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Moving Toward Interaction: Epistemic Injustice, Julia Kristeva, and Disability

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MOVING TOWARD INTERACTION:
EPISTEMIC INJUSTICE, JULIA KRISTEVA, AND DISABILITY

by

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To Ashley Miller, who inspired this dissertation in many ways.

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Abstract

Dohmen, Joshua R. PhD. The University of Memphis. August 2015. Moving Toward Interaction: Epistemic Injustice, Julia Kristeva, and Disability. Major Professors: Pleshette DeArmitt and Deborah Tollefsen.

This dissertation argues that the discourse of epistemic injustice and Julia Kristeva's oeuvre offer important insights into disability oppression, and that interaction is a promising form of resistance. "Interaction" as used here, is a term adopted from both Kristeva and José Medina to signify a social relation in which persons or groups come into contact while the specificity of each party is maintained. Thus, interaction is defined in contrast to integration.

In the first chapter I argue that institutionalization, medicalization, and cultural anxieties about mental disabilities constitute and cause epistemic injustices against disabled subjects. I then show why epistemic interaction, an openness and responsiveness to diverse others, is promising for resisting these injustices. I conclude with three recommendations for avoiding epistemic injustices against severely mentally disabled persons, but they threaten to make these lives thought meaningful only as they *might* be.

I then turn to Julia Kristeva's essays on disability, reading them through her previous works. First, I explain Kristeva's theory of language to reveal how meaning can be shared, even with severely mentally disabled subjects. In this way, the meaning of severely disabled lives can be understood in the present, not as deferred. I then develop Kristeva's account of disability exclusion as founded in the narcissistic threat posed to nondisabled subjects by disabled subjects. Finally, I propose that interaction be understood as a double movement of interpersonal relations, which allow nondisabled persons to work-through their narcissistic defenses and share meaning with disabled

persons, and social relations, in which the nondisabled "move toward" the disabled to alter the figures of abjection.

In the final chapter, I argue that disabled persons, including the severely mentally disabled, are capable of achieving what Kristeva calls the highest form of subjectivity: genius. Arguing against an interpretation that relies on her account of psychosexual development, I propose that feminine genius be understood as a form of intimate revolt from the social margins that produces a work. Interpreted thusly, other forms of marginalized genius become conceivable. I offer two examples, Susan Wendell, a feminist philosopher, and Sesha Kittay, the daughter of Eva Kittay, as disabled geniuses.

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Introduction

Invisibilia, a podcast produced by National Public Radio (NPR), recently produced an episode, provocatively titled "Batman" (Miller and Speigel 2015a) about Daniel Kish, a blind man who uses echolocation to move in space—to, he says, "See." As a child, Kish began using clicks of his tongue to sense the world around him, and as the episode explains, because he was allowed by his mother to make mistakes, he developed a very refined sense of echolocation such that he did not identify as a blind person until college. Developing this skill is quite rare for blind people, however, even in those who are blind from birth or a young age, in large part because it is discouraged. Daniel and his mother were told that the clicks were "not socially acceptable," and they were consistently told that allowing him as much freedom as he had was irresponsible and dangerous. (Nevermind, of course, the fact that *any* child who is rambunctious can get into trouble or get hurt.) In college, he came across a book called *The Making of Blind Men* (1981) by Robert Scott, which helped him realize that blind people are often socialized to be incapacitated. They are encouraged to rely on charity, told they are unable to work, isolated in sheltered workshops, guided in their movements in school and sheltered workplaces; in short, they are determined to be helpless in advance. Kish decided to start an organization called World Access for the Blind to help teach others, especially blind children, how to echolocate. But this proved challenging because "a blind person teaching another blind person how to get around is basically unheard of" (Miller and Spiegel 2015b).

This dissertation is an attempt to understand the experiences of disabled persons who, like Kish, are discredited and who, like the people in Scott's study, are excluded.

What is the harm done to persons like Kish when expressions of their experiences are disavowed? What would it take to be attentive to experiences of disabled persons, and is this possible for those with the most severe mental disabilities? Why are disabled people largely excluded? And how could meaningful interaction, not integration or assimilation, between the disabled and the nondisabled be achieved? This dissertation addresses these and related questions by appealing to recent discussions of epistemic injustice and the work of Julia Kristeva.

In the first chapter, I summarize arguments about epistemic injustice made by Miranda Fricker and José Medina to understand the epistemic aspect of disability oppression. What was the harm done to Kish when his experiences were discounted? What harms are done to blind people when they are not given space or resources to express themselves, especially to one another? I argue that these and many other related cases constitute testimonial and hermeneutical injustices by applying Fricker's theory to two practices closely related to disability experience: institutionalization and medicalization. Then, I suggest that the most promising way to resist these injustices is through what Medina calls epistemic interaction, a practice which fosters beneficial epistemic friction and the formation of meta-lucidity through epistemic virtues. Organizations like Kish's, in other words, serve as important spaces to develop interpretations of disabled persons' experiences such that they can be articulated and resist mainstream understandings of disabled persons as, in this case, helpless. But while the first part of the chapter applies these theories of epistemic injustice to the experiences of disabled persons, I conclude by reflecting on mentally disabled persons, especially the most severely disabled, to argue that there is a limit to how far the discourse of epistemic

injustice can understand disability oppression. Specifically, the case of the severely disabled subject raises the question of who can and cannot be the subject of epistemic injustice. I argue that in the large majority of cases, mentally disabled persons can be and are subjected to epistemic injustices. Thus, I suggest three practices to avoid these injustices. First, whatever testimony disabled persons share, even if it is only expressions of pleasure, pain, or discomfort, should be taken seriously. Second, when trying to understand the testimony or experiences of severely disabled persons, it may be important to consult those with similar conditions or those in similar environments who are likely to have greater insights into the experiences of their severely disabled peers. Finally, the epistemic skills of severely disabled persons should be fostered as much as possible rather than being disregarded or undermined. But with these recommendations in mind, there are still two important qualifications. First, it is important to accept that there may very well be persons who will never develop the epistemic skills necessary to give testimony or interpret their experiences in the ways that Fricker's account requires. Second, caution is necessary to avoid thinking of severely disabled persons' lives or experiences as meaningful in a deferred way. That is, it is important to acknowledge the meaning of severely disabled persons' lives as they currently are, not just as they might be with time, therapies, trainings, and so on. With these qualifications in mind, I turn to Julia Kristeva.

In the second chapter I explicate Julia Kristeva's essays on disability to think through, first, how meaning is shared and can be shared even with severely disabled persons, and second, what psychic barriers keep others, especially nondisabled others, from interacting with disabled persons. Because Kristeva's works on disability are

intended for rather general audiences, I read them through her more theoretically rich

work on language, abjection, and the uncanny. I argue that because meaning emerges

through the interaction of the semiotic and the symbolic on Kristeva's view, that she

provides the tools for understanding how others could listen to the meanings made and

shared by even the most severely mentally disabled subjects. This form of attentiveness

resists the tendency of my recommendations in the first chapter to put severely disabled

persons in a state of deferral because it finds meaning in the experiences of disabled

persons as they *are*, not just as they *might be*. I call the prejudicial failure of this form of

attentiveness "intimate hermeneutical injustice," to flag (a) that it concerns interpersonal

interpretive resources, not group or collective resources like Fricker's concept of

hermeneutical injustice and (b) that it concerns the interpretation of experiences, not the

exchange of testimony like Fricker's concept of testimonial injustice. I move on to

explain Kristeva's account of disability exclusion, showing how the threat of a

narcissistic wound that is experienced in encounters with disabled others keeps

nondisabled persons from interacting with disabled persons. In this way, Kristeva

provides a psychic explanation of the epistemic injustices discussed in the first chapter.

Epistemic interactions with disabled others are resisted by nondisabled persons because

of an experienced threat to their own narcissistic integrity. To see how Kristeva could

help contribute to resisting this exclusion, I both take up Kristeva's recommendation and

move beyond them, with the help of an essay by Sara Ahmed (2005), to argue that

including disabled persons in a more just way will require a double movement of

working-through nondisabled persons' narcissistic defenses in interactions with disabled

persons, and "moving toward" disabled persons to allow for greater interaction between disabled and nondisabled communities.

Having argued for the sharing of knowledge and meaning between disabled and nondisabled people through interaction in the first and second chapters, I move on in the third chapter to argue that disabled persons are not just subjects, but that some disabled persons achieve what Kristeva thinks of as the highest form of subjectivity: genius. A genius is a subject whose life, through common yet extraordinary intimate revolts, results in a work that is inseparable from that life, a work that is taken up by others. Arguing against a reading of feminine genius as depending upon Kristeva's ableist, sexist, and heteronormative account of psychosexual development, I propose an interpretation of feminine genius as a form of intimate revolt from social margins. Having freed the notion of genius from this Oedipal account of psychosexual development, I argue that this allows us to develop a more general notion of marginalized genius which I demonstrate through two examples of disabled geniuses: Susan Wendell and Sesha, Eva Kittay's severely disabled daughter.

In an attempt to give rigorous readings to each of the figures dealt with in my chapters, I largely leave synthesizing these accounts to the conclusion. There I argue that Kristeva offers helpful resources for understanding why epistemic injustices are committed against disabled persons and for resisting those injustices. I also suggest that Kristeva and Medina offer similar accounts of interaction that help to build upon one another. Specifically, I argue that Medina's position that spaces reserved for oppressed persons are often necessary to resist assimilation into epistemic mainstreams could strengthen Kristeva's account of interaction by noting that disabled persons will likely

need such spaces—which I call spaces of forgiveness for reasons that will be articulated later—to achieve revolts from the margin. Indeed, I intend to play with this intersection in my title: Moving Toward Interaction. The title evokes my intent to make progress in—to move toward—facilitating interaction between disabled persons and communities and nondisabled persons and communities. It also refers to two movements that I argue are necessary for interaction throughout the dissertation: first, a movement of disabled people toward one another to form spaces from which to challenge their oppression and exclusion; and second, a moving of nondisabled people toward disabled people that can allow for both interpersonal and broader social interaction.

Disability Studies

Because this is a work intended for an audience of primarily philosophers, I do not assume readers' familiarity with trends in disability studies. But in the interest of keeping my arguments and developments clear in the main chapters of the work, I do not want to make repeated digressions through the terrain of disability studies in those chapters. Thus, I want to devote ample space here to discussing some main developments in the field of disability studies. Of course, my aim is not to give an exhaustive review of all the literature in disability studies. This is not only impossible but would likely be counterproductive. Instead, I give an overview of some important themes in disability studies, particularly arguments about how disability is best understood, and how disability oppression is best resisted. This overview should not only be helpful to the reader who is unfamiliar with disability studies, but will also serve as a background against which I can position my account.

Understanding Disability

As Lennard J. Davis explains, disability is not a stable or fixed concept, but like other identities is "inherently unstable" (2002, 5). Indeed, it may be the *most* unstable sociopolitical identity. How disability is understood, then, is no simple matter, but there are two particular models of disability against which contemporary disability theorists situate themselves: the medical model and the social model. I will therefore organize this section into three parts, one on the medical model, one on the social model, and the third on a variety of theoretical developments that respond to and call into question these earlier models.

The Medical Model

The medical model, which is sometimes referred to as the "individual model," does not have a set of foundational texts. [1] Instead, this is the assumed understanding of disability that pervades most social responses to disability. According to the medical model, disability is a "problem" located in the disabled individual, and therefore the appropriate response is medical cure. Understanding disability in this way has several important consequences. The medical model justifies viewing the sole source of disability as biomedical in nature. It also leads to problematic assumptions about disabled persons. For example, disabled individuals may be blamed for not "overcoming" their conditions (Linton 1998, 18-9). Those who do succeed in living with their disabilities may be viewed as inspirational for completing activities that would be thought ordinary for a nondisabled person; some in the disability rights movement refer to this trope as the "supercrip" (Shapiro 1994, 16-8). The medical model also justifies understanding

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[1] Simi Linton (1998) and Michael Oliver (2009), for example, both discuss this model as the "individual model."

disabled persons as worthy of pity, rather than as living meaningful lives or deserving of equal rights and access to resources. I will discuss below how these narratives supported by the medical model are rejected by the social model of disability.

There are also important linguistic consequences of assuming the medical model. This model justifies "person first" language which is often thought to be progressive. Person first language uses phrases like "a person with a disability," "a person with autism," or "a person who is deaf," just as other medical conditions are treated, like "a person with the flu," or "a person who is feverish." The use of person first language emphasizes that the condition is not an essential part of the person—that she is a person first. This model also justifies the use of more offensive phrases, like "a person confined to a wheelchair" or "wheelchair-bound," or "a person suffering from blindness," especially when the latter is used for a person who does not in fact experience her blindness as a source of suffering.

Finally, because, on this model, a disability is understood to result from the individual's biology alone, responses to disability are targeted at the individual. Thus, cures (like medications, implants, and surgeries) and rehabilitation (attempts to help the person achieve "normal" or "near-normal" biological function) are the favored response to disability. In addition to medical, psychiatric, and rehabilitation professionals, those who organize charities for disabled persons also usually subscribe to the medical model of disability.

The Social Model

The social model of disability, a phrase coined by Michael Oliver, is a response to the medical model that grew out of an influential document published by the Union of the

Physically Impaired Against Segregation (UPIAS). According to UPIAS, disability results from social oppression, not from individual biology. Thus, they make an important distinction between "impairment" which is "lacking part or all of a limb, or having a defective limb, organ or mechanism of the body" and "disability" which is "the disadvantage or restriction of activity caused by a contemporary social organization which takes no or little account of people who have physical impairments and thus excludes them from participation in the mainstream of social activities" (quoted in Oliver 2009, 42). This model has been influential and has been taken beyond physical disability to understand disability in general. Thus, "impairment" can be understood as an abnormal biological feature or process in an individual, whereas "disability" is the result of social practices, structures, and attitudes that dis-able individuals. While the medical model encourages pity and inspirational stories of overcoming, proponents of the social model reject pity, view disabled lives as attempts to simply live, not inspirational plots lived for the nondisabled, and think social oppression, not individual impairments, are what need to be overcome.

Though social model thinkers differ in their views on language, the social model tends to support phrases that emphasize the social causation of disability. "Disabled person," for example, emphasizes that a person is dis-abled by social structures, whereas "person with a disability" individualizes disability as a trait that is had by a person. Similarly, "wheelchair user" is preferable to "wheelchair bound" because it refuses to think of the wheelchair as a confining artefact that is only necessary because of a personal tragedy and instead expresses that a wheelchair is a tool actively used to enter social realms that would not otherwise be accessible.

Clearly, the social model also argues for addressing disabled persons' concerns at the social level, rather than just the individual level. Rather than seeking out cures for spinal cord injuries, or "rehabilitating" persons with spinal cord injuries by forcing them to approximate walking, social model theorists argue that justice for persons with spinal cord injuries would require making buildings wheelchair accessible through ramps and elevators, having bathrooms that are accessible to wheelchair users, maintaining sidewalks and implementing curb cuts, the availability and affordability of both relevant healthcare services and of technologies and aides for tasks that are difficult for wheelchair users but assumed normal for others, and so on. The absence of structural accessibility disables, not spinal cord injuries. The lack of affordable health care disables, not the impairment. Historical research supports these arguments. Brendan Gleeson, for example, argues that physical impairment in feudal England was likely "an accepted, prosaic element of peasant life, and may only have marked itself out when, on occasion, it was seen to have spiritual significance" (1999, 96). But the rise of city life and standardization caused by industrialization brought with it physical structures, employment practices, and attitudes that disabled the physically impaired. Similarly, deafness is a disability only in the absence of certain technologies and social practices. Nora Ellen Groce's book, *Everyone Here Spoke Sign Language: Hereditary Deafness on Martha's Vineyard* (1985), for example, shows how deafness was not perceived as a relevant social difference in Martha's Vineyard because many people in the community spoke sign language. Indeed, many in the Deaf community do not consider sign languages to be a therapeutic tool, but think of them as languages on par with orally spoken languages that contribute to Deaf culture.[2] With better educational opportunities

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[2] "Deaf," when capitalized, usually refers to the Deaf culture or members of that culture,

for deaf children, the availability and affordability of sign language interpreters and technologies like text or video communications and alarms that alert senses other than hearing, deaf persons would not face the same barriers to social interaction.

While the social model in its early iterations was focused on physical and sensory disability, similar arguments could be developed for certain mental disabilities. The neoliberal requirement that employees be flexible to the demands of employers, for example, makes employment difficult for intellectually disabled persons. An employer that expects its employees to learn a wide variety of tasks and work erratic schedules may hinder mentally disabled persons or those who depend upon scheduled care or transportation services from being successful employees. This would not be the case in a flexible workplace that seeks to tailor assignments and schedules to the capabilities and needs of its employees. To take another example, implementing inclusive classrooms and eliminating social stigmas would likely enable many learning-disabled persons who are now disabled by institutions and social expectations.

Taking the social model seriously means acknowledging that there are a variety of social responses to bodies that are more or less disabling. Linton offers one way to categorize social practices.[3] The first category is "pariah," in which disabled people are denied most rights and considered "a threat to the group itself" (Linton 1998, 38). This attitude is common in eugenic discourse.[4] The second category, "economic and social

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whereas "deaf" refers to hearing loss and persons who have difficulty hearing or cannot hear.

[3] She bases her categories on a 1948 article entitled "The Physically Handicapped in Certain Non-Occidental Societies," but makes significant revisions to the analysis given in the article.

[4] Lest we think eugenics is a thing of the past, slippery slope arguments are still common in discussions of reproductive rights for disabled persons. See, for example, Roberta Cepko's

liability," refers to cultures in which disabled people are seen as drains on economic resources and social success. This attitude is prevalent today among those who view the welfare system as a "hand-out," and employers like one manager who asked me, "Why should my business suffer to employ this [disabled] person?" "Tolerant utilization," the third category, refers to practices of using disabled people in social roles to the extent that they can "fulfill certain roles and duties designated by the nondisabled majority as necessary" (1998, 51). One of Linton's examples of tolerant utilization is the hiring of deaf workers for jobs that require frequent exposure to loud machinery. The fourth category, "limited participation," refers to practices which accept disabled individuals insofar as they "can 'keep up' with the nondisabled" (1998, 53). Whereas tolerant utilization puts disabled persons in certain roles, limited participation says that disabled people can participate insofar as they can fulfill the roles of nondisabled people (with no "accommodations"). "Laissez-faire," the fifth category, describes settings in which there is no orchestrated response to disabled persons and instead disabled persons rely on their families, friends, and communities for whatever support they receive. There is no active attempt to include disabled people, in such settings, and the support disabled people receive is likely to vary widely according to the beliefs and resources of those they rely upon. The sixth category, and Linton's own innovation, is "participation and accommodation" according to which the participation of disabled people is valued and actively sought by a society. Participation and accommodation require greater flexibility on the part of institutions, material structures, social expectations, and so on. One of

review of case law regarding involuntary sterilization in the United States (Cepko 2013) and Alison Kafer's discussion of a heavily criticized deaf lesbian couple who selected a deaf sperm donor in hopes of having a deaf child (2013).

Linton's examples, here, is inclusive education. What these categories reveal is that there are multiple ways societies can react to disabled bodies, and that the reaction of any particular society is contingent. Societies should strive, Linton argues, for participation and accommodation as much as possible. It is important to note that these categories rarely, if ever, accurately describe an entire society's response to disability. Instead, any given community will likely exhibit characteristics of multiple categories, and indeed we could likely find instances of all six categories in the contemporary United States.

While Linton aims to categorize the multiple social responses to disability, Charlton (2000) analyzes disability oppression in terms of similar practices that can be found in most contemporary societies, even if their particular manifestations differ. The first is political economy, and through this framework, Charlton explains that disabled persons tend to be the poorest and least employed, especially given the global neoliberal economic practices that have standardized work processes, centralized wealth in the hands of the few, and created a massive class of unemployed and underemployed persons around the world. Looking at cultures and belief systems, Charlton explains that attitudes toward disabled persons "are almost universally pejorative" (2000, 25), whether this takes the form of paternalism, religious myths of retribution, or media depictions of disabled persons as necessarily bitter and asexual. The third dimension of disability oppression is "(false) consciousness and alienation," or the internalization of disability oppression (2000, 27). The fourth and final dimension, "power and ideology" describes the ways in which power functions to keep disabled people disempowered, and how ideology functions to make the suffering and marginalization of disabled persons appear natural (2000, 29-31). Through this analysis, Charlton's readers are called to imagine and

work toward economic practices, cultural beliefs, relations to oneself and the world, and operations of power that could resist the oppression of disabled people. Again, oppression is not a natural result of impairment, but a result of social practices and structures which are contingent, and thus, this oppression can be meliorated.[5]

Recent Developments

There have been myriad responses to the social model of disability, such that I could not possibly hope to discuss them all here. It is important, however, to note some common criticisms of the social model of disability as a background for the arguments in this dissertation. One common theme among responses is the call to pay more attention to what social model theorists call "impairment." Influential disability scholar, Tom Shakespeare is one who points to the limits of the social model. Shakespeare argues that the social model has been beneficial politically by creating a clear agenda and language for activism, instrumentally through its effectiveness in passing legislation, implementing reforms in transportation, employment, housing and so on, and psychologically as a source of identity and self-esteem for disabled persons (2006, 199). But there are four important weaknesses of the social model on Shakespeare's view. First, it does not give sufficient attention to impairments which are often a source of suffering for disabled persons, even when oppressive environments are not causing suffering.[6] For example,

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[5] I do not intend to group Linton, Charlton, or others discussed under the heading of social model thinkers together as if they follow Michael Oliver explicitly. Instead, my aim is to show multiple theorists who have taken up social understandings of disability to analyze current and historical practices that have been disabling.

[6] For his part, Oliver does not think this criticism has any grounding. First, he notes that the social model is intended not as an exhaustive theory, but as a source of political change. Second, he argues that the pain and suffering of impairment are actually quite important to his work: "As a severely disabled tetraplegic, who every day of my life needs to make the necessary arrangements to be able to get up in the morning and go to bed at night and, indeed, to use the

"degenerative conditions," especially those "which may cause premature death" appear to cause suffering regardless of the social context (2006, 200). A person with multiple sclerosis (MS) may experience pains as a result of her condition that do not result from social oppression (Falvo 2014, 111), even if there are other ways in which she is oppressed by ableism. And even if there is much more society could do to be accessible to deaf persons, the vertigo associated with many forms of hearing loss is unlikely to be addressed by social reforms (2014, 273-4). This worries Kafer because only addressing "disabling barriers" threatens to make "pain and fatigue irrelevant to the project of disability politics," but it should be an important experience around which disabled persons could organize (2013, 7). Second, Shakespeare argues that "the social model assumes what it needs to prove: that disabled people are oppressed" because it "defines disability as oppression" (2006, 201). It is impossible, given this definition, to find a non-oppressed disabled person.[7] Third, the social model's dream of a "barrier-free utopia" is impossible (2006, 201). This is true for a variety of reasons. First, it is impractical because the structural changes required, for example, would require leveling many structures already in place as this would be easier than retrofitting old buildings, and because there will remain aspects of the "natural" environment that remain inaccessible to people with certain disabilities, like "mountains, bogs, and beaches" for wheelchair

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toilet, I find such suggestions galling" (Oliver 2009, 48). Indeed, insofar as social model thinkers have pushed for aides, expanded affordable health services, and so on, not just the installation of ramps, it is difficult to see why one would think they are not concerned with the suffering caused by impairments. Shifting the level of analysis to the social does not mean ignoring individual impairments altogether, and it has important political benefits by uniting persons with diverse impairments into a movement of disabled people.

[7] I only aim to give a summary of Shakespeare's arguments here, not to engage with them critically, but it does seem as though one could respond to this criticism by noting that there *may* be non-oppressed and therefore nondisabled *impaired* people, removing Shakespeare's concern about question-begging.

users or the sound of babbling brooks for deaf people. (2006, 201).[8] Limitations on

resources make it difficult to conceive of formatting educational materials for all disabled

persons, like large-print editions for those with vision loss, audio versions or Braille

versions for blind persons, and so on.[9] Second, it may be in principle impossible because

different changes are needed to make the environment more accessible for different

impairments. "[B]lind people," Shakespeare explains, "prefer steps and defined curbs and

indented paving, while wheelchair users need ramps, dropped curbs, and smooth

surfaces" (2006, 201). Similarly, the beeps that signal a crosswalk for blind people may

cause sensory irritation to some autistic persons, for example.

Shakespeare's fourth criticism of the social model is one that has been articulated

in many ways: the distinction between (biological) impairment and (socially caused)

disability is too neat to accurately describe the interaction between the individual body

and the social environment. He gives the example of a person with a neurological

disorder who is depressed (2006, 201). It may well be impossible to separate the complex

interactions at play between her neurological condition, environment, depression, social

isolation, and exclusion. Is her depression caused by her neurological condition or her

exclusion? Is her isolation a result of exclusion or is she isolating herself as a result of her

depression? Did environmental factors contribute to her neurological condition, or would

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[8] Kafer (2013) provides an insightful caveat to this claim. She notes that many "natural" environments are made accessible to nondisabled persons, whether in the form of trails or landmarks and signs.

[9] Shakespeare's move may be too quick here. I identify as nondisabled, and I often have to wait for interlibrary loans to get the texts I need. If research libraries purchased materials in a variety of formats, it seems to me that a sharing program could be quite effective in filling the research needs of persons with diverse disabilities.

she have developed the condition in any environment? It is unlikely that even the most rigorous science and theory could provide certain answers to these questions.

Shelley Tremain (2005) argues that a Foucauldian analysis is better suited to understanding disability. First, she notes that the clear distinction between impairment and disability is incomplete, because an impairment is in fact a necessary (though not sufficient) condition for being disabled. Indeed, this must be the case to understand why some persons who are oppressed for biological differences, like racialized persons or intersex persons, are not considered to be disabled. An impairment, it seems, is a bodily state that leads to the person being disabled in a particular (that is, ableist[10]) environment. Through the framework of bio-power, it becomes clear that impairment is itself the illusory "prediscursive" or "natural" justification for the practices that in fact produce impairment by circumscribing it as a "discursive object" (Tremain 2005, 11). In other words, impairment becomes an explanation for disability only insofar as certain bodies are already divided by the disciplinary tactics at work in bio-power. What counts as an impairment is determined by practices which select certain bodies as disabled, and impairment is then used as an explanation for disability. In this way, the social model ends up extending the practices of bio-power that it seeks to contest by accepting "impairments" as natural.

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[10] Ableism is, in its most basic interpretation, oppression against disabled people. Perhaps the fullest consideration of ableism is given by Fiona Kumari Campbell in *Contours of Ableism* (2009). Campbell defines ableism as "A network of beliefs, processes and practices that produces a particular kind of self and body […] as the perfect, species-typical and therefore essential and fully human" (2009, 5). This definition is helpful for focusing on the processes that produce disability, rather than on disability or disabled persons, such that these normalizing processes can be investigated and criticized at a more foundational level.

Susan Wendell's account of the social construction of disability also avoids the strict division of (biological) impairment and (socially caused) disability. She writes that "the biological and the social are interactive in creating disability […] not only in that complex interactions of social factors and our bodies affect health and functioning, but also in that social arrangements can make a biological condition more or less relevant to almost any situation" (Wendell 1996, 35). Throughout a chapter devoted to the topic, she notes myriad ways in which the biological and social interact: wars and political violence lead to disability, as does the unequal distribution of resources and poverty; medical practices can reduce disability, but they may also cause us to live longer and thus increase the rate of disabilities that come with age; an increased pace of life is likely to disable more people than a relaxed or flexible pace of life; social expectations, structures, policies, and institutions can either be enabling or disabling depending on how they are arranged; a social understanding of some social benefits as expected (like education, transportation, and utilities) while others are unnecessary entitlements (like health aides, or non-standard educational materials, or accessible transportation, or utilities designed for different forms of communication, like sign language) is disabling for those who require supports beyond those considered standard; stigmas and media representations construct certain types of bodies as disabled but not others. Wendell thus favors an approach to understanding the social construction of disability, one that acknowledges the multiple and diverse ways in which the biological and the social interact.

While Wendell's understanding of the social construction of disability takes into account the pains that are likely biological in origin, Tobin Siebers (2008) worries about a version of social constructionism of the body that neglects disabled experiences,

especially pain. He seeks to develop instead a "new realism of the body." Looking at

Judith Butler's body theory and Donna Haraway's thinking of the cyborg, he

demonstrates that the former thinks pain only as the result of external, disciplinary forces,

and that the latter cannot give an account of disability because of its emphasis of that

which *exceeds* the "normal" human. The pain of disability, however, is often physical

pain, not *just* the pain of guilt for not conforming. And the cyborgs that disabled persons

become in interaction with technologies and environments is often still painful and

limited in comparison to "normal" human capacities: prosthetics may aid mobility and

even give one greater speed than "normal" human legs, but they often cause pain where

they connect to the body; wheelchairs may be beneficial in some settings, but in other

environments they are more restricted than "normal" legs, and sitting for prolonged

periods makes it difficult to avoid sores. Thus, it is important to avoid idealizing disabled

bodies or ignoring the specificity of their experiences, especially their pain, but to do so

without then individualizing pain or disability more generally. As Siebers puts it, "The

body is alive, which means that it is as capable of influencing and transforming social

languages as they are capable of influencing and transforming it" (2008, 68). So while the

body and its pain need to be understood as resisting unidirectional social construction,

bodies and their pains should also be thought in their political relevance once they are

freed from being understood as *simply* individual. How can the pains experienced by

persons with diverse disabilities both be recognized in their specificity but also be useful

in galvanizing those persons around a political movement? This is the important question

for current theories of the body, on Siebers's view.

Sharing the concerns of others responding to the social model, Kafer develops what she calls a "political/relational model" of disability (2013, 6-9). Such a model needs to make room both for the social nature of disability *and* bodily pains and fatigue, for disability identity, pride, and activism *and* for the difficulty and even sadness of losing abilities or functions one previously had. For Kafer, disability is importantly political, and this resists tendencies to individualize, especially through charity and medicine, the experiences of disabled persons. Disability is also always relational, because it is never understood in isolation such that the nondisabled are affected by ableism just as disabled persons are. The young and elderly, for example, are affected by the same normalizing assumptions of young adult health and ability that disabled persons are.

Normalizing forces and assumptions are an important site of analysis for many in disability studies. First, it should be noted that the norm that determines the limits of disability is quite restrictive. For this reason, many disability scholars point out the extent to which ability is actually a temporary and precarious state. Writing in the context of developing an ethic of care, Eva Kittay explains that there are inevitable periods of dependency in any human life, though how these periods are experienced and responded to varies over time and between social settings: "The immaturity of infancy and early childhood, illness and disability that renders one nonfunctional even in the most accommodating surroundings, and the fragility of advanced old age, each serve as examples of such inescapable dependency" (1999, 29). Siebers notes that "[o]nly 15 percent of people with disabilities are born with their impairments" such that "[m]ost people become disabled over the course of their life" (2008, 59). Thus, even if a person does not experience a permanent disability during her lifetime, she is likely to move from

ability to disability, perhaps multiple times. Margrit Shildrick takes this point even further, explaining that *all* bodies are disorderly. "Such an acknowledgement," she argues, "does not cover over difference, nor deny the specificity of the phenomenology of disability; rather it figures instability as the *unexceptional* condition of all corporeality" (Shildrick 2009, 173). Thus, we should "revalue" disabled embodiment "as just another variant on the infinite modes of becoming" (2009, 173).

Indeed, an acronym exists in the disabled community to name the fleeting nature of "ability": temporarily able-bodied (TAB). There are disabled persons and TABs, but there is no such thing as a permanently able-bodied (or -minded) person. Rosemarie Garland Thomson uses the word "normate" to point to the way in which disability (and other forms of marginalization) is constituted by and creates the boundaries of the "normal" subject position. The normate is "the figure outlined by the array of deviant others whose marked bodies shore up the normate's boundaries" (Garland-Thomson 1997, 8). In this way, the figure of the normate can help expose the relations between those forms of otherness (disability, race, gender, sexuality, and so on) that constitute norms without artificially separating them. Many in the autism rights movement make a similar move in their terminology. The neurodiversity movement signals that while many autistic persons recognize that their brains function differently than others' brains, this does not make them inferior. Thus, they developed the term neurotypical (NT) to label those persons who are not perceived or diagnosed as autistic, or in some extended uses as having other mental disorders (Sinclair 1998).[11]

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[11] Ian Hacking gives a brief explanation of the benefits of this language in his essay, "How We Have Been Learning to Talk about Autism: A Role for Stories" (2010).

Lennard J. Davis aims his criticism at the historical contingency of normalcy (1995). He explains that in the English language "normal" and its related forms only took on their contemporary meaning, as conforming to a standard, in the middle of the nineteenth century. Prior to this point, the dominant division in the European cultural imagination was not between normal and abnormal, but between the ideal, which no actual human could attain, and the grotesque, the common state of the non-divine. Through the application of statistics to human populations, however, "normal" became a description of a range of actual humans with particular traits, such that others were understood as deviant. These statistical methods were taken up by Marx as well as eugenicists, and continue to inform our understanding of ourselves today. For example, people are often comforted by being told they or their experiences are normal, our health, academic, and career performance are determined in relation to norms, and in this way "normal" becomes an unquestioned value used to understand and evaluate ourselves and others. It is this historical innovation that makes disability, as it is currently understood and experienced, possible. Others have written similar histories of disability. Michel Foucault's *History of Madness* (2006) traces understandings of madness (and their corresponding formations of Reason) to reveal how understanding madness as "mental illness" became possible, and in his lectures publishes as *Psychiatric Power* (2007), he shows how psychiatric power spread, for example, through the figure of the "idiot child." James W. Trent, Jr. (1994) traces the various historical innovations that preceded the then contemporary understanding of "mental retardation," and through a detailed European history, C. F. Goodey (2011) reveals the historical specificity and contingency of notions of intelligence that allowed for the development of "intellectual disability."

Like the other efforts to understand disability as complexly intertwined with other

cultural formations discussed above, Fiona Kumari Campbell's book, *Contours of*

Ableism argues that disability should be approached through an understanding of ableism

in order to decenter normative ability. She defines ableism as "A network of beliefs,

processes and practices that produces a particular kind of self and body […] that is

projected as the perfect, species-typical and therefore essential and fully human," against

which disability is understood as a diminished, delayed, or lacking (Campbell 2009, 5).

Like Thomson's concept of the normate, such a framework reveals the ways in which

ability and disability are co-constitutive, and hopefully to imagine beliefs, processes, and

practices that resist ableism.[12]

Because ableism is a pervasive phenomenon and has shared histories with other

forms of marginalization, many disability studies scholars have sought to understand the

complex relationships between disability, race, gender, class, and other identities. Indeed,

Davis suggests that disability is the best lens through which to understand other

oppressed identities because they share a common history in eugenics and the scientific

study of deviant or problematic groups identified by race, gender, sexuality, and class. He

writes, "All these were considered to be categories of disability, although we do not think

of them as connected in this way today. Indeed, one could argue that categories of

oppression were given scientific license through these […] discourses, and that, in many

cases, the specific categories were established through these studies" (Davis 2002, 14). In

place of a postmodernism of proliferating identities, then, Davis argues for a

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[12] Campbell distinguishes this approach from those that focus solely on "disablism," which she thinks of as "a set of assumptions […] and practices that promote the differential or unequal treatment of people because of actual or presumed disabilities" (2009, 4). The latter approach, she avers, does not question the ableism which is at the root of disablism.

"dismodernism" that accepts the "partial, incomplete subject" and seeks "dependency and interdependence" rather than "autonomy and independence" (2002, 30). In this way, disability may be a unifying framework for a new ethics and politics. Similarly, Susan M. Schweik's study of the so-called "ugly laws," which banned "unsightly" persons from the public in certain jurisdictions in the United States in the late nineteenth and early twentieth centuries, reveals the complex relationships between disability, gender, sexuality, ethnicity, and race (Schweik 2009).

More specifically, Wendell and Thomson both call for intersectional approaches to feminism and disability studies. These fields could inform one another in important ways because many women are disabled, and many disabled persons are women, because the same understandings of the human body are oppressive to both women and disabled people, because both offer important questions about the meaning and value of independence, and because both offer important insights into understanding social identities (Wendell 2006, 243, Garland-Thomson 2004, 74-6). Kim Q. Hall shows how feminist disability studies can offer important insights into many recent controversial cases that are given incomplete analysis through feminist or disability studies frameworks alone. One example is the case of Ashley X, who was given a hysterectomy, estrogen treatments to facilitate the fusion of her bone plates, and had her breast buds removed at age six because her doctors and parents believed she would never develop skills beyond those of a "normal" three-month-old.[13] Reports which refer to Ashley as a "sweet" "pillow angel" reveal a gendered dimension of her treatment, while the fear of her sexual development evokes both the assumed asexuality of disabled persons and the stereotype

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[13] I discuss this example further in Chapter 1.

of hypersexual cognitively disabled persons (Hall 2011, 4). Similarly, Licia Carlson analyzes the figure of the "feebleminded woman" to show the gendered nature of nineteenth century conceptions of feeblemindedness (2010, 57-62), while others have criticized the sexism of the disability rights movement (O'Toole 2004) or the ableism present in early feminist rhetoric (Lamp and Cleigh 2011).

Race also provides an important intersection for disability studies. Anna Stubblefield, for example, shows how the concept of intelligence arose as a "scientific justification for racism (and classism and sexism)," and argues that the effects of this history are still present in the United States in the segregation and unequal distribution of educational (among other) resources to black children, the decreased life expectancy and employment rates of black adults with "intellectual disabilities," and environmental injustices, among other things (Stubblefield 2010, 301, 304-8). Nirmala Erevelles provides important analyses of the intersections of disability and race (and gender) in the context of war (2011) and the school-to-prison pipeline (2014). And Chris Bell criticizes disability studies for its failure to engage race, suggesting that the field itself be renamed "White Disability Studies" (Bell 2006).

Finally, in his book, *Crip Theory*, Robert McRuer argues that a "compulsory able-bodiedness" permeates contemporary U.S. society in a way that both parallels and intersects with what queer theorists have called "compulsory heterosexuality." Like the latter, compulsory able-bodiedness hides its own functioning, making its effects appear natural, and disguising the fact that the able-bodied ideal, like the heterosexual ideal, is in fact impossible (McRuer 2006, 8-9). Resisting both compulsory able-bodiedness and compulsory heterosexuality, McRuer suggests, will require a continual problematization

of their hegemony through performances and analyses that contest their boundaries, ideals, and assumptions.

A Note on Method

Disability studies is a diverse and growing field, as the last section endeavored to show. My hope is that this dissertation can contribute both to the field of disability studies by bringing certain philosophical resources to the discussion of disability, and to philosophy by pushing the field of my training to grapple with the experiences and problems of disabled persons who are all too often left out of philosophical discourse.

I would like to take some brief space here to explain some of my methods and linguistic choices. First, I have attempted to use examples throughout that are written by disabled persons or, if necessary, their caretakers, relying on texts that give enough detail to develop philosophical insights from. I did not seek out the testimony of disabled persons for the dissertation, instead relying on sources already in print. I also chose not to use fictional accounts as examples because, as Rosemarie Garland-Thomson writes, "Disabled literary characters usually remain on the margins of fiction as uncomplicated figures or exotic aliens whose bodily configurations operate as spectacles, eliciting responses from other characters or producing rhetorical effects that depend on disability's cultural resonance" (1997, 9). Thus, I rely heavily on texts produced by disabled people, like *Loud Hands: Autistic People, Speaking* (The Autistic Self Advocacy Network 2012) and a collection called *From My Perspective: Essays about Disability* (Faldet and Schanilec 2009). The essays of the latter collection were written by clients and supporters of a service provider for disabled adults (and my former employer) in Decorah, Iowa.[14] I

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[14] The agency is called the Spectrum Network.

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also return frequently to Eva Kittay's accounts of her daughter Sesha because they are moving, detailed, and generous. These accounts provide a thread that run throughout the dissertation.

Second, I should explain some of my linguistic choices. By "disability," I mean any number of conditions referred to in the disability studies literature. I include in my use of this term physical disabilities (e.g., amputations, paralyses), sensory disabilities (e.g., blindness, deafness), chronic illness (especially when such illness is dis-abling in other ways), and mental disabilities. I follow Margaret Price in using "mental disability," because of its breadth. Mental disability can refer to madness, cognitive, emotional, developmental, and intellectual disabilities, autism, and even the mental effects of other conditions, like "the 'brain fog' that attends many autoimmune diseases, chronic pain, and chronic fatigue" (Price 2011). While this may threaten to level the particularities of individual disabilities, my hope is that instead it reveals just how narrow the normative "nondisabled" figure actually is. Because I am often interested in discussing those cases of disability that challenge Fricker's account of epistemic injustice, I will use "severely mentally disabled" to refer to those who are unable to participate in the epistemic practices of sharing knowledge and interpreting shared social experiences, and thus, those who are unable to experience epistemic injustice in this narrow account. Finally, I use "disabled person" and "disabled people" throughout, avoiding "person-first language" like "person with a disability" because, as I discussed above, the latter both individualizes the condition such that political coalitions of disabled people are made difficult by this language and it fails to take into account the extent to which social worlds are *dis-abling*. I attempt to use "disabled person(s)" as much as possible to maintain the particularity of

each disabled person's experiences, reserving "disabled people" for cases in which a group of disabled individuals are acting together, or where the claim is true of disabled people generally.

Knowledge: Epistemic Injustice and Disability

Because the field of disability studies is so interdisciplinary, the injustices faced by disabled people are often discussed in broad terms as ethical and political. In this chapter, I will argue that it is philosophically possible and politically useful to conceive of certain injustices faced by disabled persons as *epistemic* harms. To do so, I will draw upon the theories of epistemic injustice developed by Miranda Fricker (2007) and José Medina (2013) to argue that disabled persons are subject to pervasive forms of epistemic injustice. First, I explain the terminology and arguments developed by Fricker and Medina that are useful in theorizing epistemic injustices against disabled people. Second, I analyze three specific causes of these epistemic injustices: medicalization, institutionalization, and cultural anxieties about mental disability. Finally, I consider severely mentally disabled persons who, because they are unable to share information or develop interpretations of shared social experiences fall outside of Fricker's narrow definition of epistemic injustice. These considerations will lead to the second chapter, in which I discuss Julia Kristeva's work to, first, articulate a form of attentiveness that is responsive even to severely mentally disabled persons and second, develop an understanding for why nondisabled people subject disabled people to epistemic (among other) injustices.

Before moving on to discuss epistemic injustice, however, I want to pause to consider why it is worthwhile to focus on specifically epistemic harms suffered by disabled people. If the epistemic is a part of the overall concerns of disability studies literature, I can imagine a reader asking, then what use is abstracting the epistemic from its complex relationships with other forms of injustice? First, my hope is that by focusing

on the epistemic aspects of disability oppression, a clearer analysis and some helpful connections between the experiences of differently disabled subjects will emerge. I do not want to abstract but to focus. Second, I find certain resonances between Medina's call for epistemic interaction and Kristeva's plea for interaction with disabled people to be interesting. Instead of moving point-by-point through what each means and then comparing and contrasting them, however, my hope is that by devoting a close reading to each in separate chapters I can do justice to both authors but also bring out the similarities in their recommendations. Finally, as I will address in the second section of this chapter, the long histories of charity and medical models of disability have meant that epistemic subjectivity has been especially undermined by disability oppression. When the telethon organizer raising money for a disability cure thinks she knows what is best for disabled people, or when the medical community supports the view that a cure is the only way to solve the "problem" of a disability, it is precisely the knowledge and experiences of disabled persons which are undermined. To better understand this phenomenon, I will now turn to discuss epistemic injustice in general.

<div align="center">An Overview of Epistemic Injustice</div>

Fricker: Testimonial and Hermeneutic (In)Justice

In her book, *Epistemic Injustice: Power and the Ethics of Knowing*, Miranda Fricker (2007) discusses two types of epistemic injustice, testimonial injustice and hermeneutical injustice, seeking to define them and to understand how they are caused and how they might be addressed. Hers is a virtue epistemological account, relying on epistemic sensibility, virtues, and vices, to understand the phenomena she considers. She also notes that she intends to focus on specifically epistemic concerns. Because questions

about the distribution of information or education are not distinctly epistemic—that is, because "it seems largely incidental that the good in question can be characterized as an epistemic good"—this is not her focus (Fricker 2007, 1).[1] Rather, as I will explain, testimonial and hermeneutical injustices constitute both epistemic and ethical harms.

Testimonial injustice is broadly defined as the attribution of less credibility to a speaker as a result of a hearer's prejudice.[2] But Fricker is especially concerned with what she calls the "central case" of testimonial injustice, "*identity-prejudicial credibility deficit*" (2007, 28, original emphasis). It may be helpful to consider some important aspects of this definition. First, stereotypes, defined as "*widely held associations between a given social group and one or more attributes*," are not harmful in themselves, on Fricker's view (2007, 30, original emphasis). Indeed, she avers that we would be worse off epistemically if we did not use stereotypes in our daily interactions. We need to make quick assessments of who to believe and who not to trust without lengthy inferential processes. Thus, testimonial injustices result from *prejudicial* stereotypes, where "prejudice" refers to a judgment that is resistant to counter-evidence due to an "*affective investment on the part of the subject*" (2007, 35, original emphasis). That is, stereotypes are epistemically advantageous as long as they remain responsive to counter-evidence.

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[1] David Coady is critical of this view, arguing that the epistemic good of "interesting true belief is an intrinsic value" such that distributive concerns about this good are not "only incidentally epistemic" (2010, 106). Fricker suggests in reply that such questions are useful but that she chose to focus on the more hidden injustices resulting from discrimination rather than the more easily recognized injustices resulting from problems of distribution (2010, 175).

[2] I considered reformulating Fricker's use of "speaker" and "hearer" in various ways to undermine the emphasis on oral communication. I decided against this, however, for several reasons. First, retaining Fricker's language may help to highlight the ubiquity of the norm of oral speech in our language. Second, and conversely, perhaps retaining this language can help give breadth to what "speech" and "hearing" usually mean in English. In other words, could we conceive of both non-oral forms of communication (American Sign Language, for example), and oral communication as speech without neglecting their differences?

And because prejudices can be positive or negative (that is, a hearer can be disposed in favor of or against a speaker), Fricker is concerned with *negative* prejudicial stereotypes.[3] Second, the prejudices with which Fricker is especially concerned are those based on *identities* found in shared social imaginations.[4] An individual with idiosyncratic prejudices might commit testimonial injustices, but not of the central type. Fricker explains that the identity-prejudicial credibility deficit is her central case because it tends to be both systematic and persistent (2007, 27-9). It is systematic because identity-prejudicial credibility deficits tend to intersect with injustices in other arenas, such as legal, economic, or political injustices. It is persistent because such injustices tend to occur, not in isolation, but repeatedly over time. Indeed, perhaps one of the most

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[3] Indeed, Fricker (2007, 19-21) gives two arguments for the view that positive prejudices leading to credibility excesses are not cases of epistemic injustice. First, she holds that credibility is not a finite good, and thus, by assigning a credibility excess to one person or group we do not necessarily assign a credibility deficit to another person or group. Second, she argues that any harm done by a credibility excess would not result from that single instance, but would result from the accumulation of being assigned credibility excesses over time. One may develop the epistemic vice of arrogance, for example, or come to hold false beliefs from a lack of questioning, but no one instance of credibility excess caused these harms. On the other hand, a single credibility deficit could be harmful to the knower *as* a subject of knowledge. This seems like an odd argument given Fricker's focus on systemic (occurring in concert with other forms of injustice) and persistent (repeated over time) instances of testimonial injustice. Indeed, Medina disagrees with Fricker on this point. He argues, first, that while assigning credibility may not be a zero-sum affair, it is comparative (Medina 2013, 61). If a person assigns a credibility excess to one person, that usually means she assigns less credibility to another person. In other words, "I trust you" usually means "I trust you more than…" Second, he argues that because the harm of testimonial injustices are embedded in histories and social contexts, an "attribution contributes to epistemic injustice" insofar as it "belongs to a chain of attributions that promotes epistemic vices" (2013, 59). Isolated testimonial injustices are rare and much less serious than those that are repeated.

[4] The fact that identities result from the social imagination is important because it reveals identities as contingent. Fricker defines the social imagination as shared images or "shared imaginative conceptions" which are important to be attentive to because these shared images often operate without individuals' conscious awareness (2007, 14,37). She avoids the use of the "social imaginary" out of a desire to avoid getting bogged down in psychoanalytic theory, but others, including Linda Martín Alcoff (2010, 133-4) argue that the notion of the social imaginary, like that found in the work of Michèle LeDoeuff, could be particularly promising for her account. Fricker does offer a brief reply in a response article (2010).

systematic and persistent forms of epistemic injustice is what Fricker calls "pre-emptive testimonial injustice" (2007, 130). Pre-emptive testimonial injustice occurs when the subject does not share information at all because she is perceived to have no credibility in advance; she is silenced by others who do not seek her knowledge. This constitutes not a partial but a complete undermining of the subject as a knower.

Due to the systematic and persistent nature of testimonial injustices,[5] they pose an array of harms to the speaker. Generally, the speaker is "wronged in her capacity as a giver of knowledge," which is, for Fricker, an essential capacity for human value (2007, 44).[6] Another way of understanding this harm is as a form of epistemic objectification; when a speaker's testimony is neither sought nor trusted, she can contribute to the sharing of knowledge only as an object of knowledge (2007, 132-3). She is a source of information but not an informant. Fricker's benign example, here, is the difference between a guest who enters with a wet umbrella from which you can infer that it is raining outside (source of information) and someone telling you it is raining when asked (informant), but there are of course much more nefarious versions of epistemic objectification, a sample of which I will discuss below. Moreover, the individual harm of

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[5] Here and following I use "testimonial injustices" to refer specifically to the central case of testimonial injustice discussed in the previous paragraph.

[6] This account is later refined through a discussion of Edward Craig's state of nature account of testimony. For Craig, certain pressures have meant that what we mean by "knower" is an objectivized form of "good informant." That is, in our everyday epistemic interactions, we recognize one as a knower only if they are a good informant, if they "participate in the sharing of information" (Fricker 2007, 144-5). What this drives home, for Fricker, is that while we may think that undermining one's testimony is not the same thing as undermining one as a knower (after all, one could object that a person may very well know something but not be allowed to give testimony about it or not be trusted when they share that knowledge), in fact, what we mean by knower is a person who is a participant in the sharing and pooling of information such that to undermine one's testimonial capacity *is* to undermine one's status as a knower. In Fricker's words, "the [testimonial] injustice sends the message that they are not fit for participation in the practice that originally generates the very idea of a knower" (2007, 145).

epistemic injustice rarely exists in isolation. Because being a potential giver of knowledge is so important to our understanding of what is human, any challenge to the speaker's status as a knower is also symbolically a challenge to her humanity; that is, it is also an ethical problem. And in the case of testimonial injustice, the speaker is undermined because of the social identity perceived by the hearer, such that the challenge becomes a problem not just for the speaker's epistemic competence and humanity, but for the knowledge and humanity of all who are perceived to have the same social identity. Testimonial injustice is in this way truly oppressive, not just a one-off ethical harm.

I want to pause, here, to note a suggestion made by Christopher Hookway in response to Fricker's book (Hookway 2010). He offers a distinction between two perspectives on epistemic injustice: the informational perspective and the participant perspective. According to the informational perspective, the relevant questions about epistemic competence concern one's reliability as a source of information. According to the participant perspective, the relevant questions about epistemic competence concern one's ability to be involved in the activities that contribute to the growth and sharing of knowledge (2010, 157). Hookway argues that the participant perspective is in fact broader, and suggests incorporating testimonial injustice as a type of participant injustice. This would allow us to understand injustices in which one's tentative suggestions or hypotheses are discounted, one's questions not taken seriously, or one's ability to "recognize relevant information" is cast in doubt (2010, 157-8). These forms of participation are, for Hookway, not reducible to sharing information but are just as important to the development of knowledge and one's status as a knower. In a reply, Fricker agrees with Hookway that these are important aspects of our epistemic projects.

She suggests instead, however, that we should consider instances of what Hookway calls participant injustice as testimonial injustices because they are peripheral to the "basic epistemic practice" of "passing on knowledge" (Fricker 2010, 175-6). My aim is not to enter this debate but rather to flag the issue, noting that practices beyond strictly sharing information may be discredited as a result of negative identity prejudices and that this too can constitute an epistemic harm. In my discussion below, I will use "testimonial injustice" in this broader sense to include other forms of epistemic participation unless otherwise noted.

Beyond the primary harm of being undermined as a knower, there are several secondary harms caused by testimonial injustices. First, there are practical harms. Because testimony is such a central part of our affairs, being assigned credibility deficits or being pre-emptively silenced is likely to have broad implications for one's life. If one is not trusted in a court, she is less likely to be found innocent and more likely to face stiffer penalties. If a person is seen as lacking credibility at a job, she is less likely to advance in her career. If a person is thought not to have a worthwhile understanding of her predicament in a segregated living facility, she is more likely to suffer conditions which she has no say in improving. In this way it is clear that testimonial injustices have important ethical and practical valences.

There are also secondary epistemic harms. Those who experience testimonial injustices may actually lose knowledge or lose epistemic virtues. For example, a person's self-esteem may be undermined to such an extent that she loses confidence in her beliefs or her justifications for her beliefs. In such a case, if we adopt an understanding of knowledge as justified, true, belief, as depending on confidence or justification we may

say that this person has actually lost knowledge. Such a loss of self-esteem may also hinder one from gaining knowledge that she may have otherwise gained. Imagine, for example, a student who knew the stages of mitosis very well, but because she is subject to testimonial injustices from her teacher loses confidence that she actually knows about mitosis and, moreover, fails to learn as much as she could have about other chapters studied in the course because she starts to perceive herself as incapable. It is also likely that being subject to recurring testimonial injustices would lead one to lose, or fail to develop, epistemic virtues like courage, "the virtue of not backing down in one's convictions too quickly in response to a challenge" (2007, 49). Clearly epistemic courage is helpful in contributing to knowledge; without it, one would revise her beliefs in response to challenges from others, whether her beliefs were true or not. For a person subject to frequent testimonial injustices, however, it is easy to imagine that it may be difficult to continually maintain one's beliefs in the face of challenges given the constant credibility deficits and silencing the person experiences.

As a corrective to testimonial injustice, Fricker develops the epistemic virtue of "testimonial justice." The ideal for the hearer who has the virtue of testimonial justice is "*to neutralize the impact of prejudice in her credibility judgements*" (2007, 92, original emphasis). Importantly, our attributions of credibility deficits should not be understood as inferential, but as perceptual. When one is assigned less credibility than she deserves as a result of her social identity, the hearer is usually not making an inference, but *perceives* her as less credible.[7] Thus, achieving (or approaching) the virtue of testimonial injustice

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[7] In the most overt cases of testimonial injustice, the hearer may in fact infer that the speaker is less credible or consciously use the premise that the speaker is less credible in an inference. Even in such cases, however, the credibility deficit will likely result from perception as

will require a training of one's testimonial sensibility. This could occur in two ways. One

may have the virtue naïvely, that is, the subject's judgments are "free from prejudice

from the start" (2007, 93). When this is the case, it is likely to be specific to some social

identities. That is, it is unlikely that any hearer would be free from prejudices regarding

all social identities. On the other hand, one may have the virtue of testimonial justice as a

corrective. In this case, the hearer makes adjustments to her attributions of credibility to

counteract negative prejudices where appropriate. This can be done in two ways, through

reflection or spontaneously. In neutralizing prejudices reflectively, a hearer recognizes

that she either has attributed, or is likely to attribute, unjust credibility deficits as a result

of the speaker's social identity and seeks to neutralize those prejudices. To do so, the

hearer must consciously give the speaker more credibility, and ideally, about as much

credibility as she would have given the speaker in the absence of such a prejudice. Other

ways to correct for one's prejudice might take more institutional forms, like sanctions for

apparent prejudice or "anonymization" of school or job applications, exams, or other

assignments (Fricker 2010, 165). The corrective form of testimonial justice could also be

achieved spontaneously through familiarity or through habituation. In the former,

frequent interaction with a member or members of a social identity may lead distorting

prejudices to gradually disappear such that the hearer eventually comes to trust speakers

of that social identity appropriately. In the latter case, the hearer develops the virtue by

being diligent enough about assigning neutralized credibility assessments that it becomes

second nature. This is the ideal of testimonial justice. Because we exist in complex and

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well. The racist Juror 10 in *12 Angry Men* (1957), for example, both perceives the defendant as
less credible and articulates the position that "You know how these people lie. It's born in them."

shifting social environments, however, most hearers can only ever hope to develop this virtue for certain social identities at any given time.[8]

Having given a rough sketch of testimonial injustice and its corresponding virtue, I will move on to discuss hermeneutical injustice. The central case of hermeneutical injustice is defined as "*having some significant area of one's social experience obscured from collective understanding owing to a structural identity prejudice in the collective hermeneutical resource*" (2007, 155, original emphasis). By "structural identity prejudice," Fricker means a prejudice that affects people based on their membership in an oppressed group; that is, based on their social identity. By "collective hermeneutical resource," she means the interpretive possibilities available in a given social environment. So a systematic hermeneutical injustice occurs when a person cannot explain her experiences to others (and perhaps cannot even understand them herself) because the hermeneutical resources of her community are lacking with regard to the experiences of members of her social group.[9] Moreover, this gap in hermeneutical resources is asymmetrical, it does not affect all equally. Fricker's main example here is sexual harassment, which is an attempt to name an experience that at one time had no way of being discussed as a shared experience. Given this gap in the hermeneutical resources of the time, there was no way for women to make sense of their experiences of

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[8] It should be noted that testimonial justice is also an ethical virtue because it aims to reattribute subjecthood to the speaker and, through repetition, to resist the practical ethical harms resulting from testimonial injustice. That is, its end is not just truth but also justice (Fricker 2007, 121-2).

[9] As in the case of testimonial injustice, there may exist hermeneutical injustices that are incidental, that is, not systematic. In such a case, an individual or group of individuals may be unable to understand and communicate about their experiences as result of a lack in hermeneutical resources which is not caused by a social identity.

ill-treatment, and thus they could not object to it. Only through sharing similar experiences could these women gain an understanding of the phenomenon, give a name to it, and begin a project of introducing the concept to the hermeneutical resource while rejecting the phenomenon in practice. And importantly, this hermeneutical lacuna affected (especially working) women in a harmful way, but it did not pose a harm to men. Indeed, it was to men's benefit that this behavior could only be understood as "natural" or "harmless play."

The harms of hermeneutical injustice map roughly on to the harms of testimonial injustice, for Fricker. The primary harm is that the persons affected are undermined in their capacity as knowers; that is, they are excluded "from the pooling of knowledge" because of an identity prejudice (2007, 162). And as in the case of testimonial injustice, there are both practical and epistemic secondary harms. Practical harms occur when the inability to communicate one's experiences leads to other negative consequences, like the continued exposure to physical and psychological harm or the barriers to career advancement in the example of the yet-unnamed sexual harassment. Secondary epistemic harms occur when one loses knowledge or epistemic virtues one might have had were it not for the hermeneutical gap. Because those subject to hermeneutical injustice may feel themselves to be alone in their incomprehensible or incommunicable experience, self-doubt and a lack of epistemic courage are likely consequences (even if it is just within the realm of experience affected by the particular hermeneutical lacuna).

To correct for hermeneutical injustice, Fricker calls for the epistemic virtue of "hermeneutical justice." This virtue is a "sensitivity" to the fact that what another is attempting to communicate is difficult given the available hermeneutic resources rather

than writing the unintelligibility off as "nonsense" or a "subjective failing" (2007, 169). As in the case of testimonial justice, this is achieved through adjustments in attributions of credibility. Ideally, the hearer who is hermeneutically just would attribute credibility to a speaker's interpretation as if it were given in a more hermeneutically inclusive environment. Of course, imagining one's response within a more inclusive hermeneutical environment before its arrival is a difficult project, precisely because our imaginations are constrained by the hermeneutic resources of our various communities. But there are several concrete forms this credibility adjustment could take. First, a hearer may seek out evidence of similar, but similarly inexpressible, experiences. In the case of women's mistreatment in the workplace, for example, a coworker could have sought out other working women to see if there was a common set of experiences, or a hearer may suspend judgment. To take the same example, a male coworker could say to a female speaker, "I do not understand the problem you are having, but I take seriously your sense of it as a problem. If you have more experiences like this one, please continue to share them with me so that we might come to a better understanding of your discomfort in these situations."

Finally, Fricker acknowledges that testimonial injustices and hermeneutical injustices are likely to be related. In cases where a person is subject to hermeneutical injustices based on a negative identity prejudice, that person is also likely to be subject to testimonial injustices resulting from the same prejudice. In other words, when one is a member of a group whose experiences are unintelligible either to all (including themselves) or to those in the dominant social identity/identities, she will probably also be viewed as less credible in her testimony because of her social identity. She does not

have the words to explain her experiences, and when she tries, she is unlikely to be believed anyway.[10] This is a danger that makes the epistemic virtues of testimonial justice and hermeneutical justice all the more important, but all the less likely.

Medina: Epistemic Interaction

Like Fricker, José Medina is concerned with epistemic injustice in his book, *The Epistemology of Resistance*. But where Fricker develops a concise analytic framework for understanding the specifically epistemic nature of these injustices, Medina undertakes a more complex project, drawing from and making contributions to democratic theory, social philosophy, and ethics where they intersect with epistemic concerns. It is this productive complexity that makes Medina's work both fruitful and difficult to summarize. For this reason, my discussion in this section will be necessarily confined to the specifically epistemic dimensions of his work, especially his responses to and developments upon Fricker's work. I turn to Medina for two reasons especially, his discussion of epistemic injustice at a broader social level, and his reworking of standpoint theory in terms of epistemic virtues and vices.

Medina is interested in developing an epistemology of resistance, that is, an epistemology that fosters the contestation necessary for democracy by challenging the epistemic practices that sustain "oppressive normative structures" (2013, 3-4). Such an epistemology must engage individual and social levels of analysis. We do not choose the communities we are born into, the social imaginaries or hermeneutical resources within our communities, or our social identities. It would be insufficient, then, to understand epistemic injustices in individual terms alone, or to hold only individuals accountable for

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[10] Medina expands upon this point in his book (2013, 96). Because I discuss his argument in detail in my conclusion, I only flag it here.

them.[11] But (for the most part) the communities into which we are born, the social

imaginaries we use to make sense of the world, and our social identities are not static or

total. Our communities contain sub-communities and are in contact with other

communities;[12] the resources we have for interpreting our worlds contain gaps,

contradictions, and may differ from one community to the next; our social identities

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[11] To be clear, I do not take Fricker to be opposed to this view. She recognizes that the social imagination and collective hermeneutical resources play an integral role in epistemic injustices. But hers is a book on ethics, and so its analysis and proposed solutions concern mainly individuals and their interpersonal interactions. Indeed, she gestures toward a political analysis of epistemic injustice in "Replies to Alcoff, Goldberg, and Hookway on *Epistemic Injustice*" (2010, 176-7).

[12] Medina is critical of Fricker on this point, specifically with regard to hermeneutical injustice. Recall that on Fricker's definition a hermeneutical injustice occurs when one's experiences are blocked from "collective understanding" as a result of gaps in "*the* collective hermeneutical resource" (2007, 155, my emphasis). For Medina, it is inaccurate, and indeed dangerous, to talk about a single collective or hermeneutical resource. First, this is because whatever collective one is referring to exists alongside other collectives and contains within it "heterogeneous subgroups." Second, it seems to set up an ideal of an eventually unified hermeneutical resource; but "no matter how unified and well communicated the social body happens to be, such inventory should be suspect, for it is likely to be an artificial unification invoked from a theoretical standpoint, which always runs the risk of disregarding some marginalized and hard-to-find interpretive resources" (Medina 2013, 103).
Kristie Dotson develops a similar criticism in her essay, "A Cautionary Tale: On Limiting Epistemic Oppression" (2012). She argues that Fricker's account of hermeneutical injustice assumes both (a) a collective hermeneutical resource and (b) that both the marginalized speaker and dominant perceiver have equal difficulty in making the marginalized person's experiences intelligible. This is rarely the case, however. Thus, Dotson develops the term "contributory injustice" to name injustices in which a perceiver's "willful hermeneutical ignorance" leads her to continue using "structurally prejudiced hermeneutical resources" rather than being open to marginalized hermeneutical resources (2012, 32). Importantly, this impedes the speaker's "ability to contribute to shared epistemic resources within a given epistemic community," thus the name, contributory injustice (2012, 32).
Fricker *does* emphasize the complexity of social identities such that "while a hermeneutically marginalized subject is prevented from generating meanings pertaining to some areas of the social world, she might well maintain a fuller participation as regards others" (2007, 153-4). And recall that she says that one way to achieve hermeneutical justice is to seek out corroborating evidence in the experiences of others, which could very well take the form of seeking out the experiences of those in marginal communities. But as Dotson points out, in her concern to delimit her concepts of epistemic injustice, Fricker ends up excluding the development of other forms of epistemic injustice, placing potential epistemic injustices that do not fit within her framework in the category of "epistemic bad luck." Medina and Dotson share the concern that we need to always keep open the possibility of hermeneutic resources existing, especially in the most "remote and obscure corners of the social fabric" (Medina 2013, 103). Doing so may require opening up Fricker's framework to expansions that she herself foreclosed.

change over time and within different social environments. Thus, it would be inaccurate to say that individuals' knowledge or epistemic practices are strictly determined by their epistemic milieu. Individuals can variously perpetuate or diverge from the knowledges and practices of their communities. Such divergences need not be understood as originating in completely self-determining individuals, but should be understood as arising from (a) innovations based on the epistemic resources of one's community and especially from (b) epistemic *friction*[13] produced through contact with other communities or sub-communities, other social imaginaries, and other social identities. With these complexities in mind, Medina proposes that we think of epistemic responsibility in terms of "chained action."

Building from Iris Marion Young's social connection model of responsibility, Medina conceives of chained actions as a way to gain a more nuanced understanding of action and responsibility between the individual and the entire social group or collective. He defines chained action as "an action with individual elements, the significance of which can only be properly understood within a chain of actions, being thus crucially dependent on the actions of others, indefinitely many others, but always particular others and not (at least not necessarily) entire collectives or social groups" (Medina 2013, 226). The recent events spurred by police violence against racialized persons may serve as a useful model. Individuals are taking to the streets, often choosing acts of civil disobedience to keep the issue in the broader public's awareness. Importantly, those blocking streets are a small fraction of the people that they may be acting in concert with or on behalf of, for example, racialized communities, fellow protesters, or those seeking

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[13] I discuss Medina's understanding of this term two paragraphs below.

changes in the justice system. These acts of civil disobedience have meaning only within

a particular context of chained actions, like the history of civil disobedience as a response

to civil rights violations, the actions of fellow protesters in their communities, and the

actions of others practicing civil disobedience around the Unites States. And yet, each of

those practicing civil disobedience is acting as an individual, performatively reinforcing

the other links in this chain, and spurring reactive performances through similar acts of

disobedience, protests, media coverage, and so on.

This is chained action in progress, and it has important epistemic consequences.

While cases of police violence against racialized persons are nothing new in the United

States, chained actions like these have brought awareness to the issue in a new and

important way. The experiences of communities of color are being articulated in a

mainstream public, forcing discussions which, though they may be disappointing, would

not happen at all without the efforts of different groups acting in response to police

violence, each in their own way.[14] This is an example of what Medina calls "epistemic

friction." Epistemic friction is the result of opposing cognitive forces, which Medina

understands as the various motivations for and influences on our thinking (2013, 49). In

our example, then, bringing the experiences of communities of color into public discourse

constitutes epistemic friction for mainstream, white communities. Many white

communities are motivated to maintain the epistemic status quo because it is in their

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[14] The importance of this point should be underscored. There is no single national
organization organizing and carrying out the various actions taking place. Rather, networks of
communication exist such that methods and messages can be shared, but actions are led by those
in their own communities, proposed solutions are responding to particular needs of those
communities, and the tactics used by each group are chosen by and respond to the particular
communities. We need not wait for a unified message or nation-wide collective action to bring
the experiences and demands of marginalized communities into a broader public discourse.

interests;[15] and many cognitive influences in white communities (from mainstream news and media, to the discourse of "colorblindness," to the segregation of white communities from communities of color) reinforce the erasure of the experiences of communities of color. Thus, the presence of protesters in public spaces and the public discussion of some problems faced by communities of color constitute a form of epistemic friction.

Not all epistemic friction is positive, however. As Medina notes, epistemic friction can also work in conservative and oppressive ways, by "censoring, silencing, or inhibiting the formation of beliefs, articulations of doubts, the formulation of questions and lines of inquiry, and so on" (2013, 50). The discourse of colorblindness, for example, may result in epistemic friction for communities of color, as it labels anyone who seeks to address racial issues as "the real racists," preemptively silencing their concerns. For this reason, Medina introduces two principles of epistemic friction. The first is the principle of acknowledgement and engagement, according to which "all the cognitive forces we encounter must be acknowledged and, insofar as it becomes possible, they must be in some way engaged" (2013, 50). So it is imperative for those in white communities to take into account their own motivations and influences, and they should also consider the knowledges and experiences of communities of color. Writing others off as racist, for example, would be to fail this principle. Of course the opposite is also true. The second is the principle of epistemic equilibrium. According to this principle, we should aim for "equilibrium in the interplay of cognitive forces, without some forces overpowering

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[15] Charles Mills talks about this in his essay, "White Ignorance," for example. Here he notes that recognizing the benefits one receives from racist institutions, considering the possibility of reparations based on histories of racial oppression, and feeling responsibility to work alongside communities of color to change racist institutions are all obscured or erased by the ignorance of those in white communities and thus they have a motivation to remain ignorant (Mills 2007).

others, without some cognitive influences becoming unchecked and unbalanced" (2013, 50). Importantly this does not mean "giving equal weight to all perspectives" (2013, 195). Instead, this principle asks us to be vigilant in taking multiple perspectives into account, so that our own thinking is not given to only one set of cognitive forces. To return to my extended example, this would require that members of white communities not let their motivations and the influences on their thinking keep them in the inertia of ignorance. They must keep a constant check on these cognitive forces, and this would mean keeping in mind the viewpoints of communities of color. For members of communities of color, the principle would require that they not let mainstream influences overpower their own experiences. Such persons, for example, should not let themselves be silenced by "colorblindness" or doubt their own knowledge as a result of the failure of the white community to take up their concerns. In this way, we can foster *beneficial* epistemic friction, not friction for the sake of friction.

Of course, determining what constitutes beneficial epistemic friction will of necessity be a context-sensitive affair, but it is helpful to understand them in terms of "meta-lucidity" and "meta-insensitivity."[16] Meta-insensitivity occurs when people are "insensitive to their own insensitivity" (2013, 152). It consists of an outward direction, in which we ignore our "insensitivity towards others," and an inward direction, in which we ignore "our insensitivity toward ourselves—toward certain aspects of ourselves that we

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[16] Medina's use of "meta-insensitivity" is basically interchangeable with his use of "meta-blindness." He notes in a forward that he maintains this language in response to much literature which already uses the language of "blindness," but also acknowledges the danger of conflating blindness (and disability in general) with insensitivity or ignorance (2013, xi-xiii). Indeed, he notes that "insensitivity" has a broader meaning—all senses can be insensitive, not just sight, and we can be insensitive with faculties other than our senses, namely our emotions—such that it is better suited for the complex epistemic phenomena he seeks to understand. With these things in mind, I will, unless quoting, use "meta-insensitivity" throughout.

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disregard or even deny" (2013, 161-2). The meta-insensitive person does not know what she does not know, or more properly, does not know the limitations on her own knowledge; she is not sensitive to her failures to take others' experiences into account, nor is she sensitive to the social location or privileges that allow her to remain insensitive. In this way, detrimental epistemic friction can be seen as contributing to meta-insensitivity. One example of meta-insensitivity Medina uses is culture blaming, the phenomenon in which a group's "culture" is viewed as a cause of suffering (even when the same form of suffering is not blamed on the dominant group's culture when it occurs there). When the prevalence of single-mother households in black communities is blamed for rates of crime, for example, or the proportion of welfare recipients, this often constitutes a form of meta-insensitivity. Outwardly, not only is the person making this claim which is insensitive to a broad range of problems in black communities, from differential policing and the war on drugs to a history of segregationist practices which impact housing and education among other needs, but she is insensitive to her own insensitivity. That is, she does not even recognize that there may be alternative factors to take into account, or other perspectives, namely the perspectives of black persons to heed. The problem and solution are already given. Inwardly, this person is not only insensitive to a broad range of privileges afforded to her because of her race, from a history of slavery, grants, lending and housing practices that differentially benefitted white communities to law enforcement that uses its discretion to police communities differently, but she is also insensitive to her ignorance of her own social location. That is, she is not just insensitive to her own privilege, but insensitive to her own relation to black communities such that privilege could be one possible way to understand that relation.

Meta-lucidity, unsurprisingly, is defined in contrast to meta-insensitivity, as the "capacity to see the limitations of dominant ways of seeing" and knowing (2013, 47). The meta-lucid person acknowledges the gaps and problems of a group's or society's epistemic practices, even if she cannot detail exactly what those gaps are. In this way, beneficial epistemic friction can be seen as contributing to meta-lucidity. Thus, to return to the example above, the meta-lucid subject may acknowledge that there are histories that contribute to various forms of suffering in black communities and that those histories are often not told for political reasons, even if she does not know those particular histories; she may acknowledge that the narrative of the single parent household does not take into account the perspectives of persons from black communities and may therefore seek out those perspectives; she may acknowledge that there are indeed a multiplicity of black communi*ties* and thus a single description of "*the* black community" is insufficient; she may acknowledge that, as a white person, she is in very particular social relationships to black communities, and thus understand that her own life and identity are tied to those others, even if she does not know exactly how. Meta-lucidity is not knowing everything, but knowing that we do not know and striving to remain open to what we do not know.

Because it is through others that we do (and should) understand ourselves and the world, meta-lucidity and the principles of epistemic friction are supported by what Medina calls the Imperative of Epistemic Interaction, which requires that we develop habits and sensibilities[17] to be open and responsive to "diverse and multiple others" (2013, 9). To fulfill this imperative it is necessary that different groups within a society

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[17] It is clear, here, that Medina agrees with Fricker about the perceptual and affective nature of our epistemic interactions with others. Being closed or open, indifferent or responsive to others involves *perceiving* and *feeling* that the other as worthy of attention as much as it involves re*cognizing* the other as worthy of attention.

"can articulate their shared experiences and perspectives" (the expressibility requirement)

and that different groups within a society, and perhaps the society as a whole, take up

those experiences and perspectives (the responsiveness requirement), such that true

interaction can occur (2013, 9). Importantly, for Medina, the language of "interaction" is

preferable to "integration," because the latter is stronger, often taking on a sense closer to

that of "assimilation" which he avidly wants to avoid. Integration may require "those who

have been so far excluded and marginalized to find their place in practices and

institutions that have not been traditionally theirs," and thus undermine the beneficial

epistemic friction required for meta-lucidity and create detrimental epistemic friction

which fosters meta-insensitivity (2013, 8). (After all, if all persons and groups are

integrated in the sense of assimilated, where could friction come from other than the

friction of dominant discourses against individual experiences?) Interaction, on the other

hand, is a weaker notion and thus allows for spaces, institutions, histories, or discourses

intended primarily for marginalized groups. In this way it fosters beneficial epistemic

friction and contributes to meta-lucidity.

So far I have discussed the epistemology of resistance in terms of guiding ideals.

We should seek out beneficial epistemic friction to foster meta-lucidity, and we should

resist detrimental epistemic friction to avoid meta-insensitivity. To do so will require that

societies follow the Imperative of Epistemic Interaction. Medina also discusses three

epistemic virtues necessary to achieve meta-lucidity, and three opposing vices that lead

persons to be meta-insensitive.[18] The first virtue Medina discusses is epistemic humility,

or "attentiveness to one's cognitive limitations and deficits" (2013, 43). This is a virtue

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[18] Medina does not take this list to be exhaustive but argues that these virtues and vices are central for his purposes (2013, 31).

because, in moderation, it leads to certain epistemic benefits. It can help subjects make more specific, nuanced arguments, recognize lacunae in their knowledge, and formulate questions about unwarranted generalizations or gaps in knowledge that should be filled. Its opposite is epistemic arrogance. Epistemically arrogant people are inattentive to the limitations and gaps in their knowledge, and thus it is more difficult for them to learn from mistakes, question presuppositions and biases, or contest their own beliefs (2013, 30-1). A second virtue is "intellectual curiosity/diligence," which is the motivation to meliorate gaps in one's knowledge and one's cognitive limitations (2013, 43). Its opposite is epistemic laziness, the lack of motivation to fill, and often concerted effort to avoid filling, gaps in one's knowledge (2013, 33). A third epistemic virtue Medina argues for is open-mindedness. The open-minded subject is open to, and may even seek out, the perspectives of others, especially those perspectives that may contest her current beliefs (2013, 44). The opposite of open-mindedness is closed-mindedness. Closed-minded subjects are "systematically closed to certain phenomena, experiences, and perspectives, come what may," often in an active, defensive manner (2013, 34-5). As epistemic character traits, these virtues and vices involve cognitive, affective, and perceptual components. That is, open-minded subjects ideally recognize, perceive, and are emotionally open to others, especially relevantly different others, as sources of alternative perspectives that may contribute to beneficial epistemic friction. Because of this complexity, these virtues and vices are habituated; they are not natural, nor the result of cognitive effort alone.

As habituated character traits, we may expect that some experiences will be more likely to lead to the development of epistemic virtues than others. One relevant way to

organize such experiences is the relationship of oppressor and oppressed. On Medina's

view, epistemic virtues and meta-lucidity will *tend* to correlate with oppressed persons,

while epistemic vices and meta-insensitivity will *tend* to track oppressors. This is because

mainstream discourses, practices, and institutions often leaved oppressors unchallenged,

while constantly contesting the marginalized. By being given default, and often undue,

epistemic authority, oppressors will likely develop arrogance; only being required to

understand and navigate their own, mainstream social milieu will likely lead to laziness;

and because acknowledging one's privilege and implication in the material and social ills

of others would result in an uncomfortable cognitive dissonance, oppressors are likely to

develop unconscious defense mechanisms such that they remain closed-minded (2013,

30-36). Insofar as these vices contribute to epistemic meta-insensitivity, then, we can say

that oppressors are more likely to develop meta-insensitivity, especially with regard to

the oppressed.

The oppressed on the other hand are likely to have experiences that foster

epistemic virtues. Because oppressed persons are likely to experience gaps in mainstream

epistemic practices, discourses, and institutions which block the mainstream from

understanding their experiences, the oppressed are more likely to develop humility.

Indeed, if oppressed persons are able to identify with others' exclusions as a result of

their own experiences of exclusion, this may lead them to be more attentive, not just to

the limitations of the mainstream, but to their own limitations in relation to understanding

other oppressed groups.[19] Similarly, it is common for oppressed subjects to benefit from

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[19] For example, the fact that the mainstream claims to speak on behalf of women despite its obvious failures to account for the experience of women could lead white women to recognize that there are limits on their own understandings of the experiences of women of color or immigrant women. Of course, the failure of women's groups to make this connection has been a

knowledge of, and have frequent opportunities to learn about, their oppressors. Surviving

under oppression often requires oppressed persons to navigate different social realms (at

the very least, their own milieu and the oppressor's world), which requires them to gain

the relevant types of knowledge. If the curiosity that the oppressed benefit from

developing becomes a character trait that can be directed at other social realms, in

addition to their own realm and that of their oppressor, then we can see that oppressed

persons have occasions for developing intellectual curiosity that oppressors lack. Finally,

oppressed persons "are often encouraged and typically even forced to see reality not only

through their own eyes, but also through the eyes of others [that is, oppressors] whose

perspectives and social locations matter more" (2013, 44). If this openness to the

perspective of their oppressors can be generalized, then they will be more likely to open

themselves to the perspectives of different others as well, especially the perspectives of

other marginalized persons. Insofar as these virtues contribute to meta-lucidity, oppressed

persons are more likely than oppressors to develop meta-lucidity.

To be clear, the tendencies discussed in the last two paragraphs are just that:

tendencies. First, the virtues discussed are not exclusive to the oppressed, nor are the

vices exclusive to oppressors. Second, the virtues discussed are not universal to

oppressed persons, nor are the vices universal to oppressors. Finally, the virtues do not

automatically follow from being oppressed, nor do the vices automatically follow from

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major source of criticisms of Western feminism. I think Medina's suggestion is still convincing,
though. He is careful to qualify his position, so that all he really needs to show is that oppressed
persons will be *more likely than oppressors* to develop these virtues, and this is because they are
more likely to experience epistemic friction than oppressors. Indeed, while there is always more
work to be done, anti-oppression theorizers and activists do tend to be more responsive than
others to alternative perspectives. For example, it is commonplace in activist circles to follow the
lead of those whose fight it is, while charities and government agencies still take the lead with
little input from those they supposedly work on behalf of.

being an oppressor (2013, 43). There will almost certainly be humble oppressors, for example, and closed-minded oppressed subjects. We must also be careful not to romanticize the epistemic privileges of oppressed groups. As Medina notes throughout his book, oppression creates epistemic disadvantages alongside its other (e.g., material, symbolic) manifestations. Oppression may result in moderate epistemic humility, but it may also lead to oppressed subjects who experience limitations to the point of being epistemically undermined. While oppressed persons may be in better situations to develop curiosity and epistemic diligence, they may also be barred from acting on their curiosity or lack the resources to be diligent. And though open-mindedness may be encouraged in the oppressed by the necessity of taking the perspective of their oppressors, the same forces may lead to a dissonance or double-consciousness that hinders epistemic growth and may lead to psychological suffering. Thus, Medina's argument must be nuanced: as a result of oppression, oppressed persons will have certain experiences that may prompt the development of epistemic virtues and meta-lucidity. Oppressors, on the other hand, will probably not have these experiences, and indeed often have experiences that support or incentivize epistemic vices and meta-insensitivity. Summarizing these points, Medina writes, "although I will depart from those strong positions that attribute some kind of epistemic superiority to oppressed groups, I will defend the claim that there are distinctive epistemic advantages that can be found among oppressed subjects" (2013, 45).

<div align="center">Epistemic Injustice and Disability</div>

The discussion of Fricker and Medina in the previous section is intended to outline the phenomenon of epistemic injustice and the ways in which it might be

addressed. In this section, I turn to epistemic injustices specific to the oppression of

disabled persons. The section is organized into two subsections, one focusing on practices

that have epistemic effects for a broad spectrum of disabled persons (institutionalization

and medicalization), and the other focusing on some specific issues that arise when

discussing epistemic injustice in relation to mental disability. Before turning to these

issues, however, a few qualifications are in order. First, though I frequently combine my

discussions of physical disability and chronic illness, I do not intend to conflate them.

Rather, because there are certain similarities in the epistemic injustices faced by

physically disabled persons and chronically ill persons, I will discuss them in parallel,

highlighting relevant differences along the way. Second, by dividing physical disability,

sensory disability, and chronic illness from mental disability in the final subsection I do

not intend to understand them as opposed. Instead, because mental disability can pose a

unique challenge to discussions of epistemic injustice—specifically the question of

whether or not persons who are often understood to have natural epistemic limitations

can be subject to epistemic injustices—I have separated the discussions to emphasize this

issue. Of course, there will be common themes that emerge in discussing disability in its

myriad forms, and there are persons who are both physically disabled or chronically ill

and mentally disabled. Finally, I do not address all, or even most, disabilities in this

section. What I hope to accomplish is to understand some themes that have emerged in

disability studies with the tools of the literature of epistemic (in)justice discussed above.

Problematic Practices

Understanding the myriad epistemic injustices faced by disabled and chronically

ill persons would be too large a task for this project, so I organize this subsection by two

related practices: institutionalization and medicalization. These practices have long been contested by disability studies scholars and disabled communities, yet they are still very common in the contemporary United States. What I aim to home in on are the specifically epistemic aspects of these practices. This focus is important for several reasons. First, because institutionalization, medicalization, and related practices to which disabled persons are often subject are importantly epistemic in nature, treating disabled persons as objects *of* knowledge, not subjects *with* knowledge. A second reason for this focus is that disability studies has largely been concerned with the ethical and political aspects of disability oppression, such that my focus on epistemic injustice can provide a helpful supplement to understanding disability oppression.

Institutionalization

I will begin by discussing the epistemic consequences of institutionalization. By institutionalization I mean the practices of confining disabled people in either public or private institutions. Related to institutionalization is the practice (often seen as the only alternative to brick-and-mortar institutions) of tracking disabled persons into segregated housing and employment. According to ADAPT—formerly the American Disabled for Accessible Public Transit, and later the American Disabled for Attendant Programs Today[20]—more than "250,000 people in nursing homes want to return to the community" (ADAPT 2015). Indeed, nursing homes became the new space of confinement for many disabled people as large-scale institutionalization in its previous manifestations fell out of favor in the wake of controversies about their terrible conditions in the 1970s (Shapiro

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[20] See Thomas (2015) and Shapiro (1994) for insightful histories of ADAPT.

1994, 241).[21] Despite the move away from larger institutions, "33,732 American people were still housed in large state institutions housing 16 people or more" in 2009, "and most states continue to channel a significant proportion of long-term care funding into institutions" (Chapman, Carey and Ben-Moshe 2014, 11). It is also important to recognize that prisons serve as sites of confinement for disabled persons. In 2012, for example, the Treatment Advocacy Center (Torrey, et al. 2014) reports that there were approximately 356,000 prisoners diagnosed with mental illnesses in just state prisons and county and local jails. Disabled persons are funneled into prisons by a system that criminalizes non-normative behavior and fails to address mental health issues in productive ways. On the other hand, the prison environment is disabling in many ways. As Chapman, et al. (2014, 16) explain, the difficult labor in unhealthy conditions, the use of drugs and shared needles, the scarcity of medical equipment, and emotional, physical, and sexual violence all constitute disabling aspects of the prison environment. Thus institutionalization may change forms over time, but it is a remarkably persistent social reaction to disability.

What, then, are the epistemic consequences of institutions? Frequently, the institutionalized are subject to testimonial injustices. Perhaps most profoundly, disabled subjects' knowledge about the institutions in which they are imprisoned is often disregarded. Joseph Shapiro discusses the example of Jeff Gunderson, a man with cerebral palsy who was placed in a nursing home from ages eighteen to twenty-seven (1994, 237-250). Gunderson's various wishes were not heeded and he was forced, for example, to go to bed at 7:00pm as a young adult, to eat bland "gruel" meant for the

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[21] For a fascinating microcosm of this transition, see Carey and Gu (2014) who discuss the role of parents' organizations in the deinstitutionalization reforms of Pennsylvania.

elderly in the nursing home, and was subject to many forms of abusive behavior. The fact that this sort of treatment can continue for over eight years reveals the extent to which his and others' testimony is often disregarded by institutional staff and administration. Indeed, this treatment had the sort of epistemic and practical consequences that Fricker discusses. Gunderson came to doubt his own beliefs, undermining his epistemic subjectivity (the primary harm) and his willingness to hold to his convictions (the secondary epistemic harm), such that he could not resist the abusive behavior inside the institution (the secondary practical harm). Indeed, it took the pleas of a (testimonially just) social worker to convince him that his desire to leave the nursing home was justified. Shapiro writes that Gunderson said of this encounter, "I thought it was impossible, […] even though I'd always been screaming, 'Get me out'" (1994, 242).

Mark Friedman and Ruthie-Marie Beckwith, writing about two self-advocacy groups of intellectually and developmentally disabled people, Speaking For Ourselves of Pennsylvania, Inc. and People First of Tennessee, Inc., note the frequent testimonial injustices faced by disabled members as they sought to organize against institutionalization. They explain, for example, "Insightful reflections shared by leaders [of the organizations] were dismissed as the product of manipulation and subversive mind control techniques employed by the nondisabled organizers and advisors" (Friedman and Beckwith 2014, 239). Here, it is clear that the organizers faced testimonial injustices. Professionals and the family members who assumed that they should be in institutions found the testimony of the organizers to lack credibility because of their disabled statuses. Indeed, the assumption was that these ideas must have been coming from outside, from nondisabled organizers feeding them to the disabled organizers. Again, this

treatment led to the sorts of harms Fricker discusses. In addition to disrespecting their epistemic subjectivity (the primary epistemic harm), many members of the organization had developed a sort of learned helplessness, a feeling of inability to trust their own knowledge (the secondary epistemic harm) and make decisions about their lives. It was also common for them to acquiesce to poor treatment, abuse, and threats in institutions (a secondary practical harm) because of this conditioning over the course of their lives. Indeed, one member, Betty Potts, recalls her experience of trying to bring awareness to an instance of abuse: "I once spoke up about their hitting someone and handled rough but they said I lied about it but I didn't" (2014, 241). Though she remained insistent, and thus resisted some of the secondary epistemic harms (like loss of epistemic courage), she was clearly subject to a testimonial injustice in this case, one that undermined her as a knowing subject and that led to continued practical harms.

Clearly, the testimonial injustices to which disabled persons, like Gunderson and the self-advocates just discussed, operate in such a way that beneficial epistemic friction is removed within the institutions, but the institutions themselves obstruct beneficial epistemic friction in the wider communities. Within institutions, epistemic influences which point to the harms caused by institutions, the evidence that institutions are unnecessary because of—and indeed inefficient compared to—various technologies and home care services, and their inability to effect cures are met with the closed-mindedness of workers, legal custodians, and administrators who will not consider alternatives to institutionalization and the arrogance of those who think they know what is best for the institutionalized. Discussing the historical developments in institutions that led to the creation of back wards, or institutional spaces designed for the "untreatable" and which

often have the most deplorable conditions, Philip M. Ferguson (2014) notes that these wards developed largely out of the need for administrators to maintain their claims to expertise. When the institutionalized did not appear to be improving or responding to the therapeutic means used, administrators in these institutions could claim that they had been misclassified, rather than admitting that the therapies were ineffective. In the back ward, experts claimed to have "discovered" persons who were beyond therapeutic help, and in this way they bolstered their claims to expertise while simultaneously eliminating epistemic friction within the institutions, within the medical community, and in extra-institutional communities. Moreover, institutions themselves eliminate epistemic friction from their surrounding communities. By isolating "abnormal" people, institutions keep communities from needing to consider forces which may cause people, individually or collectively, to question or contest their own beliefs. For example, when persons who depend upon aids to care for their bodies are in nursing homes, outside communities have little impetus to contest the meaning of independence that we assume in our everyday lives, work spaces, or political discourse. The presence of such persons and the expressions of their experiences in our communities, on the other hand, might serve as a powerful force of questioning. What is independence for an adult who must be fed or bathed by someone else, or for someone who depends on technology for mobility or other activities? Are those who are considered nondisabled really so independent of others and technologies? Such questions could serve as important sources of contestation for views of independence and autonomy that assume forms of embodiment that allow for individual executions of one's will. But institutions remove such epistemic friction from mainstream view. In this way, institutions also result in hermeneutical injustices. They

prevent the interpretation and articulation of the experiences of the institutionalized in collective hermeneutic resources.

Resisting these injustices may indeed require the virtues of testimonial and hermeneutical justice. After all, when institutionalization is taken to be the only possible response to certain disabilities and institutions function so as to disregard the testimony and experiences of the institutionalized, it would take a non-institutionalized person breaking rank and taking the testimony of an institutionalized person seriously to begin letting disabled persons speak for themselves. But I am less interested in this form of resistance for two reasons. First, depending upon the testimonial justice of others may reinscribe a paternalistic relationship between institutionalized persons and the non-institutionalized. Second, and related to the first concern, the most effective forms of resistance to epistemic injustices (and injustices in general) resulting from institutionalization have come from the disabled community, especially the institutionalized and formerly institutionalized. Resistance of this sort is better explained by Medina's understanding of epistemic interaction as leading to beneficial epistemic friction. Michael Oliver (2009) explains, for example, that after his spinal cord injury, it was his involvement in organizations led by disabled persons, whether sports clubs or the Spinal Injuries Association or the British Council of Organizations of Disabled People, that helped him to understand his experiences as oppressive, find spaces in which he could express his views, and ultimately bring the experiences of the members of those groups to a broader level of social awareness. Similarly, those organizing against institutionalization in the United States, like Speaking For Ourselves and People First discussed above, first developed spaces in which they could discuss their experiences,

like speak-out sessions and meetings with privacy policies (in other words, "what's said here, stays here"), to regain their sense of epistemic subjectivity and courage (Friedman and Beckwith 2014, 239-43). This facilitated other learning processes, like visiting other institutions, and practices of epistemic contestation, from letter-writing and calling campaigns to publications which were made possible by a shared understanding of their experiences and newfound confidence in their own beliefs. Note that this is in line with Medina's preference for interaction over integration. The separate spaces and emerging discourses of disabled people allowed for expressions of knowledge that would not have been possible if disabled people were simply integrated, that is assimilated, into communities. The knowledge gained in these organizations could then become the source of beneficial epistemic friction in their wider communities. Thus, resistance to the testimonial injustices and meta-insensitivity fostered by institutions finds its most effective form in the collective consciousness-raising of disabled people and their subsequent interactions with nondisabled communities.

Medicalization

Closely related to institutionalization is medicalization. Indeed, the rise of institutionalization was an important contribution to the normalizing discourses that still characterize most of contemporary medicine.[22] I want to separate them here, however, to try to get clear on some of the epistemic injustices that result from medicalization. By medicalization I mean the practices of understanding disability and/or chronic illness in biological terms alone and responding to disability and/or chronic illness with only or primarily medical interventions or "cures." To be clear, my intent here is not to argue for

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[22] For discussions of this relationship, see for example, Michel Foucault (1994) and Lennard J. Davis (1995).

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an end to medicine (as if such a thing were possible), nor to criticize all aspects of medical practices. Instead, I want to draw some critical attention to the epistemic consequences of medicine's largely unquestioned authority over those subjected to medical diagnoses and treatments. This is especially important in the United States given our dependence upon medical diagnoses for insurance claims, government resources, and school and workplace alterations; a physician's signature, not the subjective experience of being disabled, is the litmus test for access to these resources.

The practices of medicalization can result in testimonial injustices in at least two ways. First, in providing diagnoses and prognoses, medical professionals often disregard the testimony of disabled and chronically ill persons. Susan Wendell, who discusses this problem at length in her book *The Rejected Body*, summarizes the point:

> The authority of medicine tends to delegitimize our experiences of our bodies as sources of knowledge about them, because the authoritative, that is, the medical and scientific, descriptions of our bodies are third-person descriptions of physical conditions. For example, our own phenomenological descriptions are at best treated as weak evidence for the truth of medical and scientific descriptions. They are almost never treated as even weak evidence against a medical or scientific description of our bodies. (1996, 119)

Indeed, the perceived authority of medicine is so complete that there is relatively little acknowledgement of the gaps in medical knowledge. Thus, when medicine has not (yet) developed an understanding of a condition affecting a patient or patients, they are likely to be told, "There is nothing wrong with you," rather than having the limitations of medical knowledge explained and having their concerns taken seriously. Responses like this constitute testimonial injustices because they disregard the knowledge of patients whose experiences do not fit the mold of current medical diagnoses. Such attributions of credibility deficits are prejudicial, on Fricker's understanding, because they are

judgments that resist counter-evidence due to the person's affective investments (Fricker 2007, 35). In this case, the medical professional views the patient's testimony as weak (that is, she resists the evidence of the patient's testimony) due to her own investment in her expertise, profession, and so on. Rather than admit her own limitations, the doctor rejects the patient's testimony. This undermines subjects as knowers of their own bodies and experiences (the primary epistemic harm); it often leads to further physical and psychological suffering as they often try to be more active than they should, placing unnecessary strain on their bodies, and often feel isolated from others who cannot understand their experiences and will not take them seriously (secondary practical harms); and it may lead them to lose epistemic courage as they learn not to maintain convictions in the face of challenges, even when this concerns their own bodily experiences (the secondary epistemic harm). In very real ways, being told by a doctor that "there is nothing wrong with you" prompts a difficult decision: either one must reject the putative authority of medicine and hold on to one's bodily knowledge, or one must reject one's own bodily knowledge and accept the authority of medicine (1996, 124). In an environment that puts its faith in medicine to the extent that ours does, rejecting medicine is likely to bring with it the scorn and doubt of insurance providers, employers, family and friends, and even oneself because the person is likely to have placed her trust in medicine prior to the experience of testimonial injustice.

Of course, injustice can result from diagnosis just as it can from the failure to give a diagnosis. Katie Aubrecht describes her experience with psychiatrists thusly:

> I was constantly quizzed about how well I knew the experiences I had were actually true experiences. I couldn't be sure what I felt, liked, or wanted anymore. I did, however, become ever more familiar with what doctors felt, liked, and

wanted, and that those things would be the right things to feel, like, and want. (Fabris and Aubrecht 2014, 190)

Here, Aubrecht gives an account of how the testimonial injustices of her physicians undermined her epistemic subjectivity, led to self-doubt, and ultimately led her own knowledge to be covered over by the knowledge of the doctors. One may object that if the doctors were quizzing her, it seems unlikely that they would disregard her knowledge. On Aubrecht's description, however, the quizzes did not serve as genuine requests for testimony about her experiences and beliefs, but instead introduced skepticism about her testimony. Moreover it is clear that, as she describes it, the doctors have an investment in imposing their own beliefs to maintain their own expertise such that they resisted evidence to the contrary, gradually moving Aubrecht to a space of confusion and compliance. Insofar as medical diagnoses are inflexible to the experiences of patients, then, it is likely that patients will continue to experience testimonial injustices.

Authoritative predictions of how a condition will change over time can also constitute what Fricker calls preemptive testimonial injustices, as they silence the patient's future testimony. Consider, for example, Alison Kafer's experience:

> [M]y doctor suggested that my thoughts of graduate school were premature, if not misguided. He felt that I would need to spend the next three or four years living at home, under my parents' care, and only then would it be appropriate to think about starting school. His tone made it clear, however, that he thought graduate school would remain out of reach; it was simply not in my future. What my future did hold, according to my rehabilitation psychologist and my recreation therapist, was long-term psychological therapy. My friends were likely to abandon me, alcoholism and drug addiction loomed on my horizon, and I needed to prepare myself for the futures of pain and isolation brought on by disability. (2013, 1)

This response to Kafer's acquired disability is clearly an instance of testimonial injustice. The doctors and therapists Kafer depended on for treatment disregarded her own beliefs about what was possible for her. As discussed above, she had to make a complex decision

about whether to maintain her beliefs despite the pronouncements of medical authority or to take their knowledge as authoritative and disregard her own convictions. But what may be even more threatening, here, is the predictive nature of her interactions. Not only do their predictions threaten to create self-fulfilling prophecies—one can easily imagine a person in Kafer's position socially withdrawing as a defensive response to the fear of abandonment, or giving up on graduate school in response to the doctor's doubts—but they also threaten to silence the patient in advance. In telling Kafer to prepare for a life of isolation, for example, those professionals trusted with her "rehabilitation" preempted any testimony she may have given about the resilience of her social ties or her knowledge of resources that could allow her to live in more socially integrated settings. By predicting drug and alcohol abuse, they preempted any testimony about whether or not she herself felt, or conceived of herself as, prone to such outcomes. Such interactions have the structure of preemptive testimonial injustice described by Fricker: "The credibility of such a person on a given subject matter is already sufficiently in prejudicial deficit that their potential testimony is never solicited" (2007, 130).[23]

A third instance of testimonial injustice often occurs as a result of medical treatments or therapies. Take, for example, Katie Aubrecht's experience of being diagnosed as mentally ill and prescribed medications for her condition. Among other complaints, Aubrecht experienced her medicated self as "alter[ing] the very way I moved," fatigued, disoriented, restless, nauseous; the medication made it "seemingly impossible to *be where I was*" (Fabris and Aubrecht 2014, 191, original emphasis).

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[23] Again, I believe this behavior can be considered prejudicial given Fricker's definition because it involves resistance to counter-evidence (the patient's testimony) as a result of the professionals' affective investments (in, say, their educations, professional expertise, reputation, and so on).

Despite these complaints, doctors continued to assure her that medications for depression and anxiety are normal, that they would help her be more social, and even that the source of her "problems" might be estrogen levels such that her birth control prescriptions were experimented with. Michael Oliver offers resonant criticisms of rehabilitation professionals' insistence on approximating walking. First quoting Vic Finkelstein, who wrote that the imperative to walk resulted in "endless soul-destroying hours at Stoke Mandeville Hospital trying to approximate to able-bodied standards by 'walking' with calipers and crutches," Oliver argues that for many with disabilities, walking is the least enabling option, that it results in greater suffering than learning to use other technologies like wheelchairs, and that "rejecting nearly-walking […] threatens the power of professionals, it exposes the ideology of normality and it challenges the whole rehabilitation enterprise" (2009, 36). These examples reveal the testimonial injustices to which patients can be subject once they are given treatment regimens by medical professionals. The testimony of those whose experiences do not follow the normal or expected course during treatment are disregarded; doctors insisted that Albrecht would improve with medication even though she experienced medicated life as more anxious than her life prior to treatment, and rehabilitation specialists insisted, in Finkelstein's case, that near-walking (to use Oliver's terms) would be better than using a wheelchair, even though he knew his own preference for using wheelchairs for movement. As discussed with other examples above, these testimonial injustices are largely motivated by medical professionals' own investments in their expertise.

Medicalization also tends to produce hermeneutical injustices and detrimental epistemic friction. Because medical discourse admits of only measurable, "objective"

information, patients are often at a loss to interpret their own subjective experiences.

Indeed, the unquestioned authority of medicine is apparent in Fricker's own work, where

she uses the example of an undiscovered disease to explain the difference between a

collective hermeneutical disadvantage and a hermeneutical injustice. She writes:

> If, for instance, someone has a medical condition affecting their social behavior at a historical moment at which that condition is still misunderstood and largely undiagnosed, then they may suffer a hermeneutical disadvantage that is, while collective, especially damaging to them in particular. They are unable to render their experiences intelligible by reference to the idea that they have a disorder, and so they are personally in the dark, and may also suffer seriously negative consequences from others' non-comprehension of their condition. But they are not subject to hermeneutical injustice; rather, theirs is a poignant case of circumstantial epistemic bad luck. (Fricker 2007, 152)

What is required for such a hermeneutical disadvantage to be an injustice is the inclusion

of hermeneutical marginalization, the asymmetrical "hermeneutical participation" of a

group; that is, the ability of a hermeneutic resource to provide interpretations of a

dominant group's experiences but not those of a marginalized group (2007, 152-3). I do

not want to argue that Fricker's example would always be a case of hermeneutical

injustice and never a case of epistemic bad luck, but I do think there are cases that fit

Fricker's description in which a hermeneutical injustice has been committed. Wendell's

discussion of the experience of pain provides such an example. As she explains, medicine

lacks interpretive resources, and is resistant to expand its interpretations, of pain. She

begins with the informative example of a woman who described her pain as a crab that

tore at her insides; she was later discovered to have an enormous ulcer in her stomach,

but because the doctors could find no physical cause of her suffering, she was sent to a

mental hospital (Wendell 1996, 134). Wendell also shares a similar story of a woman,

later diagnosed with multiple sclerosis, who for five years was told that she had

"housewife's syndrome," and because of this tried to be more active which increased her suffering (1996, 124). Drawing from her own experiences, Wendell explains that she finds the language medical experts use to describe her symptoms from chronic fatigue syndrome (CFS), like "fatigue," to be inadequate; she prefers a term she found in literature written by another person diagnosed with CFS, "cellular exhaustion," because it describes the "deep and pervasive" nature of her experience, unlike fatigue, which she experienced before she had CFS symptoms and which other people frequently experience (1996, 135). Instead of medicine, it was turning to her experiences and those of others with chronic pain that helped her to better understand her pain as an "interpreted experience;" rather than resisting the pain, she discovered the ability to "relax 'into it,'" an "attitude of acceptance toward it, giving in to it, or just watching/observing it" that "can reduce the suffering it actually causes" (1996, 171-2). In these three instances, the people suffering were members of a group (those experiencing pains unrecognized by medical authority) who were disadvantaged by the hermeneutical resources which privileged the experiences of others (medical professionals and those whose pains they could diagnose) such that they were unable to interpret their own experiences or communicate their experiences to others, and some of them suffered non-epistemic harms as a result of this treatment. Moreover, I aver that these are not simply instances of epistemic bad luck. They result from the hegemonic epistemic authority of medicine which refuses to consider experiences for which it cannot account as even possibly credible. The medical professionals in these examples could have admitted the limits in their knowledge and remained open to interpretations of experiences that did not fit their diagnoses or methods of assessment; they could have, in other words, exhibited

hermeneutical justice. The doctors' responses in these cases also individualized the patients, such that they were not able, or at least not encouraged, to seek out others with similar experiences to better understand them. Imagine, for example, that the first doctor did not diagnose the patient with a mental illness, but remained open to her experiences and sought out others with similar descriptions of their symptoms to assist the patient in gaining better interpretive resources for her suffering. Or consider how differently the second person would have been treated if, instead of considering herself as an isolated case she would have tried to find others with similar symptoms to better understand her own. Indeed, this is what Wendell herself found: seeking out others' interpretations of their own experiences helped her to better understand and respond to her own (1996, 109).

Indeed, this individualization that is encouraged by medical discourse is a generally important source of hermeneutical injustice. When chronically ill or disabled persons are treated only as patients, they are discouraged from seeking out alternative explanations for their experiences. As much work in disability studies has shown, however, chronic illness and disability can only be most fully understood in their social settings. Interpreting Wendell's experiences with CFS through medicine alone would be incomplete, as her experiences are shaped by how her employer, friends and family, services, and so on, interact with her. Oliver's experiences after his spinal cord injury can only very partially be understood by medicine, as the value of walking, for example, is determined by, among other things, the technologies available to him, the structures in his environment, and the attitudes and knowledge of those around him. Understanding Albrecht's experiences with psychiatry alone would neglect how her gender, her school's

expectations and responses to her, and her family and friends, among other things, influence her experiences diagnosed as simply depression and anxiety. By imposing medical interpretations, chronically ill and disabled people are hindered in understanding the complexity of their experiences; and when they act in solidarity to develop interpretations of, and language for, their experiences, they face resistance in modifying the hermeneutic resources of the wider community. The inertia of the hermeneutic resources in these cases can in part be explained by the interests and motivations of the medical field. Medicine identifies itself with individualized, biological explanations and treatments, and professionals have (largely unconscious) investments in maintaining their expertise, investments which keep them from admitting the limitations of their knowledge, or considering the extra-biological and social causes and possible responses to chronic illness and disability.[24]

But the field of medicine is surely not alone in fostering the hermeneutical injustices caused by medicalization. Rather, in the contemporary United States (and at least for the last century), medicalization has become a much more widespread phenomenon with myriad sources contributing to the detrimental epistemic friction which hinders the development of non-medical understandings of disability. Researchers and doctors are not the only people invested in the hegemony of medicine. Insurance companies, businesses, and government agencies that provide resources to disabled and chronically ill people have an interest in a medicalized understanding of disability because it allows doctors to serve as gate-keepers to their resources. Medical

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[24] In the essay discussed above, Michael Oliver provides an insightful critique of rehabilitation professionals regarding their investments, specifically concerning walking and "near-walking" (2009, 35-9).

professionals often testify about individuals to convince courts, for example, of whether

or not the individual is deserving of "accommodations" or other resources.[25] Of course,

medical and pharmaceutical manufacturers are also invested in medical understandings of

disability. Fiona Kumari Campbell gives an insightful discussion of the example of

cochlear implant (CI) manufacturers in Australia. The manufacturers of CIs never

consulted Deaf groups or deaf individuals in the development of their products, and they

rely upon ableist assumptions about the tragedy of hearing loss to defend the

development and marketing of their products (Campbell 2009, 88-90). As these

manufacturers came to be seen as an important part of the Australian economy, the

investment spread beyond the companies to the nation: the effect of people's choice not

to receive CIs was reported in terms of the impact on the national economy, and some

Deaf people even reported that they did not want to be critical of CIs "because to do so

would be to criticise the work of [Australian] Professor Graeme Clark and bear the

allegation of being pronounced un-Australian" (2009, 89). Material investments like

these which motivate detrimental epistemic friction are surely widespread and profound

in their impact, but I also want to consider the psychic and symbolic investments that

support medicalization and its resulting hermeneutical injustices.

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[25] Indeed, that is what makes doctors like Perry Timberlake so subversive. Timberlake is a doctor in Hale County, Alabama known for referring patients to disability programs for conditions that might, in other settings, be not considered disabling. Because almost all employment opportunities in the area require employees to stand for all or most of their shifts, Timberlake considers conditions like chronic leg and back pain to be disabling. His story is part of an interesting series of reports by the Planet Money team on NPR (Joffe-Walt 2013). While this may be a subversive use of his medical authority, Fiona Kumari Campbell (2009, 24-9) warns about certain dangers of practices like these. When individuals take on disability identity or diagnoses for subversive reasons, like getting access to resources that they would not otherwise be able to, not only does this reify ableist institutions and practices rather than contesting them, but there is also a dangerous potential that this identity will become internalized.

Wendell discusses these investments in terms of idealized and invulnerable

bodies. She writes that all subjects in our particular normalizing society are expected to

"deny bodily weaknesses, to dread old age, to feel ashamed of and responsible for their

distance from the ideals, and to objectify their own bodies at the expense of subjective

bodily awareness" (Wendell 1996, 91). These expectations create a feedback loop of

sorts: people desire to control their bodies; then because they are made to feel responsible

for their bodies, they believe they can control their bodies and seek to meet ideals; but

because these ideals are never really met, the desire for bodily control is never satisfied.[26]

Disability comes to represent, under these conditions, the abnormal, and as such it calls

forth the "fear of being or becoming abnormal," whether that means weak, unattractive,

old, or whatever else falls outside of normative parameters (1996, 91). Perhaps the most

severe form of rejection occurs when disability reminds one of the possibilities of illness,

suffering, or death. Wendell's example of reporting pain is powerful and generous, so I

quote it at length:

> [W]e remind them of the existence of pain, the imperfection and fragility of the
> body, the possibility of their own pain, the *inevitability* of it. The less willing they
> are to accept all these, the less they will want to know. If they cannot avoid
> confronting pain in our presence, they can avoid us. They may even blame us for
> being in pain. They may tell themselves that we could have avoided it, in order to
> believe that they can avoid it. They may want to believe they are not like us, not
> vulnerable to this; if so, they will cling to our differences, and we will become
> 'the Others.' (1996, 92)

Disability is thus rejected as a reminder that we are all temporarily able-bodied (indeed,

some in disability studies use the acronym TAB to emphasize the fleeting nature of

ability), resulting in detrimental epistemic friction that is difficult to counter or even

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[26] One could argue, following Lacan for example, that it is the nature of desire not to be
satisfied, but the important point Wendell makes here is that the particular desires we have
regarding our bodies are importantly shaped by normalizing expectations.

address.[27] Though Wendell does not use the term "medicalization," it is clear that for her these responses to disability are tied to the practices I have been referring to under the heading of medicalization. As a result of the fear of abnormality, suffering, and death, people embrace medicine as a way to understand illness and disability rather than the subjective experiences of the ill or disabled. Doing so fosters the myth of control, the idea that medicine could prevent the nondisabled from becoming disabled, or that medicine can provide cures should one become disabled. In order to maintain this myth, chronic illnesses and disabilities must continue to be understood as individual and medical. Here we can see the full range of the epistemic vices Medina is concerned with. As a result of medicalization, the nondisabled *arrogantly* maintain their own or doctors' interpretations of disability regardless of the experiences, interpretations, or testimony of disabled or chronically ill people; the nondisabled cultivate *laziness* favoring medical diagnoses and stories of curing or overcoming disability rather than seeking out the experiences of disabled people; and the nondisabled are *closed-minded* in their refusal and disavowal of disability, suffering, and vulnerability. Opening the wider hermeneutical resource to disabled and chronically ill people such that they could interpret and communicate their experiences as resulting not just from biology but from material structures, economic practices, government policies, social attitudes, ideologies, and so on, would have the potential to shatter the myth of bodily control. Thus, the detrimental epistemic friction that keeps hermeneutic resources from expanding to include the interpretive resources disabled people have developed is widespread and powerful. In this way, most people,

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[27] I will return to this theme in the second chapter where I elaborate a Kristevean explanation for the rejection Wendell discusses.

not just medical professionals and institutions, participate in the medicalization that contributes to hermeneutical injustices against disabled and chronically ill people.

As in the case of institutionalization, achieving epistemic justice in response to medicalization will likely require both the individual epistemic virtues discussed by Fricker and Medina, and the wider practices of epistemic interaction. Wendell, for example, describes positive experiences with her doctors and colleagues who attempt to take her seriously, even when they cannot immediately understand her experiences or may be tempted to meet her explanations with skepticism (1996, 2-3). One of the most widely read books on the emerging disability rights movement, *No Pity*, was written by Joseph Shapiro, which surely required him to give credit where many refused to, and to be open to interpretations of disability experience which were largely unknown (and which remain for many unintelligible). As I discussed above, however, depending on the nondisabled to adopt epistemic virtues often promotes paternalism and encourages a deferral of aims; "people will change their minds, just give it time." Thus, as in the case of institutionalization, the most significant gains against the epistemic injustices resulting from medicalization have come from groups of disabled and chronically ill people coming together to forge new understandings of their experiences and finding ways to inject these evolving interpretations into wider discourses.

The distinction I have drawn here is surely a vague one. Even within the spaces of disability activism and scholarship, the strong influence of ableism makes it likely that disabled people will have internalized aspects of ableist culture, like norms, assumptions, and medical and individual understandings of their own disability.[28] Rod Michalko

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[28] Helpful discussions of internalization can be found in Charlton (2000), especially Chapter 5, and Campbell (2009), especially Chapter 2.

recounts his own move from taking for granted the individual, biomedical character of his blindness to a sociologically informed understanding of his blind identity. In a meeting with a genetic ophthalmologist, he explains, "At no point during our conversation did I tell the doctor that I did not want to be blind, nor did he ask me whether I wanted to be. Yet, we both knew that I did not" (Michalko 2002, 46). But the doctor advised Michalko not to have biological children. Since there was a roughly fifty percent chance that he would pass the relevant gene on, the doctor explained, "You wouldn't want them suffering what you're suffering" (2002, 42). This led him to ask, "Why not?" and this question was fostered by his studies in sociology and learning about others' disability scholarship and other disabled persons' experiences. He even names one of his professors, Dorothy Smith, as influential on his growing understanding of blindness in its social complexity (2002, 26). For Michalko then, and likely for many others, being given credibility where it is normally denied and being given the space to offer new interpretations, even when they are difficult to make intelligible, is necessary in interpersonal interactions to overcome the internalized medical, ableist view of disability and make possible spaces in which new hermeneutic resources can develop.

To gain a better understanding of what such spaces look like, I will briefly discuss two such spaces: centers for independent (or integrated)[29] living (CILs) and disability

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[29] In a response to the failures of the disability rights movement in the UK, Vic Finkelstein argued that centers for independent living are misguided, and that the goal should be integration and the training of professionals allied to the community (PACs). This is, in part, because working with professionals and developing their own agendas would allow CILs to better respond to the needs of the disability community, while seeking independence would individualize resources and solutions, effectively creating a race to the bottom for cheaper service providers. His response is printed in (Oliver 2009, 142-52). While this reasoning is convincing, organizations in the United States have largely called themselves centers for independent living, and so I will use this convention.

studies scholarship. (Of course, these realms are not mutually exclusive. CILs have influenced disability studies and vice versa, disability studies scholars have been involved in CILs and activists with CILs have been scholars, and so on.) Centers for independent living are organizations run by disabled people that seek to represent and work in the interests of disabled people. Though CILs vary in their aims and tactics by city and over time, Shapiro nicely summarizes the goals of the first CIL in California which inspired the creation of other such centers: "It would be run by disabled people; approach their problems as social issues; work with a broad range of disabilities; and make integration into the community its chief goal. Independence was measured by an individual's ability to make his own decisions and the availability of the assistance necessary […] to have such control" (1994, 53-4). It is easy to see how these centers could serve as spaces in which to develop new hermeneutic resources and from which to interact with surrounding communities. Unlike rehabilitation agencies, CILs are operated by disabled people allowing them to forge their own understandings of disability and craft their own aims in response to the oppression they face. Thus, they developed and continue to promote an understanding of disability as a social phenomenon, not (solely) medical or individual in nature; they incorporated the experiences and interests of many different disabled people, rather than representing only similar groups of disabled people (like organizations only for blind persons or wheelchair users), and in this way could gain a broader understanding of disability; and they fought for integration of all disabled persons into the community, not just those who faced the fewest obstacles or had the most resources, and this fostered an understanding of integration that would require the nondisabled community to change, rather than disabled persons integrating by assimilating to ableist

norms. In other words, CILs foster alternative hermeneutic resources which can resist the

nondisabled hermeneutic resources and provide understandings of disability from which

to launch political movements.

A seminal text on disability oppression, *Nothing about Us without Us*, was written

by James I. Charlton, who worked for a CIL called Access Living of Metropolitan

Chicago. Indeed, he writes in his acknowledgments, "Much of the credit for the insights

in this book goes to my colleagues in the disability rights movement in the United States,

especially my comrades in Chicago" (Charlton 2000, xi). Thus, CILs have influenced the

creation and content of disability studies. Indeed, Simi Linton draws a parallel between

the disability rights movement[30] and disability studies, writing, "Disability studies

provides the means to hold academics accountable for the veracity and the social

consequences of their work, just as activism has served to hold the community, the

education system, and the legislature accountable for disabled people's compromised

social position" (1998, 2). It is thus clear that CILs, and the disability rights movement

more broadly conceived, have interests in common. What I am concerned with here,

however, is the way in which disability studies, as an academic field, has served as a

space in which to develop an alternative hermeneutic resource to generate beneficial

epistemic friction within the academy, and gradually within wider hermeneutic resources.

Disability studies is an interdisciplinary field that seeks to articulate new understandings

of disability, especially within the humanities.[31] Linton articulates a variety of problems

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[30] To be clear, I do not mean to conflate CILs and the disability rights movement. I
simply want to note the ways in which disability studies is related to disabled people's political
activism and policy advocacy, and I take CILs to be an integral part of that work.

[31] Linton, who provides perhaps the most complete articulation of the value of disability
studies within academic curricula, argues that applied versions of disability studies, those that

with traditional understandings of disability in the academy, many of which support the

medicalized understanding of disability I have been discussing: individualizing disability,

constructing disability as a problem, lack or pathology, the absence of disabled

perspectives and "objectification of disabled people," an emphasis on individual cure or

rehabilitation, and not the types of solutions disabled people have fought for, and the

"marginalization of the study of disability" (1998, 134-5). Given how pervasive ableism

is in academic scholarship and teaching, disability studies has and continues to serve as

an important site from which to contest this ableism and create new hermeneutical

resources for understanding the experiences of disabled persons. Thus, from sociological

perspectives, Oliver asks "What's so wonderful about walking?" (2009, 28) and

Michalko asks "What does my society have against my type [that is, blind people]?"

(2002, 71). From the perspectives of philosophy and feminist theory, Margrit Shildrick

asks why "the western world and its developed counterparts should be so unsettled by

anomalous embodiment?" (2009, 1), Wendell critically interrogates both the "flight from

the rejected body" and feminism's rejection of transcending the body (1996), and Alison

Kafer (2013) imagines alternative disabled futures. Robert McRuer, an English professor,

argues that we need to understand a "compulsory able-bodiedness" that functions

alongside and intersects with compulsory heterosexuality (2006, 2). From the perspective

of geography, Brendan Gleeson interrogates the space of disability (1999). And scholars

from a broad range of professions have written for edited volumes on specific topics

concerning disability. What all of this research has in common, however, is that it reveals

train occupational and rehabilitation therapists and healthcare workers, for example, are "Not
Disability Studies" on her definition because of the way in which they reinforce problematic
assumptions about the nature of disability. For this reason, she favors a broader liberal arts
approach to disability studies (Linton 1998, 133).

"the 'natural body' [and, I would add, mind] as an ideology and a social construction [which] brings disability back as a voice and an interlocutor in the conversation of the meaning of humanity" (Michalko 2002, 71). In other words, disability studies provides the space for the development of a hermeneutic resource which can contest the dominant, ableist hermeneutic resource of medicalization; it allows for new and different understandings of disabled persons' experiences, and therefore questions how we interpret the experiences of nondisabled people as well; in short, it brings beneficial epistemic friction to the academy and gradually to wider communities.

Mental Disability

While much of the discussion in the previous section applies to mental disability, I think it is worthwhile to focus on mentally disabled persons because of the anxiety it seems to arouse in academic settings. Kittay writes about the birth of her mentally disabled daughter Sesha, for example, "I was committed to a life of the mind. Nothing mattered to me as much as to be able to reason, to reflect, to understand. […] If my life took its meaning from thought, what kind of meaning would her life have?" (1999, 150). Similarly, Shildrick reflects on her own work, writing, "My own failure, as yet, to adequately address the issue of sexuality and developmental disability, for example, is not, I suspect, a simple matter of assessing where the greater relevance to my project […] lies, but more in the nature of a resistance to disorders of mind" (2009, 88). And in the introduction to her book on mental disability in academia, Margaret Price writes, "Academic discourse operates not just to omit, but to abhor mental disability—to reject it, to stifle and expel it" (2011, 8). Thus, if academic work, including philosophy, has investments which result in epistemic injustices committed against persons with mental

disabilities, it is important to ask what form these injustices take and what can be done to rectify them.

First, I should note that I adopt the term "mental disability" from Margaret Price because of its breadth. It can include "mental illnesses," cognitive disabilities, intellectual disabilities, learning disabilities, and perhaps even the mental effects of other disabilities.[32] What makes these disabilities problematic in the context of this chapter is that they seem to hinder or bar the possibility of participating in the knowledge pooling practices with which Fricker, and to some extent Medina, are concerned. In other words, mental disability may be a feature that hinders one's epistemic capabilities such that taking it into account when we assess epistemic competence may be warranted, and this is unlike gender, race, or other identities discussed in the epistemic injustice literature, and unlike, I have argued, physical disability. For example, if a person experiences delusions and is therefore diagnosed with schizophrenia, it appears that others would be justified in maintaining that it is warranted to attribute the person less credibility. According to the DSM-V, a person diagnosed with "profound intellectual disability" has "very limited understanding of symbolic communication in speech or gesture" (American Psychiatric Association 2013); could others be said, then, to limit her hermeneutic resources or assign her an unjust credibility deficit? And autism rights advocate, Jim Sinclair, writes that an autistic child may not "respond in any way you recognize as being part of that system [of communication]" (Sinclair 2012a, 17). Given this "communication breakdown," would others not be justified in thinking it is autism and not hermeneutic resources which hinder our collective interpretations of her experiences? Considering

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[32] Price's example, here, is "the 'brain fog' that attends many autoimmune diseases, chronic pain, and chronic fatigue" (2011, 19).

examples like these, I will answer these questions negatively. In most cases of mental disability, credibility deficits are unwarranted and hermeneutic injustices *are* often committed against such persons.

To see why, it is important to note that the myriad people diagnosed with mental disabilities are very different. Though people diagnosed with intellectual disability (ID) may all share something in common, namely their fitting certain diagnostic criteria, those criteria are quite vague. All that is required to fit this diagnosis is a deficit in "intellectual functions," a deficit in "adaptive functioning," and onset "during the developmental period" (American Psychiatric Association 2013). Thus, differences can occur both within and between levels of severity (mild, moderate, severe, and profound). While one person diagnosed with mild ID may have difficulty with mathematical reasoning, another person given the diagnosis may have difficulty with reading. And whereas a person diagnosed with mild ID may experience difficulty with a small range of tasks, say writing, a person diagnosed with severe ID may have difficulty with a broader range of tasks. The same analysis could be given to any of the disabilities I am considering under the heading of mental disability. The capacities and experiences of individuals given these diagnoses are unique. Thus, attributing credibility deficits to mentally disabled persons based on their diagnosis is unjustified, because it assumes that all persons who share a diagnosis deserve equal (and usually equally low) credibility.[33] Furthermore,

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[33] Licia Carlson calls the tendencies of one member of a category to be more representative than others of the category as a whole "prototype effects." These prototype effects change over time. So what is seen as most representative of intellectual disability changes over time, and has changed since its genealogical predecessors like mental retardation and feeblemindedness (Carlson 2010, 96-8).

attributing generalized credibility deficits to a mentally disabled person based on a limited range of capabilities is unjustified.

And yet, such attributions are common. Above, I already discussed Aubrecht's discussion of her experiences (Fabris and Aubrecht 2014). She sought therapy only for anxiety, but the aggressive and skeptical questioning of her doctors revealed a general distrust of her self-understanding. Moreover, their insistence that she remain on medications undermined her trust in herself, since she experienced them as worse than her original anxiety. Price offers some insightful examples of the ways in which teachers attribute undue credibility deficits based on presence and participation, for example (2011, 64-79). Students who often miss class or are often late are generally assumed to be slackers, but such students may actually experience depression which keeps them from getting out of bed, or anxiety that makes coming to class a difficult or even dreadful prospect. Similarly, students who do not participate in the generally accepted ways are often judged to be disruptive or inattentive; but a student passing notes may actually be trying to gain insight from peers when the lesson is proceeding too quickly, or a student who never answers questions in class may need more time than the teacher is allowing to think through the material at hand. When teachers make such assumptions and treat their students accordingly, this can have profound effects upon the students as knowers (the primary epistemic harm) and upon their confidence (the secondary epistemic harm) and their academic (and potentially non-academic) careers. At a broader social level, those diagnosed as mentally ill often suffer testimonial injustices. For example, despite the objections of many in the Mad Pride movement, organizations like the National Alliance on Mental Illness (NAMI) continue to support a biological explanation of and biomedical

responses to "mental illness" (Rembis 2014, 148). And when President Bush created the New Freedom Commission to re-evaluate mental health services in the United States, only one of its fifteen members had "personally experienced the mental health system" (Lewis 2006, 348).

In academic philosophy specifically, Licia Carlson notes that many philosophers who use (often fictional) intellectually disabled persons as examples do so without consulting disabled persons or the disabled community. She writes, "While individuals with profound and severe intellectual disabilities may be incapable of entering into the conversation, there is a paucity of work that includes the voices of those with mild intellectual disabilities" (Carlson 2010, 121). This is especially chilling given that intellectually disabled persons are often used as cases to justify abortion, prenatal testing, and, through comparisons to animals, animal rights.[34] Appealing to examples of intellectual disability without consulting their own experiences constitutes a testimonial injustice which undermines intellectually disabled persons as knowers, contributes to their treatment as inherent sufferers, and may keep them from participating in other epistemic practices. Uses of intellectual disability in philosophy also contribute to hermeneutical injustices by creating an unquestioned link between intellectual disability and suffering. But as Carlson notes, when the experiences of ID persons are consulted, a more complex understanding of intellectual disability's relation to suffering can emerge. For example, in mainstream philosophical discourse, the suffering experienced by intellectually disabled persons can only be imagined as caused by the disability itself. This obscures the ways in which suffering may in fact be caused by external factors like

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[34] Carlson gives a helpful overview of these trends in philosophy in her essay, "Philosophers of Intellectual Disability: A Taxonomy" (2010).

social attitudes, institutional mistreatment, and so on, rendering the experiences of ID individuals unintelligible to these philosophical discussions.[35]

Even the common derogatory use of "retard" functions, in part, epistemically. In an autobiographical essay, Ron Munsterman discusses how he grew up being called "Ron the retarded" (2009, 69). This use of the word, along with others like "moron" and "idiot," serves to epistemically silence the speaker. When a person who is *not* identified as intellectually disabled is called a retard or retarded, this means that she deserves only as much credit from others as those with ID diagnoses, the assumption being that intellectual disabled persons are innately deserving of less credibility. The widespread nature of these assumptions is experienced by many people with ID diagnoses. Take, for example, Charla Hageman's discussion of her experience of trying to marry another disabled person. She, along with her family and the staff at her housing and employment agencies, met to discuss her potential marriage, and she reports, "It seemed like they were making decisions for us. They would talk about you like you weren't even in the room. […] I felt I did not have any say about how I wanted to live my life" (Hageman 2009, 49). Eventually it was agreed that Charla could marry her partner if they proved their stability by living together for two years before getting married. Thus, while many people who are not diagnosed as intellectually disabled decide to get married with little

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[35] Carlson dedicates an entire chapter of her book to the topic of suffering, and so I cannot do justice to all of her insights, here. For example, while I note the failure to interrogate the distinction between internal and external causes of suffering, she also discusses the differences in external sources of suffering depending on the severity of the intellectual disability. So, for example, persons diagnosed with mild intellectual disability are more likely to suffer from attitudinal barriers, while those with severe or profound intellectual disability may be more likely to suffer from abuse or neglect (Carlson 2010, 169). All I aim to develop, here, is an understanding of some of the phenomena she discusses through the framework of epistemic injustice.

foresight, Charla, who knew her partner for about seven years before the two-year living agreement was reached, was not trusted to make this decision. In this way, calling persons retards and diagnosing persons with intellectual disabilities preemptively silences them, discredits their testimony, and makes their experiences intelligible *only* in terms of individual, medical conditions.

As in the case of intellectual disability, the very diagnosis of autism often carries epistemic consequences for the person diagnosed.[36] Amy Sequenzia, who is labelled as a "low-functioning" autistic person because she does not communicate orally, discusses the ways in which her diagnosis and use of communication technology discredits her in the eyes of others. She writes, for example, "I am a self-advocate and I can type my thoughts. But at the moment I show up with my communication device and an aide, my credibility, in the eyes of most neurotypical people, is diminished" (Sequenzia 2012, 159). Indeed, she goes on to explain that most people assume her aide is present to speak *for* her, when in fact she requires aides to help her with "everyday tasks," while her device helps her communicate for herself (2012, 160). While Sequenzia's testimony is unjustly discredited directly, by expanding the notion of testimonial injustice to include other epistemic practices, per Hookway's suggestion, other testimonial injustices may be revealed. Persons diagnosed with autism are often denied entry into epistemic practices that contribute to the development of knowledge, even when they are asked to speak. Sinclair discusses the phenomenon of the "self-narrating zoo exhibit," in which autistic persons

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[36] It is important to note that those diagnosed with autism are also often diagnosed with ID, such that considering them as mutually exclusive would be inaccurate. For my purposes, here, I only want to note that the perception of autistic persons as lacking in sociability and empathy leads to epistemic injustices. Since these conditions are linked to autism and not necessarily ID, it is useful to consider them separately.

are expected to explain their experiences to parents and professionals as a resource to parents of autistic children, but they are not treated as people worthy of interaction in themselves or as people with interpretations of their experiences that may counter medicalized understandings of autism as an individual tragedy (2012, 55). In Fricker's terms, autistic people tend to be treated as sources of information but not as informants by non-autistic people; they can help others understand the experiences of autistic people generally, but they cannot contest the biomedical understanding of autism, nor are they seen as worthy of knowing as persons. An anonymous contributor to the Loud Hands Project describes another instance of epistemic injustice: she was placed in a "special-ed high school" for "fighting" and her principal tried to convince her not to take a "mainstream" Spanish course. "He said it was too 'difficult' for a special-ed student, and I didn't need a language. I only needed the lesser diploma that doesn't get you into college" (Anonymous 2012, 154). She went on to earn a Master's degree. The principal discredits her in two ways, here, first by assuming that the course will be too difficult simply because of her label as a special-ed student, and second, by assuming that even if she could pass the class it was not worth it to try since she would not be going on to attend college anyway. In this way, her difficulties with speech and sensory sensitivities were generalized by the label of "special education" to discredit her knowledge and her future epistemic potential. Autistic persons are also commonly subject to hermeneutical injustices through assumptions about their social skills. Elizabeth J. Grace explains a situation in her graduate school education when a prominent autism researcher said, "By definition, a person with autism does not know what it means 'for life to be like something for someone,' so she cannot possibly get the concept of what it is like to be

herself," based on research in Theory of Mind which posits that autistic persons lack a

theory of mind (2012, 142). In other words, the assumption that autistic persons cannot

empathize with or understand the thoughts and feelings of others[37] bars any interpretation

of autistic experience as empathic, social, or concerned for others; the professor

mentioned in Grace's story even suggests that autistic people have no understanding of

their *own* sense of self. In this way, autistic persons face barriers in developing

interpretations of their own experiences and in communicating those interpretations to

non-autistic persons. Because of assumptions about autistic persons' lack of sociability,

for example, the idea of an "autistic community" becomes an oxymoron, and friendship

with or between autistic persons becomes unintelligible. Indeed, Sinclair explains that in

the process of forming Autism Network International, he was discredited as a member of

the autistic community by non-autistic persons, especially "experts," precisely because he

was seeking to express himself, form a community, and engage in other activities seen as

inconsistent with biomedical understandings of autism (2012b, 34-5). Winter shares a

similar experience in which she is told that as a high-functioning autistic person, she

cannot speak on behalf of low-functioning autistic persons. The irony here, of course, is

that experts who are diagnosed with *no* form of autism are trusted to speak on their behalf

(Winter 2012, 119-20). All of this contributes to the hermeneutic injustice of closing off

all non-medical interpretations of autistic persons' experiences.

As in the other cases of epistemic injustice discussed in the previous subsection,

addressing these problems will require both epistemic virtues exercised in interpersonal

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[37] As Penni Winter notes, this assumption is a sloppy one that often fails to take into account the distinction between cognitive empathy, or the ability to pick up on non-verbal cues to recognize others' emotional states, and affective empathy, or the emotional responses one has to knowledge of others' emotions (2012, 118).

interactions as well as spaces in which new interpretations of mentally disabled persons'

experiences can be created and from which those interpretations can be expressed to

generate beneficial epistemic friction in broader communities. To be sure, testimonial and

hermeneutical justice in these cases may require new skills in correcting for credibility

deficits and being open to new interpretations of mentally disabled persons' lives. In

academic settings, for example, teachers may need to set aside assumptions about what

presence and participation mean for students. Price suggests that when designing courses

instructors should structure them with access in mind, rather than accommodation. While

accommodation assumes that there is a problem faced by an individual that needs to be

fixed, leaving the course structure mostly unchanged, improving the *access* of a course is

to design it such that it is "flexible, multi-modal, and responsive to feedback" (Price

2011, 130). For example, "We can open as many different channels of communication as

possible, in hopes that at least one will be accessible enough for a given student to use it,

and trust that our own attitudes will have much to [do] with student response" (2011, 89).

To be clear, Price is not suggesting here that teachers extend themselves beyond their

means. Instead, she is noting that different instructors have different skills and

preferences that may be more beneficial for some students and less so for others. If all

instructors opened their range of communication styles to those they find comfortable,

this would create a range of channels of communication both in individual courses and

between classes such that students would have maximum ability to choose those styles of

communication that best suit them. For example, some students may find online

discussion boards to be the most helpful, while others may prefer face-to-face

communications; some may prefer agonistic environments and others may prefer

cooperative interactions. The point is not to be accessible to all of these modes of participation and presence in each course, but to define participation and presence widely enough within courses and between courses so that as many students can benefit as possible. Medical professionals also need to open themselves to the testimony of mentally disabled patients, whether that means taking concerns about the side-effects of a medication seriously or considering potential solutions to the problems patients express outside of biomedical treatments. Autism, because it includes difficulties in normalized forms of communication, offers a special case of the need for testimonial justice. As James Sinclair explains, because autistic persons are foreign to shared systems of communication, taking them seriously means "[y]ou're going to have to learn to back up to levels more basic than you've probably thought about before, to translate, and to check to make sure your translations are understood. You're going to have to […] let your child teach you a little of her language, guide you a little way into his world" (2012a, 17). Thus, while testimonial justice in the case of mental disability may require challenges that are unique compared to other forms of testimonial justice, it is certainly possible.

Addressing hermeneutical injustices may require imagining otherwise with regard to the experiences of mentally disabled persons. Kafer provides an example of this in the case of Ashley X, the girl diagnosed as "permanently unabled" who was given what has become known as the "Ashley Treatment," which consists of the removal of breast buds, a hysterectomy, and estrogen patches which accelerates puberty leading to a forty percent reduction in predicted weight and twenty percent reduction in predicted height (pillowangel.org 2012).[38] As Kafer notes, in justifying this "Treatment," Ashley's doctors

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[38] Each of these aspects of the "Treatment" is justified as having both direct benefits and additional, indirect benefits. For example, the primary "benefit" of removing the breast buds is

and parents and other advocates mentioned the myriad sources of potential pain that

Ashley might face without the "Treatment," but "[i]t is seemingly inconceivable to

imagine Ashley's body—her disabled female body—as the source of any sensation other

than pain" (2013, 65). Indeed, severing the link between mental disability and suffering

in the mainstream hermeneutic resource would be an important form of hermeneutic

justice generally. Other examples of hermeneutic justice might include being open to

treatment alternatives outside of institutionalization and pharmaceutical treatments,

which many in the Mad Pride movement and other survivors of the mental health system

have come to understand as a form of "chemical constraint" (Fabris and Aubrecht 2014).

Such alternatives might include peer-run services (Lewis 2006), or even the formation of

alternative spaces or communities (Ben-Moshe 2014). Currently it seems there is no such

room for interpretations of mentally disabled experiences like this, however, in the

mainstream hermeneutical resource.

Multiplying the interpretive resources for understanding mental disability in this

way cannot depend upon the nondisabled alone, however. As discussed in the previous

subsection, developing spaces in which new understandings of mentally disabled

persons' experiences can emerge is critical to the creation of beneficial epistemic friction

in the hermeneutic resources of their wider communities. Organizations of intellectually

disabled persons, like People First of Tennessee, have developed new understandings of

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preventing the future pain of predicted large breasts, and a secondary "benefit" is that it "avoids sexualization towards caregiver[s]" (pillowangel.org 2012). As Kafer explains, it is unclear why the imagined large breasts are only considered a source of potential pain and not a source of potential pleasure. I would add that it is unclear why the imagined pain of imagined large breasts is given more weight than the pain caused by the treatment itself. Kafer is also critical of the claim that having small, undeveloped breasts would make Ashley X any less likely to be abused (2013, 64-5).

the current and potential experiences of intellectual disability (Friedman and Beckwith

2014); the Mad Pride movement in general and particular organizations like the Center

for Mental Health Services and Mindfreedom have been important sites for gaining new

understandings of the experiences of "mentally ill" persons and imagining new

alternatives to living with "mental illness" (Lewis 2006, Rembis 2014, Fabris and

Aubrecht 2014); the Autism Network International and the Loud Hands Projects provided

a space in which to develop, and resources to disseminate, new understandings of the

experiences and lives of Autistic persons, understandings which challenge the biomedical

model of autism which understands autism as a personal tragedy rather than a different

set of ways of experiencing the world that leads to oppression by a normalizing society

(Bascom 2012, Sinclair 2012b).[39]

   With all of this in mind, however, there are persons whose testimony or

interpretations of their own experiences may very well never go beyond expressions of

likes or dislikes, pleasures or pains, if even these are expressed. This likely includes

persons diagnosed with profound intellectual disability or "Level 3" autism, for example

(American Psychiatric Association 2013). Eva Kittay's daughter Sesha, who I discuss in

more detail in the next chapter, and Ashley X, are likely examples given the descriptions

we have of their behaviors and experiences. What would it mean to be testimonially or

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[39] One such development is a profound reversal of normal understandings of autism. Sinclair writes, "Each of us who does learn to talk to you, each of us who manages to function at all in your society, each of us who manages to reach out and make a connection with you, is operating in alien territory, making contact with alien beings. We spend our entire lives doing this. And then you tell us that we can't relate" (2012a, 18). In other words, Sinclair suggests, maybe it is "normal" people who have difficulty communicating with autistic people and not vice versa.

hermeneutically just in one's interactions with such persons? I believe there are at least four considerations to keep in mind, here.

First, others should be open to the expressions of pleasure and pain, preferences and dislikes of even the most severely disabled persons and take them seriously. Such expressions are, after all, means of sharing information about experiences. Treating a disabled person's pleasure or pain as less worthy of consideration is also a way of disregarding her testimony about her experiences. Or disregarding a disabled person's musical preferences, for example, also places one's own testimony above hers. Whatever such persons express, however limited in scope it may be, should be taken seriously. But this principle is not likely to carry nondisabled persons very far in determining how to respond to those with severe intellectual disabilities.

Second, then, it is important to be open to the testimony and interpretations given by others who are close to severely intellectually disabled persons. Others who are disabled but expressive and are institutionalized alongside severely disabled persons or are given similar medical treatments may very well have insights into the experiences of their more severely disabled peers.[40] Such persons may also be more open to listening to severely disabled others as a result of their own experiences of being silenced or shared coping techniques. Grace explains an example of a "man who said everything through lines from famous movies, television shows and commercials" (2012, 142). Because she was willing to listen, she understood that he was using these quotations to communicate,

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[40] I cannot emphasize enough, however, that I am not suggesting that the experiences of these two groups are equivalent. My only intent is to suggest that persons subject to similar treatments are more likely than physicians, professionals, or others who have never interacted with severely disabled persons to understand those experiences which are shared. Any generalization about parallels beyond this must be made very cautiously.

not repeating them randomly, and was able to convince his staff such that they gained limited communication with him. Here is an example of Medina's suggestion that oppressed persons are more likely to develop epistemic virtues. Because of her own experiences, Grace was open-minded and diligent about other autistic persons' attempts to speak in ways that non-autistic people were not. Similarly, others who work with or care for severely intellectually disabled persons may be in a better position than others to understand their experiences. Carlson discusses this suggestion in detail as a "spectrum of certainty" (2010, 178). For example, the caregiver who works closely and frequently with a disabled person is likely to have a better understanding of the person's life than a medical professional who only interacts with the person in short appointments and understands the persons experiences through only biomedical diagnostic and treatment schemes. Still because the doctor does have this knowledge, she would be situated higher on the spectrum of certainty[41] than the armchair philosopher who has not interacted with the person (or even other disabled persons). Eva Kittay makes a similar point, suggesting that caregivers are likely to have particular knowledge of their severely disabled charges that others, including medical professionals, do not (1999, 169-70). However, these evaluations must be made cautiously. Though others subject to similar treatment may *tend* to have more insight into the experiences of severely disabled persons, their experiences may differ widely. And though caregivers may better understand the experiences of those they care for, they may in fact be radically closed to their experiences or project their own concerns, feelings, or experiences onto them.[42] For

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[41] Of course, there is no absolute certainty in such cases; but then again, when is there?

[42] Licia Carlson develops this concern in her book, *The Faces of Intellectual Disability* (2010, 187, 190-1).

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example, returning to Ashley X, it is quite conceivable to interpret her parents' concerns as reflecting their own preferences more than an empathic imagining-with what her preferences and interests might be. Another parent, Joann Hagen, expresses concerns similar to those of Ashley's parents, explaining that she wanted her daughter, who was diagnosed with aphasia, to receive an "endometrial ablation," the cauterization of the uterine lining which prevents eggs from implanting. In discussing her reasoning, she writes, "I did not even want to consider how she would conceive a child!" (Hagen 2009, 56). To be clear, I do not mean to comment on whether or not her daughter should indeed be able to conceive, especially if she is indeed unable to communicate consent. Given her discussion of the issue, however, it seems that Hagen's understanding of what is in her daughter's interest is actually a result of her discomfort with thinking of her daughter engaging in sexual activity. Thus, while it may be useful to think of epistemic justice for persons with severe intellectual disabilities as including others on a spectrum of certainty, it is important to remain cautious about such attributions, especially in cases where the prejudices of the others are likely to influence their interpretations.

Third, the development of epistemic capabilities should be fostered to the greatest possible extent. History is filled with examples of mentally disabled persons who, because of assumptions about their epistemic capabilities, were subject to testimonial and hermeneutical injustices which limited their development as epistemic subjects. The practice of institutionalizing children with Down syndrome, as Michael Bérubé notes, surely contributed to their limited epistemic achievements for decades as they were confined to environments that did nothing to support the acquisition of knowledge and epistemic skills. He writes,

Right through the 70s, […] it was pronounced by the best-trained medical practitioners in the world, who told families of kids with Down's that their children would never be able to walk, talk, dress themselves, or recognize their parents. […] Only the most stubborn, intransigent, or inspired parents resisted such advice from their trusted experts. […] It's impossible to say how deeply we're indebted to those parents, children, teachers, and medical personnel who insisted on treating people with Down's as if they *could* learn, as if they *could* lead 'meaningful' lives. (Bérubé 1996)

Being epistemically just in interactions with mentally disabled people requires an openness to new epistemic capabilities, even if they do not develop on a "normal" timeline. Speaking specifically of autism, Winter calls this "maximisation" to distinguish it from normalization, because the goal, in her view, should be to develop the capabilities of autistic persons *as* autistic persons, rather than forcing them to conform to non-autistic, neurotypical standards (2012, 116). A similar caution is appropriate for all interactions with mentally disabled persons: others should be open to their knowledge and interpretations regardless of its limits and in as many communicative methods as possible. If, for example, a person communicates through quotations, as in Grace's example discussed above, taking these attempts at communication seriously may result not only in immediate forms of epistemic justice, but also the development of greater epistemic and communicative capabilities. Persons who do not communicate orally may be able to communicate through gestures or the use of communication devices, and providing these options is a form of epistemic justice which allows them to provide testimony, share interpretations of their experiences and develop these interpretations with others, and to develop epistemic capabilities that would have otherwise remained unattainable. Indeed, given frequent advancements in technology, the developments of new forms of therapy, and other changes in understanding disability, it becomes more and more likely that at least modest epistemic capabilities are possible for most persons,

and to deny anyone access to these resources would constitute epistemic injustice. It is important to resist institutionalization and recognize the limits of medical knowledge to foster the development of epistemic skills for as many persons as possible.

That having been said, there are important qualifications that need to be made. First, because of current models of service provision and inequitable distribution of resources, following the imperative to foster epistemic capabilities is a thoroughly political affair. If family members, legal custodians, or service providers are not provided adequate resources, it is unrealistic to expect them to be constantly open to those they care for as they will likely be overwhelmed with concerns about physical health, finances, finding time to care for themselves, and so on. Thus, it is likely that wealthy caretakers will be most able to act on this imperative. Fostering epistemic justice for mentally disabled individuals, then, will surely require fighting for economic and political justice, through myriad changes like higher standards for service provision, better pay for caretakers, subsidized service provision and devices to increase access to them, inclusive settings in schools and care facilities, and so on. Second, even with the best means available, it is likely that there will still be persons who will not develop the epistemic capabilities of others, such that they have no knowledge to share, form no interpretations of their own experiences, and develop no epistemic virtues (or vices). So while I want to suggest fostering the development of epistemic capabilities in all to the greatest extent possible, it is also necessary to accept mentally disabled persons *as they are*. Writing about her daughter, Sesha, Kittay criticizes the sole aim of independence, writing,

> I fear that the stress on independence reinstates Sesha as less than fully human. With every embrace, I know her humanity. And it has no more to do with

independence than it has to do with being able to read Spinoza. So when we think of mothering a disabled child as enabling and fostering development, we must also reconceive development, not only toward independence, but toward whatever capacities are there to be developed. Development for Sesha means the enhancement of her capacities to experience joy. (1999, 173)

We could easily replace "independence" in this quotation with "epistemic capabilities." Accepting mentally disabled persons as they are while remaining open to their attempts to share information or interpretations is important to avoid the tentative understanding of disability. As Campbell writes, "[P]ositioning disability as tentative conjures up the notion of disability *in waiting*, disability *standing in reserve* for technologies that can restore wholeness. This view of disablement has the potential to realign social planning away from a focus on 'care' to that of 'cure'" (2009, 44). Thus, emphasizing the constant possibility of development may end up reinscribing the discourse of medicalization which I have been at pains to reject in this chapter. It will be important, then, to balance fostering epistemic capabilities with both a recognition that the development of epistemic capabilities (and indeed, what counts as an epistemic capability) depends on influences outside of an individual's biology, and with an acceptance of individuals as they are at the current moment regardless of their epistemic capabilities or signs of development. But in emphasizing this last point I am moving beyond the realm of epistemic injustice, at least on the narrow understanding developed by Fricker, and into the realm of finding meaning in lives often thought to be meaningless. For this, I turn to Kristeva in the next chapter.

Conclusion

I have argued in this chapter that the framework of epistemic injustice can be usefully extended to disabled persons, and that doing so is useful because it identifies a

unique form of oppression. But the framework is limited. Fricker's understanding of testimonial injustice focuses on the exchange of information rather than broader epistemic practices (as Hookway suggests). And hermeneutical injustice as she develops it—and indeed, the revisions made by those critical of Fricker's account—emphasize the social group as unified by a set of hermeneutical resources. In these ways, the framework may be unable to describe injustices against persons who are limited in their capacities for sharing information or for forming socially shared understandings of their experiences. It also fails to provide an explanation of the deeper psychic reasons for why epistemic injustice (and other forms of injustice) occurs. In my view, Kristevan psychoanalysis provides a remedy. In particular, Kristeva's theory of language helps to reveal a form of hermeneutical injustice, and a corresponding form of attentiveness, that occurs at the interpersonal level rather than the more broadly social level.[43] Moreover, her discussion of the narcissistic wound in relation to disability reveals a psychic explanation for epistemic injustice, and, I will argue, it points toward "interaction" as the form of resistance best suited to counter disability oppression.

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[43] Of course, the distinction between "interpersonal" and "social" is not a clear one. What I have in mind, however, is that the form of hermeneutical attentiveness I develop in the next chapter is an attempt to make and share meaning at the level of the individual in interaction with others. When Fricker, Medina, and perhaps others discuss hermeneutical injustice, they are concerned with interpretive resources of social groups with shared identities, even when these are very particular, small, or marginalized groups. I want to argue, however, that there are interpretations to be given to individuals' lives and experiences which are not (necessarily) based on social identities even if they are necessarily social (that is, interpersonal). Therefore, even persons with severe mental disabilities (that is, those who cannot develop understandings of shared group experiences) participate in forming these interpretations.

Meaning: Kristeva and Interaction

The previous chapter aimed to develop an understanding of the epistemic aspects of disability oppression, and to gesture toward forms of resistance to epistemic injustices. In this chapter, I turn to the work of Julia Kristeva. By reading her recent work on disability through her earlier texts, I aim to develop two threads to contribute to an understanding of disability oppression. First, I argue for a form of listening that is responsive to disabled persons, especially the severely mentally disabled that the framework of epistemic injustice developed in the first chapter does not address. Second, I argue for an account of disability oppression that reveals the psychic underpinnings of the epistemic injustices discussed in the previous chapter.

In two essays, "Liberty, Equality, Fraternity and…Vulnerability" and "A Tragedy and a Dream: Disability Revisited," Julia Kristeva presents a novel view of disability and the exclusions faced by disabled persons. Her self-described aim is to work toward a new humanism, one that is not founded on the liberal (that is to say, autonomous, rational, independent) subject, but on an understanding of subjects as vulnerable, heterogeneous, and dependent. One way she expresses this aim is the source of her essay's title: "By adding a fourth term (vulnerability) to the humanism inherited from the Enlightenment (liberty, equality, fraternity), analytic listening inflects these three toward a concern for sharing, in which, and thanks to which, desire and its twin, suffering, make their way toward a constant renewal of the self, the other, and connection" (Kristeva 2012, 42). In other words, when the vulnerability of every human subject is taken seriously, the political link, thought here in terms of liberty, equality, and fraternity will be changed. Liberty and equality, for example, must take into account human dependence. In this

chapter, I will discuss what it means to take vulnerability into account and the resistances to doing so. Because the essays on disability are intended for more general audiences, they make reference to concepts from Kristeva's broader oeuvre without always explicitly explaining them, so this chapter will draw from Kristeva's other works where necessary. Specifically, Kristeva's concept of the "speaking being" will help explain her contention that even severely disabled subjects are capable of sharing meaning, while her concept of the "abject" will be helpful in understanding her view of disability, as will her use of Freud's concept of the "uncanny." I will then assess certain criticisms of Kristeva's position made by Jan Grue in his sustained analysis, "Kristeva and the Rhetorics of Disability," and move on to articulate a Kristevan account of disability that develops, in my view, the strongest reading of Kristeva's essays. Before moving on to these topics, however, I want to note that a handful of disability studies scholars have recently sought to integrate psychoanalysis into a field that, for understandable reasons, has been largely resistant to this discourse. These thinkers appeal to Lacan, however, not Kristeva.

<center>Lacanian Analyses, or Why Kristeva?</center>

Dan Goodley and Margrit Shildrick have both recently given psychoanalytic analyses of disability using Lacan. They draw especially on Lacan's account of the mirror stage to account for why disabled persons are experienced as sources of anxiety, particularly to nondisabled others. According to Lacan, the infant's body is fragmented, chaotic, and undifferentiated from the mother (Shildrick 2009, 90); this is the "real" for Lacan (Goodley 2011, 124). In the mirror stage, however, the child *misrecognizes* herself and others in her mirrored reflection. This means that an external representation of the

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child becomes the fantasized unity of the fragmented body, and that the representation of the child as distinct from the other in the mirror becomes the fantasized separation of the child from others. These fantasies lead to a disavowal of the fragmented body and its undifferentiated relation to its others (Goodley 2011, 125, Shildrick 2009, 90). But as a result of these fantastic formations, the child forms an "alienating identity," an image of herself and her relation to her others that she can never really attain, as she is in fact always fragmentary and never completely differentiated from others; she becomes, in other words, an always lacking subject (Goodley 2011, 126). This is important for disability studies because the result is rejection, avoidance, and disavowal of disabled others because disability reminds subjects of the fragmentary and undifferentiated real they repressed through the misrecognitions of the mirror stage, threatening the fragile identities these processes established (Shildrick 2009, 92). Specifically, disabilities can disturb this imaginary wholeness both through their lack of wholeness, autonomy, or invulnerability or through excesses which threaten to disturb the boundaries of the subject. Thus, these lacks and excesses are projected onto disabled others in an attempt to shore up the identities of nondisabled subjects. And this double movement of projecting lack onto disabled others while disavowing the vulnerability of nondisabled persons leads to an ambivalence in responses: curiosity about and dismissal of disabled persons, nurturing of and expressing aggression toward disabled persons, or sexualizing disability and figuring it as grotesque (Goodley 2011, 130). In other words, disability is both necessary to the identity of nondisabled persons as that which is disavowed and a constant threat to the identity of nondisabled persons as the return of the repressed lack that must remain repressed to stabilize that identity.

Given that this work has been done, why look to Kristeva? First, I want to make clear that I do not see these Lacanian accounts as being in direct conflict with the Kristevan account I develop below. In other words, though I think each provides different resources, I am not claiming that Kristeva's should replace these accounts. However, I do think that the account I develop here provides different resources for thinking about disability and responding to the exclusion of disabled persons. First, this is because Kristeva herself has written about disability. Second, her innovations in psychoanalytic theory—namely her incorporation of the semiotic into her theory of language, her development of the concept of abjection, and her re-theorization of the uncanny and narcissism—offer tools for understanding disability oppression that the Lacanian accounts do not. To see why, let us first turn to Kristeva's account of language.

Sharing Meaning: Semiotic and Symbolic

In "Liberty, Equality, Fraternity and…Vulnerability," Kristeva discusses the example of John, a schizophrenic person who is the subject of the film *People Say I'm Crazy*. In this documentary, John's art is made public, and the money he makes from selling this art affords him things (a more independent living situation, for example) that he did not have before. The story is sold as a success, one person's journey from isolation to integration. But Kristeva is skeptical of this supposed success. For her, John is integrated into a system of exchange (of money and artistic objects), but he is not given the opportunity to interact, to share meaning with others, and thus to be reborn.[1] This means, for Kristeva, that the "*question of the subject* is not raised" here (Kristeva 2012,

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[1] As will become clear below, for Kristeva, the subject is never stable, but is always becoming, always being renewed through the interaction of the semiotic and the symbolic, the unconscious and the conscious. Thus, to be reborn is to be renewed as a subject through a re-articulation of one's psyche, especially in relation to others.

31). Kristeva goes on to specify that a constitutive feature of the "subject" is its remaining "open to a search for meaning and sharing," a search which she claims is possible even for persons with severe disabilities (2012, 32). Because interaction acknowledges a subject, and a subject is capable of making and sharing meaning, it will be necessary to briefly investigate what Kristeva means by "meaning" in order to understand what is missing from integration.[2]

To better understand Kristeva's use of meaning, let us turn to her much earlier work, *Revolution in Poetic Language*. Her stated goal in this work is to develop a theory of language that combines aspects of both a Husserlian phenomenological account of language and a psychoanalytic account of language. This is accomplished by her distinction between two poles of the signifying process, the semiotic and the symbolic. The semiotic is the unconscious aspect of language, the irruption of drive energy into signs. The symbolic is the realm of communicative language in which meaning is explicitly intended and articulated. Especially in the context of the arguments here, it is important to note that this language could take many forms, including spoken, written, and sign language. Importantly, Kristeva tells us that the semiotic both "logically and chronologically precedes […] the symbolic" (1984, 41). Though all language is the result of a tension between the semiotic and the symbolic, the semiotic is what developmentally precedes and makes symbolic articulation possible in each subject. It is through cries, coos, flailings, and other gestures resulting from discharging drives that the subject will eventually learn to communicate in symbolic language. The semiotic is what logically

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[2] It is important to note that the French *intégration*, like the English "integration," is closely related to "assimilation" in reference to social policy. Thus, Kristeva's hesitancy about the language of *intégration* parallels Medina's concerns about integration discussed in the previous chapter. Thanks to Mary Beth Mader for pointing this out to me.

precedes the symbolic, because without semiotic drive energy there would be nothing for the subject to communicate. (That is, if an infant had no frustrations or joys, there would be no reason to enter into symbolic language.) Though there are certain modes of expression that privilege one pole over the other (e.g., abstract mathematics is dominated by the symbolic while music is dominated by the semiotic), all language is the result of a tension between both poles. Semiotic drives find their way into symbolic language, and the symbolic shapes and seeks to give meaning to the drives. Thus, while the semiotic may be said to be "'outside of' or 'prior to' meaning proper," it must be understood as contributing to meaning (Keltner 2011, 22). In speech, one can imagine the difference in meaning caused by intonation and speed of a symbolic statement like "I love this song." Stated slowly and in monotone, it would mean something very different (maybe boredom or disingenuousness) than if it were said rapidly and with rising intonation (say, enthusiasm). Noëlle McAfee provides a helpful example from a text, James Joyce's *Ulysses*. In the passage she considers, the character Molly says "after that long kiss I nearly lost my breath," but the text uses more than the conventional sense of the colloquialism "lost my breath" to convey this meaning (McAfee 2004, 16-18). The text itself contains no punctuation and changes topics and time periods rapidly. These syntactical variations (or perhaps more properly, violations of commonly accepted syntax) give meaning to the passage in a manner different from a simple semantic meaning-conveyance. One *feels* breathless as they read the passage, more than simply understanding that Molly felt out of breath because her words tell the reader so.

Meaning for Kristeva, then, is a production of the interaction of the semiotic and the symbolic. The semiotic bursts into symbolic language; the symbolic gives shape to

the semiotic and yet is incapable of fully capturing it such that there is always an excess. This dialectical interaction is the site of the subject's emergence and re-emergence, on Kristeva's view, which is why she refers to the subject as a "speaking being" and as a "subject in process/on trial [*le sujet en procès*]"[3] throughout her works. The subject is a continual accomplishment and one formed through language. And importantly, this is always achieved through relations with (real or imaginary) others. The subject articulates itself in relation to others, and the symbolic is itself only possible because of a shared social language.

What can this tell us, then, about the case of disability? Consider first the example of John. One may think that because John was expressing himself in visual art, that he had found an outlet for semiotic drives in his creative practices. The problem is that these creations are treated as simply objects produced and sold, given no more meaning than objects establishing his capacity for greater financial independence. For Kristeva, allowing John to "speak of his anxieties and desires or the exclusion in which 'people' wall him up" would be to acknowledge him as a subject capable of creating and sharing meaning (2012, 31). In other words, to share meaning would be to allow his semiotic drives to generate new meanings by emerging in, and disrupting, the shared symbolic which currently excludes his experiences. Instead, the symbolic is left secure by integrating him only into the symbolic realm of exchange.

Kristeva's theory of meaning is also helpful in explaining her conviction that even persons with severe disabilities are capable of searching for and sharing meaning.

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[3] "Le sujet en procès" is translated as "the subject in process/on trial" because it has the double sense of being in process—that is, undergoing change—and being "under legal duress," or in this case being subject to the Symbolic (McAfee 2004, 38).

Consider the example of Sesha, Eva Kittay's daughter who she discusses in *Love's Labor*. She writes of Sesha:

> I am awakening and her babbling-brook giggles penetrate my semi-conscious state. Hands clapping. Sesha is listening to 'The Sound of Music.' Peggy, her caregiver of twenty-three years, has just walked in and Sesha can hardly contain her desire to throw her arms around Peggy and give Peggy her distinctive kiss […]. The starry-eyed far away look as she listens to Elvis crooning 'Love Me Tender,' the excitement of her entire soul […] in the choral ode of Beethoven's Ninth Symphony, and the pleasure of bestowing her kisses and receiving caresses in turn. (1999, 150-151)

Sesha cannot use symbolic language in any of its normally acknowledged forms (i.e., written, spoken, or sign language), and yet given Kittay's description it would be difficult to say that she does not convey meaning. I would like to argue that this is because Kittay has learned to listen to the semiotic—the giggles, the claps, the hugs and kisses that burst forth, the calm longing that overcomes her, the echolalias and tones that, for Kristeva, precede the development of the symbolic even in the "normal" subject. And in this way, Sesha, Kittay, Peggy, and others close to Sesha have together constituted Sesha's gestures as a limited version of symbolic language. After all, hugs and kisses and to some extent even clapping are learned gestures with fairly clearly delimited meanings. Moreover, if this were not the case, then it would appear that Sesha could not be a subject on Kristeva's view, insofar as a subject emerges in the dialectical interaction of the semiotic and the symbolic. It seems to me, however, that Sesha does have a very limited symbolic capacity, while her communication is largely constituted by the semiotic (as is every human's prior to the development of complex symbolic capacities and in certain practices like poetic language). Thus, while Sesha's meanings may be dominated by drives and affects, she can still be said to be creating and sharing meanings. Indeed, those meanings result from a semiotic origin that many fail to listen to, a semiotic discourse

that we in the West may have largely lost with the focus on the symbolic. Thus, I am arguing that looking to examples like Sesha's prompt both (a) a widening of the symbolic to include those expressions with clearly delineated meanings even if they are, say, non-propositional or non-verbal, and (b) a sensitivity to the meaning of semiotic expressions[4] often lost in the focus on and reliance upon verbal communication. Indeed, this reveals the fluidity of the boundary between the semiotic and the symbolic. The semiotic is already interpretable, and the symbolic brings the semiotic into shared language.

By bringing the body and unconscious into the process of meaning creation and sharing, Kristeva is able to include even severely disabled persons in the realm of subjects as speaking beings. In this way, Kristeva's theory of language helps to reveal a specific form of epistemic injustice that goes beyond the concepts summarized in the first chapter. This is a form of hermeneutical injustice, I want to claim, because it involves interpretive resources. But unlike the treatment of hermeneutical injustice in the literature discussed in Chapter 1, the interpretive resources at issue are not those of a whole society or subgroups within that society; rather, they are the resources at work in interpersonal, intimate relations. I will discuss Kristeva's use of the term "intimate" in the next chapter in greater detail, but for now it will suffice to say that "intimate" for Kristeva signifies the relationship between the unconscious and consciousness as it is articulated in relation to particular others. Thus, I will call the type of epistemic injustice discussed here *intimate hermeneutical injustice*, which is the injustice committed by those who are inattentive to the semiotic dimension of communication, particularly when there is a prejudice at work

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[4] Here I want to play on the ambiguity of the term "expression." Used on way, expression refers to a putting into words, that is, verbal articulation in the symbolic. Another sense, though, is that of revealing, especially affects, through non-verbal means, as in "facial expression" or "expressing sadness" in music or moans.

about the meaninglessness of the speaker's behaviors. To be sure, the victims of this type of injustice are not only those with severe mental disabilities—all communication on Kristeva's view has a semiotic component. Because the symbolic language of such persons is limited, however, and they are therefore left out of other accounts of epistemic injustice, the severely mentally disabled have been the illustrative case.

But I find in Kristeva another resource for understanding disability oppression. In her essays about disability, she provides a psychic explanation for why the nondisabled exclude disabled persons, and thus an explanation for the types of epistemic injustice discussed so far in this dissertation. To understand her thesis, it will be helpful to interpret her essays on disability with the resources of her earlier works. This is what I turn to in the next section.

Disability: Abject or Uncanny?

Kristeva begins "Liberty, Equality, Fraternity and…Vulnerability" with a discussion of the singularity[5] of disabled subjects. There are multiple and diverse disabilities, she notes, and each disabled person is singular because he or she experiences "his or her situation in a specific, different, unique way" (Kristeva 2012, 30).[6] And yet, disabled persons "confront us with incomparable exclusion" because "the disabled person opens a *narcissistic identity wound* in the person who is not disabled; he inflicts a threat of *physical* or *psychical death*, fear of collapse, and beyond that, the anxiety of seeing the

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[5] I discuss Kristeva's understanding of "singularity" in relation to "genius" in the next chapter. For the purposes of this chapter it should be sufficient to understand singularity as the specificity of each subject. Each subject has a unique history, for Kristeva, but each subject is also composed of a shared psychic structure that makes this absolutely unique history sharable or communicable.

[6] This, as I discuss below, is worth remembering especially given the criticisms made by Kristeva's critics, especially Grue, who claims that Kristeva makes disability monolithic.

very *borders of the human species* explode" (Kristeva 2012, 30 original emphasis). That is, what allows us to refer to this multiplicity of singular subjects as "disabled" is their shared experiences of exclusion, and this exclusion results from the threat of a narcissistic wound others experience in encounters with them. Here, Kristeva does not detail what she means by this "narcissistic identity wound," but it resonates with Kristeva's concept of the "abject" and her use of Freud's "uncanny." It may be helpful, then, to make a brief digression to better understand Kristeva's insights.

Kristeva introduces the concept of abjection to offer a pre-Oedipal account of splitting that must occur before the formation of a stable subject and its stable objects.[7] Whereas an object supports a subject—that is, it reveals the subject's detachment and autonomy—"[t]he abject has only one quality of the object—that of being opposed to *I*" (Kristeva 1982, 1). In other words, the abject is a non-object splitting from (but never completely split from) the subject-to-be. There is no relation to the abject other than differentiation (via expulsion or rejection). Developmentally, abjection is the "violent, clumsy breaking away" from the "maternal entity" upon which the not-yet-I depends for life, and yet from which it must separate to become a subject (Kristeva 1982, 15).[8] That is, abjection is a transitional stage of differentiation between the non-differentiation of the not-yet-subject[9] and the not-yet-object (the maternal), and the differentiation of the

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[7] There is not space here, nor is it necessary to my project, to detail the Oedipal figure of psychoanalysis and Kristeva's departure from it. What is important for my purposes is the distinction of the *abject* from the *desired object* finally achieved through the Oedipal negotiation.

[8] See also Beardsworth 2004 and Oliver 1993a for clear and helpful discussions of abjection as a developmental necessity in the constitution of the subject. Both also provide clear explanations of how Kristeva's abject differs from the Freudian and Lacanian Oedipal stories.

[9] I use subject-to-be and not-yet-subject interchangeably, here.

subject and its objects. The subject-to-be is struggling to make a space for itself within

the maternal which encompasses it. Because the subject has not yet emerged at this stage,

the motor of abjection is the drives, those somatic forces that will later exist on the border

between the unconscious and the conscious and that will only then be able to be

sublimated.[10] What is abjected is also part of the not-yet-subject, as is the case for vomit

and excrement, two figures of abjection for Kristeva. Thus, in abjection one also abjects

oneself. As such, it blurs boundaries, and this is the central quality of the abject: it

"disturbs identity, system, order," and "does not respect borders, positions, rules"

(Kristeva 1982, 4). Thus abjection is not a process that ends once a subject emerges; it is

present in the life of the subject wherever its boundaries are threatened, whenever "the

object world collapses" (Beardsworth 2004, 84). Even for adult subjects, then, corpses

are abject as are figures like those who commit premeditated crimes. The latter reveal

how the law, which we consider necessary to our existence in society, is fragile. The

former reminds us of the precariousness of life, that life is always in fact on the border of

death, that the body which we recognize as human can in fact cease to be a living human.

Another way of understanding the abject is through its relation to narcissism. In

"On Narcissism," Freud posits the existence of two modes of narcissism. In primary

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[10] Sublimation for Kristeva has a specific meaning. It is "the possibility of naming the pre-nominal, the pre-objectal […]. Through sublimation, I keep [the abject] under control" (Kristeva 1982, 11). Later, she writes that sublimation is "the mere fact of naming affect […] that mitigates its death instincts, and renders them bearable, livable, perhaps even agreeable" (Kristeva 2000, 778). That is, to sublimate is to bring a drive, especially the death drive, into representation. For Freud, on the other hand, sublimation refers to the change in the aim of a sex drive to a non-sexual aim, or the change in the aim of an aggressive (death) drive to a non-aggressive aim. A succinct explanation of Freud's use of sublimation is provided in *The Language of Psychoanalysis* (Laplanche and Pontalis 1973, 431-433).

narcissism, the ego develops through a libidinal[11] investment in itself. From a state of autoeroticism in which the not-yet-ego is not differentiated from its objects (namely its mother), the child's untamed drives begin to focus on itself, before becoming cathected (that is, invested) in an object/mother. Thus, Freud writes, "We say that a human being has originally two sexual objects—himself and the woman who nurses him—and in doing so we are postulating a primary narcissism in everyone" (Freud 1957a, 88). Once the individual takes objects and thus cathects objects with libido, secondary narcissism becomes possible. In this form of narcissism, libido is withdrawn from one's objects back to the ego. (It is this form of narcissism that can become pathological, on Freud's view). To be clear, for Freud primary narcissism can never be completely overcome; that is, we always retain a portion of libidinal investment in our own ego. Indeed, to do otherwise would be to dissolve the ego. It is precisely this threat of dissolution that abjection poses, for Kristeva, even while abjection serves as the precondition for narcissism. In its developmental iteration, abjection is the process through which the not-yet-subject separates itself from the maternal. It is only thus separated that this subject-to-be can be invested with its own drives. But the abject continues to be present throughout life as that which threatens borders, namely the border between the subject and its objects, and as such it serves as a threat to, and reveals the fragile nature of, the narcissistic enclosure of the subject. Whereas narcissism attempts to maintain the border of the subject against its

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[11] I use libido and drive interchangeably, here, usually adopting the language of the text from which I am most immediately drawing.

objects, the abject reveals the permeability and instability of that border. Thus, abjection is, for Kristeva, a "*narcissistic crisis*" (Kristeva 1982, 14).[12]

As a final point in this discussion of abjection, it is important to note that despite the fact that the "abject" is a term in the language of psychoanalysis, abjection is a historically variable phenomenon. Though Kristeva maintains that abjection is a necessity for the formation of any human subject, what is taken to be abject depends upon the individual's cultural location. Thus, in *Powers of Horror*, she is at pains to trace a history of abjection through various religious formations of the West, notably drawing out the difference between the Judaic and Christian figures of abjection. Thus, the figures of abjection mentioned above, like corpses or certain crimes, may not be abject in other times or places. Kristeva says as much in her discussion of the corpse: "The corpse, *seen without God and outside of science*, is the utmost of abjection" (1982, 4 my emphasis). With certain religious faiths, for example, may come the understanding of the corpse as a shell devoid of a soul such that the corpse does not present a threat to the distinction between life and death. Or a scientist could, in a detached, experimental way, sublimate an abject corpse by seeking to understand it as a static entity, rather than being affected by it as a revelatory of the precariousness of life. It is thus conceivable that any number of relations to the corpse are possible, and thus, that its status as abject (or not) is contingent.

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[12] My discussion of narcissism, here, is meant only to bolster an understanding of the narcissistic identity wound proposed by Kristeva. In *Tales of Love*, Kristeva develops an account of narcissism that departs from that of Freud and helps to explain the way in which the subject is always already other (1987). I will discuss this later in the same chapter. Oliver 1993, Beardworth 2004, and DeArmitt 2014 provide helpful discussions of her account.

Having briefly outlined Kristeva's concept of the abject, we can return to her discussion of disability. It is surprising that Kristeva does not use the terms "abject" or "abjection" in either of her articles on disability because her language in these essays has a strong resonance with the first chapters of *Powers of Horror*. She says, for example, that disability presents the other with "the anxiety of seeing the very *borders of the human species* explode" (2012, 29) and that the "'mortality of life,' from birth or following from these 'unpredictable biological genetic variabilities' that can generate disabilities" remains unthinkable to us (2013, 225). This threat to one's boundaries and the boundaries of the species would seem to be clear indications of abjection. Indeed, if the corpse is abject as "death infecting life" (1982, 4), it seems that the disabled person who "inflicts a threat of *psychical or physical death*" (2012, 29) would also be abject. Perhaps because these essays are intended for more general audiences Kristeva avoids the use of psychoanalytic jargon. Still, abjection may help us better understand Kristeva's discussion of disability.

First, recall that abjection is accomplished by the drives. Thus, the exclusion to which disabled persons are subject is not the result of conscious reflection; rather, it is an affective response intended to shore up the narcissistic boundaries of others in their interactions with disabled persons. Subjects who feel their narcissistic integrity threatened by disabled others experience a visceral anxiety that calls forth avoidance, expulsion, and even violence. Second, it is important to note that Kristeva's account of the narcissistic crisis experienced by the person who encounters a disabled person not only reveals the latter as an abject, but also inverts the relationship between narcissism and disability present in much psychoanalytic thought. As Tobin Siebers explains,

psychoanalysis has tended to associate narcissism with disability. As early as "On

Narcissism," Freud argued that persons with illness or injuries invest their libido in their

egos and thus withdraw it from their love objects. He writes, "the sick man withdraws his

libidinal cathexes back upon his own ego, and sends them out again when he recovers"

(1957a, 82). According to this logic, persons with chronic illnesses or disabilities would

never cathect objects, and would thus be incapable of establishing love relationships.

Siebers argues that this claim has been taken up into the practice of psychoanalysis to the

detriment of disabled persons. As analysands, disabled clients have often been assumed

to be unable to accomplish transference[13] (a cornerstone of the psychoanalytic process)

because of their supposed narcissism and thus are thought to be untreatable. On the other

hand, disabled persons have been denied access to the profession of psychoanalysis

because they are thought to be incapable of countertransference, again because of their

supposed narcissism, and thus incapable of establishing therapeutic relations with others

(Siebers 2008, 38-44). Kristeva rejects this logic, writing, for example, that disabled

persons are capable of the "search for meaning and sharing," which for her defines the

subject, "[d]espite the limitation, and sometimes even in cases of great dependency

brought on by multiple disabilities" (2012, 32). Indeed, she does not just reject the

"standard" psychoanalytic line regarding disability, she reverses it; it is not the narcissism

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[13] Transference, as Laplanche and Pontalis (1973) explain, is a notoriously difficult concept to define, but the important central component of transference is displacing cathexes, affects, or behaviors associated with one object onto another object. Countertransference refers, then, to "the analyst's unconscious reactions" to the analyzand's transferences in the therapeutic setting (1973, 92).

of disabled subjects she is concerned with, but the narcissistic identities of the nondisabled.[14]

Finally, because Kristeva tells us that the figures of abjection are culturally contingent, this may help us to understand the recommendations she makes at the level of culture to address the exclusion of disabled persons, especially in France. She traces a brief (European) history of disability.[15] Throughout the Middle Ages, for example, "'houses of God' […] excluded lepers and, sometimes, the paralyzed and the incurable," with only a handful of exceptions (2012, 35). Even when disabled persons were more fully integrated into religious charity, the result was a de-politicization of disability. On Kristeva's view, charity neglects the rights that disabled persons have to compensation. Paraphrasing the *Declaration of the Rights of Man and Citizen*, Kristeva says that "All human beings are born free and equal in dignity and rights" (2012, 33).[16] Charity, however, treats disabled persons as the beneficiaries of others' generosity and not citizens with a right to compensation based on the harms, obstacles, and exclusions to which they are subject in various ways. In this way, it threatens to infantilize disabled persons rather than treating them as subjects with whom others should interact.[17] The twentieth century did bring greater legal protections for disabled persons. Kristeva is disappointed with

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[14] In a similar manner, Siebers argues that the failure of therapy with disabled clients is not the result of the analysand's narcissism, but of the countertransference with which the analyst is unable to cope (2008, 42).

[15] This history is derived from Henri-Jacques Stiker's *A History of Disability* (2000).

[16] Kristeva gives a sustained analysis of this *Declaration* in *Strangers to Ourselves* (1991) and, to a lesser extent, *Nations without Nationalism* (1993). These works will be discussed in relation to disability below.

[17] I will discuss Kristeva's distinction between "interaction" and "integration" in greater detail below.

France, however, for failing to provide concrete supports for disabled persons, such as education, well-trained service providers, "benefits payments, access to jobs, accessible public transportation and public places" and for failing to move beyond the model of disability that, on her view, treats disabled persons as "objects under treatment," to a model which accounts for both individual limitations and social obstacles (2012, 37).[18] Underlying all of these moments in history, according to Kristeva, is a "culture that posits human beings as creatures capable of excellence, pleasure, and achievement in the image of an all-mighty Creator," a culture that despite the death of God "continues to inhabit us [...] by continuing to deny the *lack of being* essential to the human condition" (2012, 33). That is, disabled persons have presented and will continue to present a narcissistic threat to nondisabled persons[19] as long as the narcissistic illusion of wholeness which our culture expects (e.g., expectations of independence or our supposed meritocracy) and upon which our culture is largely based (e.g., the autonomous rational agent of social contract theory) is maintained.

In opposition to this culture, Kristeva suggests a humanism based on vulnerability, a culture in which the socio-political link is conceived in terms of vulnerability, and thus, a view of disabled persons as singular subjects rather than as persons with privations of certain qualities. Such a change needs to involve more than mere integration. On Kristeva's view, the United States holds out an exemplary model of integration, a process by which disabled persons are reduced to "either patients or

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[18] This distinction parallels the difference between the medical and social models of disability which I summarize in the introduction.

[19] And, I think, anyone who does not share the particular limit or exclusion her disability presents, including other disabled persons.

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workers" (2012, 40).[20] Here, the experiences of John, the schizophrenic person discussed above, may be helpful. Recall that John's sister begins to film him, and as a result his works are exhibited and sold, and he gains a certain financial independence as a result. Presented as a success story, the film worries Kristeva because John's voice is rarely heard. His success is not a success in sharing his thoughts or emotions with others, nor is it an overcoming of exclusion; after all, those we make into spectacles can be just as excluded as those who are never filmed. There is, in Kristeva's words, no sharing that takes place here, and as such John is treated as an object of treatment (and entertainment), a producer of goods, but not as a subject, that is, not as one capable of making and sharing meaning. Kristeva writes, "I saw an exhibition, and commerce, but no *interaction* between the disabled and the able" (2012, 31). Interaction is best understood, then, in contrast with integration. In integration, the disabled person is expected to change, to assimilate to the standards (social, economic, etc.) of her community such that she is accepted by the grace of her society. The threat to nondisabled subjects' narcissistic egos remains unchallenged and thus intact. In interaction, the disabled person is encouraged to make and share meaning, and thus those with whom she interacts will transform through this sharing as well. That is, in interaction nondisabled subjects confront the narcissistic threat disabled persons pose. Furthermore, through interaction, changes can occur within a community which take into account the feelings, perceptions, and desires of disabled persons. This is in contrast to integration in which any changes at the social level are prescribed by the nondisabled, failing to take into account the concerns of disabled

[20] Even this integration is poorly achieved, however. According to the Bureau of Labor Statistics, for example, 26.0% of disabled persons ages 16-64 in the United States were employed in 2014, compared to 71.7% of nondisabled persons of the same age range in the same time period (United States Bureau of Labor Statistics 2015).

persons themselves. And yet, unless there is a cultural shift of the kind Kristeva advocates, integration, not interaction will be the most likely outcome of any reform in the treatment of disabled persons because disability is still a figure of abjection.

While she does make concrete recommendations for broad social changes in the perception of disability, from education and training to greater media presence, Kristeva suggests that psychoanalysis is the privileged site of the changes she envisions. This is because any broad social changes will depend upon individuals negotiating with the narcissistic wound with which they are threatened in encounters with disabled others. To understand Kristeva's psychoanalytic prescription for changing this situation, it will be helpful to review her works on foreigners, *Strangers to Ourselves* and *Nations without Nationalism*.

In *Strangers to Ourselves*, Kristeva draws upon Freud's concept of the uncanny, which he develops in his essay, "The 'Uncanny.'" His reflections, here, begin with a linguistic analysis. He notes that in German, the word *heimlich* (canny, familiar) has developed such an ambivalent meaning that it at times becomes its opposite, *unheimlich* (uncanny, strange), which is an indication of the true nature of the uncanny (1957b, 226). This reveals that the uncanny is that which is strange because it is in fact familiar. So, for example, a story by E. T. A. Hoffman in which there is a character known as the Sand-Man that threatens to steal one's eyes is experienced as uncanny not because it is strange, but because it recalls a common fear of having one's eyes harmed or destroyed in childhood, a fear that is "often enough a substitute for the dread of being castrated" (1957b, 231). That is, the story is uncanny because it recalls a fear that is familiar, but

which has been repressed and thus alienated from consciousness.[21] We experience death as uncanny, Freud says, because we have ceased to believe in an afterlife by repressing our ideas that the dead (our own death included) live on as ghosts or spirits and are capable of interacting with the living, but this does not rid our unconscious of such ideas. Others viewed as mad or without the control of their bodily movements are experienced as uncanny because they remind us of the operations of the drives, forces we never completely control within ourselves.[22] And female genital organs are experienced as uncanny by some men because they are strange reminders of the womb which used to be home (1957b, 242-245).[23]

Freud's analysis, on Kristeva's view, helps us recognize the fragility of repression. And because repression is formative of both our unconscious and our conscious (by directing psychic contents between these two structures), the uncanny helps us to see the fragility of ourselves. Kristeva writes, "uncanniness […] is a *destructuration of the self* [that] surely manifests the return of a familiar repressed [but also] requires just the same the impetus of a new encounter with an unexpected outside element" (1991, 188). Thus, there is a sort of double destructuration involved in the

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[21] Repression is a psychical operation that involves the denial of a certain content to consciousness, which requires a change in the representative of a drive and the drive itself. The idea, the representative of the drive, is simply denied access to the unconscious. The drive energy, however, is withdrawn from its object and must either be suppressed, find expression as an affect, or be transformed into anxiety. In any case, the return of the repressed is a constant threat both from external reminders of repressed contents and from failures of the psyche to repress these contents, an effort which requires a constant expenditure of psychic resources (1957a, 151-155).

[22] It is interesting to note, as Shildrick does (2009, 90), that many of Freud's examples of the uncanny are either of disability (like persons who cannot control their movements) or figures that call forth disability (like dismembered limbs).

[23] I highlight these examples because they are the instances favored by Kristeva in *Strangers to Ourselves*.

uncanny. On the one hand, the uncanny reveals that there are repressed parts of our own psyches which are outside of conscious awareness but which can easily break through the precarious boundary of repression into consciousness. In other words, the uncanny reveals repression itself (Beardsworth 2004, 186). We are other to ourselves, then, because we are assymetrical beings; we have unconscious drives and conscious ideas which exist in a constant state of dynamic interaction. We are not, on the psychoanalytic view, unified subjects.

On the other hand, that which gives rise to feelings of the uncanny, especially other persons, reveals the extent to which we are affected deeply by others. This is because the subject emerges, for Kristeva, only through others. To see the profound way in which we are formed through others on Kristeva's view, we will need a digression through her reconception of narcissism. The subject's earliest attempts to emerge consist of a vacillation between abjection of the maternal (as discussed above) and identification with a third. This triad (the maternal, the not-yet-subject, and the third) forms the "narcissistic structure" (Kristeva 1987, 48). The subject-to-be must abject the maternal in order to differentiate itself, and yet it is also still dependent on the maternal. This establishes a vacillation between repulsion of and returning to the maternal. But this, on Kristeva's view, is insufficient to account for the development of the subject, especially the psychic space necessary for the formation of an imagination (24). The opening of this psychic space requires that the mother-figure desires an other, the "imaginary father" (26).[24] Because the not-yet-subject experiences the maternal desire for this "not I" (41)—

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[24] This figure takes on several interchangeable names, as DeArmitt notes, including "the third […], primary thirdness […], the third pole […], the father of individual prehistory […], the Imaginary Father […], and the father-mother conglomerate" (2014, 70). I will use "imaginary father" for the sake of simplicity.

a desire which "assist[s] the infant in the process of individuation by fracturing its fantasy of autoeroticism" (DeArmitt 2014, 68)—the imaginary father becomes a site of identification[25] for the subject-to-be. To be clear, this imaginary father is not an individual person—after all, the subject-to-be, without objects, could not recognize it as such. Rather, it is the "speech of the other—precisely a non-object, a pattern, a model," speech which is not imitated by the not-yet-subject (which would assume the imagination's ability to compare its own speech with that of another), but repeated, echoed (Kristeva 1987, 26).[26] In this way, the subject-to-be identifies with the imaginary father; it becomes like this figure, a "subject of enunciation," a speaking subject (26). This is the formative instance of transference (or as Kristeva understands it, love), because the subject-to-be attempts to occupy the place of the imaginary father. This, then, becomes the model for continual identification throughout one's psychic life.

This narcissistic structure, composed of the (abjected) maternal, the imaginary father (of identification), and the subject-to-be, differs from the Freudian picture, discussed above, in which primary narcissim is described as the investment of the not-yet-ego's drives in itself such that it can emerge as an ego.[27] The emergence of the subject, on Kristeva's view, is dependent on others, establishing the deeply social nature

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[25] Identification is the process by which a subject takes on an attribute of the other and in so doing becomes transformed him or herself (Laplanche and Pontalis 1973, 205). It may be inaccurate to refer to this primary identification as an identification because there is properly speaking no subject to assimilate characteristics and no object whose attributes can be adopted. Still, we see in this movement the not-yet-subject (1) assimilating an attribute, namely vocalization, and (2) being transformed by this assimilation.

[26] This feature of the imaginary father is clearly explained in Oliver (1993, 72) and DeArmitt (2014, 73).

[27] Though it should be noted that Kristeva understands herself to be giving a reading of Freud.

of the subject even before it emerges and takes objects. The combination of abjection and primary identification forms what Ewa Ziarek calls "a double operation of displacement consitutive of the narcissistic self," in which "the other becomes a metaphorical destination of sorts" through identification, even while "the unnamable otherness of the abject turns the fragile position of an I into a permanent exile" (Ziarek 1995, par. 25). The subject is not a stable entity, but is constantly displaced in its interactions with others in which one may identify with the other or be challenged by and thus reject the other. This brings us back to Kristeva's discussion of the uncanny foreigner. Encounters with foreigners, according to Kristeva, are uncanny precisely because they reveal the other within ourselves. That is, we are subjects constituted *by* heterogeneous levels (conscious/unconscious, semiotic/symbolic) and *through* identifications, abjections, and projections (i.e., relations to others), and are thus subject to a double-destructuration of the self as unified and as autonomous. In Kristeva's words, we experience the encounter with the foreigner as a loss of boundaries, signalling "the difficulty I have in situating myself with respect to the other [such that I] keep going over the course of identification-projection that lies at the foundation of my reaching autonomy" (1991, 187). Projection, resembels abjection, in that it is an expulsion of an aspect of oneself that is then located in another person,[28] but it occurs only once the subject has emerged and thus can have objects upon whom these aspects can be projected. Thus, the foreigner is a challenge to the narcissistic subject, calling forth responses which seek to restore the latter's boundaries, responses which resemble the subject's initial emergence through identification-abjection. This destructuration of the self can thus result in "a psychotic

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[28] A detailed discussion of the concept is offered by Laplanche and Pontalis (1973, 349).

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symptom"[29] in which the subject attempts to strengthen its identification with its fellow citizens and abject the foreigner, constantly reacting to the threat of depersonalization, or it can result in "an *opening* toward the new" (Kristeva 1991, 188).

In what would this opening consist? It is "the courage to call ourselves disintegrated in order not to integrate foreigners and even less so to hunt them down, but rather to welcome them to that uncanny strangeness, which is as much theirs as it is ours" (1991, 192). Each subject is a being with an unconscious, a psychic realm that is never wholly accessible for any subject. And each subject is the result of a history of abjections, projections, and identifications, such that *who she is* is a composite of interactions with others. Thus, in acknowledging ourselves as *dis-integrated*, as strangers to ourselves, we may realize that every person is a foreigner, with the paradoxical result that no one is a foreigner. Importantly, as the quotation above specifies, this does not mean that our reaction to foreigners should be to integrate them, to expect them to assimilate. Indeed, this would be to assume that our own foreignness is somehow less foreign. Nor should we treat foreigners as national abjects, excluding them, projecting our fears onto them. Either of these paths, for Kristeva, would not only be unjust, given our own foreignness, but they would also amount to psychic ossification in which we remain unchallenged and unchanged in our narcissistic identities (1991, 192). In other words, either of these options would deny that both oneself and the foreigner are, in the language of *Tales of Love*, "open systems" capable of renewal, a necessity for psychic life, only through connections with others (1987, 15). On Kristeva's view, it is precisely this renewal that

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[29] I quote this phrase as a reminder of the potential for psychoanalytic discourse to medicalize, a tendency that disability studies needs to be cautious of. Throughout, I attempt to emphasize the non-normalizing potential of Kristeva's work, but it is worth bearing in mind the conservative tendencies of adopting psychoanalytic theory.

psychoanalytic practice accomplishes, through "stabilizing-destabilizing" transference

(15), so it should come as no surprise that she sees in psychoanalysis a third way to

approach the foreigner. This would involve a working-through, [30] in which we "must

come back to [the uncanny experience], clear it up, give it the resources our own essential

depersonalizations provide, and only thus soothe it" (1991, 190). We should sit with[31] the

uncanny feeling aroused by foreign others, use this opportunity to recognize ourselves

and others as open systems, strange to ourselves and to one another, and thus soothe the

(often violent) reactionary tendencies of projection and exclusion, or fascination and

integration. Ideally, transference in our interactions with the other could move us toward

reconciliation with our strangeness to ourselves. Even though psychoanalytic practice is

the privileged space of this working-through, as Marilyn Edelstein notes, practices

outside of the psychoanalytic couch could achieve this aim (1993, 206). For Kristeva,

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[30] Working-through is an important term in psychoanalysis, but one that is never given extensive explanation by Freud. In "Remembering, Repeating, and Working-Through," Freud specifies that to work through a psychic resistance to acknowledge one's repression is to overcome it by coming to terms with the repressed contents which create the resistance (1957a, 155). Psychoanalysis is the privileged site of working-through because it allows for two techniques helpful to (if not necessary for) working-through to take place: transference and interpretation. Transference occurs when the analysand takes the analyst as her object and thus transfers her resistances, cathexes, etc. to the analyst. In transference the resistance becomes an "artificial illness," which allows the analyst and analysand to discover the repressed contents driving the resistance, and thus to reinterpret the resistance (1957a, 154). Transference and interpretation, then, are the techniques to working-through a resistance. Finally, it is important to note that the aim of working-through is more than an intellectual acceptance; working-through is successful when it results in a lived (i.e., intellectual, affective, sensory) conviction of the repressed content. A rather detailed exploration of the topic is provided by Laplanche and Pontalis (1973, 488-489).

[31] By "sit with" I mean an alternative process to immediately acting upon an affect. For example, this may take the form of feeling an affect and letting it pass, bringing attention to the bodily manifestations of affects to soothe them, or turning one's attention to the affect in order to analyze it at a more conscious level. What is important is reacting to affects without immediately seeking to rid oneself of them through the exclusion of or fascination with the other who brings the affects about.

working-through can take place in writing, art, and interactions with others outside of strictly therapeutic settings, insofar as these practices facilitate the interaction of the unconscious, semiotic drive with the symbolic, allowing for the subject's renewal.

Before returning to discuss the relation of *Strangers to Ourselves* to Kristeva's work on disability, I would like to discuss two thinkers who engage with her use of the uncanny: Sara Beardsworth (2004) and Sara Ahmed (2005). The arguments of both Beardsworth and Ahmed potentially relate to Kristeva's thought on disability, and thus discussing them may shed some light on both the uncanny and disability. Let us take each in turn. In *Julia Kristeva: Psychoanalysis and Modernity*, Beardsworth argues that the uncanny can found neither an ethics nor a politics as Kristeva would like to claim. Kristeva's ethics, she says, "makes the other an integral part of the same […], and so must remain without real otherness" (2004, 203). Just as Kristeva claims that the psyche "integrates within the assumed unity of human beings an *otherness* that is both biological *and* symbolic and becomes an integral part of the *same*" (1991, 181), Beardsworth worries that working-through one's strangeness with the foreigner will reduce the singularity of each into the same. In other words, once we are all foreigners, are we not all the same? I believe this conclusion can be avoided for two reasons. First, if it is the case that we are all the same *as strangers*, this does not imply that we are all the same *as subjects*. In *Strangers to Ourselves*, Kristeva establishes a sort of formal similarity between subjects; we are all composed of heterogeneous psychic elements and of interactions with others (abjections, identifications, projections) through which we are transformed. Thus, anyone who imagines herself to be a unified, autonomous subject must acknowledge that she is in fact a stranger to herself. This does not mean, however,

that the contents of my conscious or unconscious are the same as yours, nor does it mean

that the interactions through which I have been formed are the same as yours. Indeed, we

will see that for Kristeva this formal similarity is the foundation which allows us to share

our radical singularities, singularities which result from our unique developments as

subjects (i.e., the contents and interactions refered to above).[32] Second, we would do well

not to imagine this "same" (we are all foreigners) as static. For Kristeva, the subject is a

hetergenous *and dynamic* being, in which unconscious drives and conscious ideas (in

other words, the semiotic and symbolic) are in a constant interaction through which both

are transformed. Similarly, we as foreigners are constantly interacting and transforming

in the process. We need not imagine that the result of Kristeva's vision would be a

movement toward a flattening, static same. It is rather a movement toward a recognition

of structural similarity (foreignness) such that the singularity of each person can become

a source for renewal in others, rather than being covered over by the projections of

others.[33]

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[32] A similar form/content distinction is present in Kristeva's discussion of feminine genius (Kristeva 2004, 426).

[33] Beardsworth's full argument is more complex than the one I am presenting here. Through a reading of Freud's later works, she argues that the uncanny can give us neither alterity nor futurity. This is because the uncanny calls the (unconscious) past to the present, thus no future is involved. Another way of putting this is that the uncanny depersonalization cannot think the future because the destructured subject exists in the non-time of trauma, not the linear time of the narcissistic subject. What trauma brings forth is the already past and thus it can lead to neither otherness nor a future (Beardsworth 2004, 202-3). I am not convinced, however, that we should think of the uncanny experience as traumatic, however. Rather than *accomplishing* a depersonalization, Kristeva says that the uncanny "leads the self […] *toward* depersonalization" (1991, 188 my emphasis). And rather than saying that the uncanny, unresolved, will lead to psychosis, she says it may "remain as a psychotic *symptom*" (188). In other words, the uncanny experience, if my reading is correct, is not a trauma which disintegrates the subject; rather it is a *threat* of such disintegration, a challenge to one's unified and autonomous self-image, a depersonalization as a *process*. There remains in the experience of the uncanny, then, a temporality open to the future, and a subject (contested though she may be) capable of opening herself to the singular other. I note this here because I think substantiating this defense would take

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While Beardsworth worries about the integration of others into the same, Ahmed worries that Kristeva has underestimated the problem. In *Strangers to Ourselves*, Kristeva claims that her "ethics of psychoanalysis implies a politics" (1991, 192), but aside from a few sparse recommendations in the final few pages, she leaves a discussion of these political implications to her later *Nations without Nationalism*. Her concern here is with the fact that, in the wake of globalization, immigration, and the integration of Europe, certain Western countries are suffering from identity crises, such that Western individuals seek to bolster their identifications with national origins. An U.S. American, for instance, may experience waves of immigration as threats to the national identity and thus seek alliances with American citizens, protest or reject immigrants, or become dogmatically patriotic.[34] On the one hand, Kristeva recommends a meditation upon "the fascination and horror that a different being produces in us," similar to her ethics proposed in *Strangers to Ourselves* (1993, 30). On the other hand, she argues that we should conceive of the nation as a transitional object, an object with which we can identify but which is dynamic, open to change (41-3). But there is a particular unsettling instance of claim that "we are all foreigners" in *Nations without Nationalism*. Here, Kristeva writes that "recognition of otherness is a right and a duty for everyone, French people as well as foreigners, and it is reasonable to ask foreigners to recognize and respect the strangeness of those who welcome them" (31), a vague reference to her later claim: "It is possible that the 'abstract' advantages of French universalism may prove to

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more space and constitute more of a digression than this dissertation affords. It remains an argument to follow through.

[34] Importantly, Kristeva claims that this amounts not only to a hatred of the rejected other(s), but also a hatred of oneself, because in identifying first or most strongly with a group or national identity, one denies her own singularity (1993, 2-3).

be superior to the 'concrete' benefits of a Muslim scarf" (47). What these juxtaposed claims reveal, for Ahmed, is that Kristeva has underestimated the problem. Acknowledging that we are all strangers does not seem to deal with the uncanny response to the foreigner, because "some others are recognized as stranger than others and as already not belonging to the nation in the concreteness of their difference" (Ahmed 2005, 99). The other that evokes an uncanny response is not just any other, but one already prefigured as different (concretely) from the (abstract, universal) host. Moreover, the concrete figure of the veiled woman is in fact no more concrete than the persons who are considered hosts, though they are not recognized as such *by those French persons aligned with Kristeva's position*. In other words, veiled women are marked in a way that those without veils are not.

If the nation is a transitional object, one capable of contestation, why can it not survive the contestation of the veil? And why is it that the strangeness of the French citizen is figured as universal while the strangeness of the Muslim immigrant is figured as concrete? To answer this question, Ahmed turns to emotion. Through a linguistic analysis and several examples, she notes the complexity of emotion. First, emotions both attach us to others and move us (either toward or away from others). We are moved by emotions at the same time as we are connected by them. Second, they constitute, and continually reconstitute, the borders of the self. To use Ahmed's example, when I stub my toe on a table, "I become aware of my body as having a surface" through the pain caused by the impression upon that surface by the table (2005, 101). This border is neither inside nor outside; it is continuously reconstituted through impressions and their resulting sensations. (Note that this need not be a painful impression. Pleasure, for example, could

work in the same way.) What's more, the ways in which this border is affected (and thus effected) alter one's "*bodily space*" (2005, 101). To return to the example, I may move away from the table as a pain-causing object, and I may alter the way I move about this space in the future, perhaps keeping farther away from the table, or perhaps turning on the light in the room when it is dark. Thus, through the impression on this border, my body (now fearful, avoiding, or more careful), the table (now a pain-inducing object, or object of fear), and the relation between the two (the movement of my body relative to the object) are all altered. On her view, the "skin of the community" is constituted (and re-constituted) in a similar way—it is "*an effect of the alignment of the subject with some others and against other others*" (2005, 104 original emphasis). To clarify her account, Ahmed discusses an example drawn from the writing of Audre Lorde in which she experienced a white woman's disgust when she, a black girl, sat next to her on a train. Here, the emotions of disgust and hate effect a movement. The white woman first pulls her coat away from Lorde so that it does not touch her. When Lorde does not move, the white woman stands on the moving train rather than sitting so close to her. This allows Lorde's mother to sit next to her. Notice the movements brought about by emotion here. Disgust results in a movement away, an expulsion; consideration or love for the mother results in a moving closer, a touching. In this scene, the skin of the white community is reconstituted as it recoils from black others, and the skin of the black community (and perhaps the family among other communities they share) is reconstituted as Lorde and her mother move closer. This is a microcosm of larger social phenomena in which white communities feel fear (for financial stability, safety, etc.) when persons of color "impress" upon their collective "skin," in which white persons feel disgust or fear upon

entering communities of color, and so on. Why then are some others objects of fear or rejection while other others are objects of love or attachment? Ahmed argues that "particular histories are reopened in each encounter, such that some bodies are already read as more hateful and disgusting than other bodies" (2005, 106). In other words, we inherit histories of our communities in which this skin is already in place. And this skin is constituted and maintained primarily by metonymy, which for Ahmed is the "contact and proximity between bodies and signs," but also by metaphor, in which one "stand[s] for or stand[s] in for others" (106). So while it may be the case that immigrants come to stand for some particularly threatening individual (a feature on the nightly news, for example) in the perception of a white community, it is more common that the physical proximity of immigrants, the slippery associations of immigrants with strange languages, smells, habits, and perhaps even with the destruction of the national identity constitutes and reconstitutes the movement of white bodies away from immigrant bodies that maintains the skin of the white community.

This account, Ahmed writes, is inspired by Kristeva's own writings on abjection. Recall that the primary instance of abjection is the subject-to-be's attempts to emerge from its maternal surroundings. As such, abjection constitutes a first and fragile boundary for the subject. What's more, the feeling of disgust associated with abjection is the result of impressions upon that boundary by the abject (perhaps the proximity of a corpse, or the smell of spoiled milk) which result in an expulsion (vomiting) or a movement away from this abject (fleeing).

It appears, then, that we may have come full circle. Let us review the ground we have covered and its relation to disability. This section began with the suggestion that

abjection may be a model for disability because both are associated with death and the transgression of boundaries. If abjection constitutes a natural response, then it appears as if there is no hope for the interaction of disabled persons within our communities as Kristeva calls for. But the figures of abjection are in fact culturally contingent. Redrawing the boundaries of communities (or the human community as it is understood in the West) could result in a shift in the figures of abjection such that disabled persons would no longer be perceived as transgressing boundaries because all would be united by vulnerability, for example, rather than imagined autonomy.[35] The obstacle to this societal re-conception, however, is the narcissistic threat experienced by individuals who understand or imagine themselves to be whole, independent, or autonomous. If individuals cannot confront their own inherent vulnerabilities, it is unclear how the social link itself could be thought in terms of vulnerability. This prompted a discussion of Kristeva's use of the uncanny in *Strangers to Ourselves*. Here, we saw that the uncanny experience of the encounter with the foreigner manifests itself as a "fascinated rejection," because the foreigner reminds the citizen of her foreignness to herself, that is, her heterogeneous constitution as a being with an unconscious, a fragilely bounded being composed through interaction with others. The immediate response to this is to reject the other in an attempt to shore up the narcissistic image of oneself as unified and autonomous. But Kristeva calls upon her readers to respond in a different way, to sit with the uncanny experience, recognizing ourselves as strangers to ourselves and thus no more foreign than the foreigner who brought about the uncanny feeling in the first place. In this way, not only will we be better able to live with foreigners, but we will free them from

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[35] It is important to remember, however, that as a developmental necessity, on Kristeva's view there will always be figures of abjection.

the ossifying projections to which they are often subject such that each foreigner can be recognized for her dynamic singularity because we will no longer reject foreigners but instead be better able to interact with them. Also, we will free *ourselves* from the petrifying self-conceptions which freeze us in place and hinder our own self-understanding and dynamic potential.

Before seeking to apply these lessons to the case of disability, however, we took a detour through two criticisms of Kristeva's use of the uncanny. First, we were led to ask, by way of Beardsworth, if Kristeva's insistence that we are all foreigners reconciles alterity within the same, and thus neglects the singularity of each subject. I argued, however, that the similarity of our foreignness, for Kristeva, is a formal one. Thus, in recognizing oneself and the other as foreigners, we are acknowledging ourselves as necessarily socially constituted (and thus permeable) and as beings bearing an unconscious. This does not tell us anything about any one subject's unconscious contents or formative social interactions. Indeed, for Kristeva it is only when we recognize the foreignness of ourselves and others that we can cease rejecting foreign others and acknowledge the singularity of each subject. This led to the second question: If we are all foreigners, why are some perceived as more foreign than others. This is because of personal and community boundaries formed by the (e)motion of some subjects with regard to others. In other words, some others form an abject boundary of oneself or one's community, while we form attachments (or identifications) with other others. This circuitous path has led to what I believe is the solution to Kristeva's problem: a double-motion of working through the experience of the uncanny on the one hand, while "moving toward" (becoming attached to, identifying with) those who constitute a

person's or community's abject boundary in order to refigure abjection on the other. Neither one of these can work alone. Working through the uncanny experience of destructuration brought upon by the foreigner can allow us to come to terms with ourselves and to acknowledge the singularity of the foreigner, but this acknowledgment can only be accomplished if we form attachments or identifications with that other such that we no longer experience that other as abject. Conversely, we can refigure the boundary of our community by moving toward abject others, but this will only be possible once we learn to sit with and work through the uncanny feeling such movements bring about. What, then, are the lessons of this discussion for the case of disability?

Recall that Kristeva urges her readers to rethink the social link in terms of vulnerability, to reconceive of humans as vulnerable, dependent beings rather than independent, autonomous, or productive. The obstacle, however, is the threat to individuals' narcissistic identities presented by disabled others. Insofar as the identities of nondisabled persons are based on invulnerability, they will be unable to rethink the social link and the human community in terms of vulnerability. And insofar as the nondisabled reject and exclude disabled others because of this narcissistic threat, they will lack the impetus to conceive of themselves as inherently vulnerable. Here we see a parallel with the circularity of Kristeva's problem of the foreigner. The nondisabled conceive themselves as such by excluding the disabled community, and this conception can be challenged only by recognizing their own vulnerability, specifically through interactions with disabled persons. Thus, to truly interact with disabled others will require a similar double movement. First, nondisabled persons must encounter disabled persons and work

through[36] the resulting narcissistic threat to acknowledge themselves as vulnerable. Because one's narcissistic self-image is always emotionally invested and because we are constituted by an unconscious, identifications, and relations to others, this working-through (like all processes of working-through) must be more than a conscious reflection or recognition. It will be a piecemeal work of thinking (especially with others), of sitting with emotions (and feeling and responding to emotions with others), of dissolving old identifications and forming new ones, of coping with the shock of that which has been repressed and integrating it, if possible, into their conscious lives. Importantly, this process by which the nondisabled may transform their "fear of castration, narcissistic injury, defect, and death" into "attention, patience, and solidarity" will contribute not only to allowing true interactions with disabled persons, but will also result in a greater understanding of themselves as inherently vulnerable (Kristeva 2012, 44). This is to work through disability as a figure of the uncanny, that is, as a return of one's repressed vulnerabilities. Second, the nondisabled must stop excluding disabled persons, move toward them (in the full sense adopted from Ahmed above), and thus refigure the boundaries of the community. This is to engage and transform disability as a figure of abjection, in other words, as that which challenges the boundaries of the "nondisabled" community. The former will only be possible through an exposure to disabled persons

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[36] The fact that working-through is necessary for interaction with disabled others is most clearly stated in "A Tragedy and a Dream," where Kristeva states that love, or "continuously clarified transfer," is necessary for "the singular [to] clarify, be recognized, and develop in sharing its own singularity" (2013, 228). Recall that working-through has two moments for Freud, transference and interpretation. Thus, love, as continuously clarified (i.e., continuously reinterpreted) transference, does the work of working-through. Solidarity, on the other hand, is important for working toward the rights of disabled persons, but this fails to acknowledge the singularity of each disabled person and thus tends toward integration. Only working-through allows the singularity of each disabled subject to express itself and be heard; in other words, only working-through allows for interaction.

brought about by the latter, and the latter will be possible only insofar as nondisabled individuals perform the work of the former. Thus, it is only through a vacillation between these two movements that Kristeva's dream can be accomplished.

Kristeva's Rhetoric of Disability

Jan Grue's helpful paper, "Rhetorics of Difference: Julia Kristeva and Disability" analyzes Kristeva's discussion of disability in "Liberty, Equality, Fraternity and…Vulnerability." He provides important criticisms of Kristeva which must be taken seriously to avoid a potential reification of disability. In discussing Grue's insights, moreover, we may be able to refine the aspects of Kristeva's work that I am adopting, here. The first of Grue's criticisms with which I will engage involves the use of disability in Kristeva's thought. Recall that Kristeva calls on her audience to interact with disabled others, and in doing so to transform our narcissistic fears into "attention, patience, and solidarity" (2012, 44). That is, in their interactions with disabled persons, nondisabled persons will themselves be changed for the better by reconciling themselves to their own vulnerabilities. Grue's concern, then, is that for Kristeva the "main purpose" of disabled persons "is to induce therapeutic change in others" (2012, 53). Furthermore, he worries that beyond interpersonal interactions, Kristeva simply uses disability as an exemplary figure to argue for the utopian vision of a social link based on vulnerability. As he writes, "It is only because disability and vulnerability are already closely identified that disability enters into Kristeva's argument, and this connection is used to warrant the general point about how we organize society, not in order to explore the topic of disability itself" (2012, 54). One can see why Grue draws this conclusion. After all, Kristeva herself writes "I am convinced that humanism […] can find a chance to *revitalize itself* in the

battle for the dignity of the disabled by constructing what is still sorely lacking: respect for a vulnerability that cannot be shared" (2012, 30 my emphasis). I believe, however, that this is an ungenerous reading of Kristeva's position.

First, it is the case that Kristeva believes that true interaction with disabled subjects will lead to personal growth for the nondisabled. This does not mean, however, that this is Kristeva's *reason* for urging nondisabled persons to engage with disabled persons. We see this, for example, in her insistence that "the *training* of those capable of interaction with the disabled must be improved: from pyschiatrists to instructors, […] all should feel valued and able to provide optimal care" (2012, 38, original emphasis). Note that the reason that these professionals should learn to interact with disabled persons as subjects is in order to give the best possible care to their disabled clients. Second, it is the case that Kristeva hopes for a new humanism which understands the social link to be based on vulnerability, and that she envisions an engagement with disability as the avenue to this humanism, but it does not follow that Kristeva would be unconcerned with disability if it were not connected with this utopian vision. Rather, Kristeva is largely driven by her passion to reform the treatment of disabled subjects in France and to protect them from the consumerist integration of the United States. She writes, for example, "I envisioned the need to start a true 'cultural revolution' to change the way the disabled are viewed—based on real interaction between the able and the disabled—*to allow for* political interventions that would finally be effective" (2012, 39 my emphasis). Here it is the revolution in humanism that is presented as a means to the end of true interaction between the disabled and the nondisabled to the benefit of both groups. Furthermore, other cultural theorists have developed theories of vulnerability starting from other social

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phenomena. Judith Butler, for example, takes war as one starting point to a theorization of vulnerability (Butler 2010). On the other hand, Adriana Cavarero, largely inspired by Hannah Arendt, discusses the vulnerability of subjects based on their reliance on narration (Cavarero 2000).[37] Clearly, then, there are other aspects of social life that could serve as media for infusing humanism with a discussion of vulnerability. Kristeva, however, has a sincere interest in social and political changes that would allow disabled persons to interact as subjects with nondisabled persons and to be freed from the isolation to which French society relegates them. This is why it is a privileged site for entering a discussion of vulnerability for Kristeva.

A more troubling criticism Grue presents is the claim that Kristeva's rhetoric of "we" and "they," the disabled and the nondisabled, reifies rather than contests our understanding of disability (2012, 53). This is a criticism potentially available in any discussion of identity politics, and one way Kristeva could reply would be to say that the terms "disabled" and "nondisabled" are political expedients—the categories themselves may be fluid, but it is helpful to talk in this way in the contemporary environment, first, to facilitate solidarity between the particular individuals labelled as disabled, or second, to point out to those who are not considered disabled that there is an aspect of the social world that they are radically unfamiliar with and in part responsible for. But Grue takes issue with some more specific elements of the dichotomy Kristeva accepts. First, the audience is assumed to be composed entirely of nondisabled persons who live in a separate world from disabled persons. The problem is that disability is "a fundamentally *situational* phenomenon" (2012, 49). As Siebers discusses, for example, the United States

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[37] Cavarero also takes up war and terrorism in her more recent *Horrorism: Naming Contemporary Violence* (2011).

Supreme Court decided that the need for glasses is not a disability, revealing the *legal* contingency of the category (2008, 69). Michel Foucault traces an interesting history of what came to be known as mental retardation in his *Psychiatric Power* lectures, noting the changes in *scientific* understanding and *institutional* arrangements that formed the conditions for the emergence of mental retardation (2007, 201-223). Brendan Gleeson's *Geographies of Disability* demonstrates the *structural* and *economic* differences that the shift from feudal society to capitalist industrial society made for persons with impairments (1999). Thus, when Kristeva speaks of the "world of disability cut off from the world" (2012, 32), the former must be understood as a contingent world, and the nondisabled to whom she speaks must be thought of as nondisabled in their particular circumstances. But this seems to be precisely Kristeva's goal. She hopes for "[n]ew worlds […] open to our listening, […] neither normal nor disabled, […] worlds finally returning to their plurality" (2012, 45).

And yet, another worry remains that Kristeva may misrepresent the varied experiences of disabled persons in her discussions of the pain caused by disability, the silence imposed upon disabled persons, and the failure of the nondisabled to share their lives with disabled persons. For Grue, this is problematic because "the more disability is represented as a uniquely horrifying predicament, the more improbable social change appears" (2012, 50). This is in part because it does not offer a realistic representation of the concrete circumstances of disabled persons' lives. Disabled persons live in varying settings, such that their disabilities may actually be the source of a sense of community rather than exclusion; their disabilities may not be a source of pain (or be only intermittently so); and they may have others in their lives, disabled or nondisabled, who

do listen to them. Moreover, Kristeva's emphasis on the suffering of disabled persons makes their lives all the more unimaginable to the nondisabled audience. In other words, not only does Kristeva exaggerate the suffering of many disabled persons, but in doing so she also creates a greater rhetorical distance between her nondisabled audience and the disabled persons she calls on them to interact with.[38]

While Kristeva's broader theoretical statements may lead one to these conclusions, I think there is evidence of a more nuanced position in Kristeva's essay, especially her examples. Claire, for instance, is the mother of a daughter diagnosed with autism named Marie. She struggled greatly with her daughter's care but finally sought therapy for herself, and in the end she reports that "Marie and I were no longer two people with a single body. And Marie found a job; she makes photocopies at a law office where everyone respects her as she is. She even has a boyfriend now" (Kristeva 2012, 32). This reveals Kristeva's recognition that disability, even in contemporary French society, need not result in an isolating, silent, painful experience.[39] Indeed her concern for

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[38] Indeed, in Kristeva's later piece, "A Tragedy and a Dream: Disability Revisited," she ends up carrying this aspect of her thought to a greater extreme. She writes, "The so-called solitude of the disabled person has inevitably an absolute companion […]: the pain of mortality. Even if this person is not sick, even if they do not feel specific pains, their disabilities remind them permanently—them or at least those around them if the deficit deprives them of this consciousness—that they are not like others, who are able not *to will* to know that they are mortal" (2013, 225). I have met many disabled persons, however, who have expressed no preoccupation with death, who do not appear to be permanently reminded of their own mortality by their disabilities. I think that the greater truth in this passage, and one that I will develop below, is found in the parenthetical remark where she notes that the nondisabled persons who are close to disabled persons are permanently reminded of their own mortality. In other words, it is my position that Kristeva, in passages like these, projects onto disabled persons the suffering of nondisabled persons who encounter them.

[39] To be sure, Kristeva is well aware of the obstacles to this type of life. She writes immediately after the previously quoted sentence: "I knew, as Claire did, that nothing had really been resolved, and yet I shared her joy, wondering: will it always take psychoanalysis and the help of a kindly attorney to 'deinsulate' disability?" (2012, 33). The types of lives Grue thinks

Claire, here, suggests that the vulnerability of disabled lives *can* be shared, at least by those who care for disabled persons. Claire, too, needs to be freed from isolation. Kristeva is also concerned to resolve the guilt that caretakers feel as a result of being powerless to help make those they care for healthy (2012, 33). Thus, in her examples, Kristeva does present a more nuanced view of disability. As for the rhetorical effect of Kristeva's writing, Grue's assessment may be correct—that is, her discussion of the difficulties of living a disabled life in contemporary Western society may drive nondisabled people away from coalitions with disabled persons rather than towards them. If this is the case, however, it is a rhetorical fault and not a philosophical one. Indeed, while it would certainly be best to give an accurate portrayal of the lives of disabled persons, it may be preferable to exaggerate the difficulty of the obstacles presented by disability rather than to underestimate them.

A Kristevan Account of Disability Exclusion

Thus, Kristeva's discussion of disability does appear to be more nuanced than Grue claims. Still, there *is* textual evidence for Grue's position. I believe that this is a result of Kristeva's own ambiguity. She says that the vulnerability of the disabled person "cannot be shared," and then states that her aim is to show that "it can be *shared*" (2012, 30).[40] This contradiction appears to be resolved when Kristeva writes: "To share: to take part in a distinctiveness beyond the separation imposed on us by our fates; to participate, without erasing the fact that each is 'apart' and recognizing the part that cannot be shared,

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Kristeva neglects are possible, but this does not mean that they are without obstacle, especially in contemporary France.

[40] This is not simply a translation problem, either. In the first instance the French is "impartageable" and in the second the translated term is "partageable" (Kristeva 2005, 95-6).

that is irremediable" (2012, 43). Here, what is shared in Kristeva's sense cannot strictly be shared because of the singularity of each subject. A person with 20/20 vision cannot *share* the experiences of a blind person, and yet she can be open to the blind person *sharing* her experiences. The irremediable, here, would then be the singularity of each individual. But at the end of the essay, Kristeva introduces a problem for this interpretation: "If every speaking being is constructed around a central deficiency, disability inflicts a very different trial: the disabled subject is confronted with the *irremediable*, lacks or insufficiencies that evolve within certain limits, when they don't stagnate or worsen" (2012, 44). Thus, the irremediable, she seems to be claiming, uniquely characterizes disability. And yet, the very next sentence states that "the analysand who has not confronted the irremediable in himself has not completed his journey to the end of the night" (2012, 44). This dizzying movement appears to be the result of a desire to resist reducing disability to vulnerability, which would risk underestimating the challenges faced by disabled persons, while at the same time upholding the utopian vision of shared vulnerability.

From this tangled web, I would like to suggest what I believe to be the most generous reading of Kristeva's thought, one that takes into account various insights of disability theory but which provides a helpful supplement to theorizing disability. Returning to Kristeva's goal may help us achieve this reconciliation. Kristeva encourages the nondisabled to recognize that they are all essentially vulnerable, that psychoanalysis can reveal that vulnerability, and that an analysand has not truly confronted the depths of her psyche unless she has discovered the irremediable within her. At the same time, Kristeva warns against reducing disability to vulnerability (in the sense that we are all

vulnerable), *precisely because the experience of disability is irremediable*. How can these two statements be reconciled? It is not simply that the limitation of the disabled subject is irremediable, but that this irremediable limitation results in a unique "*exclusion that is not like others,*" because of the narcissistic wound it inflicts upon those without the same limitation (2012, 44). It is not *just* the suffering of the limitation, but the suffering of the exclusion caused by this limitation which sets disability apart from other forms of incurable vulnerability. In other words, disability differs from other narcissistic threats (e.g., the figures of the uncanny) in revealing the subject's vulnerability; and it differs from other forms of vulnerability in that it results in profound social exclusions based on the narcissistic wounds they inflict. This means, first, that persons with different disabilities may be narcissistically wounded by and therefore exclude others. A person with a physical disability may reject a person with an intellectual disability, for example, especially if the physically disabled person's intellectual prowess is central to her self-image. This explanation, then, is helpful in reminding us of the variability and contingency of what counts as a disability. Thus, Kristeva can talk about disability in broad terms like "vulnerability," but still acknowledge the particularity of each disability and the singularity of each disabled subject. Secondly, this means that *who* is disabled is contingent upon the narcissistic denial of various vulnerabilities by others. Thus, this reading of Kristeva is amenable to those positions that hold disability to be radically situational. In a group of friends, colleagues, or family members who lack or have worked through their narcissistic fears of vulnerability, a person understood to be disabled in other settings may not in fact be disabled.[41] A mass acceptance of certain

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[41] This needs to be distinguished, of course, from the specious claims nondisabled people sometimes make, like "I don't see *you* as disabled" which deny disability as a part of one's

human limitations, if incorporated into individuals' psyches, would completely alter who is disabled. To be sure, this cannot serve as a stand-alone definition of disability. Structures like stairs or the absence of audible signals at crosswalks, scientific and institutional standards like certain school curricula and exams, and so on are also disabling. But it is also the case that these disabling social structures may be, in part, addressed by Kristeva's theory of the exclusion of disabled subjects. If, for example, individuals in a community who are regularly capable of walking worked through their narcissistic defenses and interacted with wheelchair users, this would likely facilitate structural changes in the community, like making spaces more accessible to those in wheelchairs. Thus, meliorating disabling exclusions requires the oscillating movement described above between working through narcissistic defenses at the interpersonal level and greater social interaction (moving toward, creating spaces and systems that allow for this moving toward, and thus refiguring boundary of the community created and maintained by abjection).

Conclusion

In this chapter, I aimed to develop a Kristevan account of disability as a contribution to the field of disability studies and to Kristeva scholarship. First, following upon the limits of the epistemic analysis of disability oppression in the previous chapter, I argued that Kristeva's theory of signification, as the interaction between the semiotic and symbolic, provides a form of listening that is responsive to all persons' making and sharing of meaning, even those with severe mental disabilities. I named the prejudicial neglect to be attentive in this way intimate hermeneutical injustice. Second, reading her

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identity and reinforce the difference between "normal" persons ("you") and disabled persons. Rod Michalko (2002, 11-2) gives a helpful discussion of such an example.

recent essays on disability through her previous work on abjection and the uncanny, I

offered an interpretation of Kristeva as providing a unique account of disability and a

promising proposed response to disabled persons' current social exclusion. Specifically,

this account is helpful in revealing the psychic roots of the types of epistemic injustice

discussed throughout the dissertation so far. In the following chapter, I return to Kristeva,

this time her writings on genius, to develop an account of extraordinary disabled subjects.

Subjectivity: Kristeva and (Disabled) Genius

The previous chapters sought to reveal the epistemic aspects of disability

oppression, and then looking to Kristeva, to understand the psychic source of the

exclusion of disabled persons and develop a response to this exclusion through a listening

attentive to disabled persons' meanings and a double movement that constitutes what I

have called, following Kristeva, "interaction." In this chapter I return to Kristeva, this

time to understand the potential for disabled subjects to develop a specific form of

subjectivity Kristeva calls "genius." Because the genius is extraordinary even while she is

common, disabled genius has the potential to challenge notions of disabled persons as

limited or lacking. To better understand what Kristeva means by "genius," I will first

look at her Oedipal account of psychosexual development as it relates to her argument for

the existence of a uniquely feminine genius. Specifically I will consider Kristeva's

arguments in *The Sense and Non-Sense of Revolt*, where she discusses and revises the

Freudian view of psychosexual development in order to argue for a unique aspect of

feminine experience, the illusoriness of the phallus. Then I will turn to her conclusion to

the *Feminine Genius Trilogy* where she takes up this developmental picture again, this

time to support her view that there is a uniquely feminine genius. After reviewing these

two texts, I will argue that Kristeva's position on feminine genius does not require her

Oedipal account of psychosexual development, and indeed that this account provides a

hurdle to developing other forms of genius among marginalized groups. Instead, I suggest

that we conceptualize feminine genius as a form of marginalized intimate revolt, as she

develops "revolt" in *The Sense and Non-Sense of Revolt* and especially *Intimate Revolt*.

Developing this understanding of feminine genius may seem like a digression from the

thread of this dissertation, but it is important, I believe, to determine whether or not an account can be given without inheriting the heteronormative and otherwise oppressive foundation of the Oedipal account. Having established the second interpretation of genius as a form of intimate revolt, I then argue for a uniquely disabled genius through the lives and works of Susan Wendell, a feminist philosopher, and Sesha Kittay, Eva Kittay's daughter.

<div align="center">Whence Feminine Genius?</div>

The final chapter of the *Female Genius Trilogy*, "Is There a Feminine Genius?" develops Kristeva's account of feminine genius via her work on psychosexual development which will be discussed below. Before this connection can be made, however, it will be necessary to gain an understanding of what Kristeva means by "genius" in general. Kristeva begins her trilogy with a brief history of the concept of "genius," which, as she later writes, is "the most fertile version of singularity at a given historical moment" (Kristeva 2004, 404). Uncovering the singularity of each subject is one of the main concerns that runs throughout Kristeva's corpus. Specifically, she rejects feminisms that cannot acknowledge the singular differences between each woman, and more recently, she has insisted upon the singularity of all disabled subjects. She takes her inspiration to be Duns Scotus' notion of *haecceity*, or "thisness." Reality is to be found not in universals, for Scotus, "but in 'a this one,' *this man here*, *this woman there*; […] the demonstrative indexing an unnamable singularity" (Kristeva 2013, 224). Scotus sought to explain both the priority of the individual to the universal, and how these individuals can still be thought of or conceived in terms of universals.[1] Thus, we can see

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[1] A helpful discussion of Scotus can be found in Mary Beth Ingham's and Mechthild Dreyer's *The Philosophical Vision of John Duns Scotus*, especially in section 4.5, "The Principle

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why Kristeva is interested in Scotus, for she too seeks to reveal the singularity of each subject beneath the categories through which we understand them (man, woman, disability, and so on). Her solution is that there are structural similarities shared by all subjects, and yet there are specific histories, or particular developmental paths followed by each individual. As Kristeva writes, "psychic bisexuality [is] characteristic of both sexes, with dominant traits differing from one sexual identity to another and from one individual to another," such that "every sexual identity specific to a given subject is, as a result, constructed as a variation on a dominant trait" (Kristeva 2004, 426).

To be clear, what Kristeva has in mind here when she speaks of sexual identity is not *just* the sex to which one is attracted or the sex with which one identifies. Instead we should hear, here, her consistent refrain that thought and sexuality, meaning and desire, are co-present. In other words, each individual has navigated through relationships, first with the care-giver and then gradually with others, based on abjections,[2] identifications, projections, idealizations,[3] and so on, through which one is formed. And yet, each subject is composed of a conscious and an unconscious and articulates its (maternal) semiotic through the (phallic) symbolic. Thus, our individuating, but never solitary, histories are capable of being shared because of the shared structuring of all subjects in relation to the symbolic and semiotic. As in the case of foreigners discussed in the previous chapter, the

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of Individuation." There they explain that for Scotus, what makes something an individual is not form or matter or even their composite, but where an entity's "matter is *this*, the form is *this*, and the composite is *this*" (Ingham and Dreyer 2004, 116).

[2] For a discussion of abjection, see the previous chapter.

[3] In identification, the subject takes on an attribute of the other with whom she identifies and is thus transformed. Idealization occurs when the subject inflates the value of her object. In projection, a quality or an affect of the subject is displaced onto an object such that it is expelled from the subject. For detailed discussions of these psychic processes, see Laplanche and Pontalis (1973).

shared structure of each subject is what makes the singularity of each subject communicable.

Given this understanding of singularity, what is genius, for Kristeva? First, genius "pushes [sexual] variation to the limit, to the point of a maximum singularity, which can nevertheless still be shared" (Kristeva 2004, 426). That is, within psychic bisexuality, the genius creates such a unique identity that normal variations are challenged. Indeed, one thing that Kristeva notes about the feminine geniuses she studies, Hannah Arendt, Melanie Klein, and Colette,[4] is that each assumes in her own way a certain phallic assertiveness that is used to formulate and communicate "essential elements of the female experience that correspond to their psychosexual difference" (425). They assume a phallic position without seeking to become masculine.[5]

Second, a genius is one whose work is connected to her life to such an extent that one cannot be discussed without the other (Kristeva 2001, xi). This means that the effects of a genius's works depend upon our response. The work must create an excess which invites our response, but it remains up to us to discuss the person's biography, or rather, to give the person a biography in terms of her work. This biography, by its very nature will be deflationary; that is, it cannot capture the entirety of the life or the profundity of its excess. Yet we feel compelled to write or tell these stories anyway. And in so doing, we realize that "they are geniuses for us," that is, they are not extraordinary in some

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[4] Hannah Arendt was a political thinker, whose notion of the "who" and whose political and narrative theories have profound influences upon Kristeva. Melanie Klein was a psychoanalyst whose innovations in child psychotherapy were influential, especially upon object relations theory. Colette was a writer, most well-known for novels like *Gigi* and *Chéri*.

[5] As we will see below, the woman's rejection of her psychic bisexuality in seeking to become masculine is one of the fears Kristeva mentions for those women who overly invest the phallic symbolic.

questionable objective sense, but in relation to their biographers (xii). Moreover, they make us realize we too are potential geniuses, as we too have stories to be told and are capable of making creations to wonder at.[6,7]

We may then ask, with Kristeva, "And what role do women play in all this?" (Kristeva 2001, xii). In other words, why think there is a *feminine* genius? Kristeva claims to find three "resonance[s]" [*résonance*] (Kristeva 2001, xx) between the three women she discusses in the *Trilogy*. The first trait is a singularity founded in relationships. Arendt's "who" is revealed only in a web of relationships, Klein's ego always has an object, and in Colette's writing, the ego is fulfilled in the plurality of its relationships.[8] The feminine genius, then, is reconciled with, and does not seek to deny, the constitutive nature of relationships with others for her own existence, but nor does she deny the singularity of the individual subject who is allowed to flourish precisely because of and through her relations with others.

Second, for feminine geniuses thought is immanent to life. Thus, Arendt is adamant that life as *bios*, as a life with meaning, a life that is given sense, must be elevated above bare *zoe*, or biological life. It is only thought in its myriad manifestations, not simply thought as calculation, that can save us from totalitarianism on her view.

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[6] I take this passage as evidence of this claim: "Like the ancient Greek heroes, my geniuses displayed qualities that, while no doubt exceptional, can be found in most of us. […] What distinguishes these geniuses from us is simply that they have left us to judge a body of work rooted in the biography of their experience" (Kristeva 2001, x).

[7] Another way of stating this would be to say that geniuses are not *exemplars* but *examples*. I thank Marygrace Hemme for pointing me to this distinction.

[8] I phrase this ambiguously because Kristeva finds these traits in the works *and* lives of these three geniuses. This reveals the connection between the genius's life and works. So, for example, Arendt's *own* "who" is revealed in a web of relationships, as Kristeva endeavors to show throughout the *Arendt* volume, *and* Arendt's theoretical claim about the "who" is that it emerges only in a web of relationships.

Similarly, Kristeva reads Klein to be concerned with the emergence and fostering of the capacity of thought. Her researches aimed at avoiding or curing infantile psychosis were meant not to normalize, but to defend thought and the conditions that make it possible. Colette, on Kristeva's reading, creates and recreates lives through her writing which makes "thought become flesh" (Kristeva 2004, 422). Thinking is not an abstract activity, for Colette, but that which engenders new forms of sensuous writing, creating new lives. For each of these geniuses, then, life is the life of the mind, and thought is living-thought.

Finally, the feminine genius emphasizes cyclical temporality, re-creation, or rebirth. Arendt finds in natality the source of freedom, as each birth is a "new beginning," the creation of a new world (Kristeva 2004, 423). Klein was herself reborn, Kristeva tells us, as a result of her own analysis which led her to become an analyst. Moreover, in her work with children, Klein emphasized the importance of the analyst entering the world of the child (later understood as using counter-transference); in other words, she endeavored to become a child again. This led to later developments of psychoanalytic theory in which analysis is understood as perpetual rebirth, of new beginnings (424). And Colette sees in writing an opportunity for re-creation and rebirth.

Finding these traits to be common to three women, however, is hardly sufficient to deem them aspects of a uniquely feminine genius. To fully answer our initial question, then, we need an account of why we should think of them as feminine traits. I believe there are two possible answers to this question in Kristeva's work, answers which may be connected on her own view, but which I think can be beneficially separated. First, Kristeva provides an Oedipal account of the traits of feminine genius. Second, Kristeva often discusses the margin as a privileged site of what she calls (intimate) revolt. Below, I

will discuss both accounts, and argue that the latter is preferable. Indeed, her emphasis on the former, I will contend, limits Kristeva from developing other forms of marginalized genius.

<p style="text-align:center">Oedipus² and the Illusory Phallus[9]</p>

In order to approach Kristeva's thought with clarity, I first give an exegesis of her Oedipal account of psychosexual development, and then turn to my critical remarks in the following section. Kristeva's theory of psychosexual development builds upon Freud's own account, and thus takes up several important aspects of Freudian theory. First, Kristeva accepts that phallic monism characterizes infantile sexuality. (It is important for her that this characterizes only infantile sexuality, and that the ideal is a move toward adult sexuality which acknowledges both sexes.) The penis is primary in infantile sexuality because it is visible, and because it is eroticized (that is, it undergoes erections, feels pleasure, and so on). Unlike the vagina and clitoris, then, it becomes a signifier of presence and absence. The child with a penis can imagine it being removed, and can see its absence in the female's genitals. The child without a penis sees and experiences its lack in her own anatomy, and its presence in the boy's. It is this (real and/or imaginary) lack which positions the penis to become the symbolic phallus, as it comes to signify lack, and thus "all that signifies" (Kristeva 2000, 73). The penis's visible presence and absence sets up symbolic difference, that between marked and unmarked, present and absent, which "founds all systems of meaning" (97). As a result of the primacy of the penis, infantile sexuality in all children is characterized by "phallic monism," the

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[9] Throughout this chapter, Oedipus ², read "Oedipus double-prime," refers to a developmental stage theorized by Kristeva. The superscript "2" should not be confused with a footnote.

fantasy[10] that all other persons have penises and that lacking a penis is a form of punishment (especially by the father). Though phallic monism characterizes only infantile genital organization, Kristeva says, it is repressed and comes to characterize the unconscious, such that "the unconscious is phallic" or what is the same thing for her, "there is no unconscious psychical genitality" (98).[11] This phase of phallic monism is required for any child, male or female, to become a subject of the symbolic.

Kristeva moves on to present an innovation in the Oedipal narrative, however, one that is especially important in the case of females. There are two differences between Oedipus for boys and girls for Kristeva. First, because entrance into the symbolic is provided by the centrality of the phallus as the central organizer of meaning, this encounter between the sensory and the symbolic, between desire and meaning, an encounter which Kristeva calls the *kairos*,[12] is experienced differently by boys and girls. For male children, their sensations of sexual excitation correspond with this entrance into the (phallic) symbolic. Moreover, the male child tends to be the object of its parents' (especially its father's) narcissistic overinvestment. For female children, sensations of sexual excitation fail to correspond with this entrance into the symbolic, and they are often not the object of their parents' narcissistic investment (at least not to the same

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[10] It is important for Kristeva that this is a fantasy and not a *thought* (Kristeva 2000, 73).

[11] This equivalence is a point to which I will return in the next section.

[12] In a footnote about her choice of this term, Kristeva notes that *kairos* had a variety of meanings in (pre-modern) Greek: "the point that touches the end, suitability, appropriateness, the dangerous and critical point, the advantage, the right moment." She continues, "We can see the etymology in 'to encounter' or 'to cut.' To encounter oneself is also to cut oneself, with the reunification and possible loss that this supposes" (Kristeva 2000, 97n4). The word thus refers to the dangerous, critical, yet appropriate encounter between the symbolic and the drives, between meaning and desire. This encounter is also a cutting, a splitting into conscious and unconscious, into desiring and speaking, a cut which remains and indeed makes possible an encounter.

degree). Yet, Kristeva acknowledges that this is open to radical variation; girls, for example, can be valorized by their fathers as much as sons may be, or even more so. Indeed, Kristeva writes that a girl can both be more valorized and experience greater genital excitations than a boy. However, she maintains that the structure of the *kairos* is fundamentally different in girls and boys. This is because the source of her pleasure is not visible, and thus cannot replace the penis/phallus as the "privileged signifier" (Kristeva 2000, 99). Thus, while the girl can enter the symbolic in the phallic phase, it is experienced as *illusory*. In other words, the phallic symbolic is entered into by the girl because it is *indispensable* for her; she could not become a subject (of language or law) without doing so. And yet it is entered as a game, as pretend, as illusory. While the boy can experience "I am what is"—that is, I *am* a subject as a possessor of the phallus—the girl's experience is of the form "I am, nevertheless, because of *not*"—that is, I *am* a subject because of the phallus which I do *not* possess (100). Importantly, Kristeva says that the female believes that the phallic is illusory, but what she means by this is not a reflective belief, rather she means "conscious and unconscious *adherence*, without proof, to an obvious fact" (100, emphasis added). In other words, the female enters into the phallic symbolic and thus experiences signification as dissociated from her sensory experiences, as contingent, not real or necessary as the male experiences it.

This experience of the phallic as illusory or extraneous has a variety of potential results. First, it may lead the female to exist in the social world with "aloof efficiency," such that the subject navigates the symbolic without taking it too seriously (Kristeva 2000, 102). Second, it may lead the female to renounce the phallic symbolic in favor of the semiotic, an "unnamable sensoriality" in which she becomes "sullen, silent, [or]

suicidal," isolated from symbolic articulation and sharing (102). Third, the female may invest the extraneous phallic to become a "seductress," one who *knowingly* plays on the symbolic (102). Fourth, the female may on the contrary deny the illusory nature of the phallus and instead identify with it, assuming as much as possible the man's position in the symbolic and thus becoming insensitive to or unaware of the phallus's illusoriness. Kristeva refers to this position as the "female paranoiac" and lists some archetypes: "the boss, director, or virile lesbian, partisans of power in all its more or less dictatorial forms" (102). Immediately after this list (which is hard to read as anything but derogatory), Kristeva insists that these are all potential psychical structurings, each of which offers its own benefits and disadvantages. While this indicates an attempt to move away from the normalizing, pathologizing tendencies of prior instantiations of psychoanalytic theory and practice, it does not go far enough and ends up, I fear, reifying forms of sexism that should instead be resisted. I will return to this point in the next section.

The second innovation Kristeva presents is referred to as Oedipus[2], the complex process by which the girl changes the object of her sexual desire from her mother to her father. The mother is originally the object for both the boy and the girl. Whereas the heterosexual boy, with the threat of castration from the father, needs only find another woman to replace his mother as his object, the heterosexual girl must make a double move: she must change objects, from the mother to the father, and only then find male replacements. To accomplish this, Kristeva argues, she first rejects the mother as the object of her desire, but this allows her to identify with the mother. In identifying with the mother, she is then able to identify with her desire, namely the desire for the father—or more specifically, Kristeva says, "the girl wants the father to give her his own

penis/phallus, in the form of children that the girl would have as if she were…the

mother" (2000, 103). This sets up an interminable Oedipus, in which the woman desires

the phallus, whether in the form of a masculine career or a child. Kristeva is especially

interested in the second possibility, the child, which for her is the "real presence of the

phallus" (103). The experience of maternity, then, reaffirms the bisexuality of the

woman, as the child is her real phallus, and yet, as a mother she is the *other* of man. And

thus, the experience of maternity is a conjunction of the woman's "symbolic essence" in

acquiring the child/phallus, and her "carnal essence," that is, her semiotic essence, that

which recovers her pre-symbolic relation to her own mother (104). Through maternity,

Kristeva writes, mothers are "guarantor[s] of both the social and the biological" (104).

This is because the mother guides the child into language (and in doing so reacquires

language herself and thus reconciles her relation to her own mother), and because she is

responsible for biological reproduction and providing the child sustenance (Kristeva

2012, 89-90). In other words, the mother's experience of having the phallus in the form

of the child and guiding the child into the symbolic is also an experience (a) of being

given the child by the father, though she must separate from the child for it to develop

such that the child is only ever partially and temporarily the mother's real phallus, and (b)

of guiding the child into language *through* semiotic echolalia, recalling her pre-symbolic

relationship to her own mother. This is why Kristeva refers to motherhood as bisexual.

Furthermore, it is why she refers to mothering as an interminable process of identifying

with one's own mother; in being given the child and guiding the child into language, she

identifies with her mother and must therefore renegotiate her relationship to her own

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mother. In echolalia, she hears not just her child's entrance into language, but also her own entrance into language via her mother's facilitation.

While Kristeva's account is clearly an attempt to recover the unique experience of females, especially those who become mothers, she also warns against possible weaknesses that may arise out of these experiences. Here, she groups the four positions discussed above into two groups based on the ways in which they renounce psychic bisexuality. "[H]ysterical depressivity" is characterized by the withdrawal from the phallic and retreat into the sensorial, while "hysterical indifference" is characterized by a veneration of the phallic and cutting of ties with the maternal, sensorial, and semiotic (Kristeva 2000, 105). What the renegotiation of Oedipus[2] through the experience of motherhood potentially allows is an embrace of psychic bisexuality that both accepts the phallic as real (in the presence of the child) and illusory (as the child is always separating from the mother), and recovers and revalues the semiotic, primary homosexual relationship with the mother. The danger here is that the mother will only experience the real presence of the phallus vicariously through the child, such that she is vulnerable to all that the child is vulnerable to and experiences attacks upon the child as threats to herself. Thus, Kristeva acknowledges that the ideal result of motherhood as a renegotiation of psychic bisexuality is an unlikely and precarious one, and yet, one that is "miraculously" at least partially achieved by most mothers (Kristeva 2012, 86).

Having reviewed Kristeva's account of female psychosexual development, we may now return to Kristeva's account of feminine genius. In her three feminine geniuses, Kristeva finds three resonances, qualities that they share and which thus characterize feminine genius, at least in part. She roots these qualities in the female experience of

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psychosexual development discussed above, this time with some modifications and shifted emphases. Here, she emphasizes the bisexuality of both girls and boys, as both are subject to the penetration of the mother (and father) in feeding orally, having their cavities cleaned, and so on. Thus, children of both sexes are originally passive (though even at this age infants act and react, defecating, vomiting, flailing and gesturing, cooing and crying). Kristeva calls this phase the "feminine position" (Kristeva 2004, 410). Still in Oedipus[1], however, girls begin a different path of development than boys, because while boys move toward penile excitation, girls are dominated by "orificial excitation," the pleasures of the mouth, vagina, and anus, and this hollow excitation makes room for the introjection of the mother (411).[13] But the girl does not *just* represent the mother within her in her fantasy, she also forms a projective identification with her, projecting her dependence onto the mother, and identifying with her mother's possession of the daughter (412). This exposes the girl to a greater dependency, a "real need for connection," and yet positions the girl to be able to achieve "real relationship[s]" to a greater degree than the boy, even though this structure is not completely absent in boys given their bisexuality (412-13).

Then, as discussed above, the girl enters the symbolic though believing it to be illusory. And in Oedipus[2] she rejects and identifies with the mother, taking the father as her object instead of her mother, and thus desires a child-phallus. If the dangers of this complicated maneuver are avoided and the girl embraces her bisexual nature (rather than denying the phallic or denying the feminine), the woman that she becomes may be develop a unique maturity, one that is capable of acknowledging the real presence of the

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[13] Introjection is the process by which one brings another within oneself in fantasy (Laplanche and Pontalis 1973, 229).

other. This is opposed to the overly phallic position of men who conceive of themselves as autonomous, independent, or as she says "macho," and the narcissistic position of men who conceive of others as existing for them, a position Kristeva refers to as the "impossible Mr. Baby" (Kristeva 2004, 418). The unique feminine maturity to which Kristeva refers is best exemplified in the experience of motherhood, where the mother, in the best case, views her child "not as a phallic or narcissistic prosthesis […] but as the real presence of the other" (418). In other words, she can sublimate her libido, and in so doing she can access "the cyclical time of generations, of new beginnings, of rebirths" (418). It is in experiencing others *as* others, not as new manifestations of the Oedipal drama, that one can recognize the wonder of natality, the potentials for starting anew, or revolt.[14] The woman who has achieved this, on Kristeva's view, has achieved a psychic depth called the feminine: a depth based on the subject's relationships with real others, resulting in the maturity and experience of cyclical temporality discussed above.[15]

These psychosexual developments, largely specific to females, are the source of three characteristics Kristeva associates with feminine genius. First, feminine genius

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[14] This is importantly different from the "time of desire" or the "time of death," for Kristeva (2004, 418). In a much earlier essay, "Women's Time," Kristeva argues that female subjectivity offers an experience of time as cyclical—the experience she is returning to in her discussion of feminine genius—and of time as eternal—a time she calls "faultless and impenetrable" (1995, 205). This is different from a teleological conception of time, one that involves a break and then, eventually, an arrival or end. Thus, desire is experienced as a rupture, beginning with a lack, and aims toward its fulfillment, even if this fulfillment is never achieved. This is why this is also the time of history and the time of death, as both are conceived in terms of a break (for example, the emergence of a new historical period, or the birth of a new subject) and in terms of a finality (for example, the end of that historical period, or death). Missing from this view are the circular movements of time (biological repetitions, the emergence of new generations, or rebirths within a single subject) and the eternal, unbroken conception of time.

[15] Femininity is distinct from the feminine, for Kristeva. The former is a phallic guise that covers the feminine, a mask of seduction, competition, and performance (Kristeva 2004, 418-9). One can see here the similarity to the phallic positions she develops in *The Sense and Non-Sense of Revolt* discussed above.

involves the "permanence of relationships and of the object" (Kristeva 2004, 424). This, as we saw above, is a particularly likely potential for females as a result of their relationships with their mothers and their navigation of Oedipus[2] which embeds them in real relationships, first with their mothers, then potentially with their children or others. As Kristeva writes, "A woman is less isolated in erotic pleasure and more dependent on the other" (420). Recall that the girl's eroticism takes the form of introjecting and identifying with the mother, redirecting her toward relationships rather than toward centralized, phallic pleasures as often happens to boys. This leads, on Kristeva's view, to a cultivation of singularity within relationships, rather than a view of relationships as limiting one's individual pleasures.

Second, feminine geniuses are concerned to "safeguard the life of thought, because thought is life" (Kristeva 2004, 424). This is particularly feminine on Kristeva's view because female psychosexuality does not isolate itself in abstract thought or calculation, but retains meaning rooted in the sensory, the somatic, the semiotic. As we saw in the discussion above, this is because of the prolonged relation to and identification with the mother, with whom the girl shares a semiotic connection that is recovered in her relationship with her own child. Thus, she is less prone to phallic abstraction in which thought is separated (or distanced) from lived experience.

Third, "the time of flowering and rebirth" is emphasized by feminine geniuses, rather than linear time. Again, on Kristeva's view, it is the working of Oedipus[2] that makes this time characteristic of the feminine. She writes of the female:

> She goes from the mother to the father [changing objects in Oedipus[2]], from the sensory to the signifiable [though this is also a move that male children must make given her developmental accounts explained in this and the previous chapter], from the cloacal and the vaginal to the phallic [again, children of both

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sexes move from an original passivity emphasizing orificial pleasure into the phallic monism that establishes language], from the internal object to the external object [I take this to mean from the introjected mother to real relationships, first with the mother and then with others], and back to that perpetual Oedipus, which never seems completed in the female subject, never closed, but that is appeased when love is stripped of its passion in motherhood, friendships, cosmic relationships. (Kristeva 2004, 424)

Of the movements she notes here, it is the perpetual Oedipus that seems to be of most importance, as the other characteristics also describe the development of male children, even if they differ in degree between the sexes. The perpetual Oedipus to which she refers is the experience of desiring the phallus (namely in the form of a child) and reconciling herself with her mother (namely through relearning language with her child). Appeasement, as she calls it, can occur on her view when the other is recognized *as* an other, rather than as a phallic replacement. Because children grow and become distinct, a child can only temporarily serve as a phallus for the mother, and thus her experience is bound to begin again. In other relationships too, women will experience the pull between the desire for the phallus, that is, a place in the symbolic, and a recovery of the pre-symbolic relationship with the mother.[16] This is what situates female psychosexuality in a unique position to emphasize cyclical time.

There is one final point on this topic that I should make clear. Kristeva insists that genius in any form, including feminine genius, requires a certain "phallic assertiveness," without which the singular subject could not create a life or work worthy of the title genius. The feminine genius, however, is not the same as the overly phallic woman described in *The Sense and Non-Sense of Revolt*, one who denies the feminine, the sensorial, in investing the phallic, the abstract, the symbolic. Rather, she reconciles

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[16] Kristeva only mentions friendship as an alternate possibility but does not give a parallel story.

phallic assertiveness with the feminine characteristics described above, embracing

psychic bisexuality rather than denying either of its poles and entering the symbolic

forcefully without disavowing the semiotic.

<center>Feminine Genius without Oedipal Psychosexuality</center>

Before discussing the alternative version of feminine genius I propose, I will

argue in this section that Kristeva's derivation of feminine genius from her account of

female psychosexuality reifies certain sexist and dangerously normative assumptions.

While Kristeva is quick to reject any interpretations of psychoanalysis as a normalizing

practice,[17] the Oedipal narrative she develops preserves first, the primacy of the penis as

the organizer of both the symbolic and the unconscious and second, the ideal of

heterosexual development for females. Let's consider these in order. Tina Chanter

provides a helpful analysis of the Freudian Oedipal story in her essay "The Exoticization

and Universalization of the Fetish, and the Naturalization of the Phallus: Abject

Objections." There she writes,

> Girls are assumed to be wanting, given the evidence of the absence of a penis—a
> lack, however, that is based on the disparity between what is seen and the
> *expectation* that they should have a penis. The normative force of such an
> expectation resides in an attachment to the following unstated assumption: the
> basic similarity of all humans, where humanity is defined by default according to
> male traits. (Chanter 2005, 154)

In other words, the phallic monism of the Freudian account, which Kristeva retains,

accepts the normative assumption that the archetype of humanity is the male, the human

with a penis. Indeed, it is revealing that she considers the assertion that "the unconscious

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[17] Indeed in *New Maladies of the Soul* she says, and we can sense her exasperation,
"Need I emphasize that in proposing that [allowing the drives to speak through language] be the
goal of analysis, I am in no way advocating the normalization of the patient?" (Kristeva 1995,
36).

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is phallic" and the assertion that "the unconscious has no genitality" to be equivalent. The phallic is the default on this view.[18]

Moreover, Kristeva accepts arguments which claim that the penis is suited, given its physical characteristics, to be the first symbol of both presence and absence, and thus the first signifier of a symbolic based on presence and absence.[19] She also finds that the phallus, given its erotic investment, is the foundation for the co-presence of sexuality and thought, desire and meaning.[20] Note, however, that all this account requires is (a) the co-presence of a symbol of presence and absence and (b) a site of erotic investment. Any number of experiences could provide this co-presence. A child feeding, for example, experiences an oral erotic investment and the presence and absence of that which provides pleasure (the breast, the bottle, food, the thumb, and so on). Or, retaining the privilege of the genitals, the clitoris, for a girl, could surely be threatened by detachment in fantasy, and it is a site of pleasure for the girl. Indeed, Kristeva even broaches this possibility only to reject it. She says that "individual variations in excitation or clitoral pleasure […] considerably influence the modulations of feminine phallicism," and yet, "[i]nvisible and almost impossible to locate, the real and imaginary basis of phallic pleasure in the girl (the clitoris) immediately dissociates the female subject from the phallus in the sense of a privileged signifier in the logos/desire conjunction" (Kristeva

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[18] Indeed, given that the penis becomes the symbol of presence and absence, that is, of lack, this may also be of concern for theorizing disability. In other words, perceiving the disabled person as lacking depends upon the expectation of the presence of certain organs and functions. Because I aim to ultimately reject this account, and because a similar line of criticism is followed by Margrit Shildrick (2009) in reference to Lacan's thought, I will not analyze this point in detail, here.

[19] See for example, Kristeva 2000, pp. 73 and 97.

[20] I find Keltner's explanation of this aspect of Kristeva's work incredibly helpful. See Keltner 2011, pp. 120-25.

2000, 99). Importantly, this explanation depends on the primacy of sight over other senses, specifically touch (or maybe just the absence of a mirror). Here we have an ableist assumption coupled with a sexist one. To be clear, I am not arguing for an abandonment of the body, but for an understanding of the body and its pleasures and pains as mobile, not fixed by the genital consolidation prescribed by Kristeva.

In defending the thesis of phallic monism, Kristeva also acknowledges the importance of familial and social influences, again only to reject them as variations which do not disturb phallic monism. She writes that a "girl may be as […] valorized [by the father] as a little boy in the phallic phase, if not more so," and that this can alter the girl's experience of this phallic phase (Kristeva 2000, 99). And yet, she goes on to write, "Lesser valorization of the girl by her father and mother, in comparison to the boy, *traditionally* played out in families or as a result of specific psychosocial configurations, contributes to consolidating this disappointment" of "being less visible and less remarkable" (100, emphasis added). What is frustrating about this passage is that even while she acknowledges the familial and social variability of the experiences of girls (and boys) at this stage in their development, she is incapable of imagining alternatives. In other words, besides the lack of visibility of the clitoris, the other reason that the (phallic) symbolic is experienced as illusory by the girl is that her clitoral pleasure is less esteemed by her parents. But what if this is not the case? Would this not only lead to the female to experience the symbolic as real, rather than illusory, but also to fall outside phallic monism altogether? Such a scenario is never discussed, for while Kristeva may acknowledge that her theory depends on a particular social setting or "traditional" family,

she is incapable of developing alternative models. She leaves us trapped in a theory that

reifies the female as a being of lack, and the male as the archetype of humanity.

Now we can turn to the normative assumptions of Kristeva's Oedipus[2]. Recall

that this stage of a female's psychosexual development is characterized by a change of

objects, from the mother to the father. It is this that leads women to a greater psychic

bisexuality because, on the one hand, they desire the phallus (and sometimes receive it in

the form of a child), and yet on the other hand, they remain tied to their relationships with

their own mothers (through a pre-oedipal, sensory link that is renegotiated in re-learning

language with their own children). This assumes a heterosexual development, however,

in which the girl takes the father for her object and thus later seeks sexual relationships

with males. Already in her early book, *Reading Kristeva: Unraveling the Double-bind*,

Kelly Oliver noted Kristeva's discomfort with homosexuality (1993, 139).[21] This appears

to continue into her later works. Kristeva does acknowledge that there are different

positions a woman could take in her psychosexual development in relation to the phallic

and the maternal. In *The Sense and Non-Sense of Revolt* she writes, for example, "these

different articulations of the phallus offer privileges but also set traps, like every

psychical structuring" (Kristeva 2000, 102). But despite this qualification, it is clear that

she in fact values a very particular psychosexual trajectory over others, that of the

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[21] She cites the following passage from *Tales of Love*: "I have chanced to note that when analysands of either sex made their love known to me, pretending to forget the expedient of the analytical contract, it involved men or women who called themselves homosexual. […] Why homosexuals? Could they have guessed an uneasiness on my part in dealing with their uneasiness about a subjugating mother, precociously and encroachingly loving, abandoned or abiding, but always underhandedly fascinating? Do they set up, in my place, instead of an object of love, my own preciously lost love? Probably" (Kristeva 1987, 11-12). As Oliver notes, the passage suggests both a discomfort with homosexuality, but also Kristeva's own homosexual desire, her longing for her lost mother.

heterosexual mother, for it is here that we find the "assumption of the phallic and its traverse in the real presence of the child and reconciliation with the unrepresentable antephallic of the preoedipal maternal and prelanguage" (106). Similarly, in her discussion of feminine genius, it is the (heterosexual) mother who "has metabolized the […] hypersensitive receptivity of *Oedipus prime* into a psychic depth," namely the feminine, though "she is not unfamiliar with *femininity* […] by excelling in seduction and even in virile competition" (Kristeva 2004, 418-19).[22] In other words, while Kristeva claims not to normalize any particular psychosexual development, she clearly valorizes the heterosexual mother who succeeds in reconciling the phallic and the maternal over other female psychosexual positions. Moreover, Kristeva appears unable to imagine a subject who navigates Oedipus[2] by identifying with the father and retaining the mother as her object. Even when she does discuss the example of the "virile lesbian," it is a result of identifying with the "male's phallic position" and cutting, as far as possible, the "primary semiotic link with the mother (which some call primary female homosexuality)" (Kristeva 2000, 102). Her exemplary lesbian identifies with the phallic position, not the father, and denies the link with the mother, rather than keeping the mother as her object. Finally, while Kristeva is sometimes careful to put the word "normal" in quotation marks, she writes that "normal evolution abandons [the mother-daughter link] in favor of the

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[22] I think I am justified in claiming that the mother Kristeva has in mind here is heterosexual, because in her Oedipal logic, it is the desire to receive the father's penis, and thus a child, that is at the origin of the desire for the child as a phallic replacement, and it is this desire for a phallic replacement that must be transformed into a relationship with the child as a genuine other (Kristeva 2004, 417-18). One may wonder whether a woman who identifies with the father, rather than the mother, could desire a child as an other from the beginning and thus avoid the need to overcome her desire for the child as a phallic substitute. That is, could a lesbian mother (on a certain revision of the Oedipal story) have greater facility with the maternal qualities Kristeva valorizes than a heterosexual mother?

daughter-father erotic choice," presenting a normalizing developmental picture at the same time that she presents primary homosexuality as a universal female phase (Kristeva 2000, 80). That is, she makes two normalizing movements in seeking a nuanced developmental picture: the norm of following her account of Oedipus[2] and the norm of a mother (or at least a woman) as a primary care-giver.[23]

Finally, in defense of Kristeva one may reply that she specifies that feminine qualities can also be found in men. She writes, for example, that she seeks to "define not Woman or *All* Women, but a *feminine specificity* that is declined differently in each sex (the feminine of woman, the feminine of man) and in a singular manner for each subject" (Kristeva 2004, 408). Indeed, Birgit Schippers argues that "such an understanding of the feminine as irreducible heterogeneity should put at ease critics" who worry that the feminine, for Kristeva, is always reducible to motherhood (2011, 123).[24] As we saw above, male and female children alike go through a "feminine position," in which their pleasure is experienced passively or receptively; both must achieve a phallic *kairos* and become subjects of the symbolic; and thus both must move beyond the sensory link with the mother to enter the symbolic, a link that is never completely severed, however, as is evident in the semiotic. Moreover, Kristeva tells us that the feminine characteristics that are shared by feminine geniuses can also be found "in the works of a large number of male authors" (2004, 424-25). The question I am left with, however, is why we should

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[23] Birgit Schippers helpfully ties together these two points. She notes that because Kristeva remains tied to heterosexual parenting, women can be mothers and become maternal geniuses, men can share in the experience of maternity if they "tap into their feminine dispositions," but "lesbian mothering, and with it, access to maternal genius [for lesbians]" is denied (Schippers 2011, 124).

[24] To be clear, Schippers' claim is a limited one. As the previous footnote explains, she develops a different criticism of Kristeva's view of motherhood.

refer to these phases or traits as "feminine" in the first place. There are two potential

answers to this question, it seems. On the one hand, it may be the case that they are

feminine because of their relation to female psychosexual development. On the other

hand, it may be the case that they are feminine because they are characteristics which

have been traditionally assigned to, socialized in, or performatively impressed upon those

identified as women. It is clear that Kristeva's view is the former. She writes that the

characteristics of the feminine genius "can be linked to *constants* of female

psychosexuality," and that if they are found in men it is because "psychic bisexuality is

shared by both sexes" (424-25, emphasis added). Thus, that which is described as

"feminine" references female psychosexuality, and yet subjects of either sex are

psychically bisexual. We may then ask, "What is it in female psychosexuality that makes

her form of psychic bisexuality 'female'?" Her answer ultimately depends upon a certain

conservative biology, and thus it seems to me that it will inevitably fall into an

unacceptable essentialism.[25] Not having a penis, and thus switching objects from the

mother to the father, are constitutive of female psychosexuality, for Kristeva, but as

discussed above, there is simply no good reason to limit a female's psychosexual

development in these ways. Indeed, in doing so she reifies oppressive assumptions in her

attempt to revalue aspects of females' experiences. Take, for example, the "feminine

position" which both male and female children occupy. If both occupy it, why is it called

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[25] Again, I do not want to excise the body from the theory here. As should become clear in the next section, the somatic and semiotic forces that make their way into symbolic language and thus transform the symbolic are key to understanding revolt and thus genius. But rather than referencing the *biological* in her account of psychosexual development, Kristeva falls back on a conservative biology that understands sex as an essential determinant, rather than culturally formed itself.

a feminine position? Because Kristeva is reading into this developmental phase the oppressive assumption of female passivity.

Thus, I reject Kristeva's view that the semiotic is necessarily maternal and that the symbolic is necessarily phallic because it is founded upon classist, ableist, sexist, and heteronormative assumptions about the family structure. Still, abjection, narcissism, and the entrance into language via the symbolic *do* seem to provide shared structures through which singular subjects share their unique histories. So, for example, regardless of one's own sex or the sex of one's caretaker(s), all subjects experience abjection and this provides a shared structure through which we can understand others' experiences. I do not want to reject Kristeva's account of singularity entirely, then. Rather, my suggestion is that we develop a more general account of singularity that acknowledges shared structures beyond sexual differentiation.

Intimate Revolt and Feminine Genius

A second way to conceive of feminine genius is as a form of intimate revolt from the margins. Though Kristeva does not directly draw this connection, it is clear that her work on revolt (especially *The Sense and Non-Sense of Revolt* and *Intimate Revolt*) influenced the development of her thesis of feminine genius. In this section, I will make this connection explicit and suggest in doing so that it provides an account of feminine genius that is preferable to the Oedipal account discussed above.

First, then, what is "revolt" on Kristeva's view? In beginning to answer this, Kristeva, as she often does, begins by looking at the etymology of the word revolt (Kristeva 2000, 1-4).[26] The details are not essential, here, but the common theme that

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[26] In French the word is "révolte."

develops from her analysis is the sense of a "turning." While Kristeva provides a history of the word's meanings through time in order to reveal its plasticity, and thus, to help her free "revolt" from its current, solely political sense, she also finds in this history a turning and returning that will influence her own notion of revolt. This notion encompasses three figures: "revolt as the transgression of a prohibition;" "revolt as repetition, working-through, working-out;" and "revolt as displacement, combinatives, games" (Kristeva 2000, 16). Kristeva's understanding of power in contemporary France (and perhaps the contemporary West) leads her to downplay the first figure of revolt, at least as transgression has traditionally been conceived. As she asks throughout *The Sense and Non-Sense of Revolt*, "who can revolt, and against what?" (8). This is because Kristeva sees contemporary manifestations of power as normalizing, rather than prohibitive, and as falsifiable. A discussion of this problematic is beyond the scope of this work, though I will briefly come back to this below when discussing marginality.[27] The second figure, best exemplified in the analytical space and in writing, is a form of revolt both because it is a *return* to a past (of the unconscious) and because such returns are "softer forms of the displacement of prohibition" (28). Since working-through accomplishes a displacement, I will discuss the second and third figures together, here.

First, then, consider the case of working-through. Recall that for Freud, working-through follows the interpretation of a psychic resistance where this interpretation does not suffice to overcome the resistance. This is because the interpretation may be convincing at the level of conscious understanding, but there remain affective

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[27] There are helpful discussions of this in Keltner (2011) and Schippers (2011). And Sara Beardsworth places this problematic in the scope of Kristeva's oeuvre in her essay entitled "From Revolution to Revolt Culture" (2005).

investments which must be displaced.[28] Working-through, then, is achieved by recalling

something from one's unconscious, from one's past, which is resisted. Thus, it is a return.

Moreover, this resistance is the result of the imposition of the symbolic which leads to the

formation of conscious/unconscious heterogeneity. Insofar as that which is recalled from

the unconscious is blocked or resisted from conscious awareness (by the supergo or ego

ideal), its recollection is a transgression or displacement of this prohibition. Second,

consider the case of writing. Importantly for Kristeva, writing can allow that which has

been denied meaning or access to the symbolic to be shared as meaningful. Through

certain forms of literature, especially poetic language, drives which remain unarticulated

and thus meaningless can become shared and meaningful. Again, this is a return to the

unconscious, and one which displaces the boundary between meaninglessness and

meaningfulness, sense and non-sense.

This form of revolt is expanded upon and called "intimate revolt" in her book of

that name. Importantly, "intimate" has a specific meaning for Kristeva. It does not mean

"private," for example, nor does it mean "individual" understood in an isolated sense.

Rather, the "essence of the intimate" for Kristeva is "the heterogeneous continuity

between body-soul-mind," the heterogeneity of the conscious and unconscious (Kristeva

2002, 51). And because the psyche's heterogeneity is always in relation to others, an

intimate revolt will not be a private revolt. Rather, intimate revolt requires the

forgiveness of others, and this is exemplified by the analyst. Forgiveness (*pardon*) is

transference, a gift (*don*) given by another through interpretation or silence—importantly

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[28] Recall the example of disability discussed in the previous chapter. Someone may be convinced by the interpretation that she rejects the disabled person because of her own narcissistic investment in invulnerability, but this will not shift her affective investments in her own invulnerability (at least not immediately).

not through an imposition—which allows sense to be given to the senselessness of the unconscious. It is only in relation to another that a subject can share the semiotic. Through this sharing, the subject can exchange preverbal meanings with another, and work with the interpretations and silences of the other to give conscious articulation to the semiotic. And because sublimation, for Kristeva, is the placing of a drive into words, sublimation occurs only through others.[29] So in sum, transference (or forgiveness) is the forging of a preverbal (semiotic, drive-based, affective) link with another which allows the unconscious to be given conscious meaning. This is a form of revolt because it is a return to the unconscious, the return of a lost past, which displaces a conscious (and perhaps symbolic) prohibition. In other words, by bringing something unconscious into consciousness, the consciousness is itself transformed; or, by bringing something semiotic into symbolic language, the symbolic is itself transformed. These are not, of course, large-scale, structural, or culture-wide revolts. But where is a contemporary revolt to begin, Kristeva asks, if not at this level of the intimate?[30]

Furthermore, intimate revolt in Kristeva's sense is also a rebirth or renewal, because the subject is herself transformed in the process revolt. Intimate revolt is, she writes, "a psychical restructuring" (Kristeva 2002, 8). What was unconscious has become conscious; what was inexpressible has been given meaning; a lost past has been reinterpreted. Indeed, in reinterpreting this past, a new present (and therefore future)

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[29] Kelly Oliver's essay, "Revolt and Forgiveness" (2005) helpfully explains the relationship of intimate revolt to Kristeva's earlier work.

[30] Indeed, given Kristeva's concerns about the reductive consumerism of contemporary life and the reduction of the social to the "society of the spectacle," an intimate revolt which questions, and which depends upon and fosters social links beyond production, consumption, and exchange is quite radical.

become possible. As Kristeva writes, "What makes sense today is not the future (as communism and providential religions claimed) but revolt: that is, the questioning and displacement of the past. The future, if it exists, depends on it" (5).[31] Thus, the sublimation enabled by intimate revolt, whether in transference or through poetic language, is the source of the *continuous* renewal of the subject. I emphasize "continuous," here, because for Kristeva revolt is never complete. There will always be a past to return to, an affect or drive to bring into meaning, and an unstable boundary between the unconscious and conscious to be refigured. In this way the subject is capable of continual rebirths.

One final qualification is in order before discussing feminine genius as a privileged form or intimate revolt. Though never making explicit connections between revolt and marginality, Kristeva *is* concerned with those on the margins in *The Sense and Non-Sense of Revolt*.[32] There are three instances I would like to briefly discuss because I think they provide a starting point for her developments in the *Feminine Genius Trilogy*. First, Kristeva writes:

> […] the normalizing order is far from perfect and fails to support the excluded: jobless youth, the poor in the projects, the homeless, the unemployed, and foreigners, among many others. When the excluded have no culture of revolt and must content themselves with regressive ideologies, with shows and

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[31] This emphasis on birth, rebirth, or new beginnings is one of Kristeva's most important adoptions from the work of Hannah Arendt, and her reclaiming the intimate is one of her most important revisions of Arendt's work. In addition to Kristeva's own views on this relationship in the *Hannah Arendt* volume (2001), Keltner (2011) provides a helpful analysis of Arendt's influence on Kristeva. (See especially Chapter 3, "The Public Stakes of Intimacy.")

[32] Schippers makes a similar claim. She writes that "it would be interesting to ask why revolt emerges at the margins; in other words, whether marginality constitutes a privileged position in the generation of change" (Schippers 2011, 65). By looking closely at the four following passages, I hope to show that there is an affirmative answer in Kristeva's work, even if it is an oblique one.

entertainments that far from satisfy the demand of pleasure, they become rioters. (Kristeva 2000, 7)

Though Kristeva sounds rather like a conservative talk radio host in this passage, I want to read her more charitably. I take her to be pointing out that those excluded by normalizing power will be more likely to experience this order as problematic and contingent (though not necessarily consciously). Insofar as they are not given the resources necessary for revolt and therefore hindered in questioning and creating meaning, other defensive responses will likely follow. These could be "regressive ideologies" which give such persons a sense of meaning without providing resources for self-criticism,[33] immersion in superficial pleasures which do not provide meaning or the opportunity for questioning, or rioting against an order which fails to give meaning to excluded lives.[34] Thus, while the excluded or marginalized may be in a privileged position to expose or resist the normalizing order, without the resources necessary for revolt there is a danger of harmful defensive responses.

A second moment I would like to discuss is Kristeva's reading of Freud's explanation of religious sacrifice in *Totem and Taboo*. On her reading, early social links were founded on the murder of a father by his sons. The sons' sense of guilt for this murder created a bond between them, and caused the father's power of force to be

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[33] While it is easy to point to religious ideologies as examples of these regressive tendencies, it seems to me that any ideology which fails to question itself or its history is an example of a "regressive ideology." Any political ideology which fails to question itself and in which persons find an uncritical comfort, whether considered conservative or liberal, would in this sense be regressive. Even the faith in science or technology (as seen in the push for STEM education) could be a regressive ideology on this view.

[34] Note that for rioting to be a defensive response, it must itself be an uncritical activity. In this sense, political protests which contest normalizing orders, but in doing so question both the order and the activity of protest itself should not be considered defensive responses. I am extrapolating this from Kristeva's words, but I would hold onto this distinction whether or not Kristeva herself would make this distinction.

transformed into a symbolic, religious, ancestral power. Sacrifice then became necessary

as a reminder of this original guilt and emergence of the social. But, Kristeva tells us,

sometimes the benefits of this social contract "threaten to disappear" as a result of

"unemployment, *exclusion*, lack of money, failure in work, dissatisfaction of every kind"

(Kristeva 2000, 14, emphasis added). When this occurs, the subject (Kristeva says the

"I") no longer feels integrated in the social and thus must find new forms of revolt. This

explains, on Kristeva's reading, new forms of ritual and sacrifice in which "an imaginary

power" emerges in order to "satisfy the need to confront an authority in [one's]

imagination" (14). These imaginary confrontations, in the form of rituals or artistic

works, allow for the transgression of authority without physical violence. This account

has a significant influence on Kristeva's own understanding of revolt. Again, it is in the

experience of being excluded or marginalized that new forms of revolt arise on this

account. What is important, for Kristeva, is that the confrontation with authority be

sublimated into works, or become the source of new meaning, rather than resulting in

aggression.

The third and final passage from *The Sense and Non-Sense of Revolt* I would like

to consider is Kristeva's discussion of the analytic setting as one of displacement of

trauma. She writes, "A patient goes to an analyst in order to remember his past, his

traumas, his feeling of *exclusion*. […] 'I' am unable to express myself, 'I' am inhibited,

'I' am depressed, 'I' am *marginalized* because 'I' have this or that sexuality" (Kristeva

2000, 29, emphases added).[35] Marginalization, or exclusion, is a particularly important

cause of psychic suffering, and psychoanalysis is a privileged site for responding to this

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[35] Note the "I"s always in quotation marks, pointing to Kristeva's insistence that the "I" is always heterogeneous, becoming, and unstable through continual displacements.

form of suffering. Through psychoanalytic transference, displacements are effected

which allow the possibility of working-through. "In the best cases," Kristeva tells us,

"analysis is an invitation to become the narrator, the novelist, of one's own story"

(Kristeva 2000, 29). This is because in narrating (and re-narrating) one's life, one effects

a revolt, bringing meaning to drives, bringing a lost past to consciousness. Insofar as the

marginalized are more likely to experience this form of psychic suffering, or are more

likely to require such displacements to make meaning, they are in a privileged site for

revolt. Unlike the subject who fits norms, and is therefore provided with symbolic

meanings which are suited to her life, the subject excluded by the normalizing order will

be more likely to need to create new meanings through revolt.[36]

This brings us to the *Trilogy*, in which Kristeva discusses her three feminine

geniuses in terms of marginalization. Here she writes, adapting a question asked by

Simone de Beauvoir, "*How, through the female condition, can a woman's being be*

fulfilled, that is, her individual opportunity in terms of freedom […]*?*" (Kristeva 2004,

407 original emphasis). Her answer is the "singular initiative" of feminine geniuses, that

"ultimate force on which the deconstruction of any 'condition' depends" (407). In other

words, Kristeva denies that an oppressive condition itself must be changed for women to

achieve freedom. Rather, she sees in feminine geniuses this "singular initiative," intimate

revolts which challenge the oppressive condition through challenging norms, inscribing

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[36] To be sure, given Kristeva's larger project, it is clear that there is *no* subject for whom given norms or symbolic meanings can entirely suffice for her psychic life. Indeed, this would mean the subject would be *determined*, a product of the symbolic, not a heterogeneous subject of *signifiance*. Still, it is clear that subjects can be more or less excluded, more or less marginalized by a normalizing, symbolic order.

oneself into the symbolic, giving meaning to lives which are, previous to revolt, excluded by the symbolic.

In sum, the margins constitute a privileged site of revolt, and marginalized subjects who successfully revolt, and in doing so create a body of work, are geniuses whose singular initiative contributes to the deconstruction of the margins themselves. It is not surprising, then, that the three shared traits of Kristeva's feminine geniuses are closely tied to her understanding of intimate revolt. The first of the traits is the fostering of singularity always *within* relationships. Recall that for Kristeva, intimate revolt is always a sharing, enabled by another through transference (even if it is imaginary as in writing as revolt). One may then ask what makes this trait particularly *feminine*. I would like to suggest that rather than appealing to the psychosexual account discussed above, we explain this relatedness through a tendency for females to be socialized as importantly in relation to others (especially as care-givers), while males tend to be socialized to be independent. Not only, then, will women be marginalized and thus experience a greater need for revolt, but it is also likely that they will be less hindered by psychical investments in independence and thus be more likely to achieve the transference necessary for revolt. That is, they will be more likely to develop a singularity-in-relation.

The second of the traits is "the concern to safeguard the life of thought." The thought Kristeva has in mind here is not abstract thought, but thinking tied to one's life, namely signifiance. This is precisely what Kristeva calls intimate revolt: the return and questioning of a lost past, giving words to the drives. It is a thinking that involves the heterogeneity of the subject, not thinking that is dominated by the purely conscious, the abstract and symbolic. Perhaps this would be a characteristic of feminine genius because

men are often expected to be driven by abstract, calculative thinking, while females, perhaps in part due to the previously mentioned relatedness, are socialized to think in non-abstract terms,[37] and to encourage the development of thought in those for whom they care (in other words, to "forgive" the other through transference allowing meaning to emerge for the other). It is not surprising that women, largely marginalized by symbolic discourse, may be particularly likely to revolt, as the symbolic will not be experienced as meaningful as it is likely to be experienced by men.[38]

Finally, "the insistence on the time of flowering and rebirth" is closely tied to Kristeva's understanding of revolt. Recall that each revolt is a rebirth or renewal of the subject. This is because in revolt, the subject's psyche is restructured, and this is possible because of the forgiveness of the other. Thus, the subject in revolt is reborn into a social link which allows for the possibility of revolt but is also itself modified through revolt. Furthermore, the temporal character of this revolt is one of rebirth because revolt accomplishes a return to a lost past, the timelessness[39] of the unconscious, in order to re-emerge in conscious, symbolic time. This cyclical temporality would be a characteristic of feminine genius because it is in relationships that we see the births of generations, the re-creations of ourselves and others, while men, who are socialized to be more

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[37] This, at least, was a hypothesis of early care ethicists.

[38] Note here that such an explanation may provide an alternative grounds for the explanation of the illusoriness of symbolic discourse for many females without falling back on the thesis of phallic monism.

[39] In *Intimate Revolt*, Kristeva has an extended discussion of the *Zeitlos*, or timeless, character of the unconscious which is important for her understanding of revolt and is present, she thinks, in Freud's understanding of the memory-trace, working-through, and transference. In order to simplify Kristeva's account without unnecessary digressions, I have largely avoided a proper examination of this topic. Keltner (2011) devotes the fourth chapter of her book on Kristeva to this topic.

independent or perhaps goal-driven, are therefore socialized to live in terms of linear temporality.

Importantly, the socio-historical setting which determines these traits to be tendencies for women and not men is contingent.[40] We can conceive of a social organization in which caring labor is not divided along lines of sexual identity, for example. However, because these are traits that are neglected or de-valued by the sexist mainstream, there is value in theorizing them, revalorizing them, and thus arguing for the importance of the marginalized lives from which they often arise. Moreover, these traits are characteristics of feminine *genius* because they promote the flourishing of singular lives which are productive of bodies of work. The relationship of thought to life, the potential for re-creation, and their facilitation through relations of interdependence all contribute to unique subjects who are capable of producing works which are challenging and importantly rooted in the subjects' lives.

The logic employed here can be expanded beyond what we are calling "feminine genius." Insofar as feminine genius is rooted in female psychosexuality, other forms of genius cannot be developed by Kristeva. Indeed, her insistence on phallic monism and the Oedipal story inevitably leads to the primacy of sexual differentiation over all other forms of difference.[41] Thus, while Kristeva's aim of revaluing the experiences of women

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[40] Indeed, the foundation for all three characteristics of feminine genius is the primacy of relationships. In relationships, singularities can flourish without isolation, thought can be nourished but remains grounded in concrete relations and avoid abstraction, and through biological births and deaths, and psychic births and rebirths, relationships reveal a cyclical temporality distinct from linear time. Thus, the social norm which appears to be key to this understanding of feminine genius is the socialization of women into the primacy of relationships, as opposed to the ideal of independence for men.

[41] This point is inspired by Tina Chanter's criticism of Freudian and Lacanian Oedipal theories for reinforcing this primacy of sexual difference (2005).

is a worthwhile one, her means of achieving this revaluation not only reify oppressive assumptions, but they also keep her from reclaiming other forms of marginalized experience.

<div align="center">Disabled Genius</div>

In freeing feminine genius of its Oedipal justification, my hope is to inspire the development of alternative forms of genius found in marginalized lives. Recall that genius, for Kristeva, is a form of singularity which challenges particular norms and which results in a work that cannot be disconnected from the life of that singular subject. By singularity, Kristeva signifies a unique psychosexual development that can be shared as a result of psychic structures held in common.[42] How, then, might we conceive of disabled genius? If genius is a form of intimate revolt which results in a body of work, as I argued above, then we should look for disabled genius in the works of singular, disabled subjects.

I would like to consider two disabled subjects who, through revolt, have created works which are reflective of their lives. Susan Wendell wrote *The Rejected Body: Feminist Philosophical Reflections on Disability*, a philosophical yet personal work inspired by her own experiences. Wendell, who was a professor in the Women's Studies department of Simon Fraser University, fell ill in 1985 with what was later diagnosed as "chronic fatigue dysfunction syndrome" (also known as "myalgic encephalomyelitis"

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[42] I hope it is clear given my arguments above that I reject shared psychic structures which reify oppressive norms. For example, while I find abjection as a developmental necessity convincing, I would hold that abjection is a process that occurs between a caretaker (not necessarily a mother) and a child. Similarly, I find the existence of the unconscious convincing, but reject its necessarily phallic determination.

outside of the United States), an event which changed the course of her life and her

academic focus (Wendell 1996). As she writes in the book:

> I have worked for more than twenty years in the area of feminist social and political theory. The more I learned about other people's experiences of disability and reflected upon my own, the more connections I saw between feminist analyses of gender as socially constructed from biological differences between females and males, and my emerging understanding of disability as socially constructed from biological differences between the disabled and non-disabled. In addition, I was increasingly impressed by the knowledge people with disabilities have about living with bodily suffering and limitation and about how their cultures treat rejected aspects of bodily life. It was clear to me that this knowledge did not inform theorizing about the body by non-disabled feminists and that feminist theory of the body was consequently both incomplete and skewed toward healthy, non-disabled experience. I began to do some feminist theorizing about disability. (Wendell 1996, 5)

The result of this theorizing is a book which attempts to tackle a great variety of problems

in theorizing disability, from defining disability, to problems with the authority placed in

medicine, to the complex relationship of disability and feminism. But *The Rejected Body*,

is not simply a work of theory. The Introduction frames the work in terms of her own

experiences, and throughout the chapters, Wendell inserts personal experiences where

relevant, sometimes to give examples, sometimes to show where a particular argument

originated.

Consider, for example, the chapter entitled "Feminism, Disability, and the

Transcendence of the Body." Here, she discusses her own experiences with chronic pain.

She writes, "When I became ill, I felt taken over and betrayed by a profound bodily

vulnerability. I was forced by my body to reconceptualize my relationship to it" (Wendell

1996, 169). The experience of chronic pain leads Wendell, on her own account, to rework

her relationship to her body. Specifically, Wendell describes her experience of learning,

from others, to "mak[e] friends with" her pain (171). To do so is to accept pain, to

observe it, rather than resisting it or wishing to get rid of it, in order to "reduce the suffering it actually causes" (171). Later, she refers to this as a process of relaxing "into" the pain, through which the "pain is transformed into something else—sometimes a mental image, sometimes a train of thought, sometimes a desire to do something, such as lying down or getting warmer, sometimes sleep" (172). What is powerful about this example is the transformation that occurs at all levels of the psyche. The experience of pain is transformed into various other effects, the conscious and unconscious rejection of pain is transformed into a relationship of acceptance, her unarticulated experience of the pain is given words, first through an expression learned from others ("making friends with their pain"), then through a poetic turn of phrase of her own ("to relax 'into it'"). Against a certain postmodern feminism prominent at the time of her book's publication, Wendell even dares to call for a certain "transcendence" of the body, by which she means not a separation or mind-body dualism, but strategies of acceptance which "increase the freedom of consciousness" (178). A final aspect of Wendell's text I would like to draw attention to is her set of acknowledgements. Here, she expresses gratitude not only to those who helped her to theorize, but also those who listened to her. She thanks her husband for listening to her "anger, depression, and despair in the middle of many nights," her friend and counselor for helping her "learn to live with long-term illness and preserve [her] creativity," and others who supported her transition to researching disability (vii-viii).

What I am pointing to is an experience of revolt that, along with other intimate revolts, results in the production of an innovative work in philosophy. Wendell returns to a lost past, here, focusing conscious attention on unconscious responses to pain. This

return is enabled by relationships to others, some intellectual (e.g., learning the concept of making friends with pain),[43] some intimate (e.g., experiencing transference in relationships with others which allow her to give meaning to her experiences). This return effects a rebirth in which her conscious, unconscious, and bodily experiences are displaced, in which senseless experiences are inscribed into the symbolic with her symbolic inventions (i.e., making friends with/relaxing into). Finally, the work, which began in the marginal experience of being a woman with a chronic illness, and in a theoretical space outside the norms of mainstream philosophy and even feminist philosophy, challenges philosophy, medicine, and feminism among other fields to reckon with these margins. In this way, Susan Wendell is a disabled genius.

I would like to move now to a second example of disabled genius. Whereas Wendell is diagnosed with a chronic illness, the results of which were largely physical,[44] Sesha Kittay is, according to her mother, severely cognitively disabled. This may appear a strange example to draw from. After all, she could not speak and had "no measurable I.Q." at age twenty-seven (E. Kittay 1999, 151). If a return to the unconscious, the semiotic, or the timeless is a necessary part of revolt, should we not conclude that she is incapable of such a revolt? If creating a body of work is a necessary component of genius, how could she be a genius? I am attempting to work out, here, a very challenging

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[43] Indeed, even these intellectual relationships seem to have an intimate component. Throughout the book Wendell explains experiences of variously struggling with (see pages 26-27, for example) and accepting (see page 177, for example) *identifying* with others who are disabled.

[44] This distinction is less clear than we often acknowledge. One of the powerful aspects of Wendell's own work is her discussion of the psychological effects of and responses to physical pain, including depression. This points both to the importance of rejecting mind-body dualism (to account for the mutual influence of each) and the importance of rejecting a strict individual-social dualism (again, to account for their mutual influence). Wendell details, for example, how the mythical omnipotence of medicine can lead to both physical and psychological harm for those with conditions that medicine does not (yet) understand (1996, Ch. 5).

case. I think that Sesha is a genius in Kristeva's sense of the word, but if my readers are unconvinced, I hope that what I say here at least illuminates other cases of cognitively disabled subjects whose limitations are less severe.

First, then, in what sense can Sesha be said to accomplish a return? Kittay writes that "Sesha was almost twelve before she learned to kiss or hug" (1999, 151). In the last chapter, I suggested that Sesha's behaviors do not easily fall within Kristeva's linguistic categories of semiotic or symbolic. This means that if we are concerned to listen to the other, we must listen to both. Sesha's eyes following the falling leaf, for example, communicates meaning without entering symbolic discourse, that is, it appears to be semiotic. Learning to hug, however, comes closer to a symbolic articulation, in that it is a socially sanctioned means for communicating and has a generally established meaning. Learning to kiss or hug, then, would require Sesha to return to an affect or drive—characterized, say, by affection—and, through the transference love of others, to articulate this affect in this symbolic gesture. If such returns occur less frequently in Sesha's life than in others, this does not mean they are not in fact returns, nor does it mean they are returns of a lesser degree.

Second, this return is enabled by relations with others. It is all too easy to imagine a person with a severe cognitive disability being ignored, or having no person with whom to share her affection, and thus never finding the means to articulate those affects in terms of symbolic gestures. Sesha, however, did have care-takers who were patient, loved her, and allowed her to love them back. That is, there were others in Sesha's life who "forgave" her in relationships of transference, who allowed her to articulate her drives in symbolic gestures by sharing a semiotic link.

Third, learning such a symbolic gesture is also a rebirth. An affect that remained unarticulated is, through the hug, capable of being articulated according to some, even if minimal, conscious choice. This also renews the link between Sesha and others. An affection that might have been only assumed by her caretakers is then able to be directly communicated. Such a gesture may also allow Sesha to make new links with others who may have been less patient than her immediate caretakers with suppositions about her meanings.

But it is the body of work that seems to remain the greatest challenge for this case. Here I want to push Kristeva's own words to their limits. Recall that Kristeva says a genius is one who "force[s] us to discuss their story because it is so closely bound up with their creations, in the innovations that support the development of thought and beings, and in the onslaught of questions, discoveries, and pleasures that their creations have inspired" (Kristeva 2001, xi). How could Sesha's hugs be thought of as such a creation? First, the hugs and kisses have encouraged the development of thinking for both her mother, who wrestles with her own philosophical commitments as a result of her daughter's love and joy, and her caretakers. Kittay writes, "That which we believed we valued, what we—I—thought was at the center of humanity, the capacity for thought, for reason, was not it, not it at all" (Kittay 1999, 150). And Peggy, Sesha's caretaker, learns quickly that in working with Sesha, "Not my way. Your way. Slowly" (157). Second, Sesha's creations have doubtlessly inspired "questions, discoveries, and pleasures," from the questions of the family, friends, and caretakers who interact with her, to the philosophical questioning she inspired in her mother and which her mother's work continues to inspire; from the discovery of how to nourish and love a person that defies

myriad norms to the philosophical discoveries (concepts like the "doulia," "connection-based equality," and "reciprocity-in-connection"[45]) she inspires in her mother's work; from the pleasures that her joy and hugs bring those who know her to the pleasures inspired in others by her mother's moving writing about Sesha.

One obvious criticism, here, would be to say that I am interested more in Eva Kittay's own works than I am in her daughter's creations, but I think Kristeva provides an explanation for this. She writes, "The way these works affect us depends ultimately on the historical disturbances they bring about and on the way they influence other people and their followers—in sum, their effect depend on the way *we* respond to them" (Kristeva 2001, xi). In other words, a work itself is *always* dependent upon how it is received, taken up, and responded to by others. The accomplishments of all of Kristeva's feminine geniuses, for example, were in part contingent upon their receptions. And Sesha's creations have inspired not only a book and many essays by her mother, but myriad responses from others. What Sesha has created has certainly inspired more work than many other lives ever will.

Finally, Kristeva writes that geniuses "make us look at ourselves in a way that is just as ingenious as the way they locate their extraordinary character between their own pleas and the unpredictable opinion of the human beings who respond to them and who ordain them. At heart, they are geniuses for us—and for eternity, so much so that we become geniuses ourselves" (Kristeva 2001, xii). Earlier she says, "my geniuses displayed qualities that, while no doubt exceptional, can be found in most of us," and that genius is the result of "paradoxical occurrences, unique experiences, and remarkable

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[45] These concepts are introduced in Chapter 2 of *Love's Labor*.

excesses that manage to pierce through an increasingly automated world" (x). In sum, a genius is one who has qualities which are common yet exceptional, one who helps us find singularity in a normalizing world, and one who inspires others to be geniuses through her genius. When we read the description of Sesha's joys, hugs, and laughter, it is clear that there is something exceptional in her life, and yet joys, hugs, and laughter are common to most human lives. Sesha's life, and the work she inspires her mother to write, pierces through the automated world, challenges all-too-common conceptions of worth as "productivity," "health," or "independence," and in so doing it inspires us to reconsider ourselves, our relationships, and our own worth. *Love's Labor* is not just about Sesha or disability, even though Sesha's life is surely its inspiration; it is an attempt to rework the foundations of ethical relationships and political obligations. In other words, Sesha is a (disabled) genius.

One final point to consider is the extent to which Sesha's genius is related to her marginalized social position. Unlike the revolts of Kristeva's feminine geniuses or Wendell, Sesha's revolts are not the result of marginalization. It is not a failure of symbolic resources, for example, which leads to Sesha articulating her affection in the form of a hug or kiss. And yet, the influence Sesha has had on other works and authors is clearly due to the marginalization of cognitively disabled persons in the medical professions, academic philosophy, and so on. It is the struggle to put into philosophical language what makes Sesha's life meaningful that gives Kittay's work such depth. Kittay's criticisms of our public policies are powerful because of the failure of social institutions to provide a place for Sesha and others with similar disabilities that is neither impersonally institutional nor isolated within the immediate family. Thus, part of what

makes Sesha's life a life of genius is the fact that she and others are marginalized, even if that is not at the source of her own intimate revolt.

Conclusion

In this chapter I have argued for two conclusions. First, I argued that Kristeva's account of feminine genius is better understood as a form of marginalized intimate revolt, rather than as a result of a particular psychosexual development which remains normalizing despite Kristeva's attempts to go beyond the Freudian model. Second, I argued that once we reject the psychosexual model which keeps Kristeva from developing other forms of marginalized genius, we can develop such forms of genius, including disabled genius. I argued that disabled genius may indeed be said to exist through two examples, Susan Wendell and Sesha Kittay. By discussing examples rather than solely theorizing, I aimed to follow Kristeva in emphasizing the singularity of disabled geniuses. Furthermore, by discussing Sesha Kittay, I aimed to show that persons diagnosed with even cognitive disabilities could be geniuses given Kriteva's account. In the conclusion following this chapter, I will synthesize the arguments of this chapter with those of the previous two, specifically by discussing the import of the interpretations of Kristeva I have developed for the epistemic concerns of the first chapter.

Conclusion

In the chapters composing this dissertation I argued that the discourse of epistemic injustice and Julia Kristeva's oeuvre offer important insights into disability oppression and exclusion. In the first chapter I argued that institutionalization, medicalization, and cultural anxieties about mental disabilities constitute and cause epistemic injustices suffered by disabled subjects. After identifying examples of testimonial and hermeneutical injustices related to these processes, I argued that José Medina's recommendation for epistemic interaction resulting in beneficial epistemic friction and, hopefully, meta-lucidity is particularly promising for resisting the epistemic injustices to which disabled persons are subject. But there is a limit to the discourse of epistemic injustice. Persons with severe mental disabilities who cannot provide testimony or interpret their own shared social experiences appear unable to be subject to epistemic injustices. I made three suggestions for responding in epistemically just ways to such persons: treat persons as informants rather than sources of information as much as possible, even if they are only able to communicate things like pleasure or pain; attribute epistemic authority to those who are close to the severely mentally disabled person, whether that is a care-taker or person with a similar condition or a person treated in the same facility; and foster the epistemic capabilities of all persons as much as possible. Still, these recommendations do not go very far, and they threaten to put severe mental disability in a state of deferral such that meaning is not found in the lives of such persons *as they are*, but instead they are thought of *as they might be*.

To avoid thinking disability only as tentative, I turned to Julia Kristeva's recent essays on disability, reading them through her previous works on language, abjection,

and the uncanny. Doing so allowed me, first, to explain how Kristeva's theory of meaning as emerging from signifiance, the interaction of semiotic and symbolic, reveals that meaning can be shared even in interactions with those who are severely mentally disabled. I named the prejudicial neglect of this form of sharing "intimate hermeneutical injustice" to distinguish it from the general form of hermeneutical injustice which focuses on interpreting shared social experiences. I then argued that Kristeva offers a convincing account of disability exclusion. On her view, this exclusion is founded in the narcissistic threat posed to nondisabled persons by disabled persons who have been culturally figured as abject. Finally, following but also expanding upon Kristeva's work on uncanny foreigners, I proposed a way to resist this exclusion and accomplish interaction by a double movement of interpersonal relations, which allow nondisabled persons to work-through their narcissistic defenses and thus share meaning with disabled persons, and social relations, in which nondisabled persons and communities "move toward" disabled persons and communities to alter the boundaries of each community and thus alter the figures of abjection.

In the final chapter, I argued that disabled persons, including the severely mentally disabled, are not just capable of making and sharing meaning, but they are capable of achieving what Kristeva calls the highest form of subjectivity, genius. To do so, however, I needed to articulate what genius means, for Kristeva. Arguing against an interpretation that relies on her sexist, heteronormative, and ableist account of psychosexual development, I proposed that feminine genius as she develops it in her *Feminine Genius Trilogy*, should be understood as a form of intimate revolt from the social margins that produces a work. Interpreted in this way, I argued, other forms of

marginalized genius, particularly disabled genius, become conceivable. I then offered two examples, Susan Wendell, a chronically ill and physically disabled feminist philosopher who wrote *The Rejected Body* among other works, and Sesha Kittay, the severely mentally disabled daughter of Eva Kittay who has inspired many of her mother's and others' works, as disabled geniuses. In this conclusion, I draw out some similarities between the epistemic injustice account and the Kristevan account of disability developed in the previous chapters, similarities that I avoided developing earlier out of a desire to remain faithful to the original sources and not offer superficial interpretations of either set of texts. I then offer some potential future directions for research that could emerge from this project.

<p style="text-align:center">Bringing the Accounts into Interaction</p>

I want to bring the epistemic injustice and Kristevan accounts into interaction, here, and I mean interaction in the rich sense proposed by Kristeva and Medina: there are resonances or points of contact between these discourses, but they should be maintained in their specificity, not neatly mapped on to one another or integrated. What, then, can these accounts contribute to one another? And where do they diverge?

Recall that for Fricker there are two types of epistemic injustice: testimonial injustice and hermeneutical injustice. The paradigm case of a testimonial injustice, for Fricker, is a credibility deficit suffered by an epistemic agent as a result of her membership in a social group because a social imaginary prejudices others against members of her group (2007, 28). Disabled persons *do* suffer credibility deficits on Kristeva's account. For example, John, the person diagnosed with schizophrenia in the documentary Kristeva considers, is integrated into the economy of production, but his

voice, his thoughts, and his feelings are neglected by the film. That is, he is not trusted to speak for himself. Interaction, the sharing of meaning between (nondisabled and disabled) subjects, rarely occurs. This is also part of Kristeva's criticism of charity, because charity tends to consider all disabled persons as the same "without taking into consideration the *specificity* of their sufferings and exclusions" at the same time that it imposes its own methods on disabled persons, infantilizing them rather than listening to their own concerns (2012, 35-36). Her hope is that disabled persons will be listened to in their singularity, and as she says of her son, be given the opportunity to participate "not as *I* want it, but as *he* wants it and is able" (2013, 229). The obvious epistemic implication is that disabled persons must be given epistemic credibility in order to recognize their singularity, in order to address their concerns *as they see them*.

We can also see that this credibility deficit is the result of membership in a social group subject to the negative prejudices of the social imagination. On my reading of Kristeva, disabled persons constitute a social group in part because of the exclusions to which they are subject.[1] Moreover, we have seen that disability, as a figure of abjection in contemporary Western culture, suffers from the negative prejudices of the social imagination, or "shared imaginative conceptions" (Fricker 2007, 14). Disability, according to Kristeva, presents a threat to the narcissistic identity of individuals and to the boundaries of humanity itself, but only because of co-constitutive narcissistic subject formations and a broadly accepted conception of humanity.

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[1] Siebers offers a more thorough consideration of disability as a group identity in *Disability Theory* (2008). It is important to bear in mind that disabled people, like those in any other social group, may exclude one another.

Next, consider hermeneutical injustice. Recall that for Fricker this occurs when one's community lacks the interpretive framework for understanding the experiences of an entire group of people, such that members of that group cannot make sense of their lives in significant ways (2007, 158). This is perhaps the most clear in the case of the parents Kristeva discusses who lack the hermeneutic resources to comprehend their child's disability and thus experience guilt, as if the only fulfilling life for their child is one in which she is "cured" and as if it is solely the parents' responsibility to effect this cure. It is also clear, however, that Kristeva thinks we lack the hermeneutic resources, generally, to understand any life that is not capable of "excellence, pleasure, and achievement" as human (2012, 33). Moreover, because the development and sharing of meaning by disabled subjects is largely barred, their ability to make sense of their own lives or communicate about their lives with others will be hindered.[2] Thus, Kristeva's analysis clearly also points to a hermeneutical injustice.

But clearly Kristeva does not just offer a recapitulation of arguments about epistemic injustice in the context of disability. Her account, and my development of it here, offers insights that go beyond the discourse of epistemic injustice. First, Kristeva provides a warning that developing testimonial justice as an epistemic virtue in the context of disability is not as simple as developing a habit of listening to disabled others or compensating for credibility deficits. The very possibility of listening to disabled subjects (and thus of assigning them a credibility deficit or not) is foreclosed by the narcissistic threat nondisabled subjects experience in encounters with them and their

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[2] Publications like the *Disability Rag*, self-advocacy organizations like those discussed in the first chapter, and the academic field of Disability Studies, for example, may be seen as attempts to develop interpretive frameworks for the lives of disabled persons, in the face of a broader social absence of such a framework.

subsequent (usually unreflective, affective) exclusion. Thus, testimonial justice with

regard to disabled persons will require the (simultaneously reflective, affective, and

unconscious) working-through of this narcissistic self-image by nondisabled persons, in

large part *through* interactions with disabled others. Second, Kristeva's analysis provides

a concrete example of the intimate and complex way in which testimonial and

hermeneutical injustices are related, which brings her closer to Medina's analysis. The

nondisabled community lacks the hermeneutical resources to understand disabled lives

because nondisabled persons refuse disabled speakers' expressions as a result of the

narcissistic threats they present, and nondisabled persons neglect disabled speakers'

testimony as a result of this narcissistic threat *because* they lack the interpretive

frameworks to understand disabled lives as human lives at all. Meliorating hermeneutical

injustices in this case will thus require not only opening oneself to the attempts at

communication made by disabled persons, but also the melioration of testimonial

injustices as described above (i.e., the vacillation between social interaction, or moving-

toward, and working-through in interpersonal interactions). Medina is also skeptical of

any clear distinction between testimonial and hermeneutical injustices, but he explains

their relation in terms of intelligibility. Hermeneutical injustices, in which realms of

social experience are made unintelligible (at least in mainstream hermeneutic resources),

"are maintained and passed on through testimonial dynamics" that block new

interpretations from being heard as credible or even spoken, as in the case of preemptive

testimonial injustices. And testimonial justices are made "almost inescapable" when the

testimony of certain groups or about certain realms of experience are "systematically

regarded as nonsensical (and hence incredible)" (Medina 2013, 96). These accounts

clearly differ because on the Kristevan account the relationship between what is made

intelligible or not and testimony is always mediated through narcissism and abjection.

Both agree, however, that resisting either form of injustice cannot succeed without

addressing both forms of injustice.

We can also see a great deal of overlap between Kristeva's work and Medina's

recommendations. First, they share a skepticism about the goal of integration because of

its tendency toward assimilation, that is, its failure to challenge the mainstream from the

point of view of those to be integrated. Kristeva's stated concern is that integration fails

to acknowledge the *singularity* of those who are integrated by remaining uncritical of

those with whom they are integrated and by incorporating the integrated into production

and circulation rather than through the creation and sharing of meaning. Medina, on the

other hand, thinks that certain social spaces are needed for marginalized *groups* to form

group identifications in order to better understand themselves and to challenge the social

arrangements into which they may be integrated (2013, 7-8). My interpretation of

feminine genius may bring Kristeva closer to Medina on this point, however. Recall that

in the third chapter I argued that the margins constitute a privileged site of revolt, because

these are spaces that lack symbolic resources to articulate their experiences to a greater

extent than the center. Because revolt requires forgiveness, or the formation of a semiotic

link between subjects through which the semiotic can be articulated in the symbolic,

revolt may in fact be barred by integration when nondisabled people do not interact with

disabled people or reject them because of the narcissistic threat they pose. If this is the

case, then achieving Kristeva's sense of interaction may in fact require spaces of

forgiveness for those in the margins (in this case, the disabled) in which symbolic

transformations can gradually emerge and make possible the sharing of meaning between disabled and nondisabled persons. In other words, these spaces of forgiveness may be necessary to refigure the boundaries of the community formed by abjection and allow social interaction between the disabled and nondisabled.

Second, their shared alternative to integration is interaction. Recall that the Imperative of Epistemic Interaction states that we should develop habits of being responsive to diverse others and sensibilities that are cognitively and affectively open to diverse others. The ideal, here, is to consistently engage with beneficial epistemic friction, or those forces which make us call into question our own beliefs. To do so, Medina says we must acknowledge and engage cognitive forces we encounter, and not allow any one cognitive influence to become unchecked at all times (2013, 50). Kristeva similarly calls upon nondisabled readers to be open and responsive to disabled others, to create and share meaning with them. Again, however, Kristeva warns readers against a simplistic view of how this can be accomplished in the case of disabled persons. Any true interaction will require that nondisabled subjects work through their narcissistic self-images (which is, again, a process that is conscious and unconscious, affective, somatic, and intellectual), and that they move toward disabled others. Achieving epistemic justice, in other words, will require extra-epistemic methods and resources.

Finally, it is my contention that Kristeva's theory of meaning broadens the realm of the epistemic. Testimonial and hermeneutical injustices are discussed in terms of what Kristeva would call the symbolic. We are interested in knowing, for example, whether one's testimony in (spoken, written, or sign) language is assigned a credibility deficit, or whether the interpretive (linguistic or representational) resources of a community hinder

the members of a group in making sense of their lives. It becomes a challenge in this framework to discuss epistemic injustices suffered by persons with severe cognitive disabilities. Unlike those with less severe cognitive disabilities discussed in the first chapter who suffer epistemic injustices as a result of misinformation and unwarranted generalizations (what Carlson calls "prototype effects"), those with severe cognitive disabilities may be unable to share knowledge via linguistic communication. Because Kittay offers such full and moving descriptions, I will return to the example of her daughter, Sesha. Unable to speak, write, or sign, it is unclear that a standard discussion of epistemic injustice would find any testimonial or hermeneutical injustices in others' behavior toward her. What testimony, one may ask, is there to assign a credibility deficit to? To what hermeneutical resources is she appealing in order to make sense of her life? Recall that for Kristeva, however, meaning is constituted by both semiotic and symbolic elements. Thus, Sesha's claps and cries, her laughs and looks are capable of carrying meaning and, I believe, of being received unjustly.

First, consider the case of testimonial injustice. As is often the case for those who care for children, it is not uncommon to hear those who provide services for disabled persons say things like "She doesn't know what she wants." Nor is it uncommon for those in the surrounding community to ignore the severely cognitively disabled entirely. And yet, Sesha and others with similar levels of ability have meanings to share. Rushing such a person through a routine which with she or he is struggling, for instance, would be to ignore the meaning expressed in the struggle (frustration, for example). Or take this example that Eva Kittay recounts from the perspective of Sesha's caregiver, Peggy:

> I was working terribly hard trying to get Sesha to cooperate and do what I was supposed to get her to do. […] I thought, how am I going to do this? How can I

possibly do this job, when I looked down at Sesha and saw her little head pushed back against her stroller moving first to one side and then to another. I couldn't figure out what she was doing. Until I traced what her eyes were fixed on. She had spotted a lea[f] falling, and she was following its descent. I said "Thank you for being my teacher, Sesha. I see now. Not my way. Your way. Slowly." (1999, 157)

Wrapped up in her assignment of completing exercises with Sesha, Peggy was not listening to her, she failed to open herself to Sesha's shared meaning. Sesha did not say or sign "I want to watch this beautiful leaf," but her eyes, the semiotic movements of her body contain a meaning no less: fascination, perhaps joy or curiosity. Because Peggy's initial failure involves the development and sharing of meaning or interpretations of experience, rather than the exchange of information, I have called this intimate hermeneutical injustice. It shares its interpersonal nature, however, with testimonial injustice.

Indeed, ignoring the meanings of disabled persons can occur on more structural levels as well. Martha Nussbaum's argument about the voting rights of disabled persons is relevant, here. She invites her readers to consider a case in which a "person's disability is so profound that he or she is unable to perform the function in question, even to the extent of forming a view and communicating that view to a guardian" (Nussbaum 2010, 88). Her contention is that guardians should be able to vote (and serve on juries) on behalf of such persons. Her justification is political and ethical. To deny voting on behalf of such severely disabled persons is to undermine the "deep expressive and symbolic meaning" of allowing each citizen one vote, and furthermore forces guardians to choose between their own interests and the interests of the cognitively disabled in their charge (2010, 91). With the above development from Kristeva, I would add an epistemic justification. Insofar as an election reflects not just the values but also the knowledge of

citizens, there are meanings expressed by the severely disabled which are, in the status quo, ignored by the political process. For example, I may value providing optimal resources and services for cognitively disabled persons, but if I have no knowledge of the conditions in which such persons live, if I have not listened to the meanings of those who are cognitively disabled, then the votes I cast will ignore the interests of disabled persons despite the values I hold. Thus, if a group of severely cognitively disabled persons cannot deliberate and form solutions to their problems independently, others must find ways to listen to them and use these meanings to form solutions, even if it must be on their behalf. I have offered two such modes of listening: in the first chapter I proposed extending epistemic authority to those close to severely mentally disabled persons (i.e., their care-takers and those in similar conditions) as one way to listen to such persons; and in the second chapter I proposed extending listening to the semiotic and more broadly understood symbolic levels at which meaning emerges, a form of attentiveness I called intimate hermeneutical justice.

What, then, of hermeneutical injustice? It is less clear to me, in this case, that a hermeneutical injustice would prove harmful to the severely mentally disabled *in an epistemic way*. I know of no evidence that facilitating interactions among the severely mentally disabled results in greater self-understanding of the individual's situation or place in the social world, for example. It does seem to me, however, that the greater epistemic community is robbed of interpretive resources when it does not listen to those with severe mental disabilities. Consider, for example, what the doctor told Eva Kittay about Sesha, "that we should consider having other children because 'one rotten apple doesn't spoil the barrel'" (1999, 150). Or consider Jeff McMahan's comparison of the

"radically cognitively limited" to animals: "Yet no one has shown how the belief that

chimpanzees are sacrificable can be reconciled with the belief that human beings with

comparable psychological capacities and potential are not" (2010, 347). By virtue of our

failure to listen to those with mental disabilities, the resources in the United States

available for interpreting disabled lives are comparisons with fruits, vegetables, and non-

human animals. We largely lack the ability to understand and discuss the lives of disabled

persons *in themselves*. Thus the hermeneutical harm resulting from the broader failure to

listen to the mentally disabled is an epistemic harm to others, to those who are not

severely mentally disabled. The terrifying result in such cases is likely to be (non-

epistemic, that is, ethical and political) harm toward severely mentally disabled

individuals.

<center>Future Directions</center>

In this dissertation I focused mainly on the contemporary oppression of disabled

persons and non-intersectional analyses of disability experience and oppression. In future

work, it would be promising to incorporate history and intersections with other marginal

experiences into my developments here. There are two particular, and non-exclusive,

ways to go about this. First, following Kristeva's histories of abjection and foreignness in

Powers of Horror and *Strangers to Ourselves*, respectively, I could draw out historical

manifestations of disability and show how those are related to our understandings of

disability today *and* to other historical and contemporary figures of abjection. One

particularly promising site of intersection would be the female body and mind, because it

has often been figured as lacking and in this way related to the disabled body and mind.

Tracing this history may help reveal that an understanding of disability must take into

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account an understanding of femininity and vice versa. Indeed, recent volumes on

disability, like *Gendering Disability* (2004), *Feminist Disability Studies* (2011),

Rosemarie Garland-Thomson's *Extraordinary Bodies* (1997), and Licia Carlson's *The*

Faces of Intellectual Disability (2010), have already undertaken this project in various

ways. As I discussed in the introduction, racialized bodies and minds would also be an

important site of intersection for understanding the history of disability.

A second potential direction of development would be to investigate inclusive

educational models as a form of resistance to the oppressions discussed in this

dissertation. The development of prejudices against disabled persons which contribute to

epistemic injustices and the narcissistic rejection of disabled persons surely result, at least

in part, from educational practices that discourage or even block interaction between

disabled and nondisabled students. What arguments could be developed from this

dissertation, then, for inclusive education?

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