### 1

#### A. Interpretation: If the aff differs from the conventional truth testing model, they must explicitly specify a comprehensive role of the ballot and clarify how the round will play out under that role of the ballot in the form of a text in the 1AC. To clarify, the aff must:

#### 1. Clarify how offense links back to the role of the ballot, such as whether post-fiat offense or pre-fiat offense matters and which comes first.

#### 2. Clarify what theoretical objections do and do not link to the aff, such as whether or not the aff comes before theory.

#### 3. Clarify how to weigh and compare between competing advocacies i.e. whether the role of the ballot is solely determined by the flow or another method of engagement.

*My ROB evaluates both post and pre-fiat, but pre-fiat comes first. Theory is allowed and comes before the ROB. ROB is determined off of the flow [and performative offense]*

#### B. Violation:

#### C. Standards:

#### 1. Engagement – I don’t know what offense links to your aff which proves I can’t reasonably contest it – knowing what a legit advocacy is in conjunction with knowing how to weigh prevents preclusive and superficial claims about the aff. Key to fairness, education and is an independent voter since debate requires that we have a point of contestation where we answer each other’s claims in an in-depth fashion. Also key to novice inclusion because they don’t know your K lit or what your ROB says which means you exclude them – inclusion is a voter because you can’t debate if you can’t participate.

#### 2. Strategy Skew – You make formulating a strategy impossible since I don’t know what links to your evaluative mechanism. If I go for a policy action, you can say the 1AC is about speech acts and do that weighing to exclude all my offense. I’m screwed with regards to theory since if I read it, you’ll use the aff to take it out but if I don’t, you’ll uplayer which proves spec is key.

#### Framing: You can’t use your ROB to exclude my shell. My shell allows you to read your role of the ballot, it just functionally constrains how you can do that. Additionally, as long as I win comparative offense to my interp it precludes on a methodological level – my method is your ROB with specification, your method is just the ROB, so if the former is better it’s a reason to vote for me even if method debates in general preclude theory. Fairness is a prior question to determining the truth of a claim because absent fairness, it’s impossible to test whether one side is right. Also, if they go for the K first that proves the abuse of my shell since they should have specified in the AC.

#### D. Voters:

#### Fairness is a voter – a) Debate is a competitive activity that requires objective evaluation, and b) Debaters will quit if it’s unfair. Education is a voter – it’s the only portable benefit of debate. No RVIs – a) good theory debaters will bait out theory and always win, b) illogical – you shouldn’t win for being fair, and c) chilling effect – people are disincentivized from reading theory out of fear of losing on an RVI. Use competing interps – a) reasonability collapses because weighing between brightlines concedes the authority of an offense-defense paradigm, b) reasonability requires judge intervention, and c) creates a race to the bottom where people read increasingly abusive practices that minimally fit the brightline. Evaluate the theory debate after the 2nr because I don’t have another speech to point out new extrapolations and respond to new arguments. Drop the debater to deter future abuse and set better norms.

### 2

#### Ableism is seeded in a process constitutive of the disability drive – composing of primary pity, when one witnesses a fall of the ego and a recognition of the ability status as temporary, and secondary pity, which describes the egos attempt to overcompensate necessitating disabled violence.

**Mollow 15** Anna (2015): The Disability Drive, A dissertation submitted in partial satisfaction of the requirements for the degree of Doctor of Philosophy in English in the Graduate Division of the University of California, Berkeley Committee in charge: Professor Kent Puckett, Chair Professor Celeste G. Langan Professor Melinda Y. Chen Spring 2015 <https://digitalassets.lib.berkeley.edu/etd/ucb/text/Mollow_berkeley_0028E_15181.pdf> //Jia

