# Disabled sporting bodies as sexual beings: Reflections and challenges

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#### Introduction

Disabled bodies, Goodley (2011: 41) suggests constitute 'a sexually challenging idea'. In general, disabled people's sexualities have been ignored, controlled, pathologised and medicalised (Shakespeare et al, 1996), and their bodies conceptualized as asexual, unruly, monstrous, and unattractive (Kim, 2011; Shildrick, 2007). Specifically, disabled men are seen as passive, weak, and by implication impotent, while disabled women are viewed as ugly, incontinent and unfit for the desiring male gaze. Disabled sexual bodies are, therefore, framed within binary discourses of either lack and failure, or excess and perversion with a tendency to over-emphasize psychosexual (mal) functioning; explore men's sexuality rather than women's; place a lot of store on medical rehabilitation and therapeutic interventions; and assume heterosexuality.

In spite of an expanding corpus of literature on disability and sport (Berger, 2009; DePauw & Gavron, 2005; Fitzgerald, 2009; Goosey-Tolfrey, 2010; Thomas & Smith, 2009), the issue of sexuality tends to be overlooked. This chapter, therefore, attempts to foreground this crucial aspect of embodiment. We explore the complex dynamics of disability, sex and sport by drawing on life history interviews with three elite disabled athletes. These are, Jack, an athlete in his sixties; Steve, a wheelchair basketball player in his thirties; and Lindsey, a para-dressage horse rider in her fifties (all names are pseudonyms). Each became disabled following a spinal cord injury (SCI). We indicate how their narratives are framed by the ideologies of heteronormativity, compