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Defective and Deficient: White Supremacy and Disability Oppression Tangled Together

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Abstract

Eli Clare presented “Defective and Deficient: White Supremacy and Disability Oppression Tangled Together” as a keynote address at the 2018 White Privilege Conference in Grand Rapids, MI. The keynote outlines some of the ways the ableist construction of defectiveness is used both historically and currently to strengthen and maintain white supremacy.

Keywords: disability, defectiveness, body-mind, deficiency, ableism, racism, accessibility

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Among other pursuits, he has walked across the United States for peace, coordinated a rape prevention program, and helped organize the first ever Queerness and Disability Conference.

1. Prayers, Crystals, Vitamins

Complete strangers offer me Christian prayers or crystals and vitamins, always with the same intent—to touch me, fix me, mend my cerebral palsy, if only I will comply. They cry over me, wrap their arms around my shoulders, kiss my cheek. Even now, after five decades of these kinds of interactions, I still do not know how to rebuff their pity, how to tell them the simple truth that I am not broken. Even if there were a cure for brain cells that died at birth, I'd refuse. I have no idea who I'd be without my tremoring and tense muscles, slurring tongue. They want to make me normal. They take for granted that my body-mind is wrong, bad, broken.

The body-mind as gristle
and synapse, water
and bone, pure
empty space.

Complete strangers ask me, “What’s your defect?” To them, my body-mind simply doesn’t work right, defect being a variation of broken, supposedly neutral. But think of the things called defective—the mp3 player that will not turn on, the car that never ran reliably. They end up in the bottom drawer, dumpster, scrap yard. Defects are disposable, body-minds or objects to eradicate.

Complete strangers pat me on the head. They whisper platitudes in my ear, clichés about courage and inspiration. They enthuse about how remarkable I am. They declare me special. Not long ago, a White woman, wearing dream-catcher earrings and a fringed leather tunic with a medicine wheel painted on its back, grabbed me in a bear hug. She told me that I, like all people who tremor, was a natural shaman. Yes, a shaman! In that split second, racism and

ableism tumbled into each other, the entitlement that leads White people to co-opt Indigenous spiritualities tangling into the ableist stereotypes that bestow disabled people with spiritual qualities. She whispered in my ear that if I were trained, I could become a great healer, directing me never to forget my specialness. Oh, how *special* disabled people are: We have *special* education, *special* needs, *special* spiritual abilities. That word drips condescension. It’s no better than being defective. It’s simply another way to declare some body-minds bad and wrong.

Complete strangers, neighbors, and bullies have long called me *retard*. It doesn’t happen so often now. Still, there’s a guy down the road, who, when he’s drunk, taunts me as I walk by with my dog. But when I was a child, *retard* was a daily occurrence. Once on a camping trip with my family, I joined a whole crowd of kids playing tag in and around the picnic shelter. A slow, clumsy nine-year-old, I quickly became “it.” I chased and chased but caught no one. The game turned. Kids came close, ducked away, yelling *retard*. Frustrated, I yelled back for awhile. *Retard* became *monkey*. My playmates circled me. Their words became a torrent. *You’re a monkey. Monkey. Monkey.* I gulped. I choked. I sobbed. Frustration, shame, humiliation swallowed me. My body-mind crumpled. It lasted two minutes or two hours—I do not know. When my father appeared, the circle scattered. Through the word *monkey*, those kids joined a long legacy that names White disabled people and all people of Color not quite human.

The body-mind
a live wire
singing fear,
hope, desire.

They approach me with prayers and vitamins, taunts and endless questions, convinced that my body-mind is somehow bad—animal-like, defective, special, an inspiration, a tragedy. They leave me with sorrow, shame, and self-loathing (Clare, 2017a).

2. Defect

Across the centuries, how many communities have been declared inherently defective by White people, rich people, nondisabled people, men backed by medical, scientific, academic, and state authority? I ask this question rather than answer it, because any list I create will be incomplete. I think of White women suffragists fighting for the right to vote, declared defective as a way of undercutting their demands. I think of Black people kidnapped from Africa and enslaved in the Americas, declared defective as a way to justify and strengthen the institution of slavery. I think of immigrants at Ellis Island declared defective and refused entry to the United States. I think of lesbians and gay men declared defective in 1940s, '50s, and '60s and given hormones and shock therapy to cure their homosexuality. The list of peoples considered defective keeps growing, the damage deepening.