Much as the differentiation between the inseparable processes of primary and secondary narcissism rests on a distinction between building up and breaking down the ego, a similar heuristic distinction gives structure to my concepts of primary and secondary pity. To be clear, pity and narcissism are not the same thing: if narcissism can be understood as love of the self, pity involves a complex affective reaction to the suffering of someone else. Primary pity entails a response to the image of another person succumbing to what I have termed the “tragedy of disability.”121 Primary pity arises when one witnesses a fall of the self, a collapse of the ego; such falling is at once painful and pleasurable to observe. In other words, primary pity could be described as a vicarious experience of the tragedy of disability. A great deal of the pain and pleasure of primary pity center on questions about what, or who, this fallen self is. When most people think about pity, we refer to an affect in which, to adopt Edelman’s phrase, we purport to “feel for the other.” But as with primary narcissism, in which the self has not yet been constituted, and therefore cannot be said to enter into intersubjective relations with an “other,” primary pity entails a mixing up of self and other such that the ego, in becoming permeable to pain that may properly belong to “someone else,” is profoundly threatened in its integrity. Primary pity is that intense pain-pleasure complex that is provoked by the image of a suffering other who, it seems momentarily, both is and is not one’s self. This affective response can feel unbearable, as seen in Siebers’s formulation: one “cannot bear to look...but also cannot bear not to look.” Primary pity is difficult to bear because it involves a drive toward disability (one cannot bear not to look), which menaces the ego’s investments in health, pleasure, and control—because to contemplate another person’s suffering is to confront the question, “Could this happen to me?” Such a prospect, although frightening, may also be compelling; in this way, primary pity replicates the self-rupturing aspects of sexuality. Indeed, the unbearability of primary pity reflects its coextensiveness with sexuality. Sex, or the Unbearable, a book coauthored by Edelman and by Lauren Berlant, argues that sex “unleashes unbearable contradictions that we nonetheless struggle to bear” (back cover). This claim accords with Freud’s account of sexuality as a “pleasurable” “unpleasure” that the ego can never fully master or control (Three 49,75). As Leo Bersani puts it in his reading of Freud, “the pleasurable unpleasurable tension of sexual enjoyment occurs when the body’s ‘normal’ range of sensation is exceeded, and when the organization of the self is momentarily disturbed”; thus, “sexuality would be that which is intolerable to the structured self” (Freudian 38). Primary pity is also intolerable to the structured self, because it entails a fascination with the fantasy of a self in a state of disintegration or disablement. Secondary pity is something else, although it cannot wholly be differentiated from primary pity. Secondary pity attempts to heal primary pity’s self-rupturing effects by converting primary pity into a feeling that is bearable. As with secondary narcissism, secondary pity involves both an attempt to get back to that ego-shattering state of painfully pleasurable primary pity, and at the same time to defend against that threat to the ego by aggrandizing oneself at someone else’s expense. Secondary pity refers to all those ego-bolstering behaviors that most people think of when they talk about pity. Disabled people are all too familiar with these behaviors: the saccharin sympathy, the telethon rituals of “conspicuous contribution,” the insistence that “they” (i.e., nondisabled people) could never endure such suffering. More commonly known in our culture simply as “pity,” secondary pity encompasses our culture’s most clichéd reactions to disability: charity, tears, and calls for a cure. Correlatives of these commonplace manifestations of secondary pity are the obligatory claims that disabled people’s suffering is “inspiring.” Indeed, the speed with which conventional cultural representations of disability segue from overt expressions of pity to celebrations of “the triumph of the human spirit” highlights the ways in which secondary pity, as a defense against primary pity’s incursions, reinforces the ego’s fantasy of sovereignty. Secondary pity, in other words, can be seen as a variation of secondary narcissism: these affects enlarge the ego of the pitier or the narcissist at the expense of someone else. But primary pity is not the same as either primary narcissism, secondary narcissism, or secondary pity. Unlike primary narcissism, a feeling that emerges out of a relation to the world in which notions of “self” and “other” do not obtain, primary pity does depend upon the constructs of self and other, although these constructions are unstable and are continually threatening to come undone. Primary pity can thus be envisioned as a threshold category occupying a liminal position between the total denial of the other that is inherent to primary narcissism and the rigid structure of (superior) self and (inferior) other that constitutes secondary narcissism and secondary pity. My concept of primary versus secondary pity also differs from Freud’s primary- secondary narcissism distinction at the level of genealogy. Like Freud’s account of primary and secondary narcissisms, my model of primary and secondary pities involves a temporal transition; but whereas Freud imagines the movement from primary to secondary narcissism as a passage from an earlier to a later stage of an individual’s development, the temporal shift from primary to secondary pity happens much more quickly than this. It happens in an instant: that moment in which we feel primary pity and then, almost before we can blink, deny that we feel or have felt it. The denial is understandable: who wants to admit that one gets pleasure from the sight of another person’s suffering—or, to make matters worse, that this pleasure derives in part from the specter of disability’s transferability, the possibility that this suffering could be—and, fantasmatically, perhaps already is—an image of one’s own self undone? Indeed, the model of primary pity that I have been constructing may sound a bit too close to sadism for some people’s liking. Pity does come close to sadism, and at the same time, to masochism, which Freud theorizes as sadism’s obverse. In “Mourning and Melancholia,” an essay that can be read as a sequel to “On Narcissism,” Freud approaches a distinction between primary and secondary masochism, which accords with my primary-secondary pity heuristic.122 If the story that I traced in “On Narcissism” could be summarized as “child gets breast; child loses breast; child gets breast back, albeit