

2023

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Recommended Citation

Wooden, Shannon R. and Surface, Karalee (2023) "Introduction: Disability at the Intersections," *Journal of Gender, Ethnic, and Cross-Cultural Studies*: Vol. 2: Iss. 1, Article 1.

Available at: <https://epublications.marquette.edu/jgecp/vol2/iss1/1>



INTRODUCTION: DISABILITY AT THE INTERSECTIONS

SHANNON R. WOODEN and KARALEE D. SURFACE¹

Between the 2022 conference at Marquette University which inspired this collection, expansively titled “Disability at the Intersection of History, Culture, Religion, Gender, and Health,” and a number of other events—namely conference sessions like the ones I co-chair at the annual Popular Culture Conference, Disability Awareness events in which Karalee and I participate on our respective campuses, and classes I am fortunate enough to teach—we have found ourselves recently in some exciting and wide-ranging disability studies conversations among scholars, students, parents, and professionals who are, may become, and/or care for people with disabilities. From sociology and law and nursing to creative writing and dance, disability studies work is happening wherever there are bodies and minds, “complexly embodied” thinkers critiquing the constructedness of their and others’ lived experiences.²

What a time to be involved. The field is evolving rapidly, fueled by this passionate group of people. Language is changing and theory developing at an exhilarating pace, and though the shared enthusiasm and rapid progress can make for occasional moments of sensitivity, the community of scholars we have encountered is most often gleefully united in its ascent up the steep learning curve. We are little more than a generation removed from the “R-word,” it was not quite a decade ago that “Asperger’s” lost its medical and cultural footing, and now we share detailed analyses of the rhetorical implications of phrases like “high-functioning” and “nonverbal,” both of which have recently been offered more generous and more accurate alternatives (“having

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² The phrase, of course, belongs to Tobin Siebers, as I will discuss later in this introduction. In simple terms, in his invaluable *Disability Theory*, Siebers encourages a blending of “social” and “medical” ideas of disability in order to recognize the uniquely situated perspectives on the build environment afforded by disability identity. (2009).

low support needs” and “non-speaking,” respectively). The landscape is changing before our eyes and with our contributions.

In these recent conversations I have been overwhelmed at times by the widening of the field’s scope, purposefully constructed irrespective of disciplinary bounds. It is not just in forward motion that the field is growing, but in the breadth of its intellectual reach. I write from English Studies training about disability alongside gender in literature, film, and rhetorics of health. Others work on legal history, on communication technologies, architecture, sports, sex work, on international political and educational rights, and the richness of each field is felt. The memoirist who shares a beautiful meditation on post-stroke sexual intimacy with her late spouse challenges notions not only of disabled sexuality but of gender normativity, aesthetics, social communication, and the ethics of memoir as a form. The autistic linguistics scholar whose analysis of Twitter affords conversations about technology-mediated spaces of power asserts their own and others’ authority to control their narratives using social media as a liberatory tool. The Indian educator who analyzes both the attitudinal and architectural obstacles to disabled women’s education in India offers productive sites of comparisons between cultures, not only on disability but gender, education, and age. The sociology student whose work started in her own family explains how South Asian siblings become cultural and linguistic translators for families with disabled children. The social work scholar who examines the resources available for women experiencing violence at the hands of an intimate partner uncovers the challenges unique to disabled women in violent domestic situations. I don’t know of another field that covers so much ground, and so urgently.

Readers will not find all of the work I reference here in this slim volume. Our recent experiences span a greater period of time than the production calendar for this special issue, and as we designed it, we chose to highlight the Marquette conference. But these examples nonetheless give a sense of the creative richness and intellectual freedom that the field currently affords all of us who live in bodies and, I hope, provides a context for the variety of work on display here. Disability Studies is vitally interdisciplinary in both senses of that complex adverb: it is not only *necessarily* so but is *alive*—growing, changing, and becoming stronger—in so being. Even with all this complexity, the field remains generally coherent, united by common theoretical consensus and a public commitment to social justice. Together recognizing “disability” as the product of complex social factors and a deep-seated ableism that persists through language, imagery, and the

production and reproduction of power and knowledge, we are empowered to stage small interventions everywhere.

Furthermore, with foundational theorists such as Rosemarie Garland-Thompson, Alison Kafer, Nirmala Erevelles, Robert McRuer, and others, the field is richly intersectional and daily becoming more purposefully so. The memoirist mentioned above helps her listeners understand disability alongside cis/het, middle-aged white masculine sexuality; the graduate student clearly demonstrates why her research is precisely situated so as to consider nation of origin, immigration history, religious community, gender expectations, and intergenerational conflict as factors. A conference like the one at Marquette, devoted to “intersections,” encourages us to narrow our focus in order to widen the field.

