

Disability, Able-Bodiedness, and the Biopolitical Imagination
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Abstract: Following the work of Hannah Arendt, Michel Foucault, and Giorgio Agamben, this article offers a theoretical analysis of the relationship between modern forms of biopolitics and discourses of disability and able-bodiedness in the context of globalization.

Key Words: empire, globalization, biopolitics

While recent scholarship emerging out of the field of disability studies has sought to globalize the study of disability, this article addresses a series of conceptual gaps in current theorizations about disability, globalization, and practices of empire.¹ A number of leading scholars in the field of disability studies have pointed out the analytical limits of applying a Western model of disability oppression to alternative contexts, but few have articulated the complex relationship between discourses of disability and able-bodiedness and contemporary forms of biopolitics.² By placing the work of Hannah Arendt (1958), Michel Foucault (1979), and Giorgio Agamben (1995) in conversation with disability studies scholarship, this article examines the process by which forms of citizenship become invested in and defined through the bodies of citizens. To globalize the study of disability, the field must first articulate the varied ways that conceptions of disability and able-bodiedness function discursively in the control, maintenance, and organization of national populations.

Adapting the work of Jasbir Puar (2007) in *Terrorist Assemblages: Homonationalism in Queer Times*, Robert McRuer (2010), David Mitchell and Sharon Snyder (2010), and Kristen Aherns (2010) have offered a significant element to the global analysis of disability by linking it directly to the biopolitical ends of empire (and its multiple valences, both national and global). According to McRuer (2010), Puar is able to demonstrate the varied ways that the “biopolitics of Empire now target certain lesbian and gay, and even ‘queer,’ subjects for life while simultaneously queering ‘terrorist corporealities’ and targeting them for death” (p. 169).

Puar (2007) troubles the heterosexual/homosexual binary by showing how the state produces normative gay and lesbian identities in order to police more strictly alternative forms of queerness, consolidating ever-narrowing forms of white racial privilege in the process. Mitchell and Snyder (2010) coin the term “able-nationalism” in order to extend Puar’s analysis of gay and lesbian identities to disabled identities; they name the process by which some disabled subjects (“super-crips”) are nominated as exemplars of national values of progress in order to bolster an ideology of neoliberal inclusiveness, while other disabled subjects are targeted as waste within the global economy.³

For Mitchell and Snyder (2010), “recent able-nationalisms” have managed to situate “some mutant bodies as effectively and normatively disabled,” allowing disabled people to “perform their representational work as a symbol of expansive neo-liberal inclusion efforts” (p. 116). According to their analysis, the task of globalizing disability studies must also be the task of recognizing how some disabled subjects are made hyper-visible in order to render other disabled subjects invisible and beyond the bounds of neoliberal rationality.

The theoretical move initiated by these scholars begs a deeper consideration of the ways that the discursive logic of disability can often exceed the material state of the body and produce its own reality effects. In Lennard Davis's (1995) foundational text, *Enforcing Normalcy: Disability, Deafness, and the Body*, he argues:

“The problem, of course, is that the manner in which this society defines disability in fact creates the category. Able-bodied (or temporarily able-bodied) people safely wall off the severely disabled so that they cannot be seen as part of a continuum of physical differences, just as white culture isolates blackness as a skin color so as not to account for degrees of melanin production. How many people with hearing aids consider themselves deaf; how many people with knee braces consider themselves impaired?” (p. 7)

In light of Mitchell and Snyder's (2010) analysis of the “able-disabled,” and, in addition, its inverse, the disabled able-bodied, it is not enough for disability studies to simply deconstruct the able-bodied/disabled binary in order to recognize disability along “a continuum of physical differences” that defines human variation in general. Instead, it is incumbent upon the field to consider more fully how the ideology of neoliberal inclusiveness and modern forms of biopolitics actually profit from the instability of previously fixed categories of identity and difference. As the recent work of McRuer (2006; 2010) and Mitchell and Snyder (2010) suggests, processes of globalization blur the lines between the able-bodied and disabled in some contexts while reconstituting them in both stricter and more subtle ways in others.

To advance McRuer's (2010) recent effort to think the “uneven biopolitical incorporation” of “disabled subjects who in certain times and places are made representative and ‘targeted for life’ even as others are disabled in different ways, or crippled, or targeted for death” (p. 171), the field of disability studies must first develop a nuanced theoretical approach to the relationship between disability and the biopolitical imagination that has characterized the development of Western civilization and its liberal political tradition. In writing about contemporary forms of biopolitics, Giorgio Agamben (1995) argues that “only a politics that will have learned to take the fundamental biopolitical fracture of the West into account will be able...to put an end to the civil war that divides the peoples and the cities of the earth” (p. 180). Following McRuer, this article argues that the disabled/able-bodied binary informs the process by which the politics of life transforms into the politics of death, allowing for disability to act as the symbolic justification for the violence perpetuated by modern forms of empire.