in a secondary, adulterated form,” the tale that Freud tells about masochism takes much the same form. In this story, subject loves object; subject loses object; and subject tries to get object back by becoming object, that is, by identifying with the object in such a way that object starts to seem—and perhaps in some ways is—part of subject’s self. This last phase is a dysfunctional and disabling form of identification, Freud makes clear. Subject is still angry at object for having left it, and it takes out that anger on the object that is now part of itself. This is the reason that people suffering from melancholia are so hard on themselves, Freud says; the “diminution in…self-regard” that typically accompanies melancholia results from the subject’s attacks on the loved-and-lost object that the subject has incorporated into its ego (“Mourning” 246). Freud had not wanted there to be such a thing as primary masochism; for a long time, he had insisted that sadism, or “aggression,” was the primary instinct, and that masochism was only a turning-inward of this originary aggression. But in “Mourning and Melancholia,” although Freud does not yet use the term “primary masochism,” he nonetheless gets at this concept. The problem of suicide, Freud notes in this essay, raises the possibility that the ego “can treat itself as an object” that it wants to destroy (252). When it comes to such an extreme act as suicide, the possibility of carrying “such a purpose through to execution” must, Freud surmises, involve more than a sadistic wish to punish others. Perhaps, then, there is an innate desire to destroy one’s own self, Freud hypothesizes. If so, this self would not be a single thing: it would be “me” and at the same time, the lost object whose image “I” have internalized. Freud’s notion of a primary masochism is tied very closely to his conceptualization of the drive. Beyond the Pleasure Principle, the text in which Freud first used the term “death drive,” was published three years after “Mourning and Melancholia.” In the later text, Freud’s speculations about the death drive lead him to acknowledge that “there might be such a thing as primary masochism” (66). After all, Freud points out, the idea that either sadism or masochism definitively takes precedence over the other does not ultimately make much sense, as “there is no difference in principle between an instinct turning from the object to the ego and its turning from the ego to an object” (66). If sadism and masochism are ultimately indistinguishable obverses of each other, then pity, in both its primary and its secondary forms, would have to be both sadistic and masochistic. This is a deeply troubling possibility, but I suggest that trying to overcome pity will only make matters worse. There are many ways of trying to overcome primary pity, and each one ultimately aggravates the violence of primary pity. One way is the “pitiless” refusal of compassion that Edelman advocates (70). Another is the disability activist “No pity” injunction. xA third example is secondary pity, as in the query, commonly addressed to disabled people, “Have you ever thought of killing yourself?”123 In this question, disabled people correctly hear the wish, “I’d like to kill you.” Indeed, primary pity is so unsettling that our culture has been driven to “mercifully” kill people in the name of secondary pity. We have also been driven to lock people in institutions, to let them languish on the streets, to stare, to punish, and to sentimentalize—all, I would suggest, in the interest of not owning, not naming, not acknowledging that self-shattering, ego-dissolving, instantaneous and intolerable moment of primary pity. Because primary pity is tied up with the disability drive, it must, like the drive itself, be regarded as unrepresentable. However, I will quote at length from a passage of writing that comes close not only to representing primary pity but also perhaps to producing it. In his memoir, One More Theory About Happiness, Paul Guest describes an experience that he had in the hospital after sustaining a spinal cord injury when he was twelve years old: My stomach still roiled and it was hard to keep anything down. Late one night, a doctor came to my bedside, leaning over me, his hands knotted together. He seemed vexed, not quite ready to say anything. Used to the look, I waited. And then he began. “The acids in your stomach, Paul, because of everything you’re going through, it’s like your body, everything about it, is upset. That’s why you feel so nauseous all the time. We’re going to treat that by putting a tube into your nose and down into your stomach, so we can give you medicine, OK?” When he walked away, I felt something begin to give way inside me. Up until then, I’d faced more misery and indignity than I would have thought possible. I lay there, numb and sick in a diaper, helpless. It was too much to bear, too frightening, a last invasion I could experience and not break, utterly. When he returned with nurses, I was already sobbing. Anyone so limited could hardly fight, but I tried. I tried. The neck collar prevented much movement, and any was dangerous, but I turned my head side to side, just slightly, a pitiful, unacceptable range. Fat tears rolled down my face like marbles. I begged them all, no, no, no, please no. “Hold him, hold him still,” the doctor said. Nurses gripped my head on either side. From a sterile pack, the doctor fished out a long transparent tube and dabbed its head in a clear lubricant. He paused almost as if to warn me but then said nothing. 77 Then the tube entered one nostril, its gauge slight enough to pass through, down my throat and into my stomach. I couldn’t thrash or resist. I could only relent. To the pain, the discomfort, but most distressingly the feeling of powerlessness, of violation. It was in that moment, I think, that the weight of everything which had happened fell upon me, undeniably, and the knowledge of it crushed me. (23-24) “Too much to bear,” Guest writes. The word “unbearable” would indeed be an accurate descriptor of this passage: both the experience of violence that it narrates and also the retelling of that experience produce sensations that, as in Berlant and Edelman’s account of sexuality, one cannot bear but must nonetheless “struggle to bear” (back cover). Guest’s account of a nonconsensual administration of an unwanted medical treatment is especially difficult to bear because it gives the reader no recourse to secondary pity: the passage offers no “lesson” to be learned, no invitation to feel “inspired,” nothing to make one feel in any way okay about what has happened. The medical violence that Guest recounts seems particularly devastating because it is readable as sexual: it takes the form of forced penetration, and it results in a “feeling of powerlessness, of violation” that resonates with experiences recounted by survivors of sexual assault.

