from a far place, she took on full responsibility to help Helen develop her skills and reach educational success. Helen stated,

> It was my teacher's genius, her quick sympathy, her loving tact which made the first years of my education so beautiful. It was because she seized the right moment to impart knowledge that made it so pleasant and acceptable to me. She realized that a child's mind is like a shallow brook which ripples and dances merrily over the stony course of its education and reflects here a flower, there a bush… (52).

Thus, it can be said that through Sullivan's support, patience and hard work, Helen was granted a chance to get out from darkness to light, as she was able to grow, succeed and communicate with people around her. Nevertheless, while Sullivan's role was centered around teaching Helen through love and patience, it still reached the same purpose as that of the medical model, which is helping her overcome her disability and become more like an able-bodied person.

Like Keller's *The story of my life*, Palacio's *Wonder* reminds us of the limitations of the medical model of disability. This is clearly portrayed through the protagonist August Pullman, who is a ten years old boy diagnosed with a rare genetic condition known as Treacher Collins Syndrome. This condition, also called TCS, damages the bones and tissues of the face of the person. According to doctors in the medical field, this deformity is known to be the result of the creation of underdeveloped cheekbones, jaw malformation and even missing or deformed ears, which ultimately lead to emergence of difficulties in hearing and breathing. Although TCS has absolutely no influence on intellectual ability, it often necessitates a lot of surgical interventions to deal with the physical deformity and restore the shape of the child's face to what is seen as normal according to the established expectations (National Organization for Rare Disorders, Nord, 2020).

In the novel, August’s physical condition necessitates going through many surgeries, more than twenty, and staying in the hospital for months in order to repair or fix his deformity, and this automatically places his impairment within the framework of medical treatment and normalization. In other words, these procedures, though crucial for his own health, are also intended to improve the way he looks since his face is the center of focus and influences the way people interact with him. When August initially defined his appearance, he wrote, “I won’t describe what I look like. Whatever you’re thinking, It’s probably worse” (p.3). This quote highlights the fact that August is being shaped by medicalized images of his face, which deeply affect his self-perception. Siebers (2008) contended that the medical model puts individuals with impairments in a position that limits their choices and, thus, this position leads to internalized feelings of insufficiency and inferiority, as they always consider themselves as outsiders or even as aliens who do not fit in this world (p.25). This psychological influence is clear in August’s hesitation to reveal his face and interact with the outside world when his mom tells him about going to school for the first time after being homeschooled for five years. He refuses to attend school because of his continual awareness of being abnormal, which made him feel uncomfortable and limited his ability to participate in any school activity.

The way August's facial deformity is handled can also be interpreted through the lens of Siebers' (2008) theory in which he analyzes the way the medical model considers disability as an issue located in the individual that must be contained. According to Siebers (2008), "the medical model defines disability as an individual defect lodged in the person, a defect that must be cured or eliminated if the person is to achieve full capacity as a human being" (p.3). This perspective can be directly related to August’s experience, since his disability is not viewed as something natural but rather as something abnormal, that requires change in order to make him look more like others around him. The numerous surgeries he underwent represent a strong desire to omit physical differences, and this makes all his childhood built upon the expectations that his face must be corrected. Thus, it can be clearly said that the medical efforts and attempts that encircled him were more than just a survival or a function, as they were strongly connected to the idea that his face should not look the way it does. In this way, the ideology of ability continues to shape how Auggie is regarded, treated and raised since his disability is not considered as part of his identity but as a medical condition to be handled and purged.

Moreover, August’s mother represents the medicalized and protective view of disability wherein the disabled child is repeatedly being monitored and modified in response to their condition or illness. In this regard, she stated, “Anyway, honey, you have to promise me you won’t forget to put on the bug spray, okay?, […]And put your sunscreen, […]And don’t, I repeat, do not forget to take your hearing aids off if you go swimming” (p.250). From this statement, it is clear that August’s life is organized according to his medical requirements and limitations, which emphasize the fact that his disability necessitates constant care and management. This view strongly corresponds to Burke’s (2004) observation about parents devoting their whole time to care giving responsibilities. The parents plan and build their life around the disabled child’s medical needs and medicalized expectations (p.45). In the case of *Wonder*, August’s parents take great care of him and pay attention to every detail that concerns his situation, leaving no room for living their life as a normal couple or caring for their eldest daughter, Via. In this sense, his parents are not only caregivers, but also mediators of his medical condition and this results in prioritizing his well-being to the extent that they neglect their daughter and give her little or even no attention at all.

The experiences of the protagonists, Helen and August, emphasize the discriminatory effects of the medical model, which views disability as an issue that needs to be treated or fixed. According to Siebers (2008), the medical model promotes the idea that “disability is located in individual bodies and can be cured by normalizing interventions” (p.3), which reduces disability to an individual problem and encourages social attitudes that alienate and exclude disabled individuals from participating in the daily life. Helen spent her early years of life in a medicalized center and domestic environment, which reflect her isolation and exclusion. In a similar way, August’ hardships with social acceptance were made even worse due to the medical categorization of his condition, which made it difficult for him to be perceived as a normal human being and not in relation to his impairment.

As Burke (2004) also stated, the effects of the medical model extend beyond the individual to influence families and communities. He supported this idea by explaining that, “parents are the main caregivers. … but there might also be siblings as caregivers” (p.41). As such, within the stories of Helen and August, their families have been profoundly impacted by their disabilities, which makes it difficult for them to manage emotional and social relationships while taking care of the medical demands of their disabled child. On the one hand, Helen’s sister, Mildred, for example, is sometimes neglected because of the full attention Helen’s condition required. On the other hand, August’s sister, Via, also questions her role in her family by saying, “August is the Sun. Me and Mom and Dad are planets orbiting around the Sun. The rest of our family are asteroids and comets floating around the planets orbiting the sun" (p.82). This highlights the fact that the medical condition of August shapes the family dynamics, as the full attention is given mainly to him and his medical requirements.

