

“We¹ Are Not Disposable“:
“Psychiatric”/Psycho-Social Disabilities, Survivor Knowledge², and Audre Lorde’s Critique of Market
Fundamentalism

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“In a society where the good is defined in terms of profit rather than in terms of human need, there must always be some group of people who, through systematized oppression, can be made to feel surplus, to occupy the position of the dehumanized inferior.” Audre Lorde³

Miguel: Re-Framing “Passivity”

Miguel (pseudonym), like many queer little kids (including me) was tormented for years with homophobic attacks before he even knew what the word “gay” meant. Miguel did not “stand up” for himself. He did not fight back physically. Instead, he froze and was passive, enduring whatever it was the other kids did to him until it was over. For years Miguel felt shame and embarrassment over not fighting back. Grown now, a professor in Chicano, queer, feminist, and literary studies, Miguel is re-reading his apparent passivity as a young boy. He is asking what it meant, beyond that dominant account that casts it as a failure to do what he was supposed to do and be what he was expected to be.

What was he doing? Well, he was refusing to act out hegemonic scripts of homophobia and masculinism. Miguel now recognizes that what he did was stop. He paused. He thought. He experienced. He opened up an alternative theoretical space – for thinking, for feeling, for being at sea in the face on this de-humanizing treatment that made no sense. Miguel came to see that his “failure” to act may not have been a failure at all but in fact something very different. He was enacting another way to be.⁴

As various minority studies and activism has demonstrated, non-dominant ways of being are not necessarily failed or deficient examples of the dominant. Rather, they are their own expressions, which need to be understood on their own terms.

People with “Psychiatric”/Psycho-Social Disabilities: Re-Framing “Non-Productivity”

So too “failures” to meet hegemonic society’s expectations of speed and “productivity” may not indicate failures at all. Slow pace. Refusing narrowness. Resisting easy answers. Creativity. Non-linearity. Paying attention to emotions. Questioning assumptions, norms, and presumed meanings, re-thinking terms and categories – these can all offer insights otherwise missed. They can produce critical knowledge that – like Miguel’s – open onto other ways to be. By not enacting dominant “professional,” academic, even activist modes, we may be holding out for greater authenticity. This may be so even when it isn’t immediately apparent how that might happen or where it might lead.

¹ Using “we” is problematic. Of course, there are great differences among people who might be classified in such terms; some are permanently institutionalized and isolated, while others – like me -- are employed, live relatively independently, and are able to keep disabilities relatively hidden or private. My claiming both a voice and credibility as a speaker rests largely upon my having such material support and an identity as a professional and academic.

² Note: I do not claim originality in using this term “survivor knowledge.” I have not been able to track down its source. (If anyone knows where it came from, please let me know, as I would like to give appropriate credit. My closest guess is that I heard it at the University of Pittsburgh in the early to mid-1990’s, in a talk given by a scholar related to Women’s Studies at the University of Pittsburgh.

³ Lorde, Audre, “Age, Rage, Class, and Sex: Women Redefining Difference,” *Sister Outsider: Essays and Speeches* by Audre Lorde, The Crossing Press, 1984, 114.

⁴ Martinez, Ernesto, Essay presented at the Future of Minority Studies national conference, Spelman College, Atlanta, GA, September 2008.

As writes in *Disability Theory* (2008), “Some bodies are excluded by dominant social ideologies – which means that these bodies display the workings of ideology and expose it to critique and the demand for political change.”⁵ Like the metaphorical canaries in the mines, people with disabilities who are undermined in the present dominating culture, can testify to how we might think differently and live differently toward a world more oriented toward people’s genuine needs. As argues, “...oppressed social locations create identities and perspectives, embodiments and feelings, histories and experiences that stand outside of and offer valuable knowledge about the powerful ideologies that seem to enclose us.”⁶ Siebers, like others developing realist notions of identity, argues that identities, properly understood, can refer to actual features of the world, identifying barriers.

People with “psychiatric”/psycho-social disabilities are such bodies that “do not fit” with the reigning “ideology of ability” (using Siebers’ terms). It is precisely in our not fitting that we reveal barriers, harms, injustices, moral-political insights, and need for revolutionary change. In reading and unpacking how we do not fit we can identify obstacles that point to blueprints for such changes.