#### The 1AC’s belief of a better future becomes complicit in the logic of rehabilitative futurism, which is threatened by the Disabled Child.

Mollow 2 The Disability Drive by Anna Mollow A dissertation submitted in partial satisfaction of the requirements for the degree of Doctor of Philosophy in English in the Graduate Division of the University of California, Berkeley Committee in charge: Professor Kent Puckett, Chair Professor Celeste G. Langan Professor Melinda Y. Chen Spring 2015 //Jia

“Let us begin our reexamination of Tiny Tim with a discussion of No Future, a text in which Tiny Tim takes a prominent position. No Future is a text with a target: the book takes aim at “the Child whose innocence solicits our defense,” a trope that Edelman names as the emblem of an ideology that he terms “reproductive futurism” (2). According to Edelman, commonplace cultural invocations of the figure of the Child (“not to be confused with the lived experiences of any historical children”) uphold “the absolute privilege of heteronormativity” (11, 2). Defying pronatalist social imperatives, Edelman names queerness as “the side of those not fighting for the children‟” (3) and urges queers to accept the culture’s projection of the death drive onto us by saying explicitly what Law and the Pope and the whole of the Symbolic order for which they stand hear anyway in each and every expression or manifestation of queer sexuality: Fuck the social order and the Child in whose name we’re collectively terrorized; fuck Annie; fuck the waif from Les Mis; fuck the poor, innocent kid on the Net; fuck Laws both with capital ls and with small; fuck the whole network of Symbolic relations and the future that serves as its prop. (No Future 29) Elsewhere, I have argued that No Future’s impassioned polemic is one that disability studies might take to heart. Indeed, the figure that Edelman calls “the disciplinary image of the ‘innocent’ Child” is inextricable not only from queerness but also from disability (19). For example, the Child is the centerpiece of the telethon, a ritual display of pity that demeans disabled people. When Jerry Lewis counters disability activists’ objections to his assertion that a disabled person is “half a person,” he insists that he is only fighting for the Children: “Please, I’m begging for survival. I want my kids alive,” he implores (in Johnson, Too Late 53, 58). If the Child makes an excellent alibi for ableism, perhaps this is because, as Edelman points out, the idea of not fighting for this figure is unthinkable. Thus, when Harriet McBryde Johnson hands out leaflets protesting the Muscular Dystrophy Association, a confused passerby cannot make sense of what her protest is about. “You’re against Jerry Lewis!” he exclaims (61). The passerby’s surprise is likely informed by a logic similar to that which, in Edelman’s analysis, undergirds the use of the word “choice” by advocates of legal abortion: “Who would, after all, come out for abortion or stand against reproduction, against futurity, and so against life?” (16). Similarly, why would anyone come out for disability, and so against the Child who, without a cure, might never walk, might never lead a normal life, might not even have a future at all? The logic of the telethon, in other words, relies on an ideology that might be defined as “rehabilitative futurism,” a term that I coin to overlap and intersect with Edelman’s notion of “reproductive futurism.” If, as Edelman maintains, the future is envisaged in terms of a fantasmatic “Child,” then the survival of this future-figured-as-Child is threatened by both queerness and disability. Futurity is habitually imagined in terms that fantasize the eradication of disability: a recovery of a “crippled” or “hobbled” economy, a cure for society’s ills, an end to suffering and disease. Eugenic ideologies are also grounded in both reproductive and rehabilitative futurism: procreation by the fit and elimination of the disabled, eugenicists promised, would bring forth a better future.” (68-69)

