
Background: The social model of disability has, on occasion, created confusion and contention among those working in the field of aphasia. Some have treated it as an alternative or substitute for traditional therapies.

Aims: This paper makes an effort to clarify the issues surrounding discussions of the social model, and attempts to reduce some of the disagreement associated with its use. It is argued that the social model can provide principles for practice that can be used as a guide for any types of therapies.

Methods & Procedures: The study examines the literature on the social model. A distinction is drawn between social model philosophies and social model principles. Once the distinction is made, a set of principles is presented as a guide for planning and evaluating support services for people with aphasia.

Outcomes & Results: The particular principles drawn from the social model philosophy are: equalising social relations, creating authentic involvement, creating engaging experiences, establishing user control, and becoming accountable to users. Illustrations are given of how each of these social model principles was used by staff and people with aphasia to guide different support services offered by a UK charity called Connect - The Communication Disability Network. The principles were also found useful in evaluating social model activities.

Conclusions: A case is made that the social model principles can provide speech therapists with a guide for conducting their therapies, whatever form those practices take.