Discourses of Disability

For the purposes of my argument, the phrase “discourse of disability” refers to a series of statements and writings that accrue over time and imbue a physical or mental difference with social meaning and value. Discourses are not simply representations, but representations that have achieved a general sense of approbation, to the point where they appear to articulate the world as it *really* is. Focusing on discourses of disability rather than disabilities themselves does not aim to deny the material reality of physical and mental difference, but only to suggest that physical and mental differences do not carry an innate value. In other words, disability only becomes a problem, a limit, or a disadvantage within a specific social context. Discourses of

able-bodiedness operate in a similar fashion; one can only identify as an able-bodied subject within the institutional frameworks and through the cultural discourses that define able-bodiedness and describe how the able-bodied should appear.

Thinking in terms of discourses of disability helps open up critical space to theorize the gap between representations of disabilities and their physical manifestations. As so many disabled activists and scholars have noted, the experience of a disability is often far more influenced by cultural attitudes associated with disability than any physical consequences resulting from impairment. The gap between the personal experience of a disability and its larger cultural evaluation becomes even more complex when theorized in relationship to other categories of difference, such as race, class, gender, and sexuality. As Douglas Baynton (2001) explains, “disability has functioned historically to justify inequality for disabled people themselves, but it has also done so for women and minority groups” (p. 33). When the language of disability is used to describe an entire population of non-disabled people in order to justify their exclusion from full political membership in a society, discourses of disability lose their connection to the physical body entirely. Far from articulating the complexity of an embodied state, such discourses rely on the negative cultural associations of disability to stigmatize diverse groups of people and deny them basic human rights. The fact that so many Western nations have relied upon discourses of disability to produce exceptions to their laws only shows how deeply related the concepts of able-bodiedness and citizenship are in the West.⁴

Disability Oppression in the West

If discourses of disability have often been deployed historically to justify the social marginalization of all types of minority groups in the West, this tendency presents a conceptual problem for the field of disability studies. It asks scholars to consider why disability, in particular, is considered such a convenient and natural mark of social inferiority. The danger, of course, is to read disability oppression as an evolutionary phenomenon, the inevitable result of the human desire for reproductive fitness. Once disability oppression is linked to human biology, it is divested of its political implications.

In contrast, when discourses of disability are examined in relationship to the biopolitical aims of the state, even the earliest forms of biopolitics help reveal the tacit political connection between disability and social oppression and exclusion. When Aristotle writes that “[human beings are] born with regard to life, but existing essentially with regard to the good life,” he articulates the ancient Greek distinction between natural life and political life (Agamben, 1995, p. 2). Hannah Arendt (1958) elaborates on this division in *The Human Condition* when she distinguishes between labor, work, and action, where labor, or the *animal laborans*, “corresponds to the biological process of the human body, whose spontaneous growth, metabolism, and eventual decay are bound to the vital necessities produced and fed into the life process by labor. The human condition of labor is life itself” (p. 7). According to Arendt, the ancient Greeks relegated labor to the private sphere of the home while privileging the political and public life of action. For Agamben (1995), this distinction corresponds to the privileging of *bios*—“the form or way of living proper to an individual or group”—over *zoe*—“the simple fact of living common to all living beings” (p. I).

In the classical world, the physical needs of the body were excluded from the political realm. As Arendt (1958) explains, “what men [*sic*] share with all other forms of animal life was not considered to be human” (p. 84). In this way, citizenship referred to a process of disembodiment, where citizens were released from the strictures of the bodily labor associated with the home and free to concentrate on the higher intellectual aims of the polis. But in practice, disembodiment cannot be distinguished from able-bodiedness, since the minimum requirement for citizenship was really the ability to account for your basic needs autonomously in the private space of the home. The inability to account for the basic needs of the human body discretely and in private became a mark of subhuman status.

Under this schema, disability was often interpreted as a visible sign of the body’s physical needs, allowing disability to become associated with *zoe* and able-bodiedness *bios*. The ancient Greek “conviction[s] that life without health [was] not worth living...and that suicide [was] a noble gesture to escape a life that has become burdensome” exemplify the way disabled subjects became devalued within ancient Greek society (Arendt, 1958, p. 315). For the ancient Greeks, a person burdened with ill health or severe impairment was incapable of experiencing an “autonomous and authentically human way of life” (Arendt, 1958, p. 13). Instead, the life of the free citizen acting in the sphere of the polis constituted the highest form of man’s being in the world, or Aristotle’s “good life.”

