Symbolic violence and the invisibility of disability

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ABSTRACT

Disability as a social justice issue is not part of mainstream talk. Approximately 15% of the world's population has a disability, and yet persons with disabilities are systematically subjected to this sort of exclusion. If considered in terms of social power, then persons with disabilities are the largest single minority group. Amongst minorities, exclusion from the social and representational order is a forceful form of symbolic violence. Persons with disabilities are systematically subjected to this sort of exclusion. In the public domain, persons with disabilities are either not represented at all, or misrepresented. The misrepresentation of persons with disabilities takes a host of cultural forms. This paper explores a few examples of these forms, as they can be considered examples of symbolic violence. We explore how negative social value may be internalised, and how this constitutes a form of symbolic violence experienced by persons with disabilities. We argue that persons with disabilities must constantly act against subtle and blatant acts of symbolic violence – including exclusion – and that the necessity of constant resistance characterises the lives of disabled persons. We argue that it is necessary not only to recognise the detrimental effects of having to confront the symbolic violence of a society which is structured for the benefit of those with typical embodiment, but also to frame this social injustice as something which leads to very real and very dangerous exclusions.

Keywords: symbolic violence, disability, sexuality, representation, exclusion

INTRODUCTION

Disability as a social justice issue is not part of mainstream talk, and disability is commonly seen as a special interest or "boutique" issue. This is despite the fact that according to the World disability report (WHO, 2011),

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approximately 15% of the world's population has a disability, making disabled persons the largest single minority group.[2] It is also despite the fact that the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) has been ratified by over 150 countries world-wide. Disability is more common than many may think, based on the relative lack of attention to disability in the mainstream, and many countries have expressed a commitment to disability rights. But it remains true to say, as we shall show, that there is a relative silence around disability issues.

Included in the question of the violence of representation, is the violence of lack of representation. This lack of representation includes the violence of hiding issues away and making them into non-issues, a factor well recognised in terms of the history of lack of representation of, and talk about, gender-based violence. Despite some encouraging changes, it remains true that persons with disabilities are vastly under-represented in media and entertainment (Plunkett, 2014), are excluded from thinking and practices about population-based health and social interventions (Rohleder, Braathen, Swartz, & Eide, 2009; Rohleder & Swartz, 2009), and are excluded from politics and business (Barnes & Mercer, 2005; Gartrell, 2010). This is a violence of effacement – a collective denial of the existence and rights to participation of a substantial proportion of the population. This article represents an attempt to act against the violence of effacement. In the sections which follow, we explore exclusion as a form of symbolic violence which is enacted against persons with disabilities, and how the basis of this exclusion is hegemonic conceptions of normalcy. We trace the consequences of the exclusion of persons with disabilities in two parts, first arguing that the devaluations of society may be internalised, and secondly, noting the ways in which exclusion takes form in relation to the sexuality of persons with disabilities.

EXCLUSION AS SYMBOLIC VIOLENCE: THE CASE OF PERSONS WITH DISABILITIES

EXCLUSION AS VIOLENCE

Amongst minoritised groups, exclusion is a potent form of symbolic violence. Morgan and Björkert (2006) write that "The social dynamics of everyday practices are often governed and shaped in many ways by the gendered inequalities and 'micro-contexts of local power' which enable forms of normative violence against women to continue with impunity" (p. 444). The same might be said about violence against persons with disabilities, persons of colour, or the aged and youth: inequalities and with them, exclusions, perpetuate the minoritisation of certain subjects. These subjects, because the social status quo positions them as naturally inferior, lack the requisite social capital with which to fully participate in society. As such, their agendas – unless championed by another – go unattended. This phenomenon of exclusion – what Brantlinger (2001) terms the "symbolic violence of hierarchical relations" (p. 5) – feeds the opaque power relations (Topper, 2001) by which daily life is structured.

Symbolic violence, we have seen, operates in part as a deprivation amongst certain groups, of social capital (Conway, 1997). This exclusion is institutionalised and naturalised, conveyed in social norms and encoded in language. One group[3] of minoritised subjects for whom such exclusion is chronically entrenched is persons with disabilities.

In the lives of persons with disabilities, the symbolic violence of the public domain involves either no representation, or misrepresentation. The latter takes a host of cultural forms, of which many can be tracked back to the exercising of medical discourse, biopower, and its creation of docile bodies (Tremain, 2008; Verstraete, 2005). In a world where bodies are, in any circumstance, objects of extremes of culturally condensed controls, the

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2 In some circles, women are also considered a minority group, which would make persons with disabilities the second largest minority group. We use the term 'minority' here in the sense of access to power. Numerically, there are more women than men on the planet.

