8-7-2008

The Solipsism of Daily Experience and the Unequal Body: The Social Construction of Ableness

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A Thesis

Submitted to the Graduate Faculty of the
University of New Orleans
in partial fulfillment of the
requirements for the degree of

Master of Arts
in
Sociology

by

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August 2008

ACKNOWLEDGEMENT

I would like to thank Andrew, Maggie, Colin, and all of the first year Sociology students for all of the long nights of theory discussion fueled by alcohol and intelligent minds—which seems like an oxymoron, but was anything but. Without you people, I would not have made it through.

I would also like to thank each person on my committee: I could not have done this without each and every one of your comments, availability, willingness to listen, and engaging class lectures. I hope to incorporate each of you in my teaching style when I get a job in the not-so distant future. Thank you for believing in my ideas.

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ABSTRACT

This is a theoretical and exploratory study of the social construction of the lived experience I am calling "ableness." Through the repetition of behaviors and practices performed by able-bodied people, the representation of the able body has come to appear natural and unconsciously taken for granted, as they do not have to think about their bodies in interaction with everyday objects. I argue that this able-bodied solipsism is heightened in advanced industrial societies where discourses and practices created by Human-Factors Engineering compile knowledge based on the assumption that the able body is the norm. This knowledge is then employed in the fabrication of everyday items. Through an examination of theoretical perspectives on impaired bodies, a history of human-factors engineering, and an ethnography of how able bodies interact with their everyday surroundings, I intend to uncover the assumptions underlying the social construction of "ableness" and able-bodied solipsism.

INTRODUCTION

Yes, it is true. I am disabled; have been all of my life. I accept that. Yet, I have always been considered and treated "normal" by my parents. It wasn't until a few years ago that the story of my birth was actually recounted. This, after six surgeries on my right leg before the age of seven and having to relearn to walk each time, was the first time I learned the true story of the morning of my birth. Although the unimportant details were left out of my mother's story, I'm quite sure the room would have been pristine: the doctor's hands would have been extremely clean and meticulous with every motion they made. His eyes would have been attentive and beautiful: they would, in fact, be the first eyes I would most certainly lock with. The delivery room would have been prepared, ready for this event to occur, stocked with all the necessary life-saving equipment in case something went wrong. The nurses in uniform would have been chatting about the effectiveness of their procedures or the great sleep they had the evening prior. There would have been my young father in a set of green scrubs unable to hold a set position, crossing his arms, then dropping them to his sides, and returning to the original position over and over again. My mother would have been lying under a set of white sheets with a drunken smile, unscathed by the cold of her ankles in a set of metal stirrups.

But all I really have to go on is my able mother's careful word choice; the pain, the misery associated. How she, herself, noticed the doctor's eyes widening as he peered into the birth canal to find my head bouncing against her pelvis as she breathed and sweated and pushed with all she had in her. "Get her upstairs for a Cesarean," he muttered to the nurse next to him. There is never any mention of the actual surgery, but I am positive it is because my mother was put under anesthesia, and my father was denied entry into the operating room. There is anguish in my mother's voice as she tells this part of the story, and I wish I could feel it too. It's the not knowing, the helplessness, inability to control the situation that really screws us up. Yet, perhaps silence and ignorance are best. A couple of days later, when the doctor said nothing about complications during the operation, my mother and father were free to take me home.

No one noticed that anything was really wrong until two months later. My grandfather was the first to say anything, noticing that I only used my left hand to do everything, especially when I tried to move around. I was brought back in to see the doctor that delivered me, and upon looking me over he replied, "He is a healthy boy." The second time I was returned to him with growing concern, the same was said of my condition. Finally, I was brought to my father's neurologist, who noticed something was, indeed, wrong before even holding me in his arms. When I think about it, it must have been tough to stand there and hear that your first child, a boy to carry on the family name, might never walk, and that they weren't sure how far the damage really went. I am sure it was hard to hear I might be permanently disabled in some way. I have never really understood that

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moment, just as the information begins to soak into a young father with his new bride, and I know I never will. I was diagnosed as having cerebral palsy due to a stroke at birth. There was a section of my brain around my left temple that had perished, causing my inability to control the muscles on my right side.

The story of my birth conjures up many questions as I write this paper. I have no concept of what it is like to have an able body. I often try to imagine it by transposing, in my mind, the feelings and abilities of my left arm onto my right side, but it never feels right. I truly do not understand what it is like to use two hands to do something. Yet, these are the subjects of my study. Why do this? The answer to this question is quite easy. What work has been done to date within disability studies just is not up to par, according to many theorists (Altman 2001; Williams 2001). The problem, I argue, is that disability studies has become a niche, populated only by those who are afflicted by disability. Even so, there are very few of us. I had the privilege of attending the last American Sociological Association convention in 2007, which, surprisingly, had a disability panel; I made absolutely sure to attend. The room was very large, seating about two hundred people; however, there may have been, at best, about 15 present at the talk. Most of them, as well, were disabled in some way. I was working on a different thesis topic at the time, but being at that panel affected me deeply. I knew I had to find some way to bring disabilities to the forefront. What better way to do so than to bring oppressor and oppressed on a level playing field by showing how they are related through the lens of the able body. Yet, as it is I who am writing this paper, how is this even possible?

GONZO SOCIOLOGY—A NOTE ON STYLE

Hunter S. Thompson, a prominent writer from the 1970's, popularized a writing style called "Gonzo" journalism, a reaction to the purported objectivity of newspaper coverage. The writer, in the case of Gonzo journalism, reports on a news story through a first-person narrative, seeing the story not necessarily as an objective episode, but as a succession of events with varied importance as they appeared to the writer. The style tends to blend factual and fictional elements to emphasize an underlying message and engage the reader. Often, Thompson, himself, would incite happenings much like an ethnomethodologist and report on his reactions, as well as the reactions of others as he interpreted them. He would also use quotations, sarcasm, humor, exaggeration, and even profanity.

The features of what I am calling "Gonzo Sociology" takes some of the same basic principles Hunter S. Thompson used in his writing style. In this instance, the culture of ableness will be viewed as a news story I am reporting on. My place in the story as a "subjective" observer different from the social locations of those I am studying allows me to comment on the same events in different ways. This is because the social structure operates on us in very specific ways and my position, made up of all the social intersections at work on my perspective, creates a slight turn that allows me to see things about the people I study that they might be oblivious to. I am not pretending that the knowledge I am generating is "objective" or "value free." In other words, if all knowledge is influenced by one's social location or vantage-point than it can never be "objective" but always is "perspectival."

Drawing from both Intersectionality Theory and Poststructuralism, like many "third wave" writers of my generation (Dent, 1995; Walker 1995; Henry, 2003), I have an epistemological approach that appreciates the socially situated and socially constructed nature of knowledge. I share with these perspectives' distaste both for essentialist analysis where differences are submerged in homogenized group categories and for binary or dualistic thought that contains hidden hierarchies and allows no flexibility or fluidity to social identities. I also have a strong preference for personal narratives where no one "speaks for" an "other" and where multiple vantage points and realities are recognized. I believe the only way to develop a theory of critical ableness is to always be aware of my social location as I report on the effects of inequality between bodies. Given that I am dealing with a rather existential issue—able-bodied solipsism—to reach more people, I rely on personal anecdotes told from my particular vantage point in a more literary, almost creative, non-fictional, style. This style also enables me to better interpret the meanings I pull from the narrative and to better critique the power dynamics that deem my social location as "disabled" and that

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silence my knowledge as naïve, less credible and, hence, as "subjugated knowledge" in the Foucaultian sense (1979). While this seems to be a recoining of a sociological tradition already in place, such as Critical Race Theory theorists' use of story telling (Delgado and Stefancic, 2001; Bell, 1993; Williams, 2005), I wish to go one step further, offering up more literary components to the methodology. This includes such devices as scene and dialogue that accompany the narrative. Thus, using "Gonzo Sociology" and theory construction through personal narrative helixed with scene and dialogue, I hope to break down the binary dualisms of able-bodied/disabled and challenge conventional conceptions of "bodily inequalities" in ways that a larger audience can come to appreciate and identify with.

ABLE-BODIED SOLIPSISM: AN INTRODUCTION

I love my father very much, but I have never understood his fascination with scatological humor. Growing up, there was always this one obscene joke, the mere mention of which, my sister and I were always made to leave the room. Of course, it was recounted at every single gathering we ever had at our home, and, I am quite positive, whenever my parents went out without us. My mother would always shoo us out of the room and remind us that this particular joke was just a little too improper for children, even for the son and daughter of a man with the mouth of a sailor. The exit was torture for us, but we always obeyed and left the room.

At long last, when I hit the age of seventeen, as a rite of passage I suppose, I was allowed to "view" the mystical joke that had captured our curiosity for so long. It was at a family gathering in our home one evening after someone mentioned the infamous ritual. My father felt I was old enough to hear the joke that had gained him so many laughs from years passed, so I was allowed to stay in the room; my sister still had to leave. I am horrible at telling jokes, myself, so there really is no way for me to suitably retell it here; not that I should want to, except for its pedagogical value. To be honest, I was not very impressed when I first "saw" it.

The essential setup for the joke revolves around a man who loses his arm in some horrific accident. Doctors are unable to reattach the appendage, so they fit him with a prosthetic with a special twist. Instead of somehow rigging it to some of his muscles for minimal movement, they insert a microchip in his deltoid that he can speak into; the arm reacts by doing whatever the differently-abled man commands. As unfunny as that sounds, the joke actually begins, as my dad has reenacted on many occasions, when the man first tries out his new bionic arm in, of all places, his bathroom in front of his toilet. He starts out by speaking simple commands like "unzip my pants" into his deltoid and acts out how he believes the arm responds. Because this is a joke told by my father, though, the situation, of course, turns completely outrageous. And when the obscenities begin to fly from my father's mouth, he begins a sexually charged fandango in the middle of the room led by his whole arm, which flails wildly around in a vulgar, suggestive manner. The crowd around him usually erupts in a tirade of laughter.

What is most interesting and significant about this joke, to me, is not the punchline. What interests me about this carefully orchestrated interpretive dance starring a prosthetic arm is that it only gains cultural importance and meaning within the context of a joke. My father, in telling this joke, sees nothing wrong with mining humor out of the plight of a one-armed man. For

him, this is just a joke and does not represent anyone in the real world. While this may be true to a certain extent—as I have mentioned the impossibility of voice recognition chips in deltoids—the impairment that afflicts the man is very real, with real consequences. In this respect, because my father is an able-bodied person, he lacks the verstehen necessary to empathize with his character. The creativity involved in acting with an impaired body does not draw a parallel to the daily routines of my father's own life or conscious existence. After the joke is over, the party resumes, and no one gives another thought to their own bodies in relation to the one-armed man or the negotiations of his everyday life. The slippage between social structure and the positions of all those in attendance does not affect their footing; they rely on the discourses of ableness provided to hold them up like a crutch.

The problem lies in the fact that the able-bodied population have the luxury of a culturally meaningful solipsistic perspective with regard to the physical/social environment within which they act; my father really was not thinking about how power preys on the differences between his able body and the body of his impaired character, nor was he even cognizant of this joke's affect on his "impaired" son—which, however, is not my point. The point is that he forgot about his body as privileged next to the impaired body. He did not consider the fact that an actor's able body gives one an advantage when interacting with the objects located in the world of everyday life; the impaired body, in his consciousness only at the time of the joke, is seen only as a thing of humor. Yet, the objects of everyday space and their organization within that space are careful expressions of the institutions of engineering design, which includes the sciences of Human-Factors Engineering and industrial design. Engineering is the design, analysis, and production of, in this case, everyday items for practical purposes. Institutions such as these use the knowledge of Human-Factors Engineering to presuppose that the able body is the normative feature of all those who will interact with the items in the spaces they fabricate and organize; therefore, the objects these institutions produce cater to the able body, the effect being that the able body and the object it is in concert with fade from consciousness during social action.

Able-bodied measurements of adroitness, dexterity, and physiology reflect a research epistemology that impacts everything from the height of kitchen counters to the placement of automobile pedals to a book's type size. It is this type of knowledge reflected by a science that aims to represent a wide range of human diversity in the everyday world with culturally important sets of standards and measurements for the construction of physical objects. While this knowledge captures a great number of the abilities and ranges of human anatomical measurement, on the whole, design "normalizes" the able body, garnering it unearned and unacknowledged privilege. Other bodies that have become affected by impairment, then, are marginalized by the vision of a normal everyday world.   In this respect, I define the chronically ill/disabled population I am

studying as any person who does not fall within the measured standards of engineering design. This includes those who are extremely tall or short, those who are infirm because of [a] body part[s] that do[es] not work "correctly," or those who have pain or experience anxiety as they interact with objects in the physical/social environment. As Mary Jo Paterson (1998) explains, the principles of traditional designs are based on able-bodied, non-elderly adults who make up less than 15 percent of the population (8).

Through the application of a standard, yet able, body, culture is codified, displayed, and as I will show later, forgotten in the pursuit of efficiency. Everything from the way products are designed and scripted with behavior, physical objects are organized and articulated in physical/social spaces, and people move is a very specific expression of a self-generated, culturally meaningful discourse echoed by science for the able body. The physical/social environment is built such that it accommodates the able-bodied person in concert with it. This is done so that the person does not have to think about the fact that their body is the acting agent in the environment. The body becomes part of a well-oiled machine where action is expected, automatic, and not dwelled over.

It is my aim to infiltrate this forgotten realm of able-bodied habitus and to illustrate how able-bodied people learn to disregard conscious attention to the fact that they are people with acting bodies. The importance of a study such as this one is that, in showing how the dominant culture of the able-bodied is constructed, I can show how the power structure gives able-bodied people an unearned, unconscious notion of privilege. In other words, because attention to the body fades from consciousness in social action, so too does the ability of the able-bodied person to see the privileges that they acquire from institutions that deem them "normal" and cater to their body types. Furthermore, because able-bodied people exhibit a culturally-derived, solipsistic perspective with regard to the objects around them in everyday life, it appears as if this is the only set of ways certain actions are done, despite the fact that other ways of "doing culture" do exist. Such examples include the presence and importance of deaf, blind, and wheelchair cultures that organize and negotiate everyday life in ways different from able-bodied life. This will hopefully place these people in a more salient position in the minds of the able-bodied as they interact with the environment and also make them more aware of their bodies. In the same vein, I would hope that this realization would expose the able-bodied assumption present in the ways in which we come to know knowledge, yet this knowledge is affected by a fluid salience of multiple social forces.

In this theoretical and exploratory study, I intend to discover how the concept of ableness is constructed in our culture. This includes the meaning created in the scientific knowledges of engineering design, which is handed down to able-bodied

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people. In effect, action in the everyday world for them becomes an automatic, bodily-unconscious endeavor. Their world is one where they do not realize the potential fragility of their own bodies, and thus, take for granted the fact that one day they too might experience the social constraints and creativity of disability. I also will limit my analysis of the scope of design to that area which measures and constructs for comfort and efficiency in the realm of the everyday; thus, I will analyze the standards and measures of Human-Factors Engineering and their expression through engineering design.

First, though, a history of disability studies is in order.

A History of Social Thought Regarding Disability

In order to turn the tables from a discussion of the disabled to an examination of able-bodies, thus opening up a dialectical conversation of "ableness," I think it is important to reconcile the problems of the already present disability studies. It is, therefore, imperative that I am clear on exactly what the tenets and characteristics of the culture of the disabled are.

Structural-Functionalist Perspectives

In the first half of the 20th century, views of disability were closely associated with deviance. Here the disabled are viewed as deviants—as abnormal.   This was characteristic of the analyses of disability and sickness undertaken by Structural Functionalism which was hegemonic in American Sociology from the early 1940's to the early 1960s. This view has been summed by Bury (2000), in his article "On Chronic Illness and Disability." He comments on Talcott Parsons' model of sickness and disability by summarizing Arthur Frank:

> Illness is regarded, normatively, as an undesirable state, and the "enactment of illness," so to speak, is hedged about by strictures and limitations. Being ill (or "sick") is thus socially regulated in order to minimize its disruption to the social system, as well as to individual lives [...] Patienthood therefore reduces social threat of illness by rendering the patient passive and by insisting on a return to social functioning as quickly as possible. The negative experience of illness (and loss of "personhood") is as much a function of normative values as it is of its biological effects. (173)

Overall, Parson's theory portrays disabled people as passive bodies that accept and deal with the stigmas bestowed upon them by society. They are operated on, forced to sit for prosthetics, and treated as if something is wrong with them by doctors and other professionals who aim to make them "normal" again. Talcott Parsons (1951) coined the term "sick role" to describe the rights and obligations of the ill and disabled. He stated that during illness or disability, a person becomes exempt from normal social roles, is not responsible for their condition, and is obligated to place his recovery solely into the hands of a health professional.   Thus, the person becomes a passive object and all power and social agency is placed in the hands of scientific experts – like the medical profession. Parsons ignored these power differentials between "experts" and "patients" precisely because he thought they were functional and thus legitimate. In keeping with his functional theory of stratification, if power is based on technical skills and meritorious credentials, then power is automatically transformed into authority or the legitimate right to rule or make decisions.   Interwoven with this view of experts as wielding legitimate authority was a focus on how the normative structure dealt with disorder and deviations from norm – which in this case were deviations from able-

bodiedness.   In short, this approach highlights the social agency of medical experts, treats the patient as a passive object and

legitimates this unequal relationship by the functional roles by meritocracy and the normative structure. However, in the 1960s,

Parson's macro-sociological perspective on disability would be challenged by micro-level, interpretative approaches that

highlighted the "symbolic" features of two-way "interaction" rather than functional, one-directional role of meritorious social actors.

INTERPRETATIVE OR HERMENEUTICAL MODELS

Perhaps the micro-level approach that had the most influence on American Sociology in the second half of the 20th

century was Symbolic Interaction. This approach challenged Parsons' medical model of sickness/disability not only because of

its micro-orientation, but also because of its use of a more interpretative, hemeneutical approach to social interaction. Here

social facts were not just "things" as in Parsons' Durkheimian-inspired structuralism, rather there was a recognition of how

different meanings or interpretations – which Symbolic Interactionists referred to as different "definitions of the situation"—

affected social life.   They recognized that what is defined as deviant in one culture or subgroup may not be defined as deviant in

another. Hence, diverse standpoints or vantage points were more critically addressed.   Howard Becker's (1963) labeling theory

exemplifies this alternative approach in that he discusses how it is the definition of the situation that causes a person to be

placed into a category of disability. Moreover, Becker recognized that these definitions of the situation were not only socially

constructed, but also they could place constraints on individuals for carrying a disability.

Erving Goffman's (1963) *Stigma* expresses a similar type of approach in that the stigmatized are discredited in society

before they even enter into contact with the "normals." Moreover, these carriers of stigma are not without social agency.

Indeed, they may engage in "impression management" to manage or hide their abnormalities until they are found out, and only

then do they become victims of the societal norms that makes them feel like less of a human. TanyaTitchosky's (2000) analysis

of Goffman's (1963) *Stigma* boils down to the observation that "disabled people occasion a trauma of recognition which obtrudes

upon a normal's sense of normalcy as an expected feature of daily life" (205). In this respect, she shows wittingly or unwittingly

how the symbolic interactionist approach shares some similarities to Parsons' Structural Functional model in that for both -

normalcy is held to the highest regard. Moreover, in Symbolic Interactionism, it is the "interaction" between a disabled person

and a "normal" where the disability is recognized or not as lacking an attribute that makes the disabled person less "human."

She also acknowledges that Goffman understood normalcy as an ideal unattainable by all humans in society (205). Indeed,

Goffman argued that all people carried stigmas (often as skeletons in their closets), even though they may or may not have these stigmas recognized or perceived by others.

THE CURRENT BINARY OF DISABILITY STUDIES

The current debate in the field of disability has shifted away from a structure and social agency debate to a debate over the location of the impediment. On the one side of this debate are those who believe that social action is obstructed only by biological impairments, while on the other are those who believe that social action is limited by the social structure, having nothing to do with individual impairments.

THE MEDICAL MODEL

In the 1990's, the medical model of disability was transformed from the earlier "sick role" model to argue that the impairment associated with the impaired person should be the focus of study; in other words, the study of disability is best understood in terms of the biological disruptions associated with the body itself. People's actions in the social world are limited only by those impairments that affect them personally. In this regard, Michael Bury (2000) states that disability studies in the past have been oversocialized: meaning that social institutions do not account for diseases that physically immobilize humans. This lens affords the experience of disability as a very individual endeavor; it sidesteps the question of whether disability is a social construction or the bases of social oppression. As Carol Thomas (2002) states,

> In my view (a view not shared by many in DS) this literature in medical sociology is of interest and value, but it is not a sociology of disability. It does not begin to address the issues of pressing concern to many disabled people: independent living, poverty, employment, education, communication, transportation, accessing built environments and civil rights. (44)

This new medical model of disabilities is also ahistorical, in that it does not account for the changing tides in the social world that may affect the patterns of social action that may be deemed acceptable, while others are not. These flaws suggest that medical sociology lies outside the realm of sociology itself, although it claims an important component of disabled experience—impairment—that needs analysis.

THE SOCIAL MODEL

The social model of disability removes what is wrong with the individual and places it in the realm of society, as if to say that the problem is something located in a social context, not with the impaired person. The view of disability deviates from

being an individualistic endeavor to a group problem, as social structures marginalize those who cannot interact with them; this view is historical in that structures change over time, suggesting that definitions of disability, over time, change as well. Therefore, this gives the disabled, as a whole, the power to fight for their place in society. It is an adequate method for empowering those who can, and will, fight for the rights they deserve as human beings, rather than forcing them to accept their position as an impaired human. Gershnick and Miller (1994) were some of the first sociologists to use the social model of disability. Using only a subset of the disabled population, they studied the lives of males who are physically disabled as active, participating people who affect their own position, or situation, in society. Their model examined how men deal with physical disability in the face of a hegemonic masculinity that constantly reminds them that they do not stand up to the ideals of strength, endurance, athleticism, and intelligence. Their argument is that physically impaired men engage in a complex set of coping mechanisms that allow them to create a positive self image in spite of their limitations. Gershnick and Miller (1994) state:

> We call them the three R's: *reformulation*, which entailed men's redefinition of hegemonic characteristics on their own terms; *reliance*, reflected by sensitive or hypersensitive adoptions of particular predominant attributes; and *rejection*, characterized by the renunciation of these standards and either the creation of one's own principles and practices or the denial of masculinity's importance in one's life. (351)

This model is important to the view of agency in the lives of the disabled in that it allows men to examine their own life situation and create, for themselves, a positive self outlook based on how they believe they either live up to male masculinity or reject it as a stronghold in their life. A similar approach can be found in Anthony Chen's (1999) study of Chinese American men who must bargain with the hegemonic ideal of masculinity in order to fit the mold.

The major problem with this model is that it ignores the different ways that people navigate the social world, based on their different impairments. The social model tries to lump all impairments under an essentialist umbrella of "disability." Yes, social action is impaired by the lack of accommodations for the impaired body, but the ways in which impaired people interact with those structures are quite different. To suggest that the social world is the only culprit in the realm of the disabled is a fatal flaw; I believe the situation is much more nuanced and complicated.

RECONCILING THE IMPEDIMENT TO SOCIAL ACTION

While both models have been fruitful with regard to the future of disability studies, some disability theorists (Williams, 2001; Hughes and Patterson, 2000; Turner, 2001), including myself, have come to believe that the social and medical models of disability both lack a very important aspect of the disability schema: namely, each other. I believe that both models only tell half of the story of the disabled experience, which begs the creation of a new model that takes into account the disability that social

obstacles present, as well as the biological features of impairment. Yet, we must remember that there is an important difference between "impairment" and "disability," especially in regard to the implications for the able-bodied populations to forget that they may become disabled at any moment. For the purposes of this thesis, impairment will refer to a biological condition that negatively affects the body; it does not differ throughout history. Actions become limited in specific ways, due to specific biological disruption. Disability, on the other hand, differs throughout history: it is the effects of social structure on actors, based on the importance culture bestows to particular ways of performing social actions and the ever-changing environment, based on technology, where one is located. Disability, then, forces the actor, impairment in mind, to negotiate with an object in order to succeed at a goal or accomplish a task; therefore, the disabled performance is a creative one.

In the following section, I will apply these two forms of impediment to social action to the social construction of the categories of the "able-bodied" and the "disabled." I believe these are fundamental attributes that are used to set both of these bodies apart in the everyday world.

UNEQUAL BODIES

Drawing from both Poststructuralism and Intersectionality theory, I will show how the meshing of these two theories illustrates the construction of the category of ableness and the "othered" categories of disability. Further, I will also expound on the strengths and weaknesses of these perspectives. I begin by discussing some of the major assumptions I draw from Intersectionality Theory.

INTERSECTIONALITY THEORY

The term "intersectionality" was coined by Kimberlé Crenshaw (1989), who used the term to express how gender and race were both important forces at work in the tendency for violence against women, although she acknowledged that other intersections were also at work. Yet, this discussion first described the major crux of this approach: it illuminates the simultaneous and interlocking nature of oppressions, such that all forms of oppression overlap each other. This means for the case we are studying that both able-bodiedness and disabledness are always racialized, gendered, and influenced by one's social class location. We cannot speak of disabled or able-bodied people without taking these different forms of privilege and penalty into account. Thus, while I often contrast the able-bodied from the disabled in this thesis, I want to emphasize that I am aware that *within* these binary groupings there are significant differences between people's social locations by race, gender, and social class.

Intersectionality Theorists also developed a number of concepts and practices from their own marginalized experiences within the U.S. that fostered an epistemic break with more dominant forms of U.S. feminist thought. This epistemic break entailed a focus on socially constructed and situated knowledges that recognized how people construct knowledge from situated locations within different races, classes and genders and how these diverse locations influence how people view the world. Collins writes:

> The overarching matrix of domination houses multiple groups, each with varying
> experiences with penalty and privilege that produce corresponding partial perspectives,
> situated knowledges, and, for clearly identifiable subordinate groups, subjugated
> knowledges […] No one group has a clear angle of vision. No one group possesses the
> theory or methodology that allows it to discover the absolute truth or, worse yet, proclaim
> its theories and methodologies as the universal norm evaluating other groups
> experiences. (1990: 234).

This idea of a "matrix of domination" also will be used in this study to highlight how this matrix includes not only racial, class, and gender positions of privilege and penalty, but also locations of privilege and penalty based on whether or not one is able-bodied.

Many Intersectionality Theorists took this analysis further to discuss how marginal social locations generate critical vantage points for understanding social life and called for a feminism that moved from margin to the center and that decentered dominant discourses. In her book, *Feminist Theory: From Margin to Center* (1984), bell hooks uses the example of the railroad tracks as a reference to the physical barriers that separate African-American spaces from white spaces. Because the African American population is forced to live across the railroad track, yet work with white people in their spaces on the other side of the railroad, they are offered a rare glimpse into the construction of both worlds. Their position allows them to deconstruct the privileges whites have as a racially dominant group. They can see the cracks in the system: in her case, how multiple oppressions operate simultaneously on a person (1-5). In the same way, I will argue that the disabled must move between two worlds – their own and the dominant world of the able-bodied. As such they have a potentially critical vantage point for seeing the social construction of both worlds that can better understand and theorize on these issues. In turn, because of their movement between these two worlds, the disabled also are more aware of the solipsism of the world of the able-bodied.

The epistemological assumptions noted above merge easily with Poststructuralism because it too has a social constructionist view of knowledge that recognizes how all knowledge is socially situated and partial. Consequently, like Intersectionality theory it also focuses on differences and the decentering of dominant narratives. In my study of able-bodied solipsism, I think it is important to try to merge the strengths of both Intersectionality Theory and Poststructuralism. On the one hand, I reject binary thought that obscures the hidden hierarchies of how binaries often treat the "other" as "lesser". I think these hidden hierarchies are present in the able-bodied/disabled binary terms that are frequently used in disability studies. I also reject essentialist thinking that ignores differences by race, class and gender *within* these able-bodied or disabled bodied collective categories. Clearly, a person with more wealth can often cope with many bodily impairments easier than can a poor person with the same impairments. Hence, I also want to be attentive to the intersections of race, gender, and class *within* and *between* the collective categories of the abled and disabled. I believe the strategic adoption of the existing collective categories of the able bodied and the disabled can used provisionally in order to explore and document the inequality among social groups and among changing configurations of inequality among multiple dimensions. As Leslie McCall (2005) states,

> The intercategorical approach (also referred to as the *categorical approach*) begins
> with the observation that there are relationships of inequality among already constituted
> social groups, as imperfect and ever changing as they are, and takes those relationships

as the center of analysis. The main task of the categorical approach is to explicate those relationships, and doing so requires the provisional use of categories. As Evelyn Nakano Glenn writes, in advocating for a greater emphasis on relationality in studies of intersectionality, scholars can treat race and gender categories as "'anchor' points— though these points are not static" (2002, 14). The concern is with the nature of the relationships among social groups and, importantly, how they are changing, rather than with the definition or representation of such groups per se, though some scholars like Glenn (2002) engage in both practices to great effect.[17] Finally, the type of categorical approach I am developing here goes further in exploring whether meaningful inequalities among groups even exist in the first place. Perhaps inequalities were once large but now they are small, or in one place they are large but in another they are small. This perspective leaves open the possibility that broad social groupings more or less reflect the empirical realities of more detailed social groupings, thus minimizing the extent of complexity. (1784-5)

In this way, by adopting the temporal categories of "ability" and "disability," I can show how biological impairment and the social structure cause inequality between bodies.

Having described above what I am drawing from Intersectionality Theory for this thesis, let me now articulate some of the ideas I am taking from Michel Foucault's Poststructuralist approach. In particular, I will focus below on Foucault's insights into how the rise of modernity was accompanied by the rise of scientific discourses on "normality"—medical, biological and social scientific discourses—that are relevant to this thesis on able- and disabled bodies.

POSTSTRUCTURALISM

Through an historical, poststructuralist approach we recognize that: "One of [Foucault's] major contributions was to show how the rise of democratic republics in the modern era was accompanied by the development of more subtle forms of power, control and discipline that had been used in earlier societies based on more visible and absolute forms of power" (Mann, forthcoming). She describes this Foucauldian view of modernity as follows:

> [Foucault] distinguishes modern societies from earlier types by referring to them as 'disciplinary' or 'surveillance' societies. These types of societies entailed subtle forms of control that were directed toward the management of life processes—of bodies as biological organisms and populations as living, social bodies. Created by the rise of the new scientific discourses about human beings, such as the social sciences and modern medicine, these subtle techniques of control specified, for example, what is normal or abnormal, natural or unnatural, sane or insane. They also developed categories that 'scientifically' delineated the differences between different bodies, such as between the sexes, the races, or the able-bodied and the disabled. (forthcoming)

For Foucault, discourses reflect the integral relationship between power and knowledge. For example, discourses that distinguish the normal from the abnormal, the able-bodied from the disabled not only restrain people and their behaviors in terms of people having to "perform normally," but they also produce our identities as normal or abnormal in the process. As he adeptly

uncovers, institutions use particular discourses to reduce people into criteria for binary categories, even though no such dichotomies exist. People become boxed in by categories marred by unequal treatment and significance. Julie Bettie (2003) explains this notion of discourse well; she writes,

> Discourses are 'competing ways of giving meaning to the world, which imply differences in the organization of social power' and have implications for the social practices in which we engage (Weedon 1987) [...] By discourse, then, I mean constellations of 'knowledge,' together with institutionalized social practices, which are politicized and result in an array of possible subjectivities. Discourses, or public meaning systems (political, social science, popular culture, etc.), are the material for identity formation. (54)

Here, Bettie (2003) refers to the fact that discourses do not just constrain, they produce in the sense that they become the bases for the formation of identities for all people, whether part of a privileged or oppressed group. Hayward (1998) adds, "Discourse may be seen as divisive, that it privileges one notion of truth above another, and in its implementation involves the exercise of power. This is very much the Foucaultian perspective" (219). In such a way, discourses even provide scripts for those in marginalized positions, defining the unnatural "right" way to do things, so as to set them apart from the "natural," privileged way to enact culture.

Furthermore, for Foucault, biopower is a technology of power, which is a way of managing people as a group. The distinctive quality of this political technology is that it allows for the control of entire populations. It is thus also essential to the emergence of the modern nation state and modern capitalism. Biopower is literally having power over other bodies, "an explosion of numerous and diverse techniques for achieving the subjugations of bodies and the control of populations" (Foucault, 1980: 140). It relates to the government's concern with fostering the life of the population and regulatory controls. Biopower for Foucault contrasts with traditional modes of power based on the threat of death from a sovereign. In an era where power must be justified rationally, biopower is used by employing an emphasis on the protection of life rather than the threat of death, on the regulation of the body, and the production of other technologies of power. Regulation of customs, habits, health, reproductive practices, and family are some examples of biopower. As I will show in the next section, efficiency and comfort are driving forces in normalizing the able body by creating items that cater to their bodies.

THE SOCIAL CONSTRUCTION OF THE NORMAL BODY

In order to discuss ableness through using a "Sociology of the Body," it is first necessary to track the social actor. The two pieces to this puzzle include a social structure, or an overarching set of institutions that exert controls over its constituents through built-in inequalities, and a sense of agency which allows the actor to reproduce these inequalities or resist them through his/her performances or social actions. Exploring agency reveals the freedom an actor has within the confines of a social structure that precedes all individuals. As the following section will show, it seems that social actors have become the victims of institutions that effectively control them, using the powers of inequality without exerting physical force. In other words, by controlling the fabrication of items that cater to the ways in which the able-bodied interact with the world, I argue that institutions cause the able-bodied to cease to see the privileges afforded to them. Exploring the "Sociology of the Body," then, is an ethnographic venture into how people make sense of their world in relation to their surroundings that have been overrun with inequality given cultural meanings and group importance, and, by 'importance,' I mean advantage.

PERFORMATIVITY

In poststructuralist analyses, identity is not only a product of discourses, but also is a reflection of the idea of "performativity," which was first described by Judith Butler (1990) in her work on the social construction of gender, later expounded upon by Julie Bettie (2003). Both theorists explain how identities precede individuals, existing within the overarching social structure of a given culture. Although Bettie's focus is on social class and she shows how "performativity" operates in regard to social class relations, the process can be applied to multiple intersections. She writes,

> It is useful to think of class as *performative*, in the sense that class as a cultural identity is an effect of social structure. Little attention has been paid to thinking about class as performance or as performative. To conceptualize class in this way is not to ignore its materiality. There is always the materiality of the body in thinking about race and gender (the continua of phenotype and of sex), whose meaning is negotiated and made more or less salient by culture. (51)

Bettie also integrates her poststructuralist analyses of performativity with some of Bourdieu's analyses of the relationship between structure and social agency – especially his notions of "field" and "habitus." For example, when the body is acted upon by within a particular "social field", defined by discourses that aim to benefit and to subjugate, it causes that particular person to enact a particular, individual habitus, based on attained cultural capital. Bettie defines habitus as "one's unconsciously enacted,

socially learned dispositions, which are not natural or inherent or prior to the social organizations of class inequality, but are in fact produced by it" (51). Shilling (2005) defines a 'social field' as, "A set of dynamic organizing principles, ultimately maintained by social groups, which identify and structure particular categories of practices in a social space" (61). These principles have an intimate connection with the particular habitus of each actor. What Bettie (2003) means here, in defining habitus, is that there is an unequal level of cultural capital, or cultural items that have meaning and importance, that class subjects are given access to based on their position, and this helps to create a specific way of life for that person. Cultural capital includes what is necessary knowledge in belonging to a particular social location. Examples of types of cultural capital in regard to forms of entertainment include such things as knowledge of the theatre or symphony or knowledge of proper cutlery or varieties of cheese. What is interesting, as noted earlier, is that these dispositions affect the way we interact as embodied beings within a particular culture, and how the importance and meanings of such practices can change a social field within a cultural canopy or over historical disruptions within a society.

Yet, the fact that cultural displays on the body and behaviors can change within a particular society seems to present a problem: the actor seems to be at the mercy of the strokes of discourse. As Bettie (2003) states,

> The work on performativity that comes out of cultural studies and poststructuralist feminism (Butler 1990, 1993, in particular), both of which offer a radical constructionist analysis of gender, race, and sexuality, holds something in common with the constructionism of symbolic interactionist sociology and ethnomethodology (Goffman 1956, 1967, 1974; and West and Fenstermaker 1995, in particular). There are important differences between the two, however, which are reflected in the long-standing structure/agency debate. Symbolic interactionist sociology and ethnomethodology have been long critiqued for tending toward a subject too readily construed as an active agent outside of the autonomy of social structures that preexist and produce various performances. A widespread misreading of Judith Butler's notion of performance also conceptualizes actors as agents who are free to choose identity performances. In actuality, in her poststructuralist framework there is no actor/agent who preexists the performance; rather the subject is constructed by the performance. (53)

Performance is not a voluntary choice for Butler, who locates the construction of the gender, sex, and sexuality within what she calls "regulative discourses." These "disciplinary regimes" decide in advance what possibilities of sex, gender, and sexuality are socially permitted to appear as coherent or "natural." Regulative discourse includes within it disciplinary techniques which, by coercing subjects to perform specific stylized actions, maintain the appearance, on the actor's body, of the "natural" gender, sex, and sexuality the discourse itself produces. West and Zimmerman (1987) discuss these interactional pressures to conform to natural standards when performing or "doing" gender. They write, "Doing gender furnishes the interactional scaffolding of social structure, along with a built-in mechanism of social control. In appreciating the institutional forces that maintain distinctions

between men and women, we must not lose sight of the interactional validation of those distinctions that confers upon their sense of 'naturalness' and 'rightness'" (147). The result of these unconscious invasions by discourse is that the performance of identity is not based on any core sense of self. Bettie (2003) writes,

> We are always performing our cultural identities, and the performance is the self.
> Performance is all there is, because no identities are natural; they are all constructed.
> But, on the other hand, those constructed subjectivities are from the interactional
> performance, so there is a fixity to those identities, which is what makes it possible for
> people to have a provisional, temporal 'real' self. (52)

The problem then becomes whether the social actor has any agency in the social structure they are located, or if they are completely controlled by the discourses that box them in and regulate how they behave and display culture.

Indeed, one of the major features of Foucauldian analysis includes the idea that discourses of normalization institute certain "technologies of power" that coerce social actors to police themselves without any outside force. His most famous example is the panopticon, a prison system with a central tower where only few guards are necessary to watch over many prisoners, who can not tell if they are being watched at any given moment. Thus, the fear of being caught doing something wrong becomes a guiding motivation for remaining passive in their cell (Foucault, 1979:201-202). More modern, and simplistic—in the sense that it does not take much for the actor to become docile—examples of such technologies include small job requirements that thrust them into submissiveness. It would seem that technologies of power acting on people would, in fact, remain in the conscious mind of those who were being affected negatively. Yet, technologies of power coerce actors into docility. Prisoners do not question the presence of the panopticon watching over them; they focus on the expected performance required of them. Technologies of power, are in a sense, absent from the conscious experience of the social actor, as they force all of the person's attention to focus on the performance they silently represent or elicit.

PERFORMANCE

Bettie (2003) addresses the issue of social agency by introducing the idea of a performance as a "conscious attempt at passing" within another, in her case, class (52); the purpose being an attempt at mobility, such as talking "white" in front of white friends and talking "black" in front of African-American friends. Therefore, this is a method by which someone attempts to pass in front of a group they do not belong to, by their place in the axis of social locations, which are fluid. Bettie (2003) writes,

> By passing I do not mean to infer an essential subject that is being covered up, but rather
> this institutionalized temporal 'real' self that is indeed constructed, but not routinely taken
> to be so by the social actor. It is cultural and material structures that make these

> subjectivities possible, and while those structures are historical and contingent, not
> inevitable, but constantly being reproduced in practice, it may not always feel like it. (53)

Performance is just a temporal self adopted from a range of preexisting identities—identities that are organized according to the criteria of social location. Similarly, Shilling (2005) writes, "Bourdieu suggests that individuals develop a taste for acquiring bodily appearances, competencies, and performances that raise their stock within those social fields most likely to reproduce their existing social status" (63). Bourdieu (1984), himself, adds, that the amount of work a person of a certain class does on their body to enhance their self-presentation is "proportionate to the chances of material or symbolic profit they can reasonably expect from it" (202). Furthermore, people, through their "acceptance" and performances of those identities, make the consequences of such a character real.

West and Zimmerman (1987) also focus on social agency or performances. They have shown that gender is not only a perspective that one internalizes; it is also an interactive process by which people are expected to act in certain ways according to the preexisting gender identity they choose to perform. Using the example of Agnes from a case study of a male-to-female transsexual by Harold Garfinkel (1967), West and Zimmerman (1987) write:

> Agnes, whom Garfinkel characterized as a 'practical methodologist,' developed a number
> of procedures for passing as a 'normal, natural female' both prior to and after her
> surgery. She had the practical task of managing the fact that she possessed male
> genitalia and that she lacked the social resources of a girl's biography would provide in
> everyday interaction. In short, she needed to display herself as a woman,
> simultaneously learning what it was to be a woman. Of necessity, this full-time pursuit
> took place at a time when most people's gender would be well-accredited and routinized.
> Agnes had to consciously contrive what the vast majority of women do without thinking.
> She was not 'faking' what 'real' women do naturally. She was obliged to analyze and
> figure out how to act within socially structured circumstances and conceptions of
> femininity that women born with appropriate biological credentials come to take for
> granted early on. (131)

The significance of this situation, for Agnes, is the fact that she must learn how to present herself as a female, the tenets of which are prescribed by a social structure and understood through a set of discourses that outline feminine identities. In following these prescriptions, she effectively presents herself as a female in the presence of others who might sanction her if they knew she did not possess the correct biological stamp of femininity. She must be conscious of her presentation at all times, as not to slip up and give away any indication that she is a male. If Agnes walked into a courthouse, discourse would be the judge and other individuals around her, including those at the center and at the margins, would be the jury, evaluating whether or not she successfully passed. In the same way that Agnes was "doing gender," below I will argue that people "do ability."

"DOING ABILITY"

I use the term "negotiation" to refer to the creative process of dealing with the physical/social environment, built on able-bodied assumptions. Indeed, the way in which I am using this term may be understood better if it is related to what Pierre Bourdieu (1977) calls *habitus*. As noted above, *Habitus* refers to a set of acquired patterns of thought, behavior, and tastes, or "dispositions," that are the result of internalization of culture or objective social structures through the experiences of an individual or group. If one is impaired, one may experience a constant failure to internalize those patterns because they have been designed for a range of bodies deemed "normal." I would also posit here that internalization of a habit or routine is made extremely hard to creatively redefine as an able-bodied person because the object begs their body to interact with it in a predefined way, based on the anatomy of an able body; therefore, the same patterns of thought and expected able-bodied motions perpetuate throughout a history of routines with objects. A simplistic example is that of sitting in a chair. For an able-bodied person, the ways in which they act socially are given cultural meaning, reinforced by the speed at which they are able to interact. These scripts define what it is for the able-bodied to "do ability." Consequently, an impaired actor is forced to creatively negotiate on a continuous basis with the everyday object routines that are so easily internalized by the rest of the population. Therefore, because an impaired person's body does not conform to the culturally important objects they interact with, they must create new methods, based on their specific impairments, for sitting in a given chair. The actor must negotiate it with impairment in mind, a negotiation that may also include their attitudes and behaviors; patterns are much harder to form in this respect, and creativity must endure in the minds of the disabled. These creative negotiations are examples of what West and Zimmerman (1987) define as cultural performances or "doing culture;" but in this case, actors "do ability" or "do disability." Furthermore, while "doing disability" should be the cause for an appreciation of both social agency and creativity, more often it entails negative social sanctions from other members of society who "do ability," since in performing tasks differently than is normatively expected in society, people become the target of ridicule or scorn and are viewed as lacking in appropriate social agency.

In the next section, I will show how the performances of the able body are catered to by the scientific discourse of Human-Factors Engineering for the purposes of efficiency and comfort. This, in effect, "normalizes" the able body and treats it as privileged.

THE SCIENCE OF HUMAN-FACTORS ENGINEERING

I believe the difference between able-bodied and impaired bodies is that items of material culture are designed in a specific way, defined by certain beliefs about the adroitness and abilities of the human body as "normal," or able. Because the able embodiment is reproduced without salient thoughts about the body in action, I believe that the scientifically engineered objects in our everyday environment are effectively furthering the tendency that the body and object fade from consciousness. As Henry Petroski (1992) states in the opening lines of one of his many books on the engineering design of everyday items, "The eating utensils that we use daily are as familiar to us as our own hands. We manipulate knife, fork, and spoon as automatically as we do our fingers, and we seem to become conscious of our silverware only when right- and left-handers cross elbows at a dinner party." This is the fundamental purpose of the science of engineering; it operates on the principle that things that we use in our everyday lives should fall into unconscious use. Because objects become extensions of organs, extending their aptitude, as Gehlen suggests, the objects fade from consciousness as well. If objects cause pain, the focus turns not only to the pain located on the body, but to the object in concert as well.   This process of object disappearance is an example the idea of *habitus* expressed by Bourdieu. Bourdieu (2004) states,

> The *habitus*—embodied history internalized as a second nature and so forgotten as history—is the active presence of the whole past of which it is the product. As such, it is what gives practices their relative autonomy with respect to external determinations of the immediate present. This autonomy is that of the past, enacted and acting, which, functioning as accumulated capital, produces history on the basis of history and so ensures the permanence in change that makes the individual agent a world within a world. The *habitus* is a spontaneity without consciousness or will, opposed as much to the mechanical necessity of things without history in mechanistic theories as it is to the reflexive freedom of subjects "without inertia" in rationalist theories. (439)

Habitus, again, is the process by which actions and belief systems are owned by humans over a history that they participate in with their creative "spontaneity," thus they act and influence the structure within bounded patterns. In a Foucauldian sense, I believe that this creativity is stunted by interaction with the physical objects around us. An able-bodied person knows how to reenact the process of sitting in a chair without giving much thought to the chair. The knowledge of the processes of using a chair actually becomes part of the accumulated cultural capital of the able-bodied community. The processes associated with the chair, which include, as I suggest, the actions that govern their actually getting into the chair, itself, become stagnate because of the ease and efficiency the chair offers the able body. Thus, the person becomes entangled in a cultural negligence of history that includes instructions for interacting with physical objects of that realm.

Engineering design is, as Petroski (1994) states, the search for fault in objects of our world and the changes that will fix those problems. He writes,

> Fault-finding with the made world around them and disappointment with the inefficiency with which things are done appear to be common traits among inventors and engineers generally. They revel in problems—those they themselves identify in the everyday things they use, or those they work on for corporations, clients, and friends. Inventors are not satisfied with things as they are; inventors are constantly dreaming of how things might be better. (38)

This sense of bettering the world around us is taken up by the two areas of engineering design, what Petroski (1994) calls "industrial design" and "Human-Factors Engineering." As Petroski (1994) writes,

> We shall, however, be concerned with what is variously called "product design" or "industrial design." Though this activity often appears to have aesthetics as its principal consideration, the best of industrial design does not have so narrow a focus. Rather, the complete industrial designer seeks to make objects easier to assemble, maintain, and use, as well as to look at […] Considerations that go variously under the name "human-factors engineering" or, especially in England, "ergonomics" are closely related to those of industrial design, but the human-factors engineer is especially concerned with how anything from the simplest kitchen gadget to the most advanced technological system will behave in the hands of its intended, and perhaps unintended, users. (33)

The following section will expound on the history of human factors as a scientific discourse.

HISTORY OF HUMAN-FACTORS ENGINEERING

At the core of the assumption of able-bodied design, though, is Human-Factors Engineering (HFE), which these design institutions use to create product models and organize the everyday world; HFE is the specific reflection of social assumptions by a scientific knowledge, called Anthropometry, that aims to comfort a particular group of people by statistically measuring the range of allowable difference between them and averaging them to find suitable measurements for the construction of objects. It is possible to trace the history of Human-Factors Engineering, from its rudimentary beginnings during World War I and World War II, to its codification and professionalization during the Cold War of the 1950's. Yet, as Meiser (1999) states,

> If one wishes to go far enough back in time in considering the antecedents of HFE, it is possible to trace these through an act of imagination to our neolithic ancestors because there have always been difficulties in matching the human to his or her tool. For example, the production of swords and armor in the Middle Ages undoubtedly took into consideration the anthropometry of that era's warriors. It also illustrates the intimate relationship that has always existed between the military and HFE—a relationship that still exists today. (149)

This differs from pre-modern societies where most production was "production for use;" each craftsperson could make an object to fit their particular size. The formulation of different social fields includes different specializations with differing sets of capital, including labor and cultural capital. Competition within those social fields leads to struggles between individuals to produce faster and faster and to acquire more and more capital. This means that specific performances that increase the levels of efficiency within a process gain cultural meaning within that society. Therefore, those who can do certain performances and produce the most are more likely win out against competitors for the same positions. The skills, education, and resources needed to "do" certain performances begin to widen the gaps between people, and power dynamics take hold of their everyday lives. Capitalism favors those who can produce or gain the most, in the context of profit, and discourse backs them up, normalizing their ways of action and performances as valid and important. Scientific institutions are created to validate and perpetuate the way of life of these people. Able-bodied ways of existing unconsciously perpetuate the importance of their performances.

It is only with the rise of "mass production for exchange" that some notion of "normal bodies" or "average" bodies is required. This thesis will not examine the history of the rise of mass production—a project better suited for a longer research project; it will, however, discuss the role the military played in developing anthropometric data in the 20th Century. As Pheasant (1996) states:

> Relatively few data for the civilian populations for whom they were recruited and of whom they may or may not be representative samples […] Confronted with this situation we may take the purist approach and only quote sources of impeachable accuracy; or we may take the pragmatic approach and fill in the gaps as best we can by using various rule-of-thumb methods of estimation (and a certain amount of informed guesswork). (27)

This data is then transformed into a set of standards, as has been done extensively (Panero and Zelnik 1979; Pheasant 1996; Inkeles and Schencke 1994; Bridger 1995; Tilley 2002; Kira 1966; Chapanis 1975) that is used to design everything from efficient processes in industry to comfortable everyday items. But how did this become possible? Meiser states that the period between World War I and World War II brought about a period of "gestation, but with relatively few outstanding accomplishments" (150). Meiser (1999) further states, "one of the few bright spots in this rather dull period was the performance of aeromedical research. By the end of World War I, two aeronautical laboratories had been established: one at Brooks Air Force Base, Texas, and the other at Wright Field outside of Dayton, Ohio" (150). The aeromedical research Meiser is referring to consisted of measures to determine performance in the Air Force, thus weeding anyone who could not physically handle airplane controls out of the pool of potential pilots.

World War II brought about huge leaps in the codification of Human Factors. As Meiser (1999) states,

> So much was reminiscent of World War I and, if it had not been accompanied by other activities, would be of little interest to HFE history. The war saw an exponential leap in technology: more highly advanced aircraft requiring complex physical and mental skills; radar and photographic systems that presented information in new ways that required special perceptual skills; sonar, which required of its watchstanders exceptional pitch discrimination; and so on. Because this was total war, involving great masses of men and women, it was no longer possible to adopt the Tayloristic principle of selecting a few specialized individuals to match a preexisting job. The physical characteristics of the equipment now had to be designed to take advantage of human capabilities and avoid the negative effects of human limitations. Obviously such a sea change in philosophy did not occur over night; its first and logical manifestation was in research to determine the human capabilities and limitations that had to be accommodated. This work took advantage of research habits developed in aeromedical research between the wars, when the limits of aircrew tolerance to environmental extremes were established. The aeromedical laboratories of the interwar period served as a model of how the military could utilize behavioral specialists. (151)

Areas of study during this period were mostly located inside the cockpit. They included designs for control knobs, breathing apparatuses, G-suits, and airborne escape facilities. Meiser (1999) contests,

> Immediately after the war, the military attempted to summarize what had been learned from research performed during the war. The Army Air Force published 19 volumes that emphasized personnel selection and testing. The ones of special interest to the historian of HFE were volume 4, *Apparatus Tests,* volume 8, *Psychological Research on Pilot Training,* and volume 19, *Psychological Research on Equipment Design,* edited by Paul Fitts (1947), which was the first significant publication on what became HFE. (152)

The period following World War II consisted of the founding of the institution of Human-Factors Engineering, which blossomed during this period. The founding fathers were those scientists continuing their research during World War II. As Meiser (1999) states,

> Almost all human factors research during and immediately following the war was military sponsored. Universities were granted large sums to conduct basic and applied research (e.g., the Laboratory of Aviation Psychology at Ohio State University). Other so-called *think tanks,* like the System Development Corporation in Los Angeles and the RAND Corporation, which split off from it, were established and funded by the military. During the war, research had concentrated on smaller equipment components like individual controls and displays, whereas the new studies performed by the laboratories embraced larger equipment units such as an entire workstation or an entire system (which corresponded in point of time to acceptance by the discipline of a new concept, the "system" concept). (154)

Yet, as time passed, the study of Human Factors also expanded beyond the scope of the military. As Meiser (1999) continues,

> The introduction of HFE to industry represented a major change in HFE. It meant HFE was no longer completely or primarily a research-oriented discipline. The interaction between HFE researchers and designers that was fostered in World War II now expanded into human factors groups that became integral elements of the system design team. The official mission of such groups was not primarily to perform research (although

occasionally they did so, when necessary, or when they bid on a government contract), but to participate through advice to engineers in the design of equipments. This new mission produced a division in HFE between those who performed research and those who engaged in application work (primarily system development). This separation of functions has had significant effects on the discipline. What had formerly been the domain of those who performed basic research now had to incorporate (with some reluctance) the application of their work to the development of physical systems. (155)

Today, the field of Human-Factors Engineering has seen as significant increase in professionals ranging from psychologists to design engineers. As Meiser (1999) writes, "the postmodern period has seen a maturation of the discipline. The number of professionals increased to the point that the HFES now has a membership of approximately 5,000—a far cry from the initial membership of 60 in 1957. The number of universities offering graduate programs in HFE has increased significantly" (156). And because technology has allowed the expansion of Human-Factors Engineering to other areas of life, along with the original expansion from military research, the creation of objects in our everyday world has now become incorporated into the science. Today, the definition of Human-Factors Engineering, then, has become extremely diffuse. As Meister (1999) states:

> The broad scope or definition of the discipline [Human-Factors Engineering] says, in effect, that everything relating the human to technology is within the purview of the discipline, although for practical and interdisciplinary reasons HFE professionals may not wish to address the full scope of the discipline. For example, the attitudes of technology users to the technology they use is within the broader scope of the discipline. Except for an occasional article about this aspect, not much is done with this subject because many HFE professionals view it as a subject for urban anthropology, for example, or some other *softer* discipline. The sociological effects of technology, as it relates to the effects of urban overcrowding, crime, morality, and so on, can be considered part of HFE in the broad scope, but almost all HFE professionals would allow sociologists to deal with these phenomena (except perhaps those like Moray, 1993).

Again, with such a broad area of study, it is certainly easy to assume that the physical/social space is, in a sense part of the technology that Meister (1999) is referring.

HUMAN FACTORS AS DISCOURSE

The military's involvement in the history of HFE design is a very interesting connection that affects the modern Human-Factors Engineer. I can understand the current rationale for a military connection to HFE with Pheasant (1996), who writes, "Few organizations outside the military have the resources to mount a full-scale anthropometric survey. As a consequence, we have extensive and detailed anthropometric data for many of the world's armed services" (27). What I take issue with is the human subjects who fill the range of the anthropometric data provided by military. An examination of the enlistment standards for the military, excluding moral principles and provisions against homosexual conduct, provides a very specific definition of a qualified applicant. These standards define a specific type of human to perform specific types of activities; they do not exhibit

any type of impairment as defined in this paper. These people are young, are within a specific weight and height range, and do not exhibit any mental or physical deficiencies. It is here that I must state that I do not take issue with the military standards as they are used within the military arena. What I take issue with is the fact that anthropometric data provided by the military is transferred into the world of the everyday, a place where the people described in the military standards are a minority. These standards form an important influence on the design of all of the objects created in our everyday lives.

The importance of these standards, relating back to the efficiency of the item, is that they allow manufacturers to standardize the dimensions of everyday items, therefore cutting down on the costs of manufacturing to reach every consumer within a market. Using the military standards provides ready-made dimensions for the construction of items without having to spend money catering to each individual person. While this may be so, it should also be noted that, again, capitalism is about profit, so there will be manufacturers who will go after the niche markets, those who will custom design items for the rich, or those who need special items to help them through their daily lives. Also, there are other factors that go into the design of items that affect the outcome of the items that are manufactured by companies. When other intersections collide with the market, consumers begin to demand things on different scales. Manufacturers must again cater to the demands other discourses that fuel profit. These include style, or the artful design or form of an item that competes with its function. All of these things must be taken into account when examining the manufacturing of items.

Yet, by creating objects for comfort and efficiency, the science of engineering design successfully allows the body's physical energy to become useable while conscious attention to the body fades from the interaction. The objects, which are built and organized to specification for the able body, also become part of the routine and fade from salient thought. To explain how Human-Factors Engineering standards affect human interaction a little easier, it might be better to provide a working example. Imagine a worker at a desk job in a cubicle. If the worker is allowed to work his eight-hour day with a chair that perfectly conforms to his body in every way—the back is tall enough to catch his whole back, the seat is deep enough for his buttocks to rest in, and the legs are just tall enough so that his feet touch the ground comfortably—he or she will be unaware of the time that passes, focusing only on his or her work or whatever the worker keeps his or her mind busy with to avoid work. In effect, within the worker's mind, the day seems to go faster because he or she has no reminder of the chair they are sitting in; it is as if the chair becomes a part of his or her body that their mind accepts and need not think about. This is the world of the able-bodied person. The chair represents all of the elements of the physical/social everyday that each able-bodied person uses to interact; it is part of a culture that has been created specifically with the able-bodied person in mind, the implications being that the person

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does not have to think about his or her body interacting with any physical object in the environment. His or her world is blue-printed without having to think about the chair beneath him. He or she does not have the mental reminder that they are a body acting out a ritual already created for them—namely that of sitting. A more complex example is that of a car, which is specifically designed for able-bodied arms and legs. The seat is contoured so that an able-bodied person fits perfectly into the curves and allows him to control the car with his hands and feet comfortably. The seat usually has a control underneath where he or she can move it to his perfect position to reach the pedals. The nascent driver learns to drive, at first, completely conscious of all of the positions his body takes, all of the exact motions their body must perform to make the car transport them from point A to point B. Eventually, though, after the motions become automatic and his or her body gets used to the positions of the seat and the locations of all of the pedals and buttons, the person can relax and forget that their body is actually doing the driving. Thus, the body disappears from conscious thought in interactions with the car, and the physical/social environment with which he or she is moving within.   We must always remember, though, within a Poststructuralist and Intersectional mindset, that this isn't always the case. Bodies are different, and they do not always conform to the expectations of discourse.

In trying to create a comfortable, efficient environment for the able body, standards that have been formed from measuring the average of such a body type are used: these designs come from engineering. Because the subject's attention to his or her body fades in interaction and the subject's organs are empowered beyond their own able strength, engineering helps the subject forget that their body is acting, so their focus can remain on the action itself. The chair created with the specifications of an average person will allow a large range of people to slide in that chair without much thought that they have achieved that action. If all chairs were built too high for the average person across multiple other social locations, then some thought would have to be put into differing methods for reaching up to sit. By this, I mean that other intersections affecting ability would come into play when overcoming the chair's height. If we think about it, the able body, then would become as deconstructed as the disabled: there would be many more scripts "created" to actually find one's way into a chair, based on individual locations. The lack of thought, then, removes salience of the struggle another person might experience to actually sit in the chair. The able-bodied, in the design of everyday things, are completely unaware that the disabled wrestle with most of the same actions that come "natural" for them.

To illustrate this, I return to the image of the worker in his or her chair used above. Now, imagine the worker in the cubicle being forced to sit in a kindergarten chair. His or her body keeps reminding him how uncomfortable they are sitting in it, and they are conscious of how long each of their actions takes during the course of the workday. It takes away from the

concentration he or she should be focusing on the tasks they attempt during the day, such as the time they spends typing spreadsheets, printing TPS cover sheets, and sitting cramped in a meeting about their boss' superiority. He or she must escape outdoors for a smoke break in order to stretch his or her legs. These conditions represent the experience of the disabled, which, then, represent the constant reminders that the physical human body is not perfectly reproduced, only the cultural world for the able-bodied person. The branch of Human-Factors Engineering takes measurements of an average person, called anthropometry—the lengths of their extremities, the range of their motions, and the variability of their positions—and uses them to create the objects of the everyday world for comfort and efficiency. Take this example from a classic HFE text:

> The subjects, who were all women, performed three groups of tasks and selected the following worktop heights as optimal:
>
> - Group A – tasks preformed above the worktop (peeling vegetables, beating and whipping in a bowl, slicing bread), 119 [47] mm below the elbow height;
>
> - Group B – tasks preformed on the surface (spreading butter, chopping ingredients), 88 [42] mm below elbow height;
>
> - Group C – tasks involving downward pressure (rolling pastry, ironing), 122 [49] mm below the elbow.
>
> These results were subsequently confirmed using a variety of physiological measurements (Ward 1971) in which it was also shown that the optimal height for the top edge of the sink was approximately 25 mm below the elbow. (Pheasant 1996)

As a sociologist, I am very curious who owns these elbows referenced in this example. And yet, Human-Factors Engineering's answer is that it is everyone's elbow. Well, not everyone's. As Pheasant (1996) states, "The principal factors to take into account when defining a target population of users, for the purpose of selecting an appropriate source of anthropometric data, will in general be: sex, age, nationality (or ethnicity), and occupation (or social class), generally in that order of importance" (30). The studies they perform just like the one above aim to create the parts of an invisible person that are used in measuring for the products we encounter in our everyday lives. It is interesting to see, first, how this example is gendered with the expectation that only women will be performing the tasks set to them in the kitchen. While this is important, my qualm is that within the target population Pheasant (1996) suggests, disability is not part of the design criteria for our average person with regard to design. Yet, Pheasant (1996) takes into consideration aspects of sociobiology in assuming that taller females marry upwards, and objects designed for the upper class should be designed for accordingly (168). In every book I have come across that deals with anthropometric data, the disabled are considered as part of a different set of design criteria to be used in specific places designated for them. In this respect, the discourse on product design does take into account the disabled, but it reserves a spot

in particular spaces that pertain specifically to their needs, designed with items such as large bathroom stalls, ramps, large remotes, walkers, and handrails.

In the next section, I explore the consequences of catering to able bodies, such as the solipsistic existence that is afforded to the able-bodied. They do not see the unearned privileges they garner by simply having an able body.

ABLE-BODIED SOLIPSISM AND THE ABSENCE HYPOTHESIS

It would seem that the normalized body would be a conscious being, acting with full consciousness of the privileges and advantages that institutions such as Human-Factors Engineering affords the able-bodied. Yet, as I will show below, conscious attention to the body and the everyday items that the able body interacts with become unconscious. In turn, this causes the person giving no thought to privilege afforded to their body. This is the foundation of the "absence hypothesis."

THE ABSENCE HYPOTHESIS

The absence hypothesis is that, in creating the world as a means to extend the potential of the organs with the specifications of an average able body, able-bodied people become unconsciously aware that they have a body when they repeat social actions. They become comfortable and unconsciously knowledgeable of what the action requires of their body. Their performance of "doing ability" does not require that they attend consciously to their body parts as they interact with objects. In effect, they are given the freedom to focus on the tasks they set before themselves, not on the items or their bodies in concert that might slow down their actions. This places them in a prime position to claim meaning for their ways of life. The question is not how the distinction came about, but how the meaning given to the able body as "normal" for the creation of items has perpetuated. It is an examination of the discourses created by science to separate out those who interact with objects in a "normal" regard, from those who must negotiate in order to perform a cultural action. Using the schema of efficiency and comfort, discourses are built into everyday items to help those who can perform tasks the "normal" way, to increase efficiency even more, while those who are impaired are left to struggle with the items. In turn, the "correct" script for accomplishing a goal, including all of the necessary bodily movements and positions, exerts a control over the body that keeps it docile: action is simple, direct, and lax.

What this means for those that have become "othered" by their inability to efficiently use the items of the everyday world is that they are forced to learn new ways to interact. Just as psychologists and religious figures became available for the sexually deviant to express their "sins," physical and occupational therapists, behavioral analysts, and other medical professionals have created a space for the disabled to learn new ways to interacting with the world. This includes equipping them with new technology to aid their impairments, showing them how to modify scripts to perform social actions, and performing medical procedures to help them return to the center of cultural meaning.

TECHNOLOGY AS AN ELABORATION OF HUMAN PERFORMANCE

A number of theorists have argued that human labor involves the transformation of nature into useful human products and that technology and labor power are the means by which they do this. For example, Karl Marx (2004) viewed humans in a struggle with the environment around them. The environment, in Marx's writings, was no more than a medium or raw materials with which production could occur; his goal was for people to master the environment, rather than be enslaved by it. Through science and technology, humans could ensure their position as masters, rather than as slaves. Technology, according to Arnold Gehlen (1980), extends the power of the human capability, like the hammer created to artificially increase the power of the human hand.

The inclusion of the body in the process of technological advancement through organ replacement, substitution, and facilitation causes the competition in each field to become more complex, as there are different types of bodies vying for the same performances. Because performances cannot be understood outside the language categories created to normalize them, efficient scripts become meaningful as able-bodied ways of acting. Able, iterative actions become reflections of normative ways of acting out performances that come to define the subject. Judith Butler (1993) writes,

> Performativity cannot be understood outside of a process of iterability, a regularized and constrained repetition of norms. And this repetition is not performed by a subject; this repetition is what enables a subject and constitutes the temporal condition for the subject. This iterability implies that 'performance' is not a singular 'act' or event, but a ritualized production, a ritual reiterated under and through constraint, under and through the force of prohibition and taboo, with the threat of ostracism and even death controlling and compelling the shape of the production, but not, I will insist, determining it fully in advance. (95)

It is important, as a measure of control, that these habits become part of an unconscious set of gestures, part of an individual's habitus. Berger and Luckmann (1966) state,

> Habitualization carries with it the important psychological gain that choices are narrowed. This frees the individual from the burden of "all those decisions," providing a psychological relief that has its basis in [human] undirected instinctual structure. Habitualization provides the direction and the specialization of activity that is lacking in [human] biological equipment. (53)

Furthermore, as noted earlier, the rise of democratic republics in the modern era was also accompanied by the rise of subtle forms of power that coerced people into self-regulating behaviors (Mann, forthcoming). So, as specialization and normalization occur within fields, neoliberal capitalistic practices are augmented by other techniques to keep the distance between oppressor and oppressed. The advent of modern industrial societies, as Foucault (1979) shows, causes people to

control themselves by self awareness, making each person "his own jailer" (201). These technologies, built into material culture for the oppressor, those who fit into the normalized category of a given social location, are given an advantage in competition for capital; material culture is manufactured by science such that these bodies can keep up with the demands of the organ substitution or facilitation. The game, as it were, is not handicapped.