The distinction between *bios* and *zoe*, or the good life and bare life, helps to explain the process by which disability gradually comes to mark the exception to the contemporary political order. By defining disability against citizenship, the ancient Greeks would set the stage for later discourses of disability deployed to deny diverse groups of people their citizenship rights in the West. The ancient Greeks’ privileging of *bios* over *zoe* reveals disability oppression to be a distinctly political process rather than a long evolutionary progression. The ancient Greeks elevated some aspects of human experience over others, privileging the human potential for intellect over the animal substratum that also made up part of human nature. In the process, disability came to mark a liminal zone separating human from animal, where disability represented something human that was refused acknowledgement as such. Only a perspective that understands the long history of disability oppression in the West as a distinctly political phenomenon will be able to recognize how discourses of disability and able-bodiedness have been translated by modern forms of biopolitics.

Rethinking Foucault: Disability Studies and Biopolitics

If disability has historically marked the exception to the Western political order, then this provides a slight nuance to the interpretation that many disability studies scholars have offered for the relevance of biopolitics to the study of disability, particularly in relation to the work of Michel Foucault. While Foucault is often cited as an important predecessor to the still growing field of disability studies, too often disability studies scholars have sought to link Foucault’s docile body, produced by modern technologies of discipline, to the disabled body.⁵ Tobin Siebers’s (2008) discussion of Foucault in *Disability Theory* provides a primary example of this critical tendency. For Siebers (2008), Foucault’s docile body—“the body invented by the modern age”—is really just the disabled body in disguise (p. 58). Siebers dismisses Foucault’s poststructural account of the body as part of a larger argument that takes aim at social

constructionist accounts of physical difference, suggesting that this type of analysis inevitably seeks to return to a healthier, fitter, and more natural version of the body that processes of signification have either blurred or substantially delimited.

Siebers's argument rests largely on a series of passages drawn from Foucault's (1979) *Discipline and Punish* two of which are reprinted below:

“The soldier was someone who could be recognized from afar; he bore certain signs: the natural signs of his strength and his courage, the marks, too, of his pride; his body was the blazon of his strength and valour.

By the later eighteenth century the soldier has become something that can be made; out of a formless clay, an inapt body, the machine required can be constructed; posture is gradually corrected, a calculated constraint runs slowly through each part of the body, mastering it, making it pliable” (p. 57-58)

The contrast presented by the depictions of the seventeenth and eighteenth century soldier provides compelling evidence for Siebers's conclusion that Foucault's work romanticizes the health and fitness of a previous age. As a representative of this earlier type of fitness, the first soldier stands erect, the natural emblem of an internal strength of mind and body that marks his calling. The second soldier, on the other hand, appears to lack this strong sense of physicality; while his body suggests a latent potential, it must be trained, sculpted, and adapted in order for that potential to be maximized. But Foucault (1979) is less concerned with the comparative physical merits of either soldier than the historical question of their verifiability as soldiers (p. 135-136). In other words, Foucault is interested in what makes a soldier a soldier, and how that truth can be measured. In the first case, the soldier's identity is verifiable through his physical attributes, traits gifted at birth, natural affinities for running, jumping, marching, and fighting.

For the second soldier, physical attributes are merely the raw material for a much more complex process of verification. This involves a training regimen and a series of drills and learned behaviors, but also an accounting process, a series of measurements, and a careful inventory of skills to ensure the effectiveness of that training. The problem with Siebers's critique is the suggestion that, despite Foucault's many claims to the contrary, his historical arguments are always implicitly evaluative, that he is nostalgic for a vision of the past.

In Siebers's (2008) argument, the docile body is the object of a profound form of repression, a reading that makes sense if “all of [Foucault's] major writings are dedicated to tracking their [‘madness,’ ‘criminality,’ and ‘sexuality’] involvement with social repression and exclusion” (p. 57). But perhaps the most innovative aspect of Foucault's work is the theoretical move he makes away from the traditional juridico-institutional approach to the problem of power in order to imagine a form of power that is not simply repressive but also productive. The concept of biopower allows Foucault to trace the many ways that power invests subjects at the level of the body, taking hold of all aspects of the life process. For Foucault, power is never simply a top-down affair; instead, it refers to a profoundly relational phenomenon. Even a cursory look at Foucault's work reveals that “repression” and “exclusion” do not occupy privileged spaces in his lexicon.

