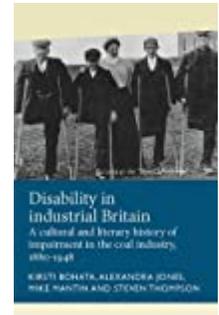


Kirsti Bohata, Alexandra Jones, Mike Mantin, Steven Thompson. *Disability in Industrial Britain: A Cultural and Literary History of Impairment in the Coal Industry, 1880-1948.* Disability History Series. Manchester: Manchester University Press, 2020. Illustrations. 320 pp. \$120.00, cloth, ISBN 978-1-5261-2431-9.



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The foundational texts of disability studies often present industrialization as an unmitigated disaster for disabled people, establishing a society that marginalized and excluded people with impairments from the workforce. This monograph evolved from a Wellcome-funded project led by Professor David Turner and the late Professor Anne Borsay, which drew on historical research from three British coalfields (northeast England, central Scotland, and south Wales) to closely scrutinize the relationship between disability and industrialization. I note here my participation in the project's research team though not in the authorship of this book. Like its preceding companion volume (David Turner and Daniel Blackie's *Disability in the Industrial Revolution: Physical Impairment in British Coalmining, 1780-1880* [2018]), it offers a fine-grained analysis of how understandings and experiences of disability were affected by industrial development. Taking us up to the nationalization of the coal industry and postwar settlement, which introduced a no-fault compensation system for disabled workers, this book interrog-

ates the impact of industrial expansion and contraction on disabled workers, the mechanization of work, and the introduction of an adversarial system to compensate workers impaired through disease or injury from undertaking their work. Entwining historical research with insights from literature, the authors concur with earlier writers that industry, specifically the coal industry, played a pivotal role in shaping the history of disability in modern Britain. However, they present a nuanced argument about the nature of this relationship, bringing to the fore the significance of time and place.

The coal industry provides the case study for this research, because, as the authors explain, no other industry “generated as large a number of disabled individuals on a daily basis” (p. 249). Impact and crush injuries arose through haulage and falls of rock and coal, while the constant pressure and impact of working positions led to “beat” hand, knee, and elbow, impairments arising from painful localized inflammation and infection. The dust generated through mining, meanwhile, caused the

chronic lung disease pneumoconiosis, while poor underground lighting was thought to be a leading cause of miners' nystagmus, an involuntary oscillation of the eyeballs. The relative level of risk miners faced fluctuated over the period covered by this book, partly in response to wage systems and working hours and partly following mechanization and electrification of the industry, which generated more dust and accidents, respectively. Risks also varied by region: the heaviest burden of pneumoconiosis, for example, fell in south Wales. When the coal industry flourished, impaired workers could often secure light work at the surface. However, impaired workers found fewer opportunities when the industry contracted in the interwar years, while many employers purged impaired workers from their workforce following the introduction of workmen's compensation in 1897, viewing them as a liability. The scheduling of nystagmus and pneumoconiosis as diseases meriting workmen's compensation was partially a victory for miners' unions but also generated formal and informal bars to work in the coal industry for miners affected by these conditions. These men were deemed "human derelicts" and "the living dead," not because they were disabled but because they were unable to secure employment in a mono-industrial community and were sometimes only awarded partial compensation (pp. 49, 52). Nor was disability confined to miners: the authors show how a combination of poor housing, heavy domestic labor, and reproductive injuries generated impairments among women in coalfields communities.

A chapter on medical care and rehabilitation suggests that coalfields disability was medicalized but also reveals that this was largely at the behest of miners and their unions. General practitioners were miners' first port of call, but high caseloads led in many cases to perfunctory, conveyor-belt style care. Medical aid societies, friendly societies, and works clubs supplemented this care, funded by contributions from employees, and, in some instances, employers too. Miners in south Wales had

good access to hospitals in coalfields areas, while miners in the northeast of England and central Scotland were more reliant on city hospitals. Yet medical treatment for much of this period was largely ineffective. The only treatment for nystagmus was to remove the sufferer from his work, while care for pneumoconiosis sufferers was palliative, not curative. Doctors, meanwhile, primarily assessed patients to determine their eligibility for compensation. Amputation was often the end result of complex fractures and crush injuries, due to the limited skills of surgeons and orthopedists, although good prosthetic limbs and assistive devices might enable a miner to keep working. By the interwar period, convalescent homes, supported by friendly societies, unions, employers, and the miners' welfare fund, became increasingly medicalized with a growing emphasis on rehabilitation, fracture clinics, physiotherapy, and orthopedics.

