# jinaofdnjao

#### The 1ACs focus on epistemology erases the material conditions of disability

**Siebers 06** (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 imaginingthe 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 aff’s expansion of the medical complex is not an expansion of care, but rather, an expansion of an industry that labors to eradicate all diseases, which results in lethal eradication of difference, conceptualizing of bodies into medical objects, and accepts death if a cure is possible.

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I play out an imaginary future in my head: disability has been cured. The medical-industrial complex has worked toward this moment for many decades. The visceral experiences named by thousands of diagnostic labels will soon cease to exist both in individual body-minds and collectively in the world. I think about myself and all the disabled people around me- acquaintances, friends, coworkers, neighbors, family members, lovers, activists, cultural workers. I think about what we offer the world--comedy, poetry, performance art, passionate activism, sexy films, important thinking, good conversation, fun. I think about who we are and the ways in which our particular body-minds have shaped us. Who would we be without disability? Disability activist Harriet McBryde Johnson writes, "Are [disabled people] 'worse off'? I don't think so. Not in any meaningful sense. There are too many variables. For those of us with congenital conditions, disability shapes all we are. Those disabled later in life adapt. We take constraints that no one would choose and build rich and satisfying lives within them. We enjoy pleasures other people enjoy, and pleasures pe-culiarly our own. We have something the world needs."3 In my imaginary future, we, or future generations like us, wouldn't exist. I feel neither triumph nor progress but loss. At the center of cure lies eradication and the many kinds of violence that accompany it. On the surface, this claim appears hyperbolic. Many lives, including my own, depend on or have been made possible by cure and its technologies. As it supports and extends life, the restoration of health seems to be the opposite of eradication. But cure arrives in many different guises, connected to elimination and erasure in a variety of configurations. In one permutation, the same medical-industrial complex that saved my mother and me would, if it could, eliminate cerebral palsy from both my individual body-mind and the world at large. In this guise, a multitude of visceral differences would cease to exist. They include both life- threatening conditions (AIDS, malaria, smallpox, and many kinds of cancer, to name a few) and conditions deemed defects but that aren't necessarily lethal (autism, cerebral palsy, hearing voices, and the lasting impacts of spinal cord injuries, for example). The list of body-mind differences, illnesses, and so-called defects that the medical-industrial complex wants to eradicate goes on and on. This kind of elimination benefits some of us in significant ways-saving our lives or increasing our comfort. At the same time, it also commits damage, routinely turning body-minds into medical objects and creating lies about normal and natural. In a second permutation, the medical-industrial complex focuses not specific diseases and disorders but rather on the people who have these conditions. This kind of eradication is often intent on changing the future by manipulating the present. I think about disability-selective abortion. In today's world, the ideology of cure doesn't suggest that we round up everyone who has Down Syndrome and eliminate them. Instead, genetic testing and counseling are paired with abortion, setting the scene for eradicating the future possibility of people with Down. Every day doctors pressure pregnant people to undergo genetic testing, and counselors release the results and guide the course of the conversations that follow. As a result, prospective parents in the United States decide to abort about two-thirds of fetuses predicted to have Down. This termination of pregnancy for the specific reason of not wanting a disabled child clearly manipulates the present. Eradication happens in this moment, but it also extends into a future that is no more than nine months away. In that future, one less person with Down syndrome exists. The choice of each individual parent stacks up until thousands of fetuses predicted to have Down are aborted every year. I'm less interested in the rightness or wrongness of these choices by themselves than in the distinct pattern they create when placed side by side, exposing the systemic desire to erase a whole group of people. This future-focused eradication is easy to shrug past, because many of us have been seduced into believing the need to eliminate disability and "defectiveness" is intuitively obvious. In a third permutation, the resolve to eradicate particular body-mind conditions stops for nothing, including the possibility of death in the present. I think about the separation of conjoined twins. These surgeries are intensely risky and not always necessary for survival and well-being. Often the high-tech, hours-long medical procedures become media spectacles, with cameras following the families and filming the operations. In an ABC News story from 2015 about the separation of the infants Connor and Carter Mirabal, a nurse says, "Now they are truly boys, individuals," suggesting that a non-conjoined body-mind is a requirement for individuality, possibly even for personhood. Moments later one of the surgeons echoes her sentiments: "It felt good to see them in separate rooms. They seem like individuals now." This emphasis on individuality underlines their belief in the superiority of one kind of body-mind over another. We never learn how Connor and Carter were actually doing before. Was this surgery essential for their survival? Or was it an exercise in eliminating what is deemed abnormal and defective, reshaping it to be normal? In some separation surgeries, doctors intentionally sacrifice one of the twins in order to save the other, most often when neither will survive if they remain conjoined. This exact situation landed in the court system in the United Kingdom in 2000. Doctors at St. Mary's hospital in Manchester, England, wanted to pursue the separation of Gracie and Rosie Attard, a surgery that they knew would lead to Rosie's death. Their parents, Michaelangelo and Rina Attard, refused to give consent. The surgeons sued the Attards and won. In the legal decision, the judges' logic is revealing. One declared, "The operation would give [Rosie], even in death, bodily integrity as a human being." Without apology, he justified the eradication of this disabled girl through an argument about personhood. In his logic, literal elimination of life becomes cure. In all three configurations, elimination of some kind-of a disease, of future existence, of present-day embodiments, of life itself- is essential to the work of cure. Sometimes these eradications result in benefit, but they can also cause individual death and the diminishment of whole groups of people. The violence that shadows these erasures could be framed as a mere side effect, or the unavoidable cost, of saving lives and normalizing body-minds. But let me suggest a different framing: that this violence is something more inherent-a consequence, an impact, even an intent. I don't mean that each individual instance of cure is violent. Remember, the restoration of health arrives in many slippery guises. Rather I mean that as a widespread ideology centered on eradication, cure always operates in relationship to violence