The fundamental difference between the two soldiers described above is that the second is the object of this new form of biopower. According to Foucault, the charge of biopower is to take hold of human life in all its aspects, “right down to the depths of society” (Foucault, 1979, p. 27). This type of power is invested in processes of economy and efficiency but also normalization; subjects begin to internalize the norms of the population to the point where they police themselves, suturing their identities around the larger biopolitical aims of the state.

Foucault chooses to study the prison and the mental asylum because they are privileged sites from which to view the operation of power on the body of the subject, and it is significant to remember that the very idea of panopticism does not simply refer to Bentham’s ideal prison but rather the prison as the perfect functioning of a mode of discipline that has invested the population at large. If Foucault (1979) looks to sites of “exclusion” for his analysis, it is in an effort to shed light on the contemporary norm, and this is precisely what he means when he argues that he is writing a “history of the present” (p.31).

Siebers (2008) mistakenly associates the docile body with disability by over-investing in the spatial mechanics of Foucault’s analysis. The contrast presented in the two soldiers’ bodies does not distinguish between the able body and the disabled body, but rather, between types of able-bodiedness. The docile body is equivalent to the modern conception of the able body, where able-bodiedness names biopower’s functional end. This explains the shift in emphasis in the context of the prison and asylum from punishment and containment to rehabilitation—the object of biopower is the reintroduction of the normalized subject into society.

But the close relationship between biopower and able-bodiedness also suggests that able-bodiedness refers not simply to a privileged form of identity but more immediately to a regulatory discourse. As a regulatory discourse, able-bodiedness does not name a form of repression, but a form of subjectification and control. As discourses of able-bodiedness invest the population around a series of measurable and increasingly differentiable norms, individual subjects begin to model their behavior according to normative expectations.

What Foucault’s work seems to intuit but never makes explicit is that the discourse of able-bodiedness, far from trying to eliminate the disabled body, requires it as a permanent threat and an imminent possibility for its very operation. In other words, disability and able-bodiedness name two sides of the same biopolitical coin, but this is a point that requires Agamben’s theory of sovereign power and bare life for further analysis.

Disability and Modernity: A New Biopolitical Paradigm

Both Foucault and Arendt characterize modernity in precisely the same way, though they arrive at the conclusion separately: the threshold of modernity is constituted by the politicization of the unqualified body, simple human life. For Arendt (1958), scientific modernity names the process by which labor, the *animal laborans*, rises to central importance within the sphere of politics.

Foucault’s (1990) analysis concurs: “For millennia man [*sic*] remained what he [*sic*] was for Aristotle: a living animal with the additional capacity for political existence; modern man

[sic] is an animal whose politics calls his [sic] existence as a living being into question” (p. 143). Once the *animal laborans* (or Agamben’s *zoe*) is linked to the disabled body, disability becomes stigmatized in the West as a symbol of the strictly biological needs of the human body.

The conclusion might follow that if the project of modern biopolitics is invested primarily in the biological processes of its subjects, disability would find a measure of inclusion in this new paradigm of rule. On the surface, this appears to be the case, particularly with the deinstitutionalization movement and legislation like the Americans with Disabilities Act (1990) that seeks to guarantee the civil rights of disabled populations.

Likewise, Davis (2002) has demonstrated the ways that disability finds inclusion as a market identity within the newly globalized economy. At the same time, there are dangers associated with this line of thought, which corresponds to a type of progress narrative associated with disability liberation. Even as the old walls of the institution begin to crumble, the group home, the nursing home, the special education classroom, and the government-funded facility continue to mark a point of separation between the able-bodied and the disabled.

From a global perspective, the inclusion of disabled subjects is also severely limited. In Achilles Mbembe’s (2003) essay “Necropolitics,” he offers the concept of a “death-world” to describe “new and unique forms of social existence in which vast populations are subjected to conditions of life conferring upon them the status of *living dead*” (p. 40).⁶ Given that there are more than a half billion disabled people in the world today and that 80 percent live in developing countries, the intersections between impaired bodies and the creation of death-worlds are multifarious (Davidson, 2008, p. 117).

In such spaces, the visibly fragmented body marks a liminal position between life and death. While the social conditions conferred upon Mbembe’s (2003) “living dead” produce disproportionate numbers of disabled people, their disabilities perform the symbolic work of justifying those unequal living conditions.⁷ The “death-world,” then, relies on a form of circular logic that inverts its temporal manifestation, where acts of violence are justified by the disabilities they produce.