While this impact on the siblings is important, the influence of the medical model also reaches the parents, and this highlights what Burke (2004) described as a common outcome for families who raise a disabled child under the influence of the medical model. Families of disabled children often internalize the idea that disability is an issue that needs to be managed and addressed, and this generally happens because of the medical professionals and doctors, who perceived disability in the same way. Burke (2004) argued that the emotional and physical energy required in caregiving that the parents put can easily shift the attention away from the other siblings, and this can result in some struggles in the family dynamics. In *The Story of my life*, Helen's parents dedicated the whole time and energy to find a solution to her disability. For instance, they consulted many physicians and adjusted their life to meet all her requirements. In the same vein, In *Wonder*, the image that Via hold of her brother depicts the way the medical requirements of August take over the family's attention, and this unintentionally pushes her to the margin. She observed,

> I'm used to the way this universe works. I've never minded it because it's all I've ever known. I've always understood that August is special and has special needs. If I was playing to loudly and he was trying to take a nap, I knew I would have to play something else because he needed his rest after some procedure or other had left him weak and in pain… (82)

This sense of orbiting clearly aligns with Burke's (2004) idea that siblings usually find themselves emotionally distant when a disabled kid is present in the family (p.45). In both cases, disability becomes a structuring force in the family, as it influences routines, priorities and emotional interactions. Hence, these literary works demonstrate how the medical model shapes not only how disability is treated but also how it is lived and experienced within the family unit.

Both Keller's *The story of my life* and Palacio's *Wonder* show how the medical model of disability views people with physical impairments as issues that must be taken care of through the help of medical intervention and familial caregiving in the lead. However, the works also demonstrate the limitations of the medical model. While Helen's early life was dominated by medical treatments and a huge focus on cure, August's environment provided more advanced medical alternatives. Yet, still confronts social restrictions by the medical model's emphasis on physical differences.

Siebers (2008) contended that the medical model ignores the social limitations that disabled people confront and focuses mainly on bodily impairments rather than the social exclusion and stigmatization that often follows disability. To highlight the limitations of this model, he explained,

> Some scholars complain that the medical model pays too much attention to embodiment, while the social model leaves it out of the picture. Without returning to a medical model, which labels individuals as defective, the next step for disability studies is to develop a theory of complex embodiment that values disability as a form of human variation (p.25)

From the above quote, it is clear that Siebers calls for an equal view of disability, a view that neither reduces it to a pathology nor ignores the realities of the body. His concept of complex embodiment emphasizes the need of taking into account both physical circumstances and social structures when addressing disability. This framing demonstrates the flaws of the medical model without fully shifting the attention to the social model, which will be analyzed further in this discussion. Thus, it can be said that this idea is obviously portrayed in the experiences of both

Helen and August, as medical solutions attempted to address their physical limitations but did not offer complete and meaningful social inclusion and acceptance.

Also, another view of the medical model of disability comes from Davis (1995) who criticized the cultural obsession with normalcy in *Enforcing normalcy: disability, deafness, and the body*. In the latter, he stated that, "the concept of the norm, unlike that of an ideal, implies that the majority of the population must somehow or another be part of the norm" (p.29). To put it differently, individuals who deviate from what is known as standard (the norm) are much often described as lacking or insufficient. This view indicates how the medical model encourages the alienation of disabled individuals by limiting their experiences to physical restrictions in addition to presenting them as divergences from a supposed ideal.

In the case of *The story of my life* and *Wonder*, Helen and August have been depicted as exceptions to the norm, a perspective influenced heavily by medicinal solutions. For instance, the story of Helen was not only about triumph over deafblindness, but also about how well enough she could navigate 'normal' ways of communication and perception. This leads to say that her achievement is defined by the assumption of the medical model that normalcy is the ultimate goal, which highly supports the idea that disability is something that needs fixing. Besides, August's experience in *Wonder* depicts this situation as well. In the novel, August lives in a world in which his physical appearance is the primary center of his identity. This consequently restricts how other people, including August himself, see his abilities. Thus, it is clear that this continual emphasis on what August and Helen lack, rather than what they can actually do, demonstrates the profound influence of the medical model, which tends to define people not by their capacities but by their flaws and deficiencies.

Another influential concept that adds more depth to the analysis of the medical model is the idea of the medical gaze presented by Michel Foucault. In *The birth of the clinic* (1993), Foucault discussed how modern medicine began to treat patients in an objective way by isolating the sickness from the person, and this ultimately resulted in a clinical vision that looks at people through the lens of heir diagnosis only. According to Foucault (1993), the medical gaze "perceives the patient not as a person but as a case, a body to be observed, classified, and treated" (p.14). This gaze can be seen in *The story of my life* and *Wonder*, as the protagonists have been observed mainly through their impairments. To elaborate further, Helen's medical diagnosis reduced her to a deaf-blind person, while August's deformity becomes the absolute focus of other people around him. The gaze or the stare puts them in a position where they can no longer develop their personalities, skills or express their desires. It transforms them into issues to be solved rather than people to be understood, and this results in their social isolation since they are subjected to a gaze that prioritizes pathology over their being.

Furthermore, Foucault (1993) argued that the power of the medical gaze comes from its ability to identify individuals according to what is perceived as abnormal or in need of correction. This method turns the body into an object of examination and improvement and removes any personal or human context. Foucault (1993) contended that, "the clinic demands as much of the gaze as natural history. As much, and to a certain extent, the same thing: to see, to isolate features, to recognize those that are identical and those that are different, to regroup them, to classify them by species or families" (p.89). In the case of Helen, her appointments with doctors and physicians focused mainly on her sensory issues, and she was viewed as a problem that required diagnosis and treatment, rather than just a developing child who has feelings and great potentials. Likewise, August's facial deformity, positions him under continuous surveillance, not only by the medical specialist, but also by everyone around him, mainly his parents. In this context, Via stated, "… we circle around him like he's still the baby he used to be. We change plans, go to plan B, interrupt conversations, go back on promises depending on his moods, whims, needs" (p.90). This makes us understand that both characters are not seen as normal individuals. Instead, they are interpreted through the limited lens of the medical model. This highlights the fact that the medical model, reinforced by the medical gaze, portrays disability as a clinical matter to be corrected, rather than a human experience to be understood, and this deeply influences the disabled characters and people around them.