#### Historical analysis fails and doesn’t account for the factors that shape disability

**Gleeson, 99** (Brendan Gleeson is the professor of Urban Policy Studies at Melbourne University, “Geographies of Disability”, 1999, <https://books.google.com/books?id=6UsqBgAAQBAJ&pg=PA56&lpg=PA56&dq=The+rest+of+this+book+is+devoted+to+this+unfinished,+indeed+hardly+established,+project+of+writing+%27body+histories%27.&source=bl&ots=6bp5MLe4sl&sig=-XADEI9o-d5PkyGHITqYYP32OHM&hl=en&sa=X&ved=0ahUKEwjvgbvH0p_VAhUBVj4KHRTmD34Q6AEIJTAA#v=onepage&q=The%20rest%20of%20this%20book%20is%20devoted%20to%20this%20unfinished%2C%20indeed%20hardly%20established%2C%20project%20of%20writing%20'body%20histories'.&f=false> )

Any historical analysis must have both an empirical starting point and a framework for understanding temporal social change. Disabled people's lives have been shaped and differentiated by the historical structuring of social relations around a variety of social cleavages, such as class, gender, race, and sexuality. I chose a political-economic frame for my empirical analyses because the historical rise of capitalism generated a profound, and inescapable, source of material change in the increasing array of societies which have yielded in time to commodity relations. I therefore wish to elaborate how this vital transformative force has affected the social geographic circumstances of disabled people. By choosing a political-economic historical framework, I do not wish to dismiss or downplay the contribution of other socio-cultural structural influences on the historical experience of disability. My analyses will capture at various points the effects of these other socialising forces. None the less, I cannot, and do not, claim that the following historical geographies provide a complete picture or explanation of the changing experiences of disabled people in Western societies. It will be the task of subsequent historical geographies of disability to elucidate more fully the complex influences of various identity forms on the past lives of disabled people. I hope to contribute to this process by offering glimpses on the role that political- economic dynamics played in this historical process. The aim of this chapter is to provide a conceptual introduction to the second part of the book which deals with the historical experience of disability in feudalism and industrial capitalism. In this chapter, I will distil from the framework developed in the previous part of the book a set of historiographical principles which can guide the study of disability in past societies. To do so, I will first need to engage the present historiography of disability which I referred to briefly in Chapter 2. My analysis here will begin with a short, critical review of this historiography, followed by an outline of my alternative historical-geographical method of analysis. Conventional approaches to the history of disability As I explained in the previous two chapters, there has been relatively little attempt within social science to understand the historical experience of disability in any depth. The few serious historical studies of disability hardly constitute a comprehensive and critically engaged debate on the topic. Moreover, the limited historiography of disability studies seems to have littered the field with a number of assumed orthodoxies about the social context of impairment in previous societies (Gleeson, 1996b). I want to examine these assumptions critically in the following discussion with a view to providing an alternative historiography in the second part of this chapter.

#### Metaphors of haunting facilitate ableist narratives---they distract our attention away from the historical reality of institutions that prioritized violence against disabled bodies