I argue that the difference between bodies, in this regard, is the levels of impairment that plague individuals. Able-bodied people are seen as having "normal" performances, and disabled performances are "othered." Therefore, there is a difference between "doing ability" and "doing disability." In the next sections, I will look at the differences between these two performative actions: this includes the ways in which regulative discourse and technologies of power advantage the "normals" and hinder the impaired by subtly diverting the focus of attention for the actor from the action at stake to the body; thus, the efficiency of the action is hindered and the competition for capital becomes easier for the oppressor.

TECHNOLOGY AND THE DISAPPEARANCE OF THE BODY

The importance of habitualization is taken up with the work of Drew Leder (1990), who expresses part of these ideas of psychological distance from action. Leder (1990) takes much of his work from Merleau-Ponty, who believes that perception is experienced through the body. Social actors, in their opinion, do have control over their bodies without having awareness of every physical movement that they must engage in. Yet, Leder (1990) argues that when actions become highly rationalized, the actor's conscious perception of the body disappears from salient thought. He believes that people's social action, of which he assumes most everyday human action consists, causes the body to 'fade' in the person's consciousness. He believes there is an inverse relationship between the concentration placed on the body parts as they perform action and concentration placed on the action itself; a person cannot think about both equally at the same time. As Leder (1990) writes,

> The concept of disappearance provides a key for understanding these corporeal transformations. To illustrate this point I will begin by examining the acquisition of a skill. The initial stages of mastering a new skill usually involve a complex series of thematizations. If, for example, I learn to swim, I pay explicit attention to certain rules of performance. I am told to cup my hands, lift my arms from the water, and breathe to one side. Moreover, I attend to the examples provided by others. […] Watching others swim may teach me more than their words. […]
>
> The thematization of rules, of examples, of my own embodiment, falls away once I truly know how to swim. I no longer need think about cupping my hands or the right style of breathing. This now comes without conscious effort, allowing my focus to be directed elsewhere. (30-31)

Leder (1990) hints that feedback is instrumental in learning a new skill or practice. Making a wrong movement, for example, while trying to learn to swim might cause the person to sink under the water, or swallow water. As the "correct" movements fall into the rhythm of the performance, feedback is no longer necessary, and the body fades. A person may become consciously aware of his or her own body in the course of a creative action, such as tackling a practical problem. I am not referring to actions that fall under the category of routine, ritual behaviors. In this way, the mind must be equally conscious of the movements it is making as well as the context of the outcome it is trying to achieve. This kind of attention falls into the realm of production. For example, when the first company created the automobile, much thought, through the use of ergonomics, was put into how the able body would reach the wheel and pedals, all the while controlling the car when the person is driving. A special effort was placed on figuring out the easiest way for a human to control the complex vehicle. My argument is that if items are created to extend the power or efficiency of a person's organs, then, when people effectively learn how to use them, the person's awareness of their body, as well as their awareness of the object, itself, fade from the person's consciousness. This allows that person to focus more and more attention on the tasks they set before themselves. They become comfortable and unconsciously knowledgeable of what the action requires of their body or of the object they are using. In effect, they are given the freedom to focus on the tasks they set before themselves. This is not to say that a person can never focus their attention on their body parts as they interact with them; it merely means that the social construction of ability and the institutions that cater to the able body fuel the tendency that a body, and the object in concert, will fade in interaction.

What happens, then, if an impairment affects the body trying to accomplish a specific goal? As noted, concentration on the body is the inverse of concentration spent on the activity, so there will obviously be a disruption in the available focus on the task. The body will take precedence in the mind of the actor during social action. For example, the organs on the inside of our bodies do not belong to the category of embodied control or salience, which he calls "depth disappearance." We do not typically notice the beating of our hearts or the digestion of food. Thus, it is only when we become sick with internal impairments that we become aware that something is wrong with us. A good, but grave, example is when a person has a heart attack. Most of the day we are not aware of the life-giving pumps our heart undertakes every moment we are alive; it is only when our heart becomes sick that it becomes salient through the perception of chest pain. This is instrumental to the difference between the able-bodied and the impaired. For an able body, attention to the body disappears from perception because it is part of the automatic process necessary for the act of living. It is only when the body is affected by an impairment that the actor is constantly reminded of the body part[s] affected by the disruption. Leder (1990) provides another example,

> A man is playing tennis. His attention dwells on upon the ball flying toward him, the movements of his opponent, the corner of the court toward which he aims his return. He is already flexing in preparation for this shot and a subsequent charge to net. The closer the ball approaches, the more it acts to focus his attention and posture until at the exactly right moment, without the need of explicit thought or will, his body uncoils to meet it with force.
>
> But as he swings he feels a sudden pain in his chest. His attention now shifts to the expanding focus of pain. The concerns of the game that a moment before were paramount—the perceptions of the ball, the court, the tricky wind, the attempt to intuit and outwit his opponent—all recedes before this insistent ache [...] He is a little distressed and a little fearful. He stops the game, which, in an experiential sense, is already something far away. (71)

This type of pain is just one example of the experience of impairment that plagues all impaired people. Because impairment hinders the actions that an impaired person may do, creative actions must be scripted in order to avoid pain and compensate for impaired organs: an impaired person must negotiate the able-bodied world that has been constructed without him or her in mind. For example, a person of small stature becomes aware of his or her height when the book he or she needs is on a counter too high for him or her to reach. Thus, they must engage in creative actions, with body in mind, to get what they want. This creative action occurs each time he or she encounters a new counter; therefore they are forced to think about their body and the counter each time they needs a book. This thought takes away from the focus the actor places on the task itself.

As a side note, the opposite can also be said of pain. As there is an inverse relationship between awareness of the body and awareness of action, psychologists in Seattle have applied using virtual reality technology to lessen a patient's perception of pain during the treatment of serious burns. Hoffman et al. (2000) write,

> The pain experienced by burn patients during physical therapy range of motion exercises can be extreme, and can discourage patients from complying with their physical therapy. We explored the novel use of immersive virtual reality (VR) to distract patients from pain during physical therapy [...]All patients reported less pain when distracted by VR, and the magnitude of pain reduction from VR was statistically significant, e.g., time spent thinking about pain during PT dropped from 60 mm to 14 mm on a 100 mm scale. (244)

This is a very important step in understanding how the very thing that the impaired lack in action with the world—the focus necessary to get tasks done efficiently—can be directed away from the perception of pain they might feel during excruciating procedures. Yet, as this does not extend into the realm of the everyday world, the advantages lie with those who have able bodies: those people whose body, and the objects they are in concert with, fade in action.

What this does to the social actor is that—through habitualized action and a lack of impairment, or a lack of pain, anxiety, or bodily attention—it removes the tendency that his or her body will remain salient when acting out in the social world.

This unconscious thought, then, leads to a solipsistic perspective where the person begins to miss the privileges and advantages that they gain from interactions with items that cater to their body type. In the next section, I outline some of the privileges garnered by the able-bodied population.

ABLE BODY PRIVILEGE: UNPACKING THE INVISIBLE KNAPSACK

This section is an attempt to express some of the same ideas as Peggy McIntosh's (date) article, "White Privilege: Unpacking the Invisible Knapsack," where she attends to the fact that white people seem to carry an invisible knapsack with them through the social world with which they can whip out unearned privileges that save them in social situations. She attempts to name them so that white people can learn to be aware of these privileges and attempt to resist the urge to allow them to perpetuate; she is garnering responsibility in the white community.

This is what I would like to bring to the able-bodied community. Yet, I have said many times in this paper that I am not really an able-bodied person, but most people do not even notice when they first meet me. They just assume that I am an able-bodied individual. It is the way I hide my hand in my pockets on the right side, or so I've been told. Shoes hide my cramping foot very well. The scars from surgery are all but thin lines. It usually is not until I try to shake their hand with my left hand, as I have said earlier, that they notice me as an impaired person. I get statements like, "Oh, I never noticed until you said something" or "Really, you are?"

Nevertheless, at times, I do enjoy the comforts of being an able-bodied person. And I get how it works. As in other positions of power, able-bodied people are "taught to think of their lives as morally neutral, normative, and average, and also ideal, so that when we work to benefit others, this is seen as work which will allow 'them' to be more like 'us'" (McIntosh 247). The assumption for able-bodied people is that their ways of interacting with the world are the right way to do things, and they are in a position to where there is no need to think about or question that status. Yet, this privilege is unearned yet conferred as natural.

So, even though I know all the intersections of social location are intimately connected, I wanted to work on some of those daily effects of able-bodied privilege that attach more to ability than class, race, or gender. As far as I can see, most impaired people do not share these same conditions.

1. Chronic pain or attention to my body is typically not an issue for me when I do the things that encompass my everyday life.

2. I know that if I walk into any place of work, the objects there, such as the desk and chair, will not hinder my work experience. I will only have to concentrate on the efficiency of my work, and moving up in the company.

3. When learning a new skill, I can be sure that the person I am learning from will provide me with an example I can mimic without my having to worry about compensating with another body part.

4. I know that the seat in the car I drive will conform to my body, and I will be able to travel safely, focusing all of my attention on the road ahead.

5. Whenever I am doing a difficult task, I will not be questioned as to the choice, range, or order of my bodily movements.

6. Whenever I go shopping at any store, I can be sure I will find objects I can use without much, if any, adaptation.

7. In my daily surroundings, I will always be able to find a place to sit and rest for a while if I become tired.

8. Whenever someone tells me a story about someone doing an amazing feat, I can safely assume that they are able-bodied, unless specifically told otherwise by the narrator.

9. When my children learn to write, read, use a computer, or anything else that requires manual dexterity, I can be sure able-bodied people with able-bodied scripts will teach them.

10. If I play a sport, I will be expected to use the equipment without any supplementary items—such as a cane or a wheelchair—lest I be called a cheater or a hindrance.

11. Knobs, handles, buttons, switches, triggers, lids, and caps all conform to my fingertips with ease.

12. If I need to assemble something for my own use, I can be sure the diagrams in the instruction book will include able bodies that will show me what to do.

13. I may not know the difference between a salad fork and a dinner fork, but I am pretty sure no one will say anything or stare if I use the wrong one during a specific course as if I were using the fork differently (i.e. – with my foot).

14. I can reach any counter top or wash my face in any sink without having to stand on something or hunch down uncomfortably.

15. Before I walk into any room, I already "know" the furniture inside will accommodate me in anyway I want to sit, lay down, or rest against.

Able-bodied privilege is a murky subject. Most people do not even realize that they are privileged because they don't have to think about their bodies, or the objects that conform to their body types. The market conforms to them, and scripts back them up as "normal" actors. Further, they begin to see anything that does not resemble their way of life as abnormal. The next section will explore this tendency.

ON OTHERING THE DISABLED

Like Agnes of Garfinkel's study (1967), disability is a juggling act that the disabled are constantly aware of and forced to deal with that is more than just an identity; it is a performance that we act out as differently-abled human beings. Both ability and disability have performances, because each have different scripts for the same social actions. Furthermore, because the able-bodied view their performances as more of a "natural" way to do things, then any other ways of doing things are not seen as important, viable, or culturally meaningful. The scripts take place in social spaces created for each type of action: the spaces created for the disabled, and the items in those places, are set apart from able-bodied spaces and looked at negatively by the dominant culture.