Neither Foucault nor Arendt can answer the competing and contradictory claims represented by the simultaneous inclusion and exclusion of the disabled body that characterizes modernity and the current age of global capital. For Agamben (1995), the primary limitation of Foucault’s (and by extension, Arendt’s) theoretical analysis is their inability to define the precise relationship between the law and specific forms of biopower (p.6). Agamben (1995) asks, “Where is the zone of indistinction (or, at least, the point of intersection) at which techniques of individualization and totalizing procedures converge?” (p. 6). In other words, at what point do sovereign acts of violence and modern technologies of discipline intersect and inform one another?

Agamben (1995) answers this question with the concept of bare life, or the life of *homo sacer*, “who may be killed and yet not sacrificed” (p.8).

The Disabled/Able-Bodied Binary and the Sovereign Decision over Life and Death

Bare life should be understood as both the foundation upon which the Western juridical order is erected and the object of biopower par excellence. According to Agamben (1995), sovereignty is constituted by the sovereign's sole power to proclaim the state of exception, and the space of the exception is characterized by the production of bare life.⁸ In other words, the "production of bare life is the originary activity of sovereignty" (p. 83).

Agamben continues, "the sovereign sphere is the sphere in which it is permitted to kill without committing homicide and without celebrating a sacrifice, and sacred life—that is, life that may be killed but not sacrificed—is the life that has been captured in this sphere" (p. 83). For Agamben, the originary activity of sovereignty is the production of excepted populations, or groups of people who are stripped of their political rights and can be murdered without consequence.

Where Agamben parts ways from Foucault and Arendt is in the assumption that the inclusion of simple life—*zoe* or the *animal laborans*—in the political realm distinguishes the modern age from the classical world of the ancient Greeks. Instead, Agamben argues that the concept of *zoe* has always been included within the political world of the West by measure of its very exclusion. As he explains, "bare life remains included in politics in the form of the exception, that is, something that is included solely through an exclusion" (p. 11).

For the ancient Greeks, *zoe* was relegated to the private sphere of the home while the qualified life of politics occupied the sphere of the polis. But in the effort to define the "good life" as the absence of bare life, bare life became fundamental to the very concept of Western politics—it was the included exclusion upon which the concept of political sovereignty became founded. The modern age of biopolitics does not, then, represent the first time that bare life has been included within the realm of politics in the West. Instead, as the state of exception becomes the rule,⁹ or as the state of exception becomes the state's working paradigm of government, the distinction between *bios* and *zoe* is no longer tenable: "exclusion and inclusion, outside and inside, bios and zoe, right and fact, enter into a zone of irreducible indistinction" (Agamben, 1995, p. 9).

What Foucault and Arendt recognized as a new form of biopolitics was actually a qualitative shift in the politics of life, where the separation of bare life and political life could no longer be easily distinguished. According to the logic of my argument, as bare life and political life enter into a zone of indistinction, so too must the concepts of disability and able-bodiedness.

Just as Foucault (1979) conceived of his work as "a history of the present," Agamben's conception of bare life becomes most significant in relation to the contemporary paradigm of rule. As Slavoj Žižek (2010) explains:

"The distinction between those who are included in the legal order and *homo sacer* is not simply horizontal, a distinction between two groups of people, but is increasingly also a "vertical" distinction between two (superimposed) ways in which *the same* people can be treated" (p. 25)

According to Žižek (2010), once exclusion and inclusion enter into “a zone irreducible indistinction,” the lines separating citizen from non-citizen also become ambiguous (Agamben, 1995, p. 9). For this reason, Žižek (2010) argues that “the implication of [Agamben’s] analysis of *homo sacer* is not that we should fight for the inclusion of the excluded, but that *homo sacer* is the ‘truth’ of all of us” (p. 125).

To fight only for the inclusion of the excluded is to misunderstand the precarious position in which all human beings find themselves today, where anyone can become excluded from the rights of political membership at any time. At a basic level, “we are *all* ‘excluded’ in the sense that our most elementary, ‘zero’ position is that of being an object of biopolitics,” so that the rights of all citizens are always secondary to the biopolitical aims of the state (Žižek, 2010, p. 125).

Together, able-bodiedness and disability represent dueling yet complicit sides of the “zero” position to which Žižek (2010) speaks. Globalization presents not just a zone of indistinction but a zone of fluidity through which the disabled become able-bodied and the able-bodied become disabled. Only this notion of a zone of indistinction makes sense of the fact that in the very name of the health of the body, modern biopolitics proliferates new forms of impairment and disease with ever finer gradations of symptoms, or the fact that so many “cures” produce their own ailments. And only this notion of a zone of fluidity can help to elucidate the point at which the disabled body becomes the site of the decision between value and nonvalue under which the politics of life transforms into the politics of death.¹⁰

Globalization is not simply opposed to the nation-state—in fact, the forces of globalization often provide new spaces through which the state of exception can operate. The lesson that thinking of bare life in terms of disability provides is not that anyone can become disabled at any time—this is a lesson that the field of disability studies has long been aware of. Instead, the lesson is that *anyone* can be produced as a disabled subject at any time as the exception becomes the rule.