3 We use the term "group" here in full recognition that it elides much of the diversity and heterogeneity of experience and position amongst disabled persons. Still, for the purposes of speaking of shared, broad social patterns of inclusion and exclusion, it is necessary here to speak of disabled persons as one "group".

differently abled body stands out as an affront, an outlier to be corrected (by treatment), hidden or enfreaked (by institutionalisation), or exterminated (by forced sterilisation, prenatal testing and genocide) (Human Rights Watch, 2011; York, 2017). These, clearly, are very real and tangible violences, but exist within a field of symbolisation which is ubiquitous. At the heart of scientific and medical constructions of persons with disabilities' lives are the notions, on the one hand, of damage and vulnerability, and on the other, of the consequent need for treatment and custodial care. Over the last century, a phalanx of nosological systems have facilitated the classification and measurement of disabled bodies with diagnoses purporting to describe not only the outer (the physical), but also the inner (the mind and psyche). By its nature, symbolic violence may tend towards invisibility, hiding its obliteration of personhood in plain sight, while we all go about our business. But in the case of disability, the workings of such violence have their own, particular deceit. As with women, but perhaps in more florid ways, the symbolic violences of disablist control are convincingly framed, nay, formed, as expressions of care. At its heart, the ideological confusions wrought by disablism attack psychic boundaries (Swartz & Watermeyer, 2008), successfully confounding everyone on questions such as where care dissolves into control, where altruism meets sadism, shame morphs into contempt, and salvation becomes murder. Everywhere in this soup of meanings is the whisper that persons with disabilities are, in some fundamental way, not whole or fully human (Shakespeare, 1994), and must be intervened upon, "for their own good and for the good of society".

As noted, ideology is by its nature stealthy, but as political awareness grows, racial or gendered bigotry may show itself in clearer relief. The dehumanisation which is a result of symbolic violence in the case of disability can be terribly hard to discern, clothed in familial care and compassion, and exercised in deeds which are universally valued as admirable. In a world of immense and tangible precarity for persons with disabilities, identifying the dehumanising meanings wrapped up with care upon which one may depend for one's very life is, to say the least, perilous.

The symbolic violence to which persons with disabilities are subjected is both institutional and social. Persons with disabilities, we know, are often conceived of, and treated as, planning problems by governmental structures, rather than citizens (Priestley & Hemingway, 2007). Gunder and Mouat (2002) write, "just as [governmental and national] planning can produce public goods and progress towards a better society, it can also be regressive; leading to oppression, exclusion and social and environmental injustice" (p. 125).

SYMBOLIC VIOLENCE, LIVED SEQUELAE

At the level of the social and the body, the impact of symbolic violence on persons with disabilities has also been elaborated. For instance, Edwards and Imrie (2003) consider the relevance of Bourdieu's (1998) conceptions of the body, including his work on symbolic violence, to the development of disability theory. They examine how the systemic and structured inequalities experienced by persons with disabilities are produced, reproduced, and reinforced by symbolic violence. Persons with disabilities lack symbolic power in society (due to their perceived inability to work as productively as non-disabled persons, for instance), and are positioned – through medical discourse and the symbolic power which underlies it – as "naturally" inferior. This has extended into social life in a number of ways, for instance, in the conflation of ability and personhood, and the conflation of disability and dysfunction.

In relation to the question of personhood, in a recent article for the journal *Qualitative Research in Psychology*, Swartz and Flisher (2017) discuss the symbolic negation of the value of persons with disabilities, in terms of personhood. They draw on the work of philosopher Eva Kittay (2005), whose work has been key in challenging philosophies of personhood to recognise their limits in relation to persons with disabilities. Kittay (2005) has shown in her work that dominant criteria for personhood, as used in philosophy, exclude persons with severe cognitive impairments from being considered fully human. The work of Kittay (2005) is so powerful precisely because she uses the example of her daughter, who has a profound cognitive disability, to make the case that definitions of

personhood should not be centred on intellect or other aspects of agentic human behaviour which may not be possible for someone like her daughter. In a similar vein, Johnson (2003), a disability activist and scholar with a physical disability, also uses her own experiences to examine disablist ideals of personhood. In a now well-known article for *New York Times Magazine,* she discusses her experience of interacting with philosopher Peter Singer, a proponent of selective abortion of foetuses who screen positive for disabilities – foetuses who would have grown into persons like herself. Persons with disabilities have their personhood questioned.