This volume we offer, seven essays stemming from that 2021 conference, makes a small but significant contribution to the colorful fabric of interdisciplinary and intersectional disability studies. Readers may traverse from Ancient Greek law courts to Victorian English novels to twenty-first century American nursing schools. From epistemological foundations and cultural metaphors to the quality-of-life issues of access and sexual satisfaction, these essays exemplify the present and future of the field, the urgent overlap of philosophy, personal experience, and political action.

The field itself rests on social model thinking, so we begin by revisiting perceived wisdom around that fundamental concept itself. Suggesting that the idea of the “social model” originated many decades before the fabled UPIAS statement of 1976 in a work overlooked by most modern DAS thinkers, Craig M. Rustici’s “‘Handicap Removed’: An Alternative Path to the Social Model” re-historicizes the social model framework. Recovering an origin point in Henry Kessler’s work in the 1930s and 1940s, Rustici demonstrates how such a shift in perspective allows for more nuanced connections between medical research and attitudes toward disability throughout the twentieth century. Amplifying Kessler’s 1947 claim that modern “disability” was created as a scapegoat for American post-war employment statistics, Rustici recognizes that, despite modern understandings of Kessler as one of the architects of the medical model, his ultimate contributions to the “medical model” were born of resignation to the apparent impossibility of overcoming social prejudices.

Rustici's work shows us something else, too: working in archives at his own institution, Rustici demonstrates how valuable work in the field of disability studies may start with observations from one's home turf. It is a 1966 film commissioned by Rustici's academic institution that inaugurates his historiographic look at the social model, leading to the observation that the grassroots realities of popular opinion may not end up preserved in the more "elite" legislative work and politico-economic situation of major social changes. The failure of Kessler's work to gain traction, Rustici explains, illustrates how political action depends on both consensus identity and the openness of systems to change, both of which were lacking in the 1940s but present, at last, in closer proximity to the Civil Rights Movement. This essay thus not only contributes valuable history to Tobin Siebers's defense of "identity politics" as a productive source of political power, but it also evokes what Siebers describes as the epistemological potential for seeing disability as "complex embodiedness."³ With a critical exploration of our own lived experiences, we may, as Siebers exhorts us to, "give concrete form to the theory of social construction" and critique the knowledge born from a given social location and positionality.⁴

In our second essay, we go far further back than the 1940s to explore the legal paradigms on which Western culture has built its disability attitudes and which, after more than 2,000 years, may still be seen in legal policies and practices. Justin L. Biggi locates catastrophic disability policies of the modern United Kingdom not only in the Thatcherism of the 1970s, itself hearkening back to the eugenics attitudes of the early twentieth century, but in the Classical Greek legal speech Lysias 24, "For the Defense of the Pension of an Invalid." Biggi argues for an intersectional reading of the unnamed petitioner, weaving his disabled identity and his economic class status, to illustrate both how law has connected the two and to restore the nuance and complexity of the disabled speaker's life. In Biggi's reading, Lysias 24 demonstrates the ancient roots of modern attitudes that resist accepting disability and poverty as qualifiers on an "otherwise stable definition" of citizenship in a community trying to maintain its sense of supremacy.

The classical era leaves its imprint on disability in modern culture also through its literary and cultural contributions. In "Classical Tragedy and Metaphors of Disability," Maxwell Gray reads the tragedy of Oedipus, particularly its use of disability as trope, to explore lasting

³ Tobin Siebers, *Disability Theory* (Ann Arbor, MI: University of Michigan Press), 15–16.

⁴ Siebers, *Disability Theory*, 30.

connections between disability, disability imagery, and an understanding of the “tragic.” Reading both Oedipus’s blindness and the familiar riddle of the Sphinx through the lenses of Alison Kafer’s “crip time,” Susan Wendell’s “unhealthy disabled,” and his own experience with chronic illness and pain, Gray offers a reading of Sophocles that can “faithfully translate and do justice to” disabled people in their complex bodyminds. Though disability studies may tend to resist the close juxtaposition of disability with “tragedy,” a sympathetic reading of literary tragedy, attuned to stigmas and temporalities of disability, can offer us opportunities to productively recognize the impossibility of separating our understanding from our bodies and the worlds we inhabit.