Moreover, the understanding of the medical model can find echo in Parson's concept of "the sick role" that he highlights in his work *The social system* (2005). Parson (2005) explained that disease is both a medical condition and a social aspect. this means that when someone is ill, he\she is spared from his\her ordinary and usual responsibilities, but he\she is also expected to try to heal and follow the instructions of the doctor. In this vein, he wrote,

> the sick person cannot be expected by "pulling himself together" to get well by an act of decision or will. In the sense also he is exempted from responsibility -he is a condition that must "be taken care of". His condition must be changed, not merely his "attitude". Of course the process of recovery may be spontaneous but while the illness lasts he can't "help it". This element in the definition of the state of illness is obviously crucial as a bridge to the acceptance of "help" (p.294).

From the above passage, it can be clearly understood that the sick persons are not only considered as physically sick, but also as unable to have any control over their condition. Sick persons are not blamed for their conditions, but they are not given full autonomy. Instead, they are required to accept and follow treatment and to agree on the medical instructions directed towards them. In this role, doctors and specialists are seen as the authorities since they decide what is wrong and how to fix it. This, therefore, places the sick persons in passive positions which oblige them to wait for others to treat their illnesses. This theory reinforces the medical model, which mainly focuses on the impaired body and views disability as something to be rectified rather than something caused by social expectations.

When we apply this theory to disability, we clearly notice that disabled individuals are most of the time treated as if their illness would haunt them forever. They are supposed to rely mainly on medical interventions rather than becoming responsible for their own life, and this shifts the focus on their bodies rather than on the barriers that encircle them. This is seen in *The story of my life*, where the protagonist's life is deeply influenced by her parents' search for a medical cure. Before the arrival of Sullivan, Helen described her situation by saying,

> have you ever been at sea in a dense fog, when it seemed as if a tangible white darkness shut you in, and the great ship tense and anxious, groped her way towards the shore with plummet and sounding- line, and you waited with beating heart for something to happen? I was like that ship before my education began only I was without a compass or sounding- line, and had no way of knowing how near the harbor was"(p.39).

Her parents took her to meet Dr Alexander Graham Bell because they believed that something can be done to cure her disability. As such, their initial reaction demonstrates how they placed their daughter in a medicalized center, as she was seen as a child who requires medical assistance rather than focusing on the development of her skills to communicate and learn. However, the situation completely changed with the arrival of Anne Sullivan, who enlightened Helen's world and became one of the most important people in her life. As for *Wonder*, the idea of "the sick role" is strongly portrayed through the character of August who explains in the first pages of the novel that he had many surgeries in his life and that his life was primarily shaped by doctors and hospital visits. He wrote, “people think I haven't gone to school because of the way I look, but it's not that. It's because of all the surgeries I've had. Twenty-seven since I was born. The bigger ones happened before I was even four years old, so I don't remember those. But I've had two or three surgeries every year since then (some big, some small) ...” (p.4).

Because of these hardships, people around Palacio’s protagonist August, especially his parents, view him as weak and in need of constant protection instead of treating him like an ordinary child. This aligns with Parson's (2005) idea since August is seen as a person who cannot be fully responsible for himself and must be monitored by his parents and people around him. This focus on the medical needs places him in a passive role which expects him to get better by following what his parents decide in his place.

Conclusion

Bringing the present chapter to its end, it can be said that the medical model, as represented in Keller’s *The story of my life* and Palacio’s *Wonder*, focused mainly on treatment and correction of disabilities at the expense of inclusion and tolerance. This chapter has revealed how Helen and August have been subjected to medicinal solutions in order to be fixed. To say it more explicitly, while Helen’s family tried their best to find a cure to her deafblindness, August’s parents did the same thing as well. This was possible of course with the use of more developed medical treatments such as surgeries. Also, the limitations of medicine showed the need for a more comprehensive and socially focused response to disability, which will be the focus of the second coming chapter.

Chapter Two: The Social Model of Disability in Keller's *The story of my life* and Palacio's *Wonder*

Introduction

The social model of disability emerged as a response to the medical model of disability to move the focus from impairments themselves into the organizational, environmental and attitudinal barriers that society places on disabled individuals. Therefore, in this chapter, I will analyze how Keller's *The story of my life* and Palacio's *Wonder* fall within the social model of disability through their portrayal of social exclusion, marginalization, discrimination and stereotyping. These works demonstrate how disability is built and maintained by discriminatory social practices, and therefore emphasize the need for listening to the usually unheard disabled individuals and advocating for their rights as normal human beings. In doing so, we found that both books convey the message that the experiences of disabled individuals are more often caused by social attitudes, barriers and organizations than the physical difference, as the medical model argues.

The Social Struggles, Education and Family Dynamics In Both Works

In *The Story of My Life* and *Wonder*, it has been made clear that social rejection is a key element that influences the experiences of the protagonists with their disabilities. Helen and August, while living in different historical periods and having different disabilities, go through similar social challenges which are the inability of their respective societies to accept their impairments. Their experiences reflect that it is not blindness, deafness or facial deformity that disable them, but rather the gaze of alienation and the discriminatory attitudes of the other people around them.