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It is not just the actual violence from which Elsie Lacks suffers that haunts our reading of Immortal Life; it is also the treatment of this violence as unremark- able, its erasure naturalized as very much part of our daily landscape. When first teaching the Skloot text in the fall of 2010 in a course entitled “Gender and Science” at the University of Connecticut, one of the authors discussed how a section of the campus—now known as the Depot campus—that houses human resources and other campus offices and departments was home to the Mansfield Training School and Hospital. This space functioned as an institution that **segregated both children and adults with cognitive disabilities and epilepsy**, and was also one of the locations where eugenic sterilizations were carried out in the state of Connecticut. While the students did not know much about the history of this space, they were nevertheless aware of the narratives about ghosts haunting the Depot campus. We identify such narratives as **ableist practices that structure oppressive** andconsequently violent representations of the residents of these state institutions such that their life stories are reduced to tawdry inconsequence. Now that these buildings have been repurposed for use by educational institutions, we must reflect on how the spaces we traverse as educators/students are often layered with histories of ableist and racist regimes of violence that are rendered invisible and are thereby casually made to disappear into the woodwork. Such disappearances, Grace Kyungwon Hong explains, serve to erase the violence of the past and of the present in a way that enables **neoliberal regimes to maintain their legitimacy** and power over those whom they have deemed unworthy of life (30). To mention a parallel anecdote, the second author of this essay has been teaching a course on social and cultural studies in education for the past two years to pre- service teachers in another repurposed wing of the former Bryce Hospital, at one time one of the largest psychiatric institutional facilities in Alabama. Here, too, none of the students in the course was aware of the shameful history of Bryce, known for the landmark case Wyatt v. Stickney. This case, brought to court by the fifteen-year-old Ricky Wyatt and his aunt, a former Bryce employee, exposed the horrible conditions in which inmates lived and was the harbinger of the deinstitutionalization movement of the 1970s. However, as in the Depot campus example, the undergraduate stu- dents at the University of Alabama were more aware of another institution in the same town, the Jemison Center (also known as the Old Bryce), now in ruins, which served as a segregated institution for black children and adults and generated similar **ableist narratives of hauntings**. Here again, the **language of ghosts distracts our attention** from the historical reality of the violence committed against the institution’s black and/or disabled residents by transforming their real experiences of violence into a phantom presence easily consumed for cheap thrills. What are we to make of these erasures of the histories of lives lived that are now supplanted by tawdry tales of ghosts that haunt the spaces in which we live and work? For example, quickly Googling the “Depot campus” at the University of Connecticut produces plenty of blog postings documenting individual attempts to hunt down these ghosts. Many sites reference the pasts of these institutional settings as “proof” of these ghosts. An October 2015 article in Connecticut Magazine, in dis- cussing the Mansfield Training School and Hospital, avers: “Connecticut has more than its share of shuttered mental health facilities, where, although the actual histories are benign and the vast majority of patients were tenderly cared for, movie-inspired imagined cruelties and struggles make for fertile ground that’s ripe for supposed hauntings” (“Haunted Connecticut” 51). The “official” discourse of benign treatment actively hides the scope of violencethat is pervasive in carceral settings while casually attributing the inevitability of the proliferation of some narratives of haunting to Hollywood-inspired imaginations. Yet again, the experiences of violence enacted against incarcerated disabled bodies, many of them poor and black**, become metaphors in an ableist narrative of vengeful ghosts seeking justice**. Similarly, narratives of “paranormal” activity at the Jemison Center abound on the Internet. Many of these accounts reference the mixing of “fact” with “fiction” by acknowledging the segregated history of this institution that included the forced labor of former slaves, but then explain this history away by describing the alleged hauntings as an inevitable outcome of such institutional spaces. The stories of resident ghosts in these institutions become urban legends that attract visitors at Halloween, while actively obscuring complex historical accounts of the violence experienced by the actual inmates. As Emily Smith Beitiks, associate director of the Paul K. Longmore Institute on Disability, explains:9 The history of institutionalization is indeed horrific, but the **abuses that were committed were overwhelmingly directed at residents with disabilities**, not the other way around as haunted attractions suggest today. Yet these horror playgrounds of disability succeed because the history of institutions is not widely known. That so many people flock to these attractions year after year shows how much work we have ahead. In this essay, the “hauntings” we draw from our analytic toolbox do not belong to this genre of sensationalist representation. Conscious of the ways in which any discussion of hauntings can be transformed via neoliberal practices into a prof- itable venture, we refuse to reproduce these practices. Rather, as educators who are aware that we inhabit spaces of institutional violence that are seldom recognized, we take seriously the need to foster a critical pedagogy that foregrounds the histories of violence our neoliberal institutions feel compelled to hide, even while at the same time these institutions (as well as faculty, administrators, staff, and students) **allow for an ableist and racist circulation of ghosts to become stories** shared in the cafeteria, on social media, and at Halloween. Recently demands from student move- ments in many universities across the U. S. to remove the names of slaveowners and members of the KKK from the academic buildings named after them have led to discussions of whether such erasures will actually disrupt institutionalized racism in Predominantly White Institutions. How educational institutions address the histories of repurposed carceral institutions on their campuses should also merit a similar discussion. Our attempts to foreground these erasures of histories through hauntings as an analytic also cautions us against reproducing the narrative of the vengeful, ghostly, disabled subject while engaging in a materialist analysis at the intersections of race, class, and gender. In describing her methodology, Gordon asks: “What kind of case is a case of a ghost? It is a case of haunting, a story about what happens when we admit the ghost—**that special instance of the merging of the visible and the invisible**, the dead and the living, the past and the present—into the making of worldly rela- tions and into the making of our accounts of the world” (24). What we find striking in this methodology is the move to admit the ghost, and in doing so, facilitate entry. While most often the act of admission assumes letting someone into a location, whether an institution of higher learning because of test scores and grade-point averages or a hospital because of a supposed need for medical treatment, the act of admission to which we allude requires recognizing the ghost as a social figure who holds in its elusive form both the absence and presence of its history.

#### \*T And The role of the ballot is to challenge ableism. Assumptions of ableism are inherent in systems of knowledge production thus ableism is an a priori question \*A Campbell 13\*C

**Campbell 13 (Fiona Kumari Campbell, Adjunct Professor in the Department of Disability Studies at Griffith University. Wednesday 27 November 2013. Problematizing Vulnerability: Engaging Studies in Ableism and Disability Jurisprudence. Keynote speech at Disability at the Margins: Vulnerability, Empowerment and the Criminal Law)**

What is meant by the concept of ableism? The literature suggests that the term is often used fluidly with limited definitional or conceptual specificity. The work of Carlson (2001)5 and Campbell (2001) represented a turning point in bringing attention to this new site of subordination not just in terms of disablement but also ableism’s application to other devalued groups. **Ableism is** deeply **seeded at the level of knowledge systems** of life, personhood and liveability. **Ableism is not just** a matter of ignorance or **negative attitudes** towards disabled people; **it is a schema of perfection**, **a** deep **way of thinking about bodies**, wholeness and permeability.6 As such integrating ableism into social research and advocacy strategies represents a significant challenge to practice as ableism moves beyond the more familiar territory of social inclusion and usual indices of exclusion to the very divisions of life. Bringing together the study of existence and knowledge systems, ableism is difficult to pin down. Ableism is a set of processes and practices that arise and decline through sequences of causal convergences influenced by the elements of time, space, bodily inflections and circumstance. Ability and the corresponding notion of ableism are intertwined. **Compulsory ablebodiedness is implicated in the** very **foundations of social theory**, therapeutic jurisprudence, advocacy, medicine and law; or in the mappings of human anatomy. Summarised by Campbell (2001, 44) Ableism refers to; …A network of beliefs processes and practices that produces a particular kind of self and body (the bodily standard) that is projected as the perfect, speciestypical and therefore essential and fully human. Disability then is cast as a diminished state of being human. Writing today (2013) I add an addition to this definition: ‘The ableist bodily configuration is immutable, permanent and laden with qualities of perfectionism or the enhancement imperative orientated towards a self-contained improvability’. Sentiency applies to not just the human but the ‘animal’ world. As a category to differentiate the normal from the pathological, the concept of **abledness is predicated on** some **preexisting notion about the nature of typical** species **functioning** that is beyond culture and historical context. **Ableism** does not just stop at propagating what is typical for each species. An ableist imaginary **tells us what** a healthy body means – a normal mind, the pace, the tenor of **thinking and** the kinds of **emotions** and affect that **are suitable to express**. Of course these ‘fictional’ characteristics then are promoted as a natural ideal. This abled imaginary relies upon the existence of an unacknowledged imagined shared community of able-bodied/minded people held together by a common ableist world view that asserts the preferability and compulsoriness of the norms of ableism. Such ableist schemas erase differences in the ways humans express our emotions, use our thinking and bodies in different cultures and in different situations. This in turn enacts bodily Otherness rendered sometimes as the ‘disabled’, ‘perverted’ or ‘abnormal body’, clearly demarcating the boundaries of normal and pathological. A critical feature of an ableist orientation is a belief that impairment or disability is inherently negative and at its essence is a form of harm in need of improvement, cure or indeed eradication. Studies in Ableism (SiA) inverts traditional approaches, by shifting our concentration to what the study of disability tells us about the production, operation and maintenance of ableism. In not looking solely at disability, we can focus on how the abled able-bodied, non-disabled identity is maintained and privileged. Disability does not even need to be in the picture. SiA’s interest in abledness means that the theoretical foundations are readily [is]applicable to the study of difference and the dividing practices of race, gender, location and sexual orientation. **Reframing our focus** from disability to ableism prompts different preoccupations: • What does the study of the politics of ‘vulnerability’ tells us about what it me ty ans to be ‘non-vulnerable’? • Indeed how is the very conceptualisation of ‘autonomy’ framed in the light of discourses of ‘vulnerability’? • In representing vulnerabilias universal does this detract from the specificity of disability experiences? SiA examines the ways that concepts of wellbeing, vulnerability and deficiency circulate throughout society and impact upon economic, social, legal and ethical choices. Principally SiA focuses on the limits of tolerance and possessive individualism. Extending the theorization of disability, studies in ableism **can enrich our understanding of the** production of vulnerability and the **terms of engagement in** civic **life** and the possibilities of social inclusion. I now turn to unpacking the nuances and structure of a theory of ableism.

#### The alternative methodology is to imagine CripTopia, a disability utopia, to uncover the lived experiences of disabled bodies. To clarify the advocacy calls for us to imagine CripTopia in this round. Campbell 12

**Fiona Kumari. (2012). 'Stalking Ableism: using Disability to Expose 'Abled' Narcissism'**

[**https://www.researchgate.net/publication/296970004\_'Stalking\_Ableism\_using\_Disability\_to\_Expose\_'Abled'\_Narcissism**](https://www.researchgate.net/publication/296970004_'Stalking_Ableism_using_Disability_to_Expose_'Abled'_Narcissism)**'**

**Difference can be a vexed issue** even **within** modern liberal **societies**. **The tendency** for many people **is** still **to emulate** or at least appear to refashion **normative ways of being.** Much of the intellectual traffic for the rethinking of disability in terms of anti-sociality has emerged through debates about the merits of social inclusion and liberal notions of equality and resilience strategies to break the abled stranglehold. Legal theorists like Ruth Colker who argues that anti-subordination rather than integration should be the measure of equality are the exception (Colker, 2006). There is limited work within disability studies, especially in approaches influenced by the social model of disability or social role valorisation theory, that take a trans-integration or post-normalisation perspective. What if we turned our backs on ‘fitting in’ – what would be the opportunities, the consequences and maybe dangers, to give ‘attention to the lived intricacies of embodiment offer[ing] alternatives to normalization efforts aimed at homogenizing social outsiders (Snyder & Mitchell, 2010, 113)’? For this imaginative undertaking it is necessary to turn to the theoretical work by other ‘outsider’ groups – queer theorists. Spearheading the critique of the ‘different but same’ stance of social justice formulations are ‘anti-social’ queer theorists (Bersani, 1986, 1996; Edelman, 2004; Halberstam, 2005, 2008; Muñoz, 2007). This section will outline some of the conceptual drivers of the anti-social argument and their adoption for developing an anti-sociality posture of disability. Leo Bersani’s seminal work (1986, 1996) formulated an anti-social, negative and anti-relational theory of sexuality. These works along with the writings of Edelman (2004), Halberstam (2005, 2008) and Muñoz (2007) set the stage for the decoupling of queer marginality from the liberal projects of tolerance and social inclusion. Before moving into a consideration of how certain conceptual renderings may be applied to the disability situation, it is useful to familiarise ourselves with how the neologism queer is understood by anti-social theorists. Lee Edelman’s No Future: Queer Theory and the Death Drive does not indicate the parameters of queer, but concludes that ‘queerness can never define an identity; it can only ever disturb one’ (2004: 17). Queer, while originating from the purview of diverse sexualities, easily extends to other kindred forms of ontological and corporeal aberrancies and ambiguities (such as disability). So it is right for Halberstam (2005: 6) to embrace a more elastic connotation of queer which refers to ‘non-normative logics and organizations of community, sexual identity, embodiment and activity in space and time’. From this reckoning, the disabled person is already queered. Queer, then is antitheoretical to the regime of ableist translation. In a world that makes claims to integrity using the argument based on equality as sameness (we are normal, we are everyday people), it would seem a bit bold or offensive to suggest that people with disability are different from the run-of-mill ableist norm emulators. Ahmed (2006) points to an alternate prism, a ‘migrant orientation’ to capture a disorientation faced by queer folk which I extend to include disabled people. The disorientation, a form of radical estrangement propels a lived experience of facing at least two directions: towards a home that has been lost (the desire to emulate ableist norms), and to a place that is not yet home. Regimes of ableism have produced a depth of disability negation that reaches into the caverns of collective subjectivity to the extent that disability negativity is seen as a ‘naturalized’ reaction to an aberration. **Not negating** queerness or **disability can cultivate alternate kinds of liberty** that de-identify with the rhetoric of social inclusion. A key marker of the anti-social turn is temporality – contemporarity and futurity – an explication of the current marginal stance and the vision for future. It is this orientation of predicament and **utopianism** that **can speak to** the **disability** realm. For disability, utopianism is a conflicted zone – there is no future existence, disability dreaming is expunged and the utopian drive is a device for promise (of curability), hence extinction of the impairment state. Jose Esteban Muñoz (2007: 453) in speculating about the absence of a queer imagination elicits a desire to engage in a queer horizon, a utopian hermeneutics where re-imagining futurity requires that ‘the not quite conscious is the realm of potentiality that must be called upon’. The distance between imagination and potentiality means that ‘queerness is not quite here’. Our imaginations are not yet exhausted. Muñoz explains: to argue that we are not quite queer yet, that queerness, what we will know as queerness, does not yet exist. I suggest that holding queerness, in a sort of ontologically humble state, under a conceptual grid wherein we do not claim to always already know queerness in the world, potentially staves off the ossifying effects of neoliberal ideology. (Muñoz, 2007: 454) How does an alternative horizon for disabled people come to be formulated? Living in the now and not yet, as outsiders, not quite inside, requires a disposition or habit of contemporariness. Contemporariness signifies a relationship with the present but also a distance, a critical space from it. As Agamben explains: Those who are truly contemporary, who truly belong to their time, are those who neither perfectly coincide with it nor adjust themselves to its demands. They are in this sense irrelevant [inattuale]. But precisely because of this condition, precisely through this disconnection and this anachronism, they are more capable than others of perceiving and grasping their own time. (2009: 40) Disabled people are called to live as contemporaries. The queering or cripping of contemporariness is the grasping and holding tight to ambivalence and obscurity so fundamental to the alternate lifestyle which is obtained through fixing the gaze not on our era’s light but the underbelly, or in Agamben’s language ‘darkness’ – which shines into the staree. In this sense, the contemporary queered and cripped person, in touching an elusive imaginary, sees the now and the emergent not as a death drive, but in terms of unlivedness: The present is nothing other than this unlived element in everything that is lived. That which impedes access to the present is precisely the mass of what for some reason … we have not managed to live. The attention to this ‘unlived’ is the life of the contemporary. (Agamben, 2009: 51) The matter of **re-imagining a disability** or cripped **horizon**, a future without the stain of ableism, although elusive and out of grasp, **is** nonetheless **fundamental** in order **to move to hopefulness and capture** that **unlived possibility in** the lives of many with **disability**. Can the so-called shadows of a disabled life be sites of invigoration? What is ‘unlived’ in our lives? Crippin’ the human involves a differential gaze – where sometimes signs and gestures predominate, where there is a different mind style such as Tourette’s syndrome or autism, or a centring on visuality or tactility. A grounded earthiness can be ‘different’ through echolocation and waist heightedness. Halberstam (2008) speaks of acts of unbecoming. Through what she describes as ‘wilfully eccentric modes of being’, it is worth conjuring and queering concepts of passivity held against disabled people, as a refusal to live up to ableist expectations of performativity: [I]n a performance of radical passivity, we witness the willingness of the subject to actually come undone, to dramatise unbecoming for the other so that the viewer does not have to witness unbecoming as a function of her own body. (Halberstam, 2008: 151) This radical passivity, for disabled people, would indeed have to be radical, as disabled people already live under the enormous weight of being characterised as passive. It is a tough ask to claw back and produce a cripped notion of passivity. Sunny Taylor does this in her quest for the right not to work: I have a confession to make: I do not work. I am on SSI [social security benefit]. I have very little work value (if any), and I am a drain on our country’s welfare system. I have another confession to make: I do not think this is wrong, and to be honest, I am very happy not working. Instead I spend the majority of my time doing the activity I find the most rewarding and valuable, painting. (Taylor, 2004: 30) Such strange temporalities, imaginative life schedules present alternative[s] temporalities which disability studies scholars have all along known, disrupt the parameters of the human (Halberstam, 2005; Campbell, 2009; McRuer, 2006). Having said this, it is all the more extraordinary that disabled people have not yielded to this repression but have resisted docility and engaged in transgressive ways of living disability. Ableism is founded on a utopian hermeneutics of the desirable and the disgusting and therefore it is, as Halberstam (2008: 153) puts it, necessary to inculcate alternative political imaginaries. McRuer (2008) drew my attention to the way Halberstam’s perspective can incorporate disability as also outside the lifecycle: I try to use the concept of queer time to make clear how respectability, and notions of the normal on which it depends, may be upheld by a middle-class logic of reproductive temporality. And so, in Western cultures, we chart the emergence of the adult from the dangerous and unruly period of adolescence as a desired process of maturation; and we create longevity as the most desirable future, applaud the pursuit of long life (under any circumstances), and pathologize modes of living that show little or no concern for longevity. Within the life cycle of the Western human subject, long periods of stability are considered to be desirable, and people who live in rapid bursts (drug addicts, for example) are characterized as immature and even dangerous. (Halberstam, 2005: 4–5) Cripped time can be staggered, frenzied, coded, meandering and be the distance between two events. Some of our time is shaped according to another’s doing – service time – the segmenting and waiting on assistive agencies. Aside from service time, there is a transient time whereby our cripped selves rub up against biology, environmental barriers and relationality. Like queerness, the lifecycle refuses patterning – there is a different vision with localised goals. Instead of proposing argument based on normalisation and similarity to the heteronormative (and by extension ableist normativity), Edelman (2004) proposes a politics of negativity, on the basis that queers, as outsiders, are embodied differently having counter-intuitive, queered forms of negative knowing (Halberstam, 2008: 141). Edelman implores queers to be norm resisters, to come out from normative shadows and fess up to futurist ‘inability’: ‘instead of fighting this characterization by dragging queerness into recognition, he proposes that we embrace the negativity’ (Halberstam, 2008: 141). Relinquishing the norm as a lost cause enables an outlaw flowering of beingness that is anti-social. Disability as perverse and anti-social The disabled life puts out fear and possibility. This is a conflict over liminality that many disabled people experience. How does the person with a disability negotiate the expectations and compulsions of ableism? In other words, do they choose to conform to or hypermimic ableism or do they go it alone and explore alternative ways of being? People with impairments have impairment – mediated proprioceptive ways of experiencing being in the world. In contrast there is the unspeakability of communality and commonality where disabled people can, as Overboe does in his spasms ‘give [him] great joy… [becoming] a life-affirming presence’ (2007, 221). Elsewhere I have argued that disabled people ‘are in effect strangers in ableist homelands – who because of their strangeness have the possibility of a new vision or orientation’ (Campbell, 2009: 161). Reading ‘disability’ in a positive (anti-social) light requires an apriori negotiation with what Foucault (1976) refers to as the effects of the ‘implantation of perversions’, the consolidation of erratic desiring. Foucault’s’ thinking about desire suggests that a desire towards emulation of the ableist subject mitigates against the development of an anti-social framing of disability outside the realms of the perverse. The challenge then is to take up these ‘implantation of perversions’, to develop as Foucault puts it ‘the thought of the outside’, a thought at the queer margins: A thought that stands outside subjectivity, setting its limits as though from within, articulating its end, making its dispersion shine forth, taking in only its invincible absence; and that, at the same time, stands at the threshold of all positivity, not in order to grasp its foundations or justification but in order to regain the space of its unfolding, the void serving as its site, the distance in which it is constituted and into which its immediate certainties slip the moment they are glimpsed. (1998, Orig 1966: 150) Slippages in certainties do create precariousness but also the possibility to (re)imagine the circumstances of disability. It is in between these conflicted traces of subjectivity that the perverse inkling of anti-social disability, an outlaw ontology, lurks. For Foucault, ‘the thought of the outside’ contains a double imperative: (negative) desire reaches into our (disabled) interiority, the emptiness, and the state of be-ing outside: ‘the fact that one is irremediably outside the outside … infinitely unfold[ing] outside any enclosure’ (Foucault, 1998: 154). Director Hara Kazuo’s 1972 film Goodbye CP, a stark black and white portrayal of Green Lawn, a Japanese activist group of people with cerebral palsy, includes a scene where the central character Yokota Hiroshi who walks on his knees because it is faster than a wheelchair is followed, in handing out leaflets. Hiroshi remarks: I walk slow and look pathetic. What’s wrong with that? ... We are outsiders. We really are. We can never be insiders. Those who think they are insiders may end up being outsiders. Why don’t they realize that? That’s the point we are trying to make. (Hiroshi, in Kazuo, 1972) Foucault is correct that **we can never** really **‘know’** the outside, **the** liminal **margins because its ‘essence’ remains inherently unknowable** and ambiguous. **To step outside the normative** trajectories **of negativity** not only destabilises the conception of disability, but also confuses and **disrupts the** processes of **subjectification** by confronting the ‘goodness’ **of disability.** Hiroshi is emblematic of the anti-sociality stance of disability. Such an act is subversive as Hiroshi positions his impaired body as queered and perverse. He is perverse because Hiroshi in effect does not ‘give a damn’ about presumed appearances – he is his own man in his embrace of outsiderness. 9780230243255\_14\_cha13.indd 227 780230243255\_14\_cha13.indd 227 4/4/2012 11:43:57 AM /4/2012 11:43:57 AM 228 Stalking Ableism I propose that at an ontological level the disabled body as a body is perverse; it is in effect anti-social in its departure from ableist normativity. A word of caution, in rejecting norm emulation the anti-social body still exists and lives under normative shadows. Anti-sociality can be about being on guard, reminding of, removing, resisting and rectifying the consequences of ableism.