Regarding the conflation of disability and dysfunction, Hansen and colleagues (Hansen, Bourgois, & Drucker, 2014) note that since the mid-1990s, when the U.S. restricted public support for low income persons, there was a dramatic increase in medicalised requirements for forms of support for indigent persons. Poverty and disability were further pathologised by making self-pathologisation a requirement of welfare eligibility. Edwards and Imrie (2003) explain that "persons with disabilities' bodies are subjected to the values of a society that renders them 'less than valuable' and inferior to those considered to be the embodiment of 'normality'" (p. 250). Persons with disabilities have their health and physical "acceptability" questioned.

In Bourdieu's (1998) full elaboration of the idea of symbolic violence, it is conceived of as "entic[ing] the dominated to contribute to their own domination by tacitly accepting, outside of any rational decision or decree of the will, the limits assigned to them" (p. 12). Edwards and Imrie (2003) apply this to persons with disabilities, noting that "for some persons with disabilities, their way of life, and their bodily identity, becomes something that appears to be natural to them, or where the oppressive nature of the social world is hidden or not necessarily understood as influencing their bodily (de)valuations" (p. 248). As Skeggs (2004) writes, the body is also experienced as a social body, constructed of and imbued with the meanings and values of a society (this is powerfully reflected in metaphor and stereotype, see, for instance, Hunt, Carew, Swartz, Braathen, and Rohleder, in press). As such, persons whose bodies are constructed as flawed, ill, or lacking, might well be expected to begin to understand their embodiment in these ways.

Contributions to disability studies literature over recent years have applied ideas from critical psychoanalysis to the question of "internalised oppression" in disability – a notion which has something in common with that of symbolic violence (Reeve, 2002, 2006). Here, attention is paid to how medicalising discourse may saturate the formative experiences of persons with congenital disabilities, creating identities forged in diagnostic taxonomies and rehabilitation regimes, and within families who are, like most of us, under the spell of biomedical science. Examination of the life trajectories of persons born into a permanent, "disabling" diagnosis renders a picture of distorted social responses at any and all levels of human engagement, mirroring again and again that "you ought not to be like this", "you need to be put right", "you cannot go where the others go", and, most destructively, "if we had known, you would not have been born". Members of racial or ethnic minorities who suffer demeaning treatment do so in the context of families and other group members who suffer in a similar way, and are thus able to empathise and validate such experiences, making it less likely that they become firmly internalised. Most persons with congenital disabilities grow up as the only disabled person in the family, and probably the entire social network of the person with a disability, having therefore to rely on internal reference points to ascertain whether jaundiced treatment reflects a lack in the other, or is simply the natural order of things given one's flaws.

SEXUALITY

Whether persons with disabilities understand these devaluations as natural and normal is not the focus of this paper, although it is interesting to consider. Instead, what Edwards and Imrie (2003) note, which is of interest here, is that symbolic violence reproduces a narrow, deterministic, and medical understanding of persons with disabilities, or where persons with disabilities' bodies are positioned as "deviant and disordered" (p. 248). This is interesting – and disturbing – to consider in relation to one facet of lived experience amongst persons with disabilities which is garnering increasing attention, and happens to coincide with a facet of life with which Bourdieu (1998) was deeply concerned: sexuality.

Symbolic violence is enacted against persons with disabilities, in relation to their sexuality, at broadly two levels. The first concerns non-disabled persons' constructions of the sexuality of persons with disabilities (Hunt, Carew, Braathen, Swartz, Chiwaula, & Rohleder, 2018). The second concerns persons with disabilities' internalisations of the negative value attached to their sexuality (Reeve, 2002, 2006).

Let us consider, first, society's constructions of the sexuality of persons with disabilities (we use the term society, here, but what is denoted is, largely, non-disabled, ableist society). One informative avenue of inquiry regarding symbolic violence, is an exploration of social representations. These encode the social meanings in society, and can work to minoritise and oppress, or value and promote, certain social phenomena. Social representations are the shared values, metaphors, beliefs, and practices through which groups and communities make meaning of social phenomena (Moscovici, 1963).