Survivor Knowledge from People with “Psychiatric”/Psycho-Social Disabilities

Voices of people with “psychiatric”/psycho-social disabilities – across such axes as class, race, and sexuality – can bring out critique of hegemonic culture’s following features:

- a) Its denial of human interdependence and its importance to our lives,
- b) Its refusal to recognize the human status of some on the basis of some kind of capacity defined by what Tobin Siebers calls “the ideology of ability.”⁷
- c) Its failure to acknowledge how “the intellect” has no monopoly on capacities to produce knowledge. Nor do hegemonic accounts of the world.
- d) Its denial of the importance, needs, gifts, etc., of our “whole” selves – body/mind/spirit.
- e) Its defense of market fundamentalist values, organizing the world on the interests of profit for the few rather than well being of all.

As Audre Lorde suggests consistently in her work, conditions for human flourishing (what is in the interests of humans) require a life-supporting environment, such as a livable ecosystem. Attention to voices otherwise marginalized as “crazy” is critical to envisioning possible futures that could serve all of us.

Insofar as they are successful, liberating movements enable people to live differently, to transform oppressive relations into emancipatory alternatives, literally shifting of the fabric of our lives. That involves labor – intellectual, physical, activist, emotional, institutional, etc, labor not valued by a hegemonic⁸ world system that is fundamentally geared to use the many to develop obscene profits for the few. Yet, such labor can be a liberating ethics of everyday life.

As Charles Mills has taught in *The Racial Contract*, such a world depends on an elaborate “epistemology of ignorance.” It’s not just that people are taught versions of reality that omit oppression. Rather, we are actively trained to not see what is (even if it is right before us). We are trained to regard oppression as non-existent – or perhaps as remaining in existence a bit but as fundamentally the fault of the oppressed.⁹

⁵ Siebers, Tobin, *Disability Theory*, University of Michigan Press, 2008, p. 33.

⁶ *Ibid.*, p. 8.

⁷ *Idem.*

⁸ I use the term “hegemonic” in the Gramscian sense, to refer not simply to dominant “ideology” or to structural practices alone but rather to the complex, interwoven ways that culture, ideas, everyday life, as well as more structural elements of a society that gets its members to “consent” or at least tolerate, a world that operates in ways that are deeply detrimental to their interests and to the interests of those they care about. (See Cornel West, *Prophesy Deliverance*, Westminster Press, 1982, for more on West’s reading of Gramsci.)

⁹ On this mindset of “epistemological ignorance,” oppression is long over and if it’s not it’s because “you people” keep “imagining it” and being “whiny” and “playing the victim.” As one undergraduate woman blurted out with great intensity recently after viewing a video of a Ward Churchill talk – “What happened to the Indians was a long time ago. It’s over. They should just get over it already!!!”

Minoritized knowledge is too seldom recognized as vital to all, especially to our sharing an interdependent world. (Like Goodman, Lugones, and others, I speak of the ways in which we live in very different worlds, as well as the way we share a common one.)

Dominant thought tends to characterize minoritized peoples and voices precisely as being ignorant, as not contributing to the world, as not being reliable knowers even of their own situations, much less as sources of insight into macro- and micro-level world issues. While some may study these “conditions,” it is often outsiders who are deemed “experts,” often treating oppressed peoples as objects rather than subjects. As DuBois asked many years ago, “How does it feel to be a problem?”

Yet oppression’s barriers and violence – physical, psychic, and epistemic – continue unabated and often unrecognized, concealed by prevailing thought that it is either justified or non-existent. Either way, dominant thought tends to construe them as pathological. One “rising above” her/his “disadvantaged” origins is portrayed as transcending a less valuable life in favor of a better life, assimilating to a dominant and better standard.

Audre Lorde often critiques the “horror” of a world organized in the interests of profit for the few rather than in the interests of human good. Part of her genius lies in the consistency with which she points to what many of us – following Kimberle Crenshaw -- now call “intersectionality,” how our lives (including oppressions of various forms) are always mutually constitutive. Another is her insistence of how insidiously all of these are tied to economic exploitation – yet she never reduces things to the economic.

Lorde’s concerns point to what Elizabeth Minnich describes as the “Root Error” of dominant Western culture, the division of human beings into fundamentally different kinds. With that “Root Error” differences among people are turned into distinctions marking fundamentally different kinds of beings, designed so by God, nature, religion – FACTS of the world as it is in itself (as if there is no human agency and responsibility in racializing, engendering, etc. human beings). Minnich notes that the construction of some groups as inferior to others depends upon the separation of people into such distinct groups in the first place.