Agamben illuminates the double register of bare life in order to bring into visibility the process by which the state of exception passes judgment on all our lives, but understanding bare life in relationship to disability adds an important affective register to his analysis. If Agamben seeks to articulate the biopolitical schism at which point biopolitics becomes thanatopolitics, the discursive distinction between the disabled body and the able body helps explain how subjects become invested in that schism without recognizing their precarious position within it.

At the point of decision where the sovereign passes judgment on the bodies of the population, the disabled/able-bodied binary produces the evaluative logic which separates the body that must die from the body that is targeted for life. This is the point at which the able-bodied subject can recognize the disabled subject only as an enemy—the disabled body becomes the static object of fear or pity while the able body masquerades as the precondition for the pursuit of happiness. If the end of biopolitics is the production of the able-bodied subject, then the end of thanatopolitics is the elimination of the disabled subject. The decision between life and death not only unites the able-bodied and disabled through their mutual exclusivity, it suggests that the knowledge of one cannot be produced outside of the knowledge of the other.

Hurricane Katrina and Memorial Medical Center

The events that took place at Memorial Medical Center in New Orleans following Hurricane Katrina provide a material example of the largely theoretical analysis above. When doctors and nurses at Memorial decided to inject at least seventeen patients with lethal doses of drugs following Hurricane Katrina, they reduced their patients to the status of Agamben's bare life, or *homo sacer*, "who may be killed and yet not sacrificed" (p. 8).

As relief efforts were slow to arrive and the hospital lost power and running water, the medical professionals at Memorial decided to appraise their patient's lives. The patients were divided into three groups: group 1 consisted of patients who could sit up and walk and they would be evacuated first; group 2 included sicker patients that required physical assistance in order to move; group 3 patients required significant assistance and were scheduled last for evacuation (Fink, 2009, p. 7).¹¹

The patients at Memorial were separated according to the severity of their impairments, where the lives of the healthiest patients were prioritized above the lives of their sicker counterparts. In choosing to evacuate the healthiest patients first, the doctors at Memorial acted upon the tacit assumption that the able-bodied have more to live for than the disabled.

The events at Memorial provide a powerful example of the theoretical claim that in the modern age, the disabled body becomes the site of the decision over life and death at which point biopolitics transforms into thanatopolitics. Before Katrina hit, LifeCare Hospitals of New Orleans leased Memorial's seventh floor and catered to critically ill or injured patients (Fink, 2009, p. 4). LifeCare, as Sheri Fink (2009) points out, was not a hospice—they specialized in rehabilitating "patients on ventilators until they could breathe on their own" (p. 5). Following the Hurricane, almost a third of LifeCare's patients were given lethal combinations of drugs to ease their pain and hasten their deaths. In a 72-hour period, LifeCare's whole *raison d'être* experienced a 180 degree shift—no longer concerned with the prolongation of life, the hospital's staff turned their attention to the administration of death.

If the floodwaters of Katrina forced the doctors and nurses at Memorial into a precarious situation, the specific choices they made to handle that situation relied upon longstanding cultural assumptions for their justification. When Memorial's staff categorized all patients with "Do Not Resuscitate" orders as level "3's" for evacuation, their decision had little to do with the extreme conditions produced by the disaster. In an interview with Fink, Bill Armington, a neuroradiologist at Memorial, explained, "patients who [did] not wish their lives to be prolonged by extraordinary measures wouldn't want to be saved at the expense of others" (Fink, 2009, p. 4).

Of course, a DNR order makes no such claim, only stating that a patient does not wish to be revived if his or her breathing or heartbeat stops. In deciding to euthanize many of their patients with DNR orders (and some without), the staff at Memorial chose not to consult them. This omission was particularly glaring in cases where patients were well aware of their surroundings and waiting anxiously for their evacuation.