Where sexuality is concerned, social representations of "normative" and "desirable" sexuality and sexual bodies are hegemonic, dependent on ability, and aligned with gendered aesthetics considered admirable. That is, sexuality is represented as the purview of those who are considered normatively attractive, have typical embodiment, are heterosexual and cisgender, and – usually – are young. This symbolic order serves to exclude persons with disabilities, particularly, perhaps, persons with physical disabilities. Central to the idea of symbolic violence, is that "a particular interpretation of reality is given a seignorial status. A specific outlook is reinforced in such a way that it becomes almost inviolable" (Murphy, Pardeck, Chung, & Min, 2015, p. 118). Indeed, research has shown that persons with physical disabilities are considered to be less sexual (Carew, Braathen, Swartz, Hunt, & Rohleder, 2017; Hunt, Swartz, Carew, Braathen, Chiwaula, Rohleder, 2018) and less gendered (Hunt et al., in press), than non-disabled persons. The attitudes of disabled persons in society reinforce the "naturalness" and ordinariness of situations in which persons with disabilities are excluded (Edwards & Imrie, 2003).

This has profound implications, some of which amount to the "violence proper" against which we contrasted symbolic violence earlier. This is not to say that symbolic violence must result in physical violation in order to achieve legitimacy – not at all – only, that it can also lead to this form of violence (Bornman, 2014; Meer & Combrinck, 2017; Naidu, Haffejee, Vetten, & Hargreaves, 2005; Phasha, 2009; Phasha & Myaka, 2014; Phasha & Nyokangi, 2012). Firstly, persons with disabilities may experience barriers to sexual and reproductive healthcare services (Hunt, Carew et al., 2018), as well as exclusionary or patently harmful attitudes from service providers (Bazzo, Nota, Soresi, Ferrari, & Minnes, 2007; Esmail, Darry, Walter, & Knupp, 2010). Secondly, they may encounter social exclusion at the level of sexual society, and face barriers to sexual development (Hunt, Braathen, Swartz, Carew, & Rohleder, 2018). Thirdly, evidence suggests that persons with disabilities – particularly women – are at risk of sexual violence, due, at least in part, to the construction of their sexuality by society (Bornman, 2014; SINTEF, 2017). In South Africa, a substantial body of evidence attests to risk of sexual abuse amongst women with disabilities, particularly, perhaps, women with intellectual disabilities (Bornman, 2014; Naidu et al., 2005; Phasha, 2009; Phasha & Myaka, 2014; Phasha & Nyokangi, 2012).

Amongst these findings, Phasha and Myaka (2014) noted that non-disabled persons' attitudes towards persons with intellectual disabilities contributed to sexual abuse of the latter: persons with intellectual disabilities were seen to be inferior sexual partners and thus non-disabled persons were doing them a favour by deigning to have sex with them. Naidu et al. (2005) go on to note that, due to stigma and social isolation, women with disabilities endure violence for longer periods of time before reporting abuse, and are less likely to be able to escape abusive partners.

Finally, persons with disabilities may internalise these negative valuations of their sexuality and their place in sexual society – their exclusion from social forums and sexual and reproductive health services – and suffer psychologically and physically as a result. This brings us to the second level at which symbolic violence operates to the detriment of persons with disabilities.

Persons with disabilities may internalise the negative value attached to their sexuality. An important theoretical note which must be made at this point is one concerning symbolic interactionism. Symbolic interaction theory examines the ways in which "societal norms, stereotypes, and judgments affect stigmatised or 'othered' groups" such as persons with physical disabilities (Rich, 2014, p. 419). It is particularly concerned with how stigmatised groups may come to internalise negative stereotypes about themselves (Goffman, 1963).

According to symbolic interactionists, disability is a primary hallmark of identity (Rich, 2014). Banks (2010), for instance, explains that gender roles are enacted through the performance of certain activities. Persons with disabilities may perceive that these activities are not possible for persons with disabilities, and so the gender of persons with disabilities is negated. As noted, this is evident in recent studies which have shown that non-disabled persons view persons with disabilities as less gendered and less sexual than non-disabled persons (Hunt, Braathen et al., 2018; Hunt, Swartz et al., 2018; Hunt et al., in press).

Further, in order to counter, manage and defend against others' devaluations, persons with disabilities must employ a variety of strategies to manage others' perceptions of them and their sexuality (Goffman, 1963; Hunt et al., in press). Goffman (1963) notes that, according to this perspective, "accounts" are made by individuals in order to hide, minimise, compensate for, or negate the socially stigmatised elements of their identities. Accounts, in this rendering, are the excuses and justifications which individuals use in order to account for socially undesirable traits or behaviours (Orbuch, 1997). Desexualisation, here, is a form of symbolic negation of personhood and this leads to exclusion and lack of access.