#### The 1ACs focus on epistemic performativity erases the material conditions of disability and is an independent link

Siebers 6 (Tobin, Prof of Literary and Cultural Criticism at the U of Michigan, “Disability Studies and the Future of Identity Politics”) DR 16

**The attack on identity by social constructionists is designed to liberate individuals constrained by unjust stereotypes and social prejudices. The example of disability in particular reveals with great vividness the unjust stereotypes imposed on identity by cultural norms and languages as well as the violence exercised by them.** It also provides compelling evidence for the veracity of the social model**. Deafness was not, for instance, a disability on Martha’s Vineyard for most of the eighteenth century because 1 in 25 residents was deaf and everyone in the community knew how to sign**. Deaf villagers had the same occupations and incomes as people who could hear.3 This example shows to what extent **disability is socially produced.** In fact, **it is tempting to see disability exclusively as the product of a bad match between society and some human bodies because it is so often the case. But disability also frustrates theorists of social construction because the disabled body and mind are not easily aligned with cultural norms and codes. Many disability scholars have begun to insist that the social model either fails to account for the difficult physical realities faced by people with disabilities or presents their body and mind in ways that are conventional, conformist, and unrecognizable to them. These include the habits of privileging pleasure over pain, making work a condition of independence, favoring performativity to corporeality, and describing social success in terms of intellectual achievement, bodily adaptability, and active political participation.** David Mitchell and Sharon Snyder have noticed that **the push to link physical difference to cultural and social constructs, especially ideological ones, has actually made disability** disappear from the social model. They cite a variety of recent studies of the body that use “corporeal aberrancies” to emblematize social differences, complaining that “physical difference” within common critical methodologies “exemplifies the evidence of social deviance even as the constructed nature of physicality itself fades from view.”4 As Davis puts it, **cultural theory abounds with “the fluids of sexuality, the gloss of lubrication, the glossary of the body as text,** the heteroglossia of the intertext, the glossolalia of the schizophrenic. **But almost never the body of the differently abled.”5 Recent theoretical emphases on “performativity,” “heterogeneity,” and “indeterminancy” privilege a disembodied ideal of freedom, suggesting that emancipation from social codes and norms may be achieved by imagining the body as a subversive text. These emphases are not only incompatible with the experiences of people with disabilities; they mimic the fantasy, often found in the medical model, that disease and disability are immaterial as long as the imagination is free. Doctors and medical professionals have the habit of coaxing sick people to cure themselves by thinking positive thoughts, and when an individual’s health does not improve the failure is ascribed to mental weakness**. Sontag was perhaps the first to understand the debilitating effects of **describing illness as a defect of imagination or will power**. She traces the notion that disease springs from individual mental weakness to Schopenhauer’s claim that “recovery from a disease depends on the will assuming ‘dictatorial power in order to subsume the rebellious forces’ of the body” (43-44). **She also heaps scorn on the idea that the disabled or sick are responsible for their disease concluding that “theories that diseases are caused by mental states and can be cured by will power are always an index of how much is not understood about the physical terrain of a disease**” (55**). The rebellious forces of the body and the physical nature of disease represent a reality untouched by metaphor.** Sontag insists that “the reality has to be explained” (55).

#### The starting point of the 1AC is epistemically flawed and an independent link – communicative spheres always zone out disability – anything that doesn’t begin from the question of disability allows ableism to infiltrate academia so breaking down notions of progress is necessary in the face of social death. Thus, the role of the ballot is to vote for the debater who best disrupts notions of progress within civil society.