To start with, in *The story of my life*, Keller reveals that she had a profound hesitation throughout the writing of her autobiography. She declared, “it is with a kind of fear that I begin to write the history of m life. I have, as it were, a superstitious hesitation in lifting the veil that clings about my childhood like a golden mist” (p.1). Helen’s fear came from remembering the dark, vague and isolated years that followed her sickness, which left her permanently blind and deaf. During those early years, Helen was trying to communicate and interact with people around her, just like any child of her age. However, due to her disability, she could not do it through listening and speaking. Instead, she was using sign language, which made it difficult for people to understand her and for her to express herself. She wrote, “I was using crude signs. A shake of the head means “No” and a nod, “Yes” a pull meant “Come” and a push, “Go”’ (p.29). This sign language was not enough and Helen was not satisfied at all, as she was desperate to communicate and feel the world around her. As her inability to communicate continued to grow, she started having persistent tantrums and breakdowns all the time, which were somehow hard to be controlled. In other words, she was feeling trapped and imprisoned in darkness and her desire for expression created emotional storms within her. She captured this by saying,

> Meanwhile the desire to express myself grew. The few signs I used became less and less adequate, and failures to make myself understood were invariably followed by outbursts of passion. I felt as if invisible hands were holding me, and I made frantic efforts to free myself. I struggled- not that struggling helped matters, but the spirit of resistance was strong within me; I generally broke down in tears and physical exhaustion. If my mother happened to be near I crept into her arms, too miserable to even remember the cause of the tempest. After a while the need of some means of communication became so urgent that these outbursts occurred daily sometimes hourly (pp.35-36)

Helen remained in this situation for many years and darkness invaded her life and left her in isolation. Nevertheless, the arrival of Anne Sullivan, her teacher, marked a turning point in her life and her world completely changed, since she started to feel a strong desire towards progress and grew a deep curiosity to know everything around her. In this context, she contended that, "the most important day I remember in all my life is the one on which my teacher, Anne Mansfield Sullivan, came to me" (p.38). The fact that Helen considered that day as the most important one shows the profound isolation she was living in before she was introduced to an education designed to her requirements. Miss Sullivan used fantastic techniques of touch, and repetition and her patience was unlimited. Helen wrote,

> I cannot explain the peculiar sympathy Miss Sullivan had with my pleasures and desires. Perhaps it was the result of long association with the blind. Added to this she had a wonderful faculty for description. She went quickly over uninteresting details, and never nagged me with questions to see if I remembered the day-before-yesterday's lesson (p.48)

These remarkable qualities of Miss Sullivan offered a radical alternative to the institutional methods of that period, which considered disabled individuals as objects of pity or subjects to be disciplined. According to Foucault's *Discipline and punish* (1995), schools applied "disciplinary power" to force pupils or students to act and behave in expected ways through the use of control and continual observation (p.184). Helen's learning experience, however, was guided and led by Anne Sullivan and was far from being under these strict methods. Her education was centered around her individual needs rather than attempting to make her fit into any system, and this demonstrates the value of an approach of learning that is more personalized, respectful and sympathetic.

Throughout the first months after the arrival of Sullivan, the process of learning remained somehow difficult. Helen was so eager to learn about everything quickly, and whenever she felt incapable or helpless, she would be overwhelmed by anger and frustration. One of the scenes that deeply portrayed these feelings was when her teacher was trying to spell different words like “water” and “doll” into her hand. Helen could not understand her teacher, and in a moment of madness she took a doll she had in her hand and smashed it aggressively. She stated,

> In despair she had dropped the subject of the time, only to renew it at the first opportunity. I became impatient at her repeated attempts and, seizing the new doll, I dashed it upon the floor, I was keenly delighted when I felt the fragments of the broken doll at my feet. Neither sorrow nor regret followed my passionate outburst. I had not loved that doll. In the still dark world in which I lived there was no strong sentiment or tenderness (p.40)

From the above quote, it can be said that this was the first moment of Helen’s inner difficulties for social interaction, as it created in her a kind of social frustration which made her feel socially disconnected from the world surrounding her and the doll became a symbol of her social alienation. Yet, her social isolation was gradually overwhelmed because of her resistance, high language performances and education as well. Through a lot of hard work and determination, Helen’s intellectual and emotional intelligence was developing in an impressive way. With her teacher’s help, she learned to speak, read and eventually write at an incredible pace. Her sharp memory, deep curiosity and intellectual skills allowed her to thrive in ways that only few people have predicted for a young girl facing such a disability, as she was mostly criticized for her achievements, which were seen as impossible for a girl who is both deaf and blind.

Her most traumatizing experience with social rejection took place when she reached twelve years old and she attempted to write a short story entitled “*The frost king”,* after mastering the reading and writing skills. What should have been a moment of pride and success turned into a painful and humiliating experience because she was accused of plagiarism. Helen wrote, "It was difficult to make me understand this; but when I did understand I was astonished and grieved. No child ever drank deeper of the cup of bitterness than I did. I disgraced myself; I had brought suspicion upon those I love best" (p.71). Although Helen was just a child who wanted to learn and acquire language skills, her short story, “*The frost King”*, was deemed for being suspicious, which would never happen if she was not deaf or blind. Her intellectual ability was questioned due to her disability. This incident did not only have a darkening effect on her increasing creativity, but also worked as a bitter reminder that people like her are frequently seen as incomplete and incapable of doing what normal people can do. It is at this first moment that this little girl felt that society rejected her; she did not only feel physically different, but also out of place intellectually. This moment shows that disabled individuals can be rejected not only socially but also intellectually as they are seen by outside societies as incapable of autonomous thought or intellectual success.

This bitter experience that Helen went through can be further explained through the theory of Siebers (2008), where he emphasized that society often underestimates the mental capacities of disabled individuals by assuming that they cannot function effectively or meaningfully. According to Siebers (2008), "the emerging field of disability studies defines disability not as an individual defect but as the product of social injustice, one that requires not the cure or elimination of the defective person but significant changes in social and built environments" (p.3). In the case of Helen, she was not deficient in intelligence or creativity, but rather talented in an impressive way. However, people saw her as incapable of writing an original story and accused her of plagiarism just because she was deaf and blind. Her abilities were not taken into account and she was treated through the lens of her disability. This hostile treatment portrays how society creates barriers and challenges that push individuals with impairments to feel out of place and abnormal, even when they are achieving outstanding and extraordinary things. Siebers (2008) also pointed out that, "it is easy to believe that disability is only negative if one has insufficient schooling in disability studies" (p.5). This emphasizes how negative and harmful assumptions appear when society lacks basic understanding. Helen's short story defied these assumptions. Yet, instead of being praised and encouraged, she was accused and doubted. Therefore, it can be said that her experience demonstrates that disability is not only related to physical or sensory issues, but also to how society responds to it, which is usually with exclusion, rejection and doubts. Consequently, what disabled people need is not only medical care, but also a change in the attitudes and behaviors of society towards them.