NUANCING INTERNALISATION AND THE NECESSITY OF CONSTANT RESISTANCE

As noted above, central to symbolic violence is that it "occurs when a person's…viewpoint [which is undermined by society] is abandoned out of logical necessity. The only reasonable action, in short, would be to suppress an inferior position" (Murphy et al., 2015, p. 119). That is, persons who hold symbolically inferior positions negate their own position and conceptions of reality. Now, while this may well be the case, sadly, for some persons with disabilities, it is certainly not the case for all of them.

Instead, perhaps, what is most evident amongst persons with disabilities is the necessity – for persons acted upon by the symbolic order most powerfully – of constantly having to defend against intrusions, and then sense that one's own position is inferior. So, while persons with disabilities may resist the idea that they are lacking sexuality, this is always framed against the recognition that their position is framed, by society at large, as an inferior one. This is not only the case for sexuality, no doubt.

This article leads us to some quite fundamental debates about the formation (or existence) of the self. The history of disability globally is a story of segregation and concealment; the international disability movement faces the colossal challenge of mobilising a constituency that is highly dispersed, individually isolated, and, for the most part, disidentifies with its most politically important commonality. Rooted in critical psychoanalysis, the psychopolitics of disability oppression begins with the family and early formative relationships. The social identity of "disabled" is not one encountered "out there", but "in here", in the convergence of meanings which coalesce in formative relationships with unusual experiences of embodiment which very seldom escape the assigning of evaluation. Of course, gender and race are not excluded from this sanctum of early meanings, but as alluded to earlier, surely it is different to be a minority of one. For most of the world's one billion persons with disabilities, finding a way to make both tangible and existential contact with others who have suffered a similar barrage of devaluing projections is both difficult and unlikely. At society's core it is simply too clear, too common-sensically true that twisted bodies are home to twisted minds, animated by derelict souls; at best, unequipped for any part in modernity's new frontier and beyond.

Still, it is important to think through disablism as a form of symbolic violence, encoded in everyday life, language, architecture, and social norms. Murphy et al. (2015, p. 119) conclude, "When persons are symbolically violated, their actions are not simply categorised and responded to in a unique manner. Instead, and far more devastating, their existence is eviscerated". Recalling the works of Eva Kittay (2005) and McBryde Johnson (2003), which both depart from the theoretical and examine the lived experience of discursive constructions of ideas of humanity, Swartz and Flisher (2017) show that "knowledges interact with bodies – knowledges are not abstract entities but are imbued with power, and are matters of life and death" (p. 119). That is, it is necessary not only to recognise the exhaustion of constantly having to gird oneself as a disabled person against the symbolic violence of a society which is structured for the benefit of those not like you, it is also necessary to frame this social violence as something which leads to very real and very dangerous exclusions.

CONCLUSION

The invisibility of disability increases the vulnerability of persons with disabilities. This creates a vicious circle, which both results in the symbolic violence of effacement, and perpetuates the invisibility of persons with disabilities. Persons with disabilities are often the victims of violence due to their invisibility in society (Lourens & Swartz, 2016; Mji, Schneider, Vergunst, & Swartz, 2014; Swartz, Bantjes, & Bissett, 2018). Simultaneously, their sustained invisibility creates the circumstances in which violence is perpetrated against them.

One possible conclusion which could be drawn from the above discussion would pertain to how this theoretical understanding of symbolic violence and its relation to vulnerability and exclusion may warrant action on the part of persons with disabilities. For instance, ensuring that sexuality training and sexual education is offered to persons with disabilities (in particular those with intellectual disabilities), and including children with disabilities as a focus group in "anti-bullying" programmes offered at schools, could be useful. However, the onus of rectifying the present relationship between invisibility, exclusion, and vulnerability will require more sustained efforts at the level of society, and on the part of non-disabled persons and persons with disabilities, to change the status quo with regard to disability representation, and increase the visibility of disability in society. It will also involve expanding the representational frame for both disability and – for instance – sexuality, to allow for more inclusive conceptions of social phenomena, to counteract the violence and impositions of hegemonic conceptions of humanity.

There is a broader struggle at stake here and this is the struggle to make disability not only more visible but more possible to talk and think about in the context of other struggles. It is relatively easy, in the context of talk of intersectionality (Carbado, Crenshaw, Mays, & Tomlinson, 2013; Crenshaw, 1997, 2005, for example, to add the cipher "disability" to others like "race", "gender" and "age", to name a few. But it is much more challenging to imagine a world in which all thinking about violence and what is done to bodies and minds both physically and symbolically, automatically included consideration of those bodies and minds which do not fit the usual categories of the "normal".

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