As Kimberle Crenshaw discusses in “Framing Affirmative Action” the mis-appropriation of color blind ideals and strategies, and denial of even the most obvious empirical facts, is particularly dangerous. As Crenshaw points out, even the keeping of empirical data that can track inequalities could be blocked. (Proposition 209 in California is an example such a clever appropriation of supposedly pro-Civil Rights ideals and goals to advance a conservative agenda aimed to in fact reverse civil rights gains.)

Yet even John Dewey recognized the role of diverse cultures and approaches to knowledge. He described cultures as “experiments in living” in which people are sorting out how to live. Diverse experiences thus have epistemic value to minoritized and majoritized persons. Satya Mohanty, Linda Martín Alcoff, Michael Hames-Garcia, and Paula Moya are among those who have argued that genuinely inclusive inquiry, in contexts of mutual respect and empowerment, is crucial to such knowledge, contributing to making greater sense of the world (ultimately including the world in the senses that it is shared in addition to the worlds that may appear altogether different). Intersectional analyses are critical to revealing complexities of our histories and their legacies, developing possibilities of living differently. Rather than threatening hopes for knowledge, for ethics, for society, diversity – when truly counter-hegemonic -- can facilitate inquiry that may be both productive and liberating.

Note: I am not going into the huge epistemological questions of this larger project. In that larger project, though, I relate these ideas to views known as “Post-Postivist Realism” or to “realist theory of identity.” On this view, multiculturalism is best thought of as “epistemic cooperation” – knowing better through learning from each other in democratizing ways. ()

The Politics of Naming: “Psychiatric”/Psycho-Social Disabilities

What do I mean by psychiatric”/psycho-social disabilities?¹⁰

¹⁰ I am deeply ambivalent about all terms I have explored to relate to the phenomena I am trying to address. I use this term, with cautionary notes, until I find something better. (Any help on this is appreciated.)

I use the term psycho-social disabilities in an attempt to capture “psychological disabilities” without endorsing the medicalized and pathologizing associations built into these terms. Can the average person today even conceive of people with psycho-social disabilities as having thought and experiences from which to learn, or even to imagine them – or us? -- as participants in human conversations aimed at producing knowledge? Deeming such people to be lacking in rationality, they assume that they have nothing to offer. As hegemonic culture so often does with oppressed people, it undermines their cognitive authority. Even in supposedly inclusive diverse and multicultural conversations, the best way to mark an idea as not even worthy of consideration is to call it “crazy.”

As notes (in Disability Theory, 2008) the “ideology of ability” is so built into language that it’s hard to find any words that do not perpetuate the very problems we are trying to solve.

I prefer psycho-social disabilities to other labels I have encountered, e.g., ex-patient, mental health consumer, “mad,” bipolar or other particular “mental illness” label, psychiatric survivor, or “mad” as in “Mad Liberation.”

Overall, what gets called disability is some subset of human diversity and variation. Again we have Minnich’s “Root Error” of interpreting human variation as fundamentally different categories of humans.

I worry about calling “psychiatric” or psycho-social issues disabilities at all, given the realities of able-ist oppression. Like people working on neuro-diversity, I worry about what would be lost if potential parents select again fertilized embryos that show genetic markers for bipolar, for attention deficit disorder, for depression. I have struggled with my own experience of these issues as well as with abuses by the medical established and its dehumanizing labels, over-medication, and the like. Still, I know that there are insights I have had, mystical experiences, deep knowing of what is important, creative energies, and social critiques that seem to have arisen out of those very ways of being that have been represented as pathological. Of course, reductionist Western medical science tends to deny or pathologize that which it does not understand, thus blocking the development of other kinds of knowledge.

In times that I have gotten through breakdowns/breakthroughs/“psychiatric” crises/enlightenment experience, certain features were present that relate to how certain indigenous wisdoms respond, being based not on economic profit and its concomitant valuing of “productivity.” Importantly, I had allies to help me make sense of the experience. Even when they did not understand, they treated me as a person, not a label. They took my thoughts, experiences, and feelings to be meaningful. They treated me as having cognitive authority. This was something utterly lacking in my experience at age 21, when I had a traumatizing encounter with the medical establishment, with a bad county hospital and no health insurance, and dealing with a disrespectful psychiatrist whose only resource seemed to be heavy-duty pharmaceuticals like Thorazine.