As far as Helen's family, though tied by the societal norms of that period of time, they played a crucial part in her progress and future success. The arrival of Anne Sullivan, the teacher who has changed her life, was made possible because of her parents' efforts, who were determined to find a solution for their daughter's condition as they even travelled to different states in the United States of America. Helen wrote, "My parents were deeply grieved and perplexed. we lived in a long way from any school for the blind or the deaf, and it seemed unlikely that any one would come to such an out-of-the way place as Tuscumbia to teach a child who was both deaf and blind" (p.36). Nevertheless, with deep research and commitment, her parents managed to find a great way to break her silence and move her from darkness to light with the help of Dr. Alexander Graham Bell. She recalls, "Dr. Bell advised my father to write to Mr. Anagnos, director or Dr. howe's great labours for the blind, and asked him if he had a teacher competent to begin my education" (p.38). This significant support illustrates how actions and beliefs can pave the way for social and educational inclusion. However, Burke (2004) argued that families of disabled children often go through emotional and internal conflicts especially in how attention and care are placed and this idea, though hardly mentioned in *The story of my life*, is highlighted in depth in Palacio's *Wonder*.

Secondly, the protagonist of *Wonder*, August Pullman, likewise goes through social rejection and exclusion during his first experience at school, since he becomes the object of an unwanted curiosity. His first experience in a formal school was at Beecher Prep middle school. Before it, he was homeschooled by his mom because of his medical complications and surgeries, and once his condition was somehow stable, his parents decided to enroll him in a real school to develop his skills even better and to integrate with kids of his age. However, August found himself in an environment where diversity is continuously met with prejudice and discomfort. Despite the fact that the school staff introduced his attendance as an optimistic step towards inclusion and acceptance, the situation was heartbreaking for August. Being the new kid in school, in addition to his facial deformity, made him famous and all the stares were pointed at him. He explained, "I could tell I was being stared at without even looking up. I knew that people were nudging each other, watching me out of the corners of their eyes. I thought I was used to those kinds of stares by now, but I guess I wasn't" (p.49). This shows that August is painfully aware of how other people saw him. His deformity made him feel like a curiosity that is taking the full attention of everybody, rather than being just a normal pupil or friend. Furthermore, this moment highlights what Rosemary Garland-Thomson calls “the stare,” a visual act that transforms the disabled body into a spectacle, described in *Staring: how we look* (2009). According to her, the stare is a social instrument that represents disabled individuals as ‘other’, and this ultimately strengthens power dynamics by putting them outside the conventional norms (p.3). August's deep sensitivity to the stares of his classmates provides an ideal example of how the ableist gaze makes disabled individuals overly visible and the center of excessive attention that transforms an everyday school experience to a struggle of identity and visibility.

Before being talked to, August has always been judged by his physical appearance. He wrote,

> Every new class I had was like a new chance for kids to not stare at me. They would sneak peeks at me from behind their notebooks or when they thought I wasn't looking. They would take the longest way around me to avoid bumping into me in any way, like I had some germ they could catch, like my face was contagious (61).

This kind of rejection influenced him deeply and isolated him emotionally, since he struggled to interact and connect with others. For instance, when classmates are asked to help August or show him around, he feels their superficiality and hesitation, as if they are doing it unwillingly. And even at the cafeteria, nobody seems to approach and sit with him, ultimately finding himself alone. However, the situation changes when Summer, a girl from his classroom, bravely sits next to him. August wrote, "Hey, is this seat taken? I look up, and a girl I never saw before was standing across my table with a lunch tray full of food " (p.51). Up until that point, August was left on his own, not because he said or did something wrong, but because people at school were too afraid to interact with someone who looked different, it somehow makes them uncomfortable and overwhelmed.

This uneasiness extended beyond the stares and deeply influenced how his schoolmates physically behaved around him. At school, August realizes that he is the main character of an unpleasant game that was created to avoid any physical contact with him. He explained in this context that, "I think it's like the Cheese Touch in Diary of a Wimpy Kid. the kids in that story were afraid they'd catch the cooties if they touch the old moldy cheese on basketball court. At Beecher prep I am the old moldy cheese" (p.72). As such, it can be said that this fear of touching August demonstrates how social rejection frequently disguises itself as a game to play, which reinforces stigmatization in a childish and painful way. One of the most painful moments that he faced later at school happened on Halloween, October 31st. In the novel, August described Halloween as "The best holiday in the world. It even beats Christmas" (p. 73). For him, Halloween is very special because he could wear costumes and hide his face, which makes him feel like he can blend in and be treated like everyone else and he does not feel like an alien who is being judged or stared at. He stated,

> I get to dress up in a costume. I get to wear a mask. I get to go around like every other kid with a mask and nobody thinks I look weird. Nobody takes a second look. Nobody notices me. Nobody knows me (p.73).

However, his first Halloween at school shattered all his excitement and destroyed his self-esteem. When August changes his costume to the screaming bleed at the last minute, nobody realizes it was him, and he accidentally overhears Jack, a classmate whom he thought was his friend because they hung up together, making fun of him in a bad way while talking to several classmates who already judge August for his deformity. He explained, "I wanted a hole I could fall inside of: a little black hole that would eat me up" (p.78). This shows how deeply hurt he was, as he felt devastated and broken because he thought Jack would never say such things about him. Though jack apologized later to August for his behavior in an email by saying, “I know why ur mad at me now I am sorry I didn’t mean the stuff I said. I was stupid. I hope you can 4give me [sic]” (p.165). This experience remains painful, as it shows the hatred and bullying disabled individuals often face. Thus, it can be said that this incident that happened to August demonstrates how schools or any educational institutions can fail to protect disabled children both physically and emotionally since they position them in environments that can cause bullying and exclusion.