Selck 16 Selck, Michael L. "Crip Pessimism: The Language of Dis/ability and the Culture that Isn't." (Jan 2016) //Jia recut

Despite the fact that a large basis of American culture is founded on ability, dis/ability rarely enters the dominant public communication sphere. The unpleasant and visceral questions that accompany communication about dis/ability have been strategically re-zoned and relocated like so many dis/abled patients, veterans, and transients. Yet, when conversation about dis/ability does seem to permeate the ideological walls of ability the messages are inspirationally distorted and optimistic. My time researching dis/ability in academia found that the conversation there mimicked the exploitive inspirational humaninterest trope found in cinema and journalism. To break the optimistic silence I set out with a performance art piece titled Under The Mantle to advance a theme of crip-pessimism, which intended to raise the stakes of contemporary dis/ability research. The beginning of this essay takes the time to detail the vast theoretical backgrounds of critical disability theory and philosophical pessimism. In the following section I reviewed intercultural communication literature for dis/ability because much of the theory literature I drew from existed outside the communication studies discipline. The evidenced lack of intercultural dis/ability artifacts up against a dis/ability centric performance art project necessitated an interdisciplinary multi-method framework. In that framework I demonstrate how autoethnography is significant to dis/ability studies because it illuminates even the most mundane able-bodied norms. In the final sections I offer a textual description of the performance and hone in on three explicit arguments that augment traditional thinking about dis/ability and communication. The trouble I encountered with dis/ability research in communication studies has to do with the way American culture understands offensive communication. Political correctness as a disciplining communication concept dictates what terms are socially acceptable at a given time. Political correctness underscores how many communication studies programs operate within the rubric of conflict (Wilderson, 2010). The thinking that suggests simply avoiding offensive terms will diminish oppression is within the rubric of conflict because it understands the oppression as materially reconcilable. What crippessimism does, and what UTM performed, is skepticism that speaking inspirationally and avoiding speaking offensively about dis/ability would end disablism. Instead I argued that what dis/ability represents is an antagonism, it is an oppression so much more foundational to the core of American values that linguistic reforms would not even scratch the surface. The significance of antagonism is that it raises the stakes of dis/ability research. The end goal of research should not be to service the meta-theoretical assumptions of the paradigm (Kuhn, 1962), because consequently the researcher never stops to ask if the assumptions of the paradigm are ethical, valid, or effective. Crippessimism is a call for some demolition and redistribution of communicative identity paradigms. If the radical promise of our theories is nothing more than a call for social stability then they are complicit in the neoliberal eugenic project. We need to theorize so that there is nothing already ‘given’ or taken for granted. Often in those moments, like the moments of so many textbooks, the underlying optimism goes completely unquestioned. Crip-pessimism as a theme is characterized by negotiating debates surrounding the efficacy of identity politics. Arguments that fit within the theme ask why the disabled should abandon their bodies in the political sphere. Social death has already occurred, the dis/abled are being rendered culturally unintelligible and physically fungible. So what we need when we are having discussions about how to progress is a theory that breaks down the notion of progress. The recognition and need for a theory like this comes about when we ask central dis/ability questions like: ‘when did eugenics end?’ and ‘where is disability in U.S. society before and after the passage of the Americans with Disabilities Act?’ and ‘globally has the Convention on the Rights of Persons with Disabilities reconciled the antagonism of disablism?’. These are the questions that I want to end on and encourage communication and dis/ability scholars alike to take up. As scholars and mass media engines continue to project dis/ability within the rubric of conflict our collective reliance on capitalism and neoliberalism grow deeper. It is my hope at the end of this project that my voice both in performing and in writing encourages more scholarship detailing the omnipresence of disablism in American culture. Under The Mantle is a reminder to me that all representations of dis/ability have consequences and in many cases all we need to witness those consequences is a slight perspectival

### Case:

#### Disability controls proximate cause to and explains all other violence – exclusion is explained only through biological inferiority. That outweighs the witchcraft stuff – 2 implications 1 is explanatory power, 2, we explain your violence.