In Rachel Gorman and Michael Rembis’s session at the Society for Disability Studies conference in 2009, we discussed the dangers of “psychologization” – in terms of the “Psy Industry” and also in terms of all the ways that social critique has often been replaced by psychological, individualizing problems and solutions.

Similarly, Incite! – and _____ in particular, has argued that violence has been medicalized, individualized.....

Of course, social locations are never uni-dimensional. As Gorman notes, her behavior in elementary school might well have been tolerated had she been white and male. It might have been encouraged as enthusiasm or exuberance. Instead, she was labeled with hyper-activity and attention deficit disorder, put on regimes of medication and behavior control. Only as an adult did she discover the secret that her biological father was of African descent. Suddenly all kinds of things made sense – how her mom tried to keep her out of the sun, tried to control and straighten her hair, desperately seeking to make her approximate ideals for middle-class white girls, at whatever cost to her spirit.

That said, there are advantages to the term “psychiatric/psycho-social disabilities.” It de-stabilizes some of the problematic assumption around distinguishing mental versus physical disabilities, as if these can be sharply distinguished. People with “psychiatric”/psycho-social disabilities reveal the falseness of that mind/body dichotomy. Some think of major depression, for example, as primarily a physical state

manifesting with psychological symptoms, while others think of it as psychological phenomena with physical manifestations. So too with Attention Deficit disorder. Some characterize it as physical (relating to brain and nervous system), some as psychological, and some as a learning disability.

Even the boldest and broadest notions of “Universal Design” often focus on the narrowly physical realm. What would it mean to have “universal design,” inclusion, and full participation of people with Post-Traumatic Stress Disorder, for example?

I do not mean “psycho-social disabilities” to refer only to those who relate to notions of psychiatric or psychological challenge. Rather, this term is meant to point to each of our “complexly embodied experiences” (Tobin Siebers’ term) of the able-ist world. I understand many disabilities to have psycho-social disability dimensions. Further, the everyday violence toward oppressed people often produces psycho-social disabilities (or perhaps simply similar challenges) in members of targeted groups, who must expend a great deal of energy simply negotiating day-to-day obstacles entailed by oppression.

The world today is woven with social and material conditions that unnecessarily exclude and do violence to many. They make it hard to live, much less flourish. Many “psychiatric”/psycho-social disabilities are produced – or exacerbated – by the ever faster pace and increasingly weakened social fabric around us. As well, such material conditions as structural violence, militarism, impoverishment, neglect, and lack of social support produce disabilities in people.

Of course, disabilities are often produced by social construction so as to unnecessarily exclude through the built environment as well as its social parallels.

(See Susan Wendell, *The Rejected Body: Feminist Philosophical Reflections on Disability*, for an account of how the mainstream ‘pace’ of profit-oriented societies produce disability and the marginalization of those with disabilities?)

I’m working with Kimberle Crenshaw’s term “intersectionality theory” (first published in 1989). Simply put, the challenge is how to work on the various social locations and patterns related to race, sexuality, disability, gender, nation, class, etc. while attending to how each “intersects” with the other. Even the language of “intersections” falls short. That language may suggest independent vectors (of race, gender, etc) that cross at certain points, whereas in fact these are mutually constituting and shifting. (A low-income Mexican-American migrant woman’s “gender” is not simply a generic “woman-ness” plus a generic “Mexican-American-ness” plus a generic “low-income-ness”, etc. Rather, her gender is itself racialized, class-shaped, and so on.) As Kimberle Crenshaw, Chandra Mohanty, Michael Hames-Garcia, Sean Teuton, Patricia Hill Collins, and others have argued persuasively, such “additive” or even “geometric approaches” are inadequate. To better understand these complexities, attention to this mutual constitutiveness must be built into assumptions and methods of inquiry, as well as attention to shifting contexts, conditions, and ideas that are current. Inquiry is best done collectively, with diverse participants, and with relevant epistemic cooperation that avoids hidden assumptions going unchecked. However, given how our various histories are intertwined with varying strands and complexities, investigated with traditions of thought and culture not necessarily known to each other, how can one begin to do justice to the imperatives of knowledge production?