The actions of the doctors and nurses at Memorial exemplify Agamben's (1995) conclusion that "the sovereign decision on bare life comes to be displaced from strictly political motivations and areas to a more ambiguous terrain in which the physician and the sovereign seem to exchange roles" (p. 143). But the "terrain" to which Agamben speaks is far more ambiguous still. When stories of the deaths at Memorial reached the press, an overwhelming majority of the public agreed with the decisions of Memorial's staff. While the Orleans Parish assistant district attorney admitted that he and the district attorney "weren't gung-ho" about prosecuting the doctors and nurses at Memorial, the public outcry against prosecution certainly impacted the New Orleans grand jury decision not to indict Anna Pou, a lead physician at Memorial, and two of her nurses, on second degree murder charges (Fink, 2009, p. 24). Through community rallies, letters to the district attorney, and talk radio calls, the citizens of New Orleans affirmed the sovereign acts of Memorial's doctors and nurses—in the court of the public, they were viewed as heroes rather than murderers.

The irony of this response is that the decision to euthanize patients reproduced the logic of exclusion that made New Orleans so vulnerable to Katrina in the first place. As early as 2004, the *Philadelphia Inquirer* had run a story about the Bush administration's failure to reinforce the levees in New Orleans, explaining that the money had been "moved in the president's budget to handle homeland security and the war in Iraq."¹² The US Government decided to take funds away from the support infrastructure of a largely poor, black, and disproportionately disabled population of US citizens.¹³ But if the Bush administration tacitly identified what type of person deserves protection in the US, their actions were mirrored by the doctors and nurses at Memorial who decided what type of person deserves to be saved during an emergency.

The public response to the events at Memorial suggests the degree to which the sovereign decision on bare life becomes invested in the population itself, where the citizen begins to assume the role of the sovereign. In other words, the citizen is asked to render the decision on bare life even as he or she occupies the "zero-level" position that it names. The fantasy induced by processes of globalization and recent able-nationalisms occludes the fact that able-bodiedness and disability structure the biopolitical imaginary, allowing able-bodied citizens to imagine themselves as altogether different from the disabled at precisely the moment where a decision must be made.

Only from this position of absolute difference can the able-bodied pass sentence on the disabled without recognizing their own fate on the faces of those they condemn. It might at first seem like an exaggeration to link the institution, the group home, and the nursing home to Agamben's discussion of the camp, but they all represent permanent spatial locations where the fact of "whether or not atrocities are committed depends not on law but on the civility and ethical sense" of care workers (Agamben, 1995, p. 174).

Where else is the citizen's sovereignty over the question of bare life more commonly recognized than in the child's reluctant decision to overturn their parents' wishes and remove them to the nursing home, a place where care workers are underpaid and abuse goes largely unchecked? The spatial locations of separation that constitute many disabled peoples' lives are not unrelated to the emergence of the new spaces of exception presented by refugee camps, detention centers, disaster areas, and terrorist holding cells. In fact, these permanent spaces of

exclusion are ideological anchor points by which the exception gradually becomes accepted as the rule.

Conclusion

The disabled/able-bodied binary has become more mobile in the contemporary moment, where the state, along with its capitalist infrastructure, draws on disability rights discourses and inclusion efforts in order to furnish an image of multicultural benevolence and render invisible the processes by which it disables other populations in alternative contexts. If discourses of disability have gradually come to legitimate the state of exception, the logic of sovereignty has begun to inform the decisions of the population at large, particularly at times of personal or communal crisis.

Where Agamben's analysis falls short is in its inability to adequately theorize the social stratifications that make some groups of people far more vulnerable to sovereign practices of violence than others. The process by which the able-bodied become disabled discursively is often inflected by other categories of difference, including race, gender, sexuality, and particularly, class. Agamben (1995) writes that:

“Until a completely new politics—that is, a politics no longer founded on the *exceptio* of bare life—is at hand, every theory and every praxis will remain imprisoned and immobile, and the “beautiful day” of life will be given citizenship only either through blood and death or in the perfect senselessness to which the society of the spectacle condemns it” (p. 11)

Recognizing able-bodiedness and disability as twin sides of the biopolitical imagination can contribute to the new politics to which Agamben gestures by denaturalizing the logic of ability that informs modern processes of exclusion and extermination. Such a project can help recast questions of human agency and ethics away from the discourse of human rights and its close alliance with neoliberal ideology to consider much more deeply our shared vulnerabilities as a human community.

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Endnotes

¹In their introduction to *The Global Transformations Reader*, David Held and Anthony McGrew (2003) provide a clear and concise definition of globalization: “Simply put, globalization denotes the expanding scale, growing magnitude, speeding up and deepening impact of interregional flows and patterns of social interaction. It refers to a shift or transformation in the scale of human social organization that links distant communities and expands the reach of power relations across the world’s major regions and continents” (p. 4). By defining globalization around a series of descriptive terms that primarily denote a quantitative change in scale, Held and McGrew suggest that while interregional flows and patterns of social interaction are not new, they have never been so dominant in the structuring of a truly global economy.

²See recent scholarship by Ato Quayson (2007), Lennard Davis (2002), Michael Davidson (2008), Robert McRuer (2006), David Mitchell and Sharon Snyder (2010), Anita Ghai (2002), and Nirmala Erevelles (2010), among others, which has sought to extend the parameters of disability studies analysis beyond its traditionally Euro-American context.

³Neoliberalism is not meant as a synonym for globalization. As McRuer (2006) explains, “Above all, through the appropriation and containment of the unrestricted flow of ideas, freedoms, and energies unleashed by the new social movements, neoliberalism favors and implements the unrestricted flow of corporate capital. International financial institutions (IFIs) and neoliberal states thus work toward the privatization of public services, the deregulation of trade barriers and other restrictions on investment and development, and the downsizing or elimination (or, more insidiously, the transformation into target markets) of vibrant public and democratic cultures that

might constrain or limit the interests of global capital. These cultural shifts have inaugurated an era that, paradoxically, is characterized by more global inequality and raw exploitation and less rigidity in terms of how oppression is reproduced (and extended)” (p. 2-3). For the purposes of this article, neoliberalism names the dominant ideology underlying current processes of globalization

⁴Examples of such practices abound throughout American and European history, particularly in relation to projects of colonialism. Perhaps the most heinous example of disability being used to signify various forms of abjection occurred during the Nazi final solution. As Zygmunt Bauman (1989) explains, “It is difficult, perhaps impossible, to arrive at the idea of extermination of a whole people without race imagery; that is, without a vision of endemic and fatal defect which is in principle incurable and, in addition, is capable of self-propagation unless checked” (p. 73). Bauman demonstrates that the type of racism responsible for the holocaust necessarily rested on the logic of disability (a “fatal” and “incurable” “defect”) for its explanatory power.

⁵See Tremain (2005) for a diverse range of Foucauldian interpretations of disability and able-bodiedness. ⁶Necropolitics, and Agamben’s thanatopolitics, refer to the politics of death. Both terms suggest the sovereign’s right to rule over the life and death of the population. When Agamben (1995) speaks of the “fundamental biopolitical fracture of the West,” he names the point at which the politics of life transforms into the politics of death (p. 180).

⁷Mbembe (2003) writes, “In other cases, in which physical amputation replaces immediate death, cutting off limbs opens the way to the deployment of techniques of incision, ablation, and excision that also have bones as their target. The traces of this demiurgic surgery persist for a long time, in the form of human shapes that are alive, to be sure, but whose bodily integrity has been replaced by pieces, fragments, folds, even immense wounds that are difficult to close. Their function is to keep before the eyes of the victim—and of the people around him or her—the morbid spectacle of severing (p. 35). We can add to this Davidson’s (2008) point that “There are more than one-hundred-ten million land mines in sixty-four countries. There are one and a half mines per person in Angola, where one-hundred-twenty people per month become amputees. There are twelve million land mines in Afghanistan, one for every two people. It seems hardly necessary to add that land mines are created not to kill but to disable, thereby maximizing the impact of bodily damage on the extended family and community” (p. 117).

⁸The state of exception refers to the sovereign’s right to suspend the law in a time of crisis.

⁹The Bush homeland security state offers a paradigmatic example of Agamben’s state of exception. Measures like the Patriot Act suspended the individual rights of citizens indefinitely in the interests of national security. According to Agamben, as the state of exception becomes a working paradigm of government, the rights of all citizens become vulnerable.

¹⁰The theoretical concept of a “zone of fluidity” recalls my earlier discussion of the way discourses of disability are often deployed to justify various forms of political exclusion in the West. As neoliberal inclusion efforts and processes of globalization blur the lines between the disabled and able-bodied in some contexts, transitions between able-bodied and disabled identities are sped up in other contexts. The “zone of fluidity” defines the ambiguous terrain where the previously able-bodied can become coded as disabled and the previously disabled can become “normatively” disabled, or represented as “able-bodied” by measure of their inclusion within the global economy. All of these shifts are made in relation to other forms of difference, including race, gender, class, and sexuality.

¹¹ For this section, I am indebted to Sheri Fink’s (2009) *New York Times* piece, “The Deadly Choices at Memorial.”

¹²Quoted in Dyson, 2007, p. 81.

¹³In their essay, "Natural Hazards, Human Vulnerability, and Disabling Societies: A Disaster for Disabled People," Laura Hemingway and Mark Priestley (2006) cite that "in 2000 more than 20%" of the population "were recorded as disabled in New Orleans, St Bernard, Jefferson, Hancock, and Jackson" (59).