Siebers 9 (Tobin Siebers, “The Aesthetics of Human Disqualification”, p. 5-8) //Jia

The appearance of lesser mental and physical abilities disqualifies people as inferior and justifies their oppression. It is now possible to recognize disability as a trope used to posit the inferiority of certain minority populations, but it remains extremely difficult to understand that mental and physical markers of inferiority are also tropes placed in the service of disability oppression. Before disability can be used as a disqualifier, disability, too, has to be disqualified. Beneath the troping of blackness as inbuilt inferiority, for example, lies the troping of disability as inferior. Beneath the troping of femininity as biological deficiency lies the troping of disability as deficiency. The mental and physical properties of bodies become the natural symbols of inferiority via a process of disqualification that seems biological, not cultural—which is why disability discrimination seems to be a medical rather than a social problem. If we consider how difficult it is at this moment to disqualify people as inferior on the basis of their racial, sexual, gender, or class characteristics, we may come to recognize the ground that we must cover in the future before we experience the same difficulty disqualifying people as inferior on the basis of disability. We might also recognize the work that disability performs at present in situations where race, sexuality, gender, and class are used to disqualify people as physically or mentally inferior. Aesthetics studies the way that some bodies make other bodies feel. Bodies, minimally defined, are what appear in the world. They involve manifestations of physical appearance, whether this appearance is defined as the physical manifestation itself or as the particular appearance of a given physical manifestation. Bodies include in my definition human bodies, paintings, sculpture, buildings, the entire range of human artifacts as well as animals and objects in the natural world. Aesthetics, moreover, has always stressed that feelings produced in bodies by other bodies are involuntary, as if they represented a form of unconscious communication between bodies, a contagious possession of one body by another. Aesthetics is the domain in which the sensation of otherness is felt at its most powerful, strange, and frightening. Whether the effect is beauty and pleasure, ugliness and pain, or sublimity and terror, the emotional impact of one body on another is experienced as an assault on autonomy and a testament to the power of otherness. Aesthetics is the human science most concerned with invitations to think and feel otherwise about our own influence, interests, and imagination. Of course, when bodies produce feelings of pleasure or pain, they also invite judgments about whether they should be accepted or rejected in the human community. People thought to experience more pleasure or pain than others or to produce unusual levels of pleasure and pain in other bodies are among the bodies most discriminated against, actively excluded, and violated on the current scene, be they disabled, sexed, gendered, or racialized bodies. Disabled people, but also sex workers, gay, lesbian, bisexual, and transgendered people, and people of color, are tortured and killed because of beliefs about their relationship to pain and pleasure (Siebers 2009). This is why aesthetic disqualification is not merely a matter for art critics or museum directors but a political process of concern to us all. An understanding of aesthetics is crucial because it reveals the operative principles of disqualification used in minority oppression. Oppression is the systematic victimization of one group by another. It is a form of intergroup violence. That oppression involves “groups,” and not “individuals,” means that it concerns identities, and this means, furthermore, that oppression always focuses on how the body appears, both on how it appears as a public and physical presence and on its specific and various appearances. Oppression is justified most often by the attribution of natural inferiority—what some call “in-built” or “biological” inferiority. Natural inferiority is always somatic, focusing on the mental and physical features of the group, and it figures as disability. The prototype of biological inferiority is disability. The representation of inferiority always comes back to the appearance of the body and the way the body makes other bodies feel. This is why the study of oppression requires an understanding of aesthetics—not only because oppression uses aesthetic judgments for its violence but also because the signposts of how oppression works are visible in the history of art, where aesthetic judgments about the creation and appreciation of bodies are openly discussed. One additional thought must be noted before I treat some analytic examples from the historical record. First, despite my statement that disability now serves as the master trope of human disqualification, it is not a matter of reducing other minority identities to disability identity. Rather, it is a matter of understanding the work done by disability in oppressive systems. In disability oppression, the physical and mental properties of the body are socially constructed as disqualifying defects, but this specific type of social construction happens to be integral at the present moment to the symbolic requirements of oppression in general. In every oppressive system of our day, I want to claim, the oppressed identity is represented in some way as disabled, and although it is hard to understand, the same process obtains when disability is the oppressed identity. “Racism” disqualifies on the basis of race, providing justification for the inferiority of certain skin colors, bloodlines, and physical features. “Sexism” disqualifies on the basis of sex/gender as a direct representation of mental and physical inferiority. “Classism” disqualifies on the basis of family lineage and socioeconomic power as proof of inferior genealogical status. “Ableism” disqualifies on the basis of mental and physical differences, first selecting and then stigmatizing them as disabilities. The oppressive system occults in each case the fact that the disqualified identity is socially constructed, a mere convention, representing signs of incompetence, weakness, or inferiority as undeniable facts of nature.