Another significant scene in the novel that shows the social rejection that August was facing occurred during a camp trip organized by his school to a place called the Broarwood

Nature Reserve in Pennsylvania. Once inside the campsite, August and jack walk into the woods away from the fairground and all of a sudden, they found themselves being attacked by a bunch of boys from another school. Those boys cruelly bullied August by calling him “Gollum”, “alien”, “Orc” and “Freddie Krueger”, and their assault extended even more to the point that they intended to beat him and his friend if not for Amos, Miles and Henry who came at the right moment to help them.

This moment of social rejection that August faced, along with the previously mentioned incidents, reflect what Siebers (2008) called “the experience of minority identity”, which is formed not just by difference, but also by social exclusion and marginalization. Siebers (2008) claimed that, “minority identity discovers its theoretical force by representing the experiences of oppression and struggle lived by minority peoples [sic] separately but also precisely as minorities” (p.16). In August’s case, his identity is built upon the way other people perceive him –not as a normal classmate or friend, but as a source of fear and discomfort. In other words, August is judged based on the way he looks and not on his character or skills. This one-dimensional treatment highlights the systemic exclusion that minority identities witness. Therefore, it can be said that August’s experience in *Wonder* is a significant example of how disability, like many other minorities indicators, can trigger instances of mistreatment, bullying and alienation. Yet, it also generates resistance and strength in response since the disabled character manages to overcome all the difficulties and challenges by remaining invincible.

In addition, August’s family provided immense support and love for him, and this support encouraged him even more to face the cruelty of the world and to embrace his difference as an aspect of human diversity. However, this focus on August and his needs influenced the family dynamics and this is evident through the character of Via, his sister. In the novel, when it is Via's turn to talk, she said,

> I'm used to the way this universe works. I've never minded it because it's all I've ever known. I've always understood that August is special and has special needs. If I was playing too loudly and he was trying to take a nap, I knew I would have to play something else because he needed his rest after some procedure or other had left him weak and in pain. If I wanted Mom and Dad to watch me play soccer, I knew that nine out of ten times they'd miss it because they were busy shuttling August to speech therapy or physical therapy or a new Specialist or a surgery (p.82)

This strongly captures Burke's (2004) point of view about siblings of disabled children, who often feel marginalized and sometimes invisible within the family dynamics. While Via started with a tone of acceptance, her detailed description of the sacrifices that she used to do each day has shown the profound feelings of emotional invisibility she was going through. Her calm acceptance reveals that when siblings gain emotional strength, it does not happen in a voluntary way but rather out of necessity, for they find themselves obliged to adapt to a family structure that is centered on the needs of the disabled child.

Thus, from the aforementioned analysis, it is strongly evident that the experiences of both characters, Helen and August, fit perfectly within the framework of the social model of disability, which highlights that disability is built by social attitudes and environments rather than individual impairments. Siebers (2008), in *Disability Theory*, explained that, "the social model opposes the medical model by defining disability relative to the social and built environment, arguing that disabling environments produce disability in bodies and require interventions at the level of social justice" (p.25). In the books, both protagonists face social experiences in which their values are questioned, and this usually happens not because of their ability, but because society refused to recognize their worth away from able-bodied standards. Their experiences provide clear evidence that exclusion and marginalization are not mainly related to their condition, but rather shaped by environments that fail to tolerate their differences. This is often noticeable when disabled individuals are denied acceptance and inclusion just because society feels uncomfortable with their disabilities. Siebers further highlighted this idea, which he called "the ideology of ability" by saying,

> The ideology of ability stands ready to attack any desire to know and accept the disabled body in its current state. The more likely response to disability is to try to erase any signs of change, to wish to return the body magically to a past era of supposed perfection, to insist that the body has no value as human variation if it is not flawless (p.26).

From the above quote, it is clear that societal pressure reduces the value of differences as a way to conform to able-bodied ideals and reinforce the systemic creation of disability.

Moreover, it is strongly evident that these acts of rejection have had a deep impact on the emotions of the protagonists, which makes them feel so different and weak. Helen, in *The story of my life*, feels ashamed and terrified not because of the mere accusations, but because she has come to realize how fragile and weak her place in the world was, and how her massive efforts and determination can be easily underestimated and invalidated. She noted,

> … I wept as I hope few children have wept. I felt so cold I imagined I should die before morning, and the thought comforted me. I think if sorrow had come to me when I was older, it would have broken my spirit beyond repairing (73).

In a similar way, August's self-esteem in *Wonder* is destroyed because of the constant stares, whispers and exclusion directed to him, which ultimately make him feel incapable of doing anything, though he is an excellent pupil and can score even higher marks than the rest of his classmates. Burke (2004) emphasized this influence in his work, *Brothers and sisters of disabled children*, by saying,

> The sense of being different which is generated as a consequence of disability is important to understand, because disability can often result from expressive perceptions and actions of others who attach the label of "disability" to individuals who might otherwise not consider themselves disabled in any way. some may wish to be identified as different, which is the right, but difference which is imposed by others is potentially discriminatory no matter how well intentioned (p.16)

From this quote, it can be said that disability is not always a self-defined identity, but it can also be imposed by society through assumptions and attitudes. When society rejects the differences of disabled individuals and makes them feel like outsiders, this encourages discriminatory and exclusionary behaviors and impacts how those individuals are seen, not just by the others around them, but also by themselves. This enforcement of differences is considered as harmful as any direct verbal abuse, since it functions continuously to diminish self-worth and self-esteem.