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#### And, the Alternative has solvency. Disability provides opportunities to reframe our relationship with life and death to fuel utopic visions of the future that provide alternative maps for living. Goodley 14

**Goodley et al. Dan,  “Dis/Ability and Austerity: beyond Work and Slow Death.” Taylor & Francis, 6 June 2014, www.tandfonline.com/doi/full/10.1080/09687599.2014.920125.**

Secondly, what alternatives does disability offer to the slow death of neoliberal-ableism and false promises of austerity? For David Mitchell (2014 Mitchell, D. 2014. “Gay Pasts and Disability Future(s) Tense. Heteronormative Trauma and Parasitism in Midnight Cowboy.” Journal of Literary & Cultural Disability Studies 8 (1), 1–16.[Crossref], [Google Scholar], 1–2): ‘**disability subjectivities create new forms of embodied knowledge and** collective consciousness. Queer and disabled people’s interdependencies **provide alternative** ethical **maps for living** together outside of, even **in opposition to, the dictates of normalcy**’. This resonates with stories emerging from our current ESRC project ‘Big Society? Disabled People with Learning Disabilities and Civil Society’ (grant reference: ES/K004883/1). The research team, from The University of Sheffield, Manchester Metropolitan University, Northumbria University and The University of Bristol, are working with organisations of/for disabled people, activists and allies to discover how disabled people with learning disabilities are participating in their communities, in public services and in social action. The team is exploring disabled people with learning disabilities access to social capital and networks of interdependence as well as their social emotional well-being in a context of austerity. Here is a story from our project: An account from our Inclusive Living colleagues: Pete and Wendy Crane, along with colleagues including person-centred planning coordinator Max Neil, have developed the Circles of Support approach to community living. This involves individuals such as Matt (a pseudonym) using their welfare benefits to recruit a network of advocates and support staff to support him 24/7 in his own home which is located a couple of streets down from his parents. (Goodley 2014 Goodley, D. 2014. Dis/Ability Studies: Theorising Disablism and Ableism. London: Routledge. [Google Scholar], 128) **Disability**, then, **offers opportunities for reconsidering our relationships with life**, labour **and** slow **death**. Could care, rather than work, be a place to find identity and recognition? Why wear yourself out? **Disability provides a moment to intervene in slow death**: why work yourself to death? Why (just) work? How do we support one another in a time of austerity? Why sweat to improve one’s embodied and cognitive lot? How else might we live together to support, care and enable one another? What do we gain when we fail to meet neoliberalism’s normative labouring standards? For Kolárová : cripness is rich with failure; **cripness is infused with negativity**; yet we do not always see it as such. The rich archive of the labour of **crip failure is here and** at hand … but do we, as the crip community celebrate those as crip failures that **can sustain our visions of utopia** and whose negative energies move us towards the crip horizon?’ (Kolárová [in press](http://www.tandfonline.com/doi/full/10.1080/09687599.2014.920125) Kolárová, K. In press. “Cruising for a Crip(Topia) in the Context of Neoliberal Transformations of the Czech Republic.” Journal of Literary and Cultural Disability Studies. [Google Scholar], n.p.) These crip horizons might be found as disability is, simultaneously for and against slow death. And this appears to be a worn out place that all occupy and can, via our collectivities and assemblages, recuperate our possibilities. What alternatives do we see for our worn-out bodies? Ones, we would assume, far beyond work and slow death.

#### And, An embrace of crip futurism allows for imagining crip futures that include coalition politics which play an integral role in progress. The alt solves case through cross movement work. Kafer 13

**Kafer 13 (Alison Kafer is Associate Professor and Chair of the Department of Feminist Studies at Southwestern University.) “Feminist, Queer, Crip” Indiana University Press 5/16/13**

These questions, and potential answers to them, have surfaced in previous chapters, but in this final chapter I address them more directly. In **imagining** what **accessible futures** might look like or might **include**, I find myself **thinking about** the possibilities of **cross-movement work**, both intellectually and politically. If disability is everywhere once we start looking for it, then why not look for it in the other social justice movements at work in contemporary culture? My understanding of disability rights, justice, politics, culture, and scholarship has always been informed by my investments in feminist and queer theories and practices. Reading disability into and alongside those investments is one way **to imagine disability differently**. In other words, **look**ingwithin disability studies **for** the traces of other movements while simultaneously looking for **disability in places it has gone unmarked** isone way ofmoving us toward accessible futures. I begin "looking for disability" in a canonical feminist studies text—Bernice Johnson Reagon's influential essay on **coalition politics**—that is not widely recognized as being "about" disability. Reading disability into it not only **allows** for an expansion of feminist and disability studies genealogies but also offers **a framework for imagining future** work. I then move outward from Reagon's text to explore three potential areas of **growth** for feminist, queer, crip theory and activism: bathroom politics and contestations over public space; environmental justice; and reproductive justice. Zeroing in on each of these sites allows us **to think through how different formulations of disability encourage** (and discourage)unexpected but **generative alliances**. I close by invoking still more connections **and** coalitions, making clear the **multiple and overlapping possibilities for** feminist, queer, crip **futures**. Reagon's text serves as an apt introduction to this chapter because of her frank acknowledgment of and engagement with practices of dissent and strife. Throughout the essay, she encourages us to recognize that the benefits of coalition politics are bound up in the difficulties of such politics. Disagreement pushes us to recognize and acknowledge our own assumptions and the boundaries we draw around our own work; without such disagreement, and the ways it compels us to reexamine our positions, we can too easily skim over our own exclusions and their effects. I have chosen each of the sites I highlight here—trans/disability bathroom politics, environmental justice movements, and reproductive justice movements—in large part because they, too, are contentious. They force our attention to the formation of the identities, positions, and practices we name as feminist and/or as queer and/or as crip. They also offer contradictions that are not easily resolvable, contradictions that make difficult any facile claims to "unity" or sameness. I am influenced here by the work of feminist theorists such as Audre Lorde, Chantal Mouffe, and Ranu Samantrai, each of whom argues for the value, and necessity, of dissent. Samantrai explains that "dissenters draw attention to the border zones where…norms are negotiated," subjecting "the terms of membership" in a political community to "continual revision."2 Indeed, rather than "expelling conflicts and suppressing their annoying reminders," a coalition politics that embraces dissent can begin to ask "how we can take advantage" of such conflicts.3 Thus, in using the language of "coalition," I am less interested in imagining coalition politics "as a process of dealing with already-constituted interests and identities"—women as discrete group working with disabled people as discrete group—than in thinking through coalitions as a process in which the interests and identities themselves are always open **to** contestation and debate.4 How does "disabled" shift, expand, or contract in these various movements and theories? In other words, part of what excites me about the coalitions I examine here is that they often **trouble the boundaries of the constituencies involved**. Thinking through trans/disability bathroom politics, then, means not only accounting for "disabled people" working alongside "trans-people," or even people who are both trans and disabled, but also questioning the very categories of "disabled people" and "trans-people."