Financial assistance was also crucial to miners unable to secure full wages following accident or illness. The authors sketch out the patchwork of financial support: community collections, charities, friendly societies, workmen's compensation, permanent relief funds, and the poor law. Yet despite the breadth of provision, many impaired miners were compelled to rely on multiple forms of welfare to make ends meet, and provisions varied by region and period. Permanent relief funds, for example, which were co-funded by employers and workers, provided disablement benefits. In the 1890s, around 90 percent of workers in the northeast of England were members, whereas only 5-10 percent of miners in south Wales were members by the Edwardian period. This partly reflected a more consensual approach to industrial relations in the northeast but also the introduction of workmen's compensation. The operation of this adversarial system was still influenced by regional politics, however: in the northeast, a joint arbitration committee sought to reach decisions on contested workmen's compensation cases, while more cases were contested in south Wales and Scotland. Securing and retaining compensation was fre-

quently demeaning and was fraught with uncertainty. Miners struggled to claim if their impairments could not be unequivocally ascribed to a workplace accident or scheduled disease, while employers could stop payments and require disabled miners and their unions to take their case back before the medical referee and, if necessary, arbitration committee and county court, a practice condemned by miners' unions for conveying the impression "that the injured person is a thief and getting money by false pretences, or that our people took a pride in getting mutilated" (p. 190).

The introduction of workmen's compensation was pivotal in the politicization of disability in this era, the authors contend. Non-union members were disadvantaged in this process; without recourse to the union's negotiating skills or legal representation, they had to rely on the goodwill of colliery officials. Yet union members were also at a disadvantage relative to union staff, with little recourse if they were unhappy with the assistance provided. Unions sought to influence the political process by supporting the election of miners' members of Parliament and procured technical expertise to aid lobbying for compensation.

Two further chapters provide fresh perspectives on understandings and experiences of disability in coalfields communities through a spatial and literary analysis. Focusing on space brings to the fore the centrality of miners' homes, a liminal public/private space, in which impaired and convalescent miners were often moved downstairs into the more public area of the home where they could interact more with family and visitors or sit outside on the front step or pavement, when weather permitted. Public spaces, such as parks and war memorials, became focal points for disabled miners to gather, yet public buildings were often not designed to be accessible. Representations of disability in coalfields literature, meanwhile, which are used throughout the book as a source, are interrogated more closely in the final chapter, revealing their pivotal role within this genre. The authors re-

veal how the moral and religious meanings ascribed to disability lost ground in twentieth-century coalfields literature; instead, disability revealed both the harm caused by exploitative capitalism and the mutualism and interdependency of coalfields communities. This body of fiction normalized disability and premature aging as intrinsic aspects of the life course in coalfields communities.

Fiction, in this respect, mirrored life: disability, conclude the authors, was indeed ubiquitous and normalized in coalfields communities, even though people with impairments were marginalized and isolated to some degree. Mining caused significant levels of impairment, but the coal industry also at times absorbed many workers with impairments into its workforce, for both moral and pragmatic reasons. Miners' unions, meanwhile, devoted considerable time and resources to tackling the impairment and disability arising from the coal industry, so much so that this became a core component of their work, underpinning the campaign for nationalization. Further historical research could determine the relationship between disability and other industries, both in Britain and beyond. What this book does, however, is reveal the contribution history can make to disability studies. History is not there to generalize but to offer nuance and complicate our understandings and to emphasize the importance of context, place, and time. The authors tell not one story but many stories, highlighting distinct regional and national trajectories informed by the divergent pace of industrialization across the United Kingdom, variations in geology and geography, and distinctive religious, political, and industrial cultures. They succeed in bringing to visibility fragments of individual stories that remind us of both the difficulties and rewards of retrieving the voices of disabled people.

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