So, it can be said that in Keller's *The story of my life* and Palacio's *Wonder*, the protagonists faced social barriers that were more disabling and hurtful than their illnesses. This rejection and exclusion arose as a repeated experience shaped by ignorance, prejudice and fear. Therefore, their experiences question the way we handle people who do not conform to conventional expectations of communication, appearance or capacities. These characters are not being celebrated and praised for their courage and resilience but rather marginalized and excluded until the others learn to perceive them in a different way.

Furthermore, both literary works emphasize that when schools do not actively show empathy and understanding, disabled children feel isolated and emotionally weak. Nevertheless, as the stories of Helen and August progress, they both begin to experience a shift. In *Wonder*, pupils at school started to get used to August's face, and his strength, intelligence and resilience earned him the respect of some of his classmates. He eventually becomes friends with most of his schoolmates. This shows that education has the transformational potential to develop empathy, communication and inclusion as long as those who participate are ready to challenge and change their assumptions about difference.

Regardless of these issues, both literary works strongly highlight family love, compassion and support as a shield against social rejection and exclusion. Kate Keller and Arthur Keller; Helen's parents, with their intelligence and determination stood as a motivating example of a family's desire to challenge the imposed limitations and conventional social norms. Similarly, August's parents, and even his sister Via, provide unlimited support, which encourages him to navigate and negotiate the outside world with resilience and confidence despite his physical difference. In both stories, the family plays the role of a sanctuary which offers both emotional support and unconditional acceptance. However, both Helen and August grow a deep desire to integrate with the outside world, and this emphasizes that while family support is crucial, it is somehow insufficient, because the real challenge is to make the external world become more inclusive and tolerant.

This desire indicates the necessity of dismantling social barriers rather than just creating safe and private areas. It is significantly evident that the home, which is the "private sphere", offers crucial emotional support and love, but to be fully included in society requires engagement with-and transformation of- the wide world that is "the public sphere". According to Siebers (2008), "the practice of peeling of minority identities from people to determine their place in the hierarchy of oppression is revealed to degrade all minority identities by giving a one-dimensional view of them" (p.29). This strongly aligns with the experiences of Helen and August, who are reduced to their disabilities in public view most of the time. Their disabilities are viewed in the same way people view Blacks, Mexicans, Asians or any minority identities as outsiders and not belonging to their world.

It can be said that the characters in the books are advocating for acceptance, inclusion and acknowledgment, as they want people to define them by what they can do rather than what they are. In this respect, the family is not considered as just an end point of acceptance, but rather as the beginning point or a marker of social inclusion. Thus, it is evident that the stories of August and Helen indicate that personal support must be enforced by a radical change in social structures, environments, attitudes and organizations in order to give a chance to minority identities to thrive beyond the limitations of domestic understanding.

Representing the unheard voices in both texts

Another main idea of the social model of disability is the fact that disabled individuals are often denied the right to speak for themselves. When they do, which happens rarely, their voice is unheard and marginalized. In both of Keller's *The story of my life* and Palacio's *Wonder* this established pattern is defied. Helen's autobiography was considered as being revolutionary not only for documenting her life, but for doing so in her own words. She wrote, "Everything has its wonders, even darkness and silence, and I learn, whatever state I may be in, therein to be content" (p.123). In this quote, she explained that even most of the things people see as negative, such as being blind and deaf, can be meaningful. Helen told her own story with its tiny details instead of allowing others to interpret her experiences, and this allowed her to transform her disability into a source of wisdom and beauty. She took control of her public image by autonomously writing her autobiography, which made her life narrative carry an inspiring message about strength, resilience and determination. In other words, it can be said that her use of voice-both literal and symbolic- breaks the silence historically imposed on disabled individuals and challenges dominant narratives that make them feel invisible.

In a similar way, *Wonder* gives the chance to a disabled character to speak. Most of the book is told by August, and this allows the readers to understand his feelings and thoughts in a clear way. Despite the fact that some parts of the novel are told by other characters like Via, Miranda, Summer and Justin, August's voice functions as the most significant one. He described how people at school were reacting to his face by saying,

> And being at school was awful at the beginning. Every new class I had was like a new chance for kids to 'not stare' at me. They would sneak peeks at me from behind their notebooks or when they thought I wasn't looking. They would take the longest way around me to avoid bumping into me in any way, like I had some germs they would catch, like my face was contagious (p.61)

August's words highlight how he deeply feels the rejection around him, since he is treated as though he is less than a human, someone to be avoided and feared. However, by sharing these experiences with the reader, he becomes more than someone to be pitied, he becomes someone we listen to and truly understand. According to the famous sociologist Parson (2005), individuals who do not conform to the established social norms are generally seen as deviant, which means that they are considered as a disruption to the social order. This deviance becomes something to be accepted only if it is being treated, corrected or controlled (p.253). Both Helen and August challenge this idea by explaining that they do not wish to be corrected, but rather to be heard and valued for their capacities and not the way they look. This right of being heard is not only personal but also political. As Siebers (2008) observed,

> It is easy to mythologize disability as an advantage. Disabled bodies are so unusual and bend the rules of representation to such extremes that they must mean something extraordinary. They quickly become source of fear and fascination for nondisabled people, who cannot bear to look at the unruly sight before them but also cannot bear not to look. Many people with disabilities can recount stories (pp.63-64)

Both *The story of my life* and *Wonder* face this uncomfortable conflict by placing disability in the hands of the disabled characters. Helen and August are not silenced or passive objects of pity and curiosity, but rather normal human beings with great insights, emotions and strengths. Helen recounts her story with depth and logic and an extraordinary focus on details, while August shares his experience with a great amount of humor, honesty and courage. These stories allow the readers to feel and understand the lived experiences of disabled characters who are navigating a world that is full of prejudices, not as a spectacle but as a genuine human condition. Thus, it can be said that these literary works fit perfectly within the objectives of the social model of disability, which intends to make a shift from exclusion and dehumanization to social recognition, inclusion and acceptance.