# Accessible formatting

#### The 1ACs focus on epistemology erases the material conditions of disability

**Siebers 06**

**disabled body mind are not aligned with norms to account for realities favoring performativity describing intellectual achievement, , and participation.** **link difference to constructs, made disability disappear “performativity, privilege disembodied freedom, suggesting emancipation imagining body as subversive with experiences of disabilities; they mimic fantasy in, that disability are immaterial as imagination is free. describing illness as a defect theories that diseases by mental states cured by will power index of much is not understood disease represent a reality untouched by metaphor.**

#### The aff’s expansion of the medical complex is not an expansion of care, but rather, an expansion of an industry that labors to eradicate all diseases, which results in lethal eradication of difference, conceptualizing of bodies into medical objects, and accepts death if a cure is possible.

**Clare 17.**

At the center of cure lies eradication cure arrives in different guises, connected to the medical-industrial complex would eliminate cerebral palsy autism hearing voices, and spinal cord injuries This commits damage turning body-minds into medical objects and creating lies genetic testing are paired with abortion exposing the systemic desire to erase a whole group resolve to eradicate stops for nothing including death elimination of present-day life is essential to cure

#### Historical analysis fails and doesn’t account for the factors that shape disability

**Gleeson, 99**

Disabled people's lives have been shaped by the historical structuring of social relations around a variety of social cleavages, historical geographies elucidate more fully the complex influences of various identity forms

#### Metaphors of haunting facilitate ableist narratives---they distract our attention away from the historical reality of institutions that prioritized violence against disabled bodies

**Gill and Erevelles 2017**,

Connecticut, functioned as an institution that **segregated children and adults with disabilities** students were aware of the narratives about ghosts haunting such narratives **ableist practices that structure oppressive** and violent representations of these institutions ableist violence rendered invisible in a way that enables **neoliberal** black and disabled residents by transforming their real experiences of violence into a phantom presence easily consumed for cheap thrills. the experiences of violence enacted against disabled bodies, **become metaphors in an ableist narrative of vengeful ghosts seeking justice**. these horror playgrounds succeed because the is not widely known. the need to foster a critical pedagogy that foregrounds the histories of violence our neoliberal institutions

#### \*T And The role of the ballot is to challenge ableism. Assumptions of ableism are inherent in systems of knowledge production thus ableism is an a priori question \*A Campbell 13\*C

**Ableism is** **seeded at the level of knowledge systems** **Ableism is not just** **negative attitudes it is a schema of perfection** **a** **way of thinking about bodies** **Compulsory ablebodiedness is implicated in the** **foundations of social theory** **abledness is predicated on** **preexisting notion about the nature of typical** **functioning** **Ableism** **tells us what** **thinking and** **emotions are suitable to express** **Reframing our focus** **can enrich our understanding of the terms of engagement in** **life**

#### The alternative methodology is to imagine CripTopia, a disability utopia, to uncover the lived experiences of disabled bodies. To clarify the advocacy calls for us to imagine CripTopia in this round. Campbell 12

**Difference can be a vexed issue** **within**  **societies**. **The tendency**  **is to emulate** **normative ways of being.** **Not negating** r **disability can cultivate alternate kinds of liberty** **utopianism can speak to** **disability re-imagining a disability** **horizon**, **is** **fundamental to move to hopefulness and capture** **unlived possibility in** **disability**. **we can never** **‘know’he margins because its ‘essence’ remains inherently unknowable** **To step outside the normative of negativity** **disrupts the**f **subjectification** **of disability.**

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**disability subjectivities create new forms of embodied knowledge and** **provide alternative maps for living**  **in opposition to, the dictates of normalcy**  **Disability** **offers opportunities for reconsidering our relationships with life**, **and** **death**. **Disability provides a moment to intervene in slow death**: **cripness is infused with negativity**f **crip failure is here and** **can sustain our visions of utopia**

#### And, An embrace of crip futurism allows for imagining crip futures that include coalition politics which play an integral role in progress. The alt solves case through cross movement work. Kafer 13

**imagining** **accessible futures include**,**thinking about** **cross-movement work**, **to imagine disability differently** **look  for** **disability in places it has gone unmarked coalition politics** **allows a framework for imagining future**  **growth** **to think through how different formulations of disability encourage generative alliances**. **and multiple and overlapping possibilities for** **futures**.**to trouble the boundaries of the constituencies involved**.