The next two essays move us closer to the present moment, but we stop in the famously normalizing space of Victorian storytelling.⁵ First, György Kiss reads the lesser-known Wilkie Collins novel *Poor Miss Finch* from the theoretical foundations built by David Mitchell and Sharon Snyder, Rosemary Garland-Thompson, and others. Through these disability studies lenses, Kiss argues, Collins’s work can be read as surprisingly progressive, an opportunity to see not just another example of reductive disability tropes cropping up prosthetically in an old text but a multilayered depiction of blindness as lived human experience. The work generally following a fairy tale structure, blindness may seem like what Mitchell and Snyder see as an inaugurating complication; the protagonist’s blindness, says Kiss, sets her up in a nearly mythical plot akin to “Beauty and the Beast” or “Cupid and Psyche.” In *Poor Miss Finch*, however, Collins explores Otherness as richly as he does in more famous work like *The Moonstone* or *The Woman in White*, exploring xenophobia, sexuality, and women’s economic agency, overturning the stereotypes he deliberately invokes even in the novel’s titular adjective.

Like Kiss, Hannah Helm explores Victorian attitudes toward disability and femininity. Simultaneously considering the narrative features of Hans Christian Andersen’s tale of “Thumbelina” and the visual imagery of Anderson’s paper cut-out art, Helm reveals both the traditional representation of feminine value that might be expected from the fairy tale text and a more subversive, “partially obscured” troubling of domestic norms. Deploying feminist disability theorists like Rosemary Garland-Thompson, Helm explains how “beauty and disability” have depended on one another and then explores the “productive ambivalence” of a text with a

⁵ See Lennard Davis, “Introduction: Disability, Normality, and Power,” in *The Disability Studies Reader*, 5th edition (New York: Routledge 2017), 10.

magically small and beautiful character navigating a world of inaccessibility, social prejudice, and patriarchal pressures. Both aggressively gendered and menacingly disabled by numerous characters throughout her adventures, Thumbelina exemplifies the exclusionary signification practices that connect femininity and disability. Finally, though, and with the accompaniment of Andersen's visual art, Helm demonstrates a subtext that anticipates the New Woman and subsequent feminist critiques.

We close with two essays that step into very different aspects of disability culture and offer concrete applications of theory-informed disability research in medical settings. As Kiss describes in at least one reading of the ambiguous ending of *Poor Miss Finch*, it is uncommon for cultural texts to represent disabled people experiencing domestic, romantic, and sexual satisfaction. Our cultural tendencies, instead, are to reduce disability identity to asexuality or childishness, a stigmatizing gesture that has been well-documented. Alexandra Kriofske Mainella and Bianca Tocci, from a multicultural counseling background, describe in more real-world terms how positive sexual self-concept plays a role in disabled individuals' life satisfaction. Surveying people with cerebral palsy and spina bifida's sexuality, the authors reveal not only the lack of research on this subject, but how social stigma, fear, shame, and poor medical communication may contribute to a sharp diminishment in the quality of life for some. Breaking "life satisfaction" into specific aspects that transcend mere "access" and "function," the authors define "sexual self-concept" as a key but frequently neglected component of disabled people's identities; in their study, they find abundant support for future work in sexual health for people with disabilities. Recognizing that the answers may lie in "interdisciplinary fields" across medicine, education, communication, and social support systems, Kriofske Mainella and Tocci challenge all of us, regardless of our discipline, to consider the connections between satisfying lives, disabled bodies, and sexuality.

Finally, a collaboration of educators from Kent State University demonstrates how some of these interdisciplinary fields can work together to improve the quality of life—in this case, the quality of health care—for people with disabilities. Communication barriers between deaf and hearing people can cause significant knowledge gaps in everything from academic knowledge to economic awareness and social relationships. In a "normalcy" where passive information is frequently oral, people who communicate primarily with American Sign Language may be left out of important information acquisition. With acute awareness that these knowledge gaps may be particularly evident and potentially damaging in healthcare settings, Jamie L. McCartney and

colleagues from Colleges or Schools of Nursing, Education, Health, and Human Services, and Lifespan Development and Educational Sciences studied a means of bridging communication gaps using infrastructure they already had in place. With clinical simulation practices already built into their nursing program, the faculty combined two courses for two different student populations: Health Care of Children, a course taken by nursing students, and Medical Interpreting and Community Setting Interpreting, for the interpreting students. With overwhelmingly high numbers, the researchers demonstrate the benefits of such collaboration: nursing students gain empathy and become more comfortable in their future practice, while the interpreting students practiced new signs or ways to demonstrate medical concepts. Their research strongly indicates that future collaborations like this one could significantly address the lack of specialized training for interpreters in healthcare settings and the potential lower health literacy of deaf patients.

Across these essays, readers are invited to consider the lives of disabled people as multifaceted, rich, at times difficult, and at times made more difficult by the refusal of society to reconsider the parameters it has built around “normal” experiences: love, sex, tragedy, illness. Like Rustici, McCartney et al. have found an occasion for their research right at home, so we begin and end the volume with a similar example of situating one’s work within one’s “social location.” We are hopeful that the disciplinary breadth of these essays will attune readers to similar opportunities across their own embodied and epistemological lives.