I think that there is a level of obliviousness that the able-bodied experience when they must teach an impaired person a new script for living daily lives. For the most part, like cultural capital, we learn how to interact with the world around us from our parents. When able-bodied parents must teach an impaired child how to interact with the world, there is often a disconnect, an assumption that does not translate. Often, parents will try to use the scripts they learned by as able-bodied human beings, assuming that an impaired child will be able to pick up on the intended outcome.   For example, growing up, one of the hardest things for me to do was to learn to tie my shoes. My parents had tried to teach me how to tie a knot on many occasions, but they always used an able script, such as the one below:

> How to Tie Your Shoes
>
> Every person at some point needs to tie their shoes. This article will show you how to tie them, and even double-knot them. This way if you forget to tie your shoes you can always glance here and remember.
>
> 1. Put the untied shoe onto your foot after you put on your sock.
> 2. Tighten the shoe by pulling on the ends of the strings on the right and left side of the shoe.
> 3. Cross the left and right strings. The left string goes under the right string and is pulled through creating a new right and left end.
> 4. Take the new left end and make a loop with it.
> 5. Make a loop out of the new right, and put that loop over the left loop.
> 6. Tie them in a knot as done with the strings at the beginning.
> 7. Pull tightly and you're done!
> 8. Double-knot by repeating the previous two steps. This is optional. It's more secure but also more difficult to untangle. (wikihow.com, 2008)

The assumptions of this script are that an able pair of hands is guiding the laces into a knot. I, unfortunately, did not have a pair of hands, so my parents were a little confused on how I should learn. I wore Velcro shoes until I was about ten years old. Eventually, I learned how to modify the able script and use the thumb of my impaired hand to hold one loop while my other hand

nimbly ties the knot around it. Another great example of this includes left-handed children learning to write in school. Teachers often do not know how to teach left handed children how to write for their particular hands, so they teach them how to write the "right-handed" way. Often children will modify their behaviors in order to accommodate their handwriting, such as curling their left hand around the pen so that it writes while on the right side of the pen: this helps to keep the ink from smudging and collecting on the person's finger. These are just some of the modifications, though, that signal the negotiations that the disabled must engage in because the scripts they are taught do not fit their body.

The same also happens when an impaired parent tries to teach an able-bodied child a new script. The child will typically learn the able-bodied script from his or her parents, which might be conveyed through speech rather than example. Peers or other able-bodied family members may fill in the examples that the child needs to see how to do a particular script. An impaired parent probably knows the able-bodied way to tie one's shoes, yet they may wear Velcro. This may not stop them from being able to impart the knowledge of shoe tying to an able-bodied child. A teacher or uncle may be able to further help by example.

While able bodies are kept in the dark with regard to their bodies in concert with objects, and, thus, how their bodies are privileged in everyday life, the disabled are "afforded" a critical vantage-point. Attention paid to their bodies when in interaction with objects, due to biological impairment and an object that does not cater to their needs, which then causes pain and/or anxiety, allows them a unique peek at the privileges that the able-bodied do not see.   I will explore this further in the next section.

THE CRITICAL VANTAGE OF THE DISABLED

Spaces are an important aspect to the ways in which the able-bodied are separated from the disabled. Walk into any male public bathroom, and the spaces created for the able-bodied extend far into the tile, the urinals, the sinks, and the bathroom stalls. Disabled spaces are reserved for the one handicapped stall. So, when an impaired actor enters that particular bathroom, he must traverse the able spaces in order to reach the spaces created for him. He enters the handicapped stall, and figures out how to creatively use the toilet, given the impairments that limit his ability. Conscious of his body, he uses the handrails to pick himself up and put himself down on the cold porcelain. He may notice that three or four able-bodied people have entered the bathroom, done their business, and left by the time he is done himself.

When he gets ready to leave, he reenters the able space, and realizes the laziness the able-bodied are afforded by the standard items in that space. A person can just meander up to the urinal, do his business, and walk away. Going to the bathroom as an impaired person takes creativity, concentration, and compensating organs that are stronger than average; the impaired actor knows this. He knows that the body can do much more than what the system lets on. He knows that the way the able-bodied come to "do ability" is affected by socially constructed knowledge. For example, people who are deaf have a very critical view of those who can hear, as if the "hearing are impaired" and miss out on all kinds of social cues.

While this is the case when using provisional and strategic adoption of the existing categories of "ability" and "disability," the problem is much more complicated and nuanced. Examining the matrix of oppressions afforded by Intersectionality theory muddies the picture of privilege. I will explore this in the next section.

PRIVILEGE CONCESSIONS

The point of this discussion, so it seems, is that the actor does not have any actual agency in the scheme of discourses that batter him or her around. The social structure exists before the actor and only allows him/her to perform concerted behaviors based on scripts provided by the discourse, itself. The actor is forced to display, upon their body, certain cultural signs that align him or her with a specific group. The actor also internalizes certain ways of thinking and doing; this includes believing certain things about those within his or her group and opposing things regarding all other groups. It seems that the essence of their particular habitus patterns their entire existence. It seems as if getting stuck in a particular location binds a person to a life of domination, whether they realize it or not, as the self-regulation in power relations is an unconscious process.

However, we must be reminded that "habitus is not the fate that some people read into it. Being the product of history, it is an open system of dispositions that is constantly subjected to experiences, and therefore constantly affected by them in a way that either reinforces or modifies its structures. It is durable but not eternal!" (Bourdieu and Wacquant 1992:133). McNay (1999) argues that Bourdieu's notion of habitus "is not to be seen as a principle of determination but as a generative structure. Within certain objective limits (the field), it engenders a potentially infinite number of patterns of behavior" (100). There thus appears to be a range of opinions about exactly how much freedom exists within Bourdieu's framework. Swartz (1997) points out that there are three strategies that can take place in fields. First, those who hold positions of power in the field will practice the conservation of their capital and hold onto those positions. Second, newcomers of the field will try for succession, trying to overtake the positions of power for themselves. As already discussed, this includes Agnes' attempts at gaining a place as a

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"normal" female. While she may convince people that she is female, losing the status that comes with being a male, she effectively succeeds the benefits that come with being heterosexual, white, able-bodied, and her other social locations. In this way, Agnes garners for herself a sense of power that she can wield. Third, individuals with little power or chance for such power will practice subversion, questioning the legitimacy of those in power in the hopes of re-defining the standards of the field.

Taking Swartz's (1997) three strategies for resistance, and adding the assumptions of Intersectionality and Poststructuralism to the discussion, there seems to be more room for people to resist the power of their social location. Because each person's social location consists of many intersections of both oppressor and oppressed at the same time, people who exist in proximity with each other may find themselves in the same oppressor position for one intersection and may find that they may be oppressed in different intersections. It is important to note that disability is not as easy as separating out into the binary categories of "able-bodied" and "disabled." Poststructualism, as well as intersectionality theory, aims to deconstruct essentialist categories. Coming out of second wave feminism, sociologists suggested that essentialist notions that all women were affected by sexism in the same ways ignored other differences between women, such as class, race, or sexuality (hooks, 1984; Collins, 2000).

The salience of power is very tricky in everyday life. Different aspects of structure (race, gender, sexuality, and disability) play out differently based on the context of the situation and the makeup of the group in question. In these instances, one person might be an oppressor with regard to one intersection, and a marginalized person in another. These differences might affect the way power plays on an individual person, as well as in the group dynamic at large. It shapes the way that people normalize the world around them, and suggests that there is not just one definition of "normal." In this respect, suggesting that a performance is right for all able-bodied people becomes a problem, as an able-bodied woman's scripts might be different than an able-bodied man's. For example, electronic buttons placed in a car to roll down the windows may be accessible to a man, but a woman might have a hard time reaching the panel. In this respect, then, the man would be considered able-bodied, while a woman, in this instance, would be considered disabled by the definitions offered in this piece. Anything that causes pain and/or anxiety about interactions with an object could be seen as a disability. Another example is the sense of anxiety created about women's bodies with the creation of the complex system of standard sizing within women's clothing (Brumberg 1997).   These social forces continually complicate and nuance the tendency that a person's attention to their body will fade in interactions with everyday objects, not to mention the ways in which we as humans come to understand and know knowledge that is being constructed by different discourses that cater to different groups of people.

CONCLUSION

As I have argued, the world of the able-bodied encompasses a space where the body and the objects that people interact with have a tendency to fade from the minds of the social actors that "belong" to that category. They lose sight of the privilege they garner from a world constructed for the able body. In turn, they begin to see their way of doing things as the "correct" or "natural" way to do things and, thus, begin to "other" the impaired body. What we must realize is that the "correct" "natural," able-bodied way to do things is just a social construct. This is what Postructuralism teaches us. Indeed, a lack of awareness of the social construction of the able-bodied is what I have called in this thesis, able-bodied solipsism. In turn, our social location as able-bodied or not, is also influenced by other social locations – our race, gender and class – which also make it more or less difficult for us to interact with objects in our social world. This is what Intersectionality teaches us. I have argued that when merged together these two perspectives greatly enrich our understanding of able-bodied solipsism and able-bodied privilege, as well as the social construction of unequal bodies.

FURTHER DIRECTIONS

Important ways that future research could enhance the arguments in the thesis would be to provide more historical analyses of the issues raised here in regard to the so-called "normal body." On the one hand, researchers could examine the rise of mass production in the United States with an eye to the role played by "normal" or "average" bodies in its development. Then connections between mass production and the rise of engineering and anthropometric discourses and practices in the 20th century that further developed more detailed notions of the "normal body" could be examined. On the other hand, a very ambitious historical project could examine how disabilities were dealt with treated in other historical eras before the rise of modern sciences and their various ways of distinguishing the normal from the abnormal. I have mentioned how in pre-modern societies artisanship involved producing products that were customized to fit the individual for whom it was produced. Yet, what are the other factors that affected the able body in a premodern era? Were there rough guidelines for the creation of items? How did the negotiations of the disabled differ in those eras? Were the disabled viewed as "abnormal" in these societies? If so, what were the consequences for both "normal" and "abnormal" people in premodern societies? These are worthwhile questions would enrich a study of unequal bodies.

I also believe that more focus on the intersections of class, race, ethnicity, and gender with disabilities should be pursued. Research that shows how the negotiations with physical and social reality are different for these different locations and the different scripts/expectations that weave through the intersections makes for an interesting topic of research. I have briefly mentioned how the social constructions of masculinity and age have been dealt with within this regard. It also appears that this has been done for various ethnic groups or cultures in regard to differences in height. More attention to the various scripts and negotiations that are occasioned by difference and diverse social locations would greatly enhance our understanding of the assumptions of underlying ableness.

Using the theoretical framework for the concept of the culture of ableness within this thesis, a future direction might also include an empirical study to back the claims of abelist solipsism introduced here. Frankenberg (1993) conducted a related study, attempting to define the social construction of whiteness. She wanted to show how white people intimately tied to antiracist activism are still affected by race relations and the status that comes with being white. She interviewed 30 white women on subjects ranging from their upbringing, interracial relationships, interracial children, guilt over and evasion of the status that comes with their race, and how they locate themselves in society.

Taking Frankenberg's (1993) methodological model, future research could uncover how able-bodied people intimately related to someone who is disabled do not necessarily construct their everyday lives, on the whole, with their bodies, or the impaired bodies of their loved ones, in mind. This is not to say that they do not have moments of clarity where they realize their bodies in relation to their disabled counterparts; I am simply arguing that, in the routines of daily life that have been constructed specifically for a pair of able-bodied legs and arms, they tend to forget that there is a body behind their actions.   In such an ethnographic study, future researchers could discover how the concept of ableness in our culture is constructed by able-bodied people in order to make action in the everyday world into an automatic endeavor; this study also could be concerned with how able-bodied culture's reliance on a person's loss of body awareness affects these people's relationships with those around them, including the impaired people with whom they are close.

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