Certainly one cannot assert a (presumably monolithic) group of people with psych survivor/psychosocial disabilities and compare that group to other (presumably monolithic) groups such as Vietnamese-Americans. The mutual imbrication of the various patterns and histories is far too great.

from Lorde’s Oberlin speech

The very ways that one is identified as having a “mental illness” versus targeted as a potentially violent youth tends to depend very much on one’s particular social location of class, race, citizen (or not) status, etc. In one anecdote, two young African-American males are identified by teachers as having Attention Deficit Hyperactivity Disorder. One family takes the school’s word for it and starts the son on medication and regimes of psychiatry, labeling him, etc. In the other case, the family is alert to the myriad ways in which African-American males are constructed as threatening, disruptive, and so on and challenge the teacher, eventually having the son transferred to another class, as it becomes clear that the son is responding to racism. Similarly, young people’s encounters with police and courts are often smoothed through the privilege of some who can arrange private attorney representation, private psychiatrist testimony as to the young person’s “issues”, etc.

Audre Lorde makes frequent connections about how some people are treated as disposable, as problems (again reminiscent of DuBois' classic question "How does it feel to be a problem?"). Further, she notes how oppressions' rationality or lack thereof is hidden. In "Eulogy for Alvin Frost" in *Black Unicorn*, Lorde writes that she is "tired of the psychology of the oppressed where mental health is seen as repression of knowledge of the world's cruelty."

In teaching a Patricia Williams book *Toward a Color-Blind Future*¹¹, my majority white class insisted on denying Williams' reported experiences and reflections -- which simply did not match their own or the dominant narratives -- as "crazy", "angry", "biased." So too did they regard Williams personally as a crazy angry Black woman. I kept challenging them, arguing that to dismiss her and her experiences as "crazy" is to suggest there are no reasons for her views, that she is really not a person, that neither her or her words and experiences are worthy of even the slightest hearing. No matter that she is a law professor, respected writer, elite university faculty member, and that they had little or no background or experience in the matters of which she wrote.

Who is treated as disposable, as valuable, as worth listening to, in a profit-centered, market fundamentalist culture? Who has cognitive authority? How are our failures to flourish under inhumane conditions interpreted as mental illness, criminality, personal character flaws, and so on? Who and how are people medicalized, criminalized, pathologized, and stigmatized? How do notions of what ideas and behaviors are "sane" or "crazy" serve to invalidate critiques and testimonies, furthering silencing messages needing to be heard?

U.S.-centered market fundamentalist processes value people for how "productive" they are, framing disabled and other marginalized people as a drain on public resources. People with "psychiatric"/psycho-social disabilities¹², like targets of intersectional forms of oppression generally, often live in ways that reject hegemonic standards of personhood, societal membership, and contribution. Such "failures" to meet hegemonic society's expectations of speed, "productivity," and "reasonableness" may not indicate failures at all. They can produce critical knowledge that reveals other ways to be. This essay arises from dialogue with many people rendered "unproductive," making sense of themselves and the world on their/our own terms.

Recall what Elizabeth Minnich¹³ describes as the "Root Error" of dominant Western culture. That "Root Error" is the division of human beings into fundamentally different kinds and the subsequent ranking of those kinds. Minnich identifies processes by which the knowledge claims of privileged white men have been taken to be universal, while others (like those with "psychiatric"/psycho-social disabilities/psych survivors) are left out, or -- worse -- distorted and misrepresented. Minnich describes "classifying humans by kind" as the "root conceptual error that feeds knowledges that...derive from and legitimate systems of domination."¹⁴

To reiterate the themes articulated here, choices of people with "psychiatric"/psycho-social disabilities -- across such axes as class, race, and sexuality -- can bring out critique of hegemonic culture's following features:

- a) Its denial of human interdependence and its importance to our lives,
- b) Its refusal to recognize the human status of some on the basis of some kind of capacity defined by what Tobin Siebers calls "the ideology of ability."¹⁵
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¹¹ Williams, Patricia, *Toward a Color-Blind Future*.

¹² I use the term "psychiatric"/psycho-social disabilities in an attempt to capture "psychiatric"/psychological disabilities" without endorsing the medicalized and pathologizing associations built into these terms.

¹³ Minnich, Elizabeth, *Transforming Knowledge*, Second Edition, Temple University Press, 2005.

¹⁴ Minnich, p. 25.

¹⁵ Siebers, op. cit., p. 8.