Conclusion

To sum up, by depicting the lived experiences of the disabled protagonists, Helen and August, *The story of my life* and *Wonder* help us understand the main idea of the social model of disability, which is the fact that disability is not a personal defect located in the body but rather something also caused by social attitudes, organizations and rules. As such, these literary works highlight the struggle for education, family dynamics, social perceptions and the necessity for disabled individuals to speak for themselves by demonstrating that it is society which needs to change, and not the person. More precisely, if society changes its view on disabled people and starts to see them as normal, able-bodied human beings, it will make them feel complete and they would live their life in harmony with the outside world. The stories of the aforementioned characters are inspirational, as they give a voice to people who are often marginalized and ignored through revealing the injustice and mistreatment they face everyday while also honoring their strength, determination and hope. In this way, these texts, not only urge us to see differences, but also encourage us to reshape the world to accept others despite the differences and embrace them as ordinary human beings.

IV. General Conclusion

Throughout my dissertation, I have examined Keller's *The story of my life* and Palacio's *Wonder* through the lens of different disability theories, while specifically focusing on the representation of disability and the response of family and society to difference. My analysis concentrated on the personal experiences of the protagonists of both works and the way their identities were shaped by both the medical and the social model of disability.

In the first chapter, I explored the medical model of disability as it was reflected in both literary works, which highlights disability as a personal defect in the body that requires treatment and correction. Helen's struggles with her sudden deafblindness and August's facial deformity that obliged him to go through many surgeries and constant medical care demonstrate how their bodies were viewed as medical obstacles to overcome, and this allowed me to show the limitations imposed by a clinical view of disability. By applying the concept of "the ideology of ability" presented by Siebers (2008) in his theory, I was able to analyze how societal expectations positioned both characters as deviant from able-bodied standards and this deeply influenced their personalities and self-esteem.

In my second chapter, I turned the focus to the social model of disability by revealing the barriers and limitations faced by Helen and August, as a result of social attitudes and perceptions rather than their impairments themselves. I would argue that their development was strongly influenced by environments that either restricted or facilitated their inclusion and acceptance. Thus, it can be said that their growth, while significantly personal, exposed immense problems of access and acceptance and emphasized the huge importance of family support and education in standing against marginalization and exclusion.

From this analysis, I have come to realize that both *The story of my life* and *Wonder* are not just simple stories of personal resilience and growth, but also carry deep criticisms of how society defines and responds to disability. That is to say, the aforementioned texts portray the tension between normalcy and difference, and this offers a broader view of the emotional and social dimensions of living with a physical disability.

All in all, *The story of my life* and *Wonder* remain significant texts for the analysis of the emergence of disability in literature. These works give a voice to disabled individuals who have faced exclusion and prejudice, while also picturing more inclusive features. So, it is correct to say that my analysis focused mainly on the intersection of disability with personal identity and social responses. However, I acknowledge that there is still much to explore in these narratives. Therefore, future research on this topic can further investigate themes of autonomy, visibility and resistance in the context of disability and children's literature.

V. References

Burke, P. (2004). *Brothers and sisters of disabled children*. New York, NY: Jessica Kingsley publishers. Retrieved from https://books.google.com/books/about/Brothers_and_Sisters_of_Disabled_Childre.html?hl=fr&id=6YDgeRD_IbYC#v=onepage&q&f=false.

Casalme, A.G (2018). Engaging children in discussions of disfigurement and disability: the wonder of Palacio's Wonder. *The Cutting Edge: The Stanford Undergraduate Journal of Education Research, 1(1)*, 26-44. Retrieved from https://ojs.stanford.edu/ojs/index.php/ce/article/view/923

Davis, L. J. (1995*). Enforcing normalcy: disability, deafness, and the body*. New York, NY: Verso.

Foucault, M. (1980). The eye of power. In C. Gorden (Ed), *Power\ knowledge: selected interviews and other writings, 1972-1977* (pp. 146-165). Pantheon.

Foucault, M. (1991). *Discipline and punish: the birth of the prison* (A. Sheridan, Trans.). New York, NY: Vintage books. (Originally published in 1918).

Foucault, M. (1993). *The birth of the clinic* (A. M. Sheridan, Trans.). New York, NY: Routledge. (Originally published in 1973)

Keller, H. (2017). *The story of my life*. TALANTIKIT. (Originally published in 1903)

Kleege, K. (2000). Helen Keller and "the empire of the normal". *American Quarterly*, *52(2)*, 322-325. Retrieved from https://www.jstor.org/stable/30041843.

Meningitis Research Foundation. (2020*). Meningitis research annual report & accounts 2019-2020*. Bristol, UK: MRF. Retrieved from https://www.meningitis.org/application/files/1516/0239/6035/MRF_Annual_Report_2019-20.pdf

National Organization for Rare Disorders. (2020). *2020 Annual report: together we are strong*. Quincy, MA: Nord. Retrieved from https://rarediseases.org/wpcontent/uploads/2022/01/NORD_2020_Annual-Report_FINAL_SpreadView_web.pdf

Nielsen, K. E. (2009). Using biography to teach disability history. *OAH magazine of history*, 23(3) 41-43. Retrieved from https://academic.oup.com/maghis/article-abstract/23/3/41/967408

Palacio, R. J. (2012). *Wonder*. New York, NY: Random house, Inc.

Palacio, R.J. (2013). Interview: R.J. Palacio, author of “Wonder” [Audio Transcript]. NPR. Retrieved from https://www.npr.org/transcripts/221005752

Parson, T. (2005). *The social system* (B.S. Turner, Ed.). Routledge. (Originally published in 1951).

Siebers, T. (2008). *Disability theory*. New York, NY: The university of Michigan Press. https://babel.hathitrust.org /cgi/pt?id=mdp.39015082696892&seq=1. Retrieved on Jan.11,2025.

Wheeler, A. E. (2013). No monster in the fairytale: Wonder and the new children's literature. *Literature Association Quarterly*, *38(3)*, 335-350. Retrieved from https://muse.jhu.edu/pub/1/article/516872/summary