Defectiveness holds such power because ableism builds and maintains the very notion that defective body-minds are bad, undesirable, disposable. In a world without ableism, *defective* as it is applied to humans, meaning the “imperfection of a bodily system,” would probably not even exist. But if it did, it would only be a neutral descriptor. However, in today’s world where ableism fundamentally shapes White Western cultural beliefs about normal and abnormal, worthy and unworthy, whole and broken body-minds, any person or community named defective can be targeted

without question or hesitation for eradication, imprisonment, institutionalization. The ableist invention of defectiveness unequivocally names many body-minds wrong.

The body-mind as symbol,
metaphor, academic
abstraction, the body-mind
as history.

Defective arcs repeatedly through history. Let me trace a single trajectory, starting in 1851, though I could begin nearly anywhere. Dr. Samuel Cartwright (1851) wrote in the *New Orleans Medical and Surgical Journal*: “It is this *defective* hematosiis ... of the blood, conjoined with a *deficiency* of cerebral matter in the cranium ... which has rendered the people of Africa unable to take care of themselves” (p. 693). Using scientific language, Cartwright defended and justified slavery, casting Black people as inferior and racist stereotypes as medical truth. Defectiveness and deficiency lay at the center of his argument.

In the same article, he coins several “diseases of the mind,” including *dysaesthesia aethiopica*, which according to Cartwright led enslaved Africans and African Americans to be lazy. This diagnosis not only turned resistance into illness but also allowed Cartwright (1851) to frame white power and control as cure:

The complaint [of *dysaesthesia aethiopica*] is easily curable. ... The best means ... is, first, to have the patient well washed with warm water and soap; then, to anoint it all over in oil, and to slap the oil in with a broad leather strap. (p. 712)

Cartwright's slight of hand is brutal. Enslaved Black people become patients and "it." The violence they endured becomes cure. The disabling nature of slavery is hidden away. Cartwright reveals in no uncertain terms the social control embedded in the declaration of defectiveness.

His words travel from 1851 to 1968, landing with White psychiatrists Walter Bromberg and Frank Simon (1968), who pontificated: "The stress of asserting civil rights in the United States these past ten years and the corresponding nationalistic fervor of Afro-American nations ... has stimulated specific reactive psychoses in American Negroes" (p. 155). Cartwright's claims transform and yet stay the same, the 1851 "defective hematosiis" twisting into the 1968 "specific reactive psychoses." Bromberg and Simon continue:

The particular symptomology we have observed, for which the term "protest psychosis" is suggested, is influenced by ... the Civil Rights Movement ... and is colored by a denial of Caucasian values. ... This protest psychosis among prisoners is virtually a repudiation of "white civilization." (p. 155)

In coining this new diagnosis "protest psychosis," cousin to schizophrenia, and declaring it widespread among Black people who defied white supremacy, they, like Cartwright, framed resistance as pathology. They used defectiveness yet again to justify violence—this time the locking up of Black people in prisons and psychiatric facilities and drugging them with antipsychotic medications.

Bromberg and Simon's words travel from 1968 to 2014, landing in the grand jury testimony of White police officer Darren

Wilson, who shot and killed young Black, unarmed Michael Brown in Ferguson, Missouri. In his testimony, Wilson recounts the altercation that happened moments before the shooting: "[W]hen I grabbed him, ... I felt like a five-year-old holding onto Hulk Hogan [a 6'7", 300-pound professional wrestler]... . That's how big he felt and how small I felt" (State of Missouri v. Darren Wilson, 2014, p. 212). There's no reflection of an adult man and a teenager of almost equal size—both of them 6 feet 4 inches tall, Brown weighing more and Wilson, the adult, armed and wielding the power of the state. Instead Wilson creates a picture of a monstrously overpowering Black man. He continues, claiming at one point that the eighteen-year-old "had the most intense aggressive face. The only way I can describe it, it looks like a *demon*" (p. 225). Wilson remembers that once he started shooting, Brown was "still coming at me, he hadn't slowed down. ... [I]t looked like he was almost bulking up to run through the shots" (p. 228). Brown becomes, in Wilson's story, a monster, an embodiment of evil, superhuman, impervious to bullets (Bouie, 2014).

Unlike Cartwright, Bromberg, and Simon, Wilson doesn't characterize all Black people as a group, wield diagnosis, or directly call Brown defective. Yet in painting him as a monstrous, superhuman demon, Wilson calls upon centuries of white supremacist belief in Black people's defectiveness. His testimony joins with *dysaesthesia aethiopica* and protest psychosis in naming African Americans defective.

Cartwright and the rest invent defective body-minds precisely to explain and justify the practices of slavery, imprisonment, institutionalization, and state violence. In essence white supremacy fortifies itself by

leveraging defectiveness.

The body-mind as gut
and bowel, hope
and dread, literal trash.

Entire body-minds, communities, and cultures are squeezed into *defective*. And then that single blunt concept turns, becoming *defect*. Bullies hurl it as an insult. Strangers ask it out of curiosity. Doctors note it in medical files. Judges and juries hear it in testimony. Scientists study it as truth. Politicians write it into policy. *Defect* explodes with hate, power, and control (Clare, 2017b).

3. Resisting Defectiveness

Because white supremacy is built upon and strengthened by the ableist invention of defectiveness, in order to end racism, we also have to dismantle defectiveness. Let me suggest four ways of resisting this ableist invention.

First, we need to develop a daily awareness of defectiveness. How are we impacted by it? When and where do we witness it? How does it operate in prisons, schools, courtrooms, doctors' offices, workplaces, and homeless shelters? Do we find it in our homes or places of worship, among our friends or with complete strangers? For those of us who, by virtue of privilege, are less personally impacted by defectiveness, cultivating this awareness is all the more necessary.

Second, we mustn't struggle against our oppressors, conservative politicians, and avowed white supremacists by mocking or diagnosing their body-minds. On a regular basis, I read activists belittling President

Trump's hair, body shape, hand size, even genital size. I hear speculation about his possible mental health diagnoses. In essence, these activists are arguing that the president's "defective" body-mind strengthens the proof that he is unfit and incompetent. This argument plays into and bolsters the invention of defectiveness by affirming the connections between body-mind differences and incompetence. Rather than using this ableist invention as an argument, let's stay focused on resisting Trump's policies and the racist, sexist, transphobic, xenophobic, Islamophobic, homophobic, ableist, and classist cultural climate that he's encouraging.

The body-mind
as ink on paper:
court order, medical
diagnosis, data
on file.

Third, let's create broad-based access in our homes, schools, workplaces, and movements for social justice. By broad-based access, I mean not only disability access, but also the availability of child care and gender neutral restrooms at gatherings; the use of sliding scales at events that cost money; the planning of meetings at locations near public transportation; the use of multiple languages, including American Sign Language (ASL), to communicate in all our community spaces; and the development of safety plans that do not rely on police. Access means being able to get into spaces both literally and metaphorically, being able to stay in those spaces, being able to fully participate, being able to belong. Creating access radically contradicts a dominant culture that deems whole communities of people disposable. And because disposability almost always works in tandem with the ableist invention of defectiveness, practicing access is powerful

resistance to it.

And fourth, we need to pay attention to the communities and people most impacted by defectiveness. I'm remembering Tanisha Anderson, a Black disabled woman killed by Cleveland police in November, 2014 on her way to a psychiatric facility. Resisting all the ways in which Anderson was deemed defective will help ensure that no one is ever killed again on their way to a psych admission. I'm remembering Reginald Latson, a young Black disabled man who, while wearing a hoodie and waiting for a public library to open in Stafford County, Virginia, was approached by police, tipped off without reason that he might be carrying a gun. In actuality he was unarmed: This was classic racial profiling. Latson responded with fear and agitation. The police read his Black neurodivergent self as dangerous, and he landed in prison, spending much of his sentence in solitary. Resisting all the ways in which Latson was (and is) deemed defective will help end the practice of locking people up in prisons and other institutions. I'm remembering Jerika Bolen, a significantly disabled Black lesbian teenager who shortly after her fourteenth birthday expressed a desire to die. Rather than being provided counseling and community support to strengthen her life, she was allowed to commit medically sanctioned suicide in 2016. Resisting all the ways in which Bolen was deemed defective will help keep marginalized peoples alive. Tanisha Anderson, Reginald Latson, and Jerika Bolen vividly remind me of how intensely defectiveness targets and impacts Black disabled people. The Harriet Tubman Collective (2016), a group of self-described "Black Deaf & Black Disabled organizers, community builders, activists, dreamers, [and] lovers," writes, "[L]iberation will never come without the intentional centering of Black Disabled/Deaf narratives and

leadership. We know this because it never has" (para. 7).

In the end what we need is simple: a wholesale revolt against the ableist invention of defectiveness.

The body-mind
as protest,
resistance,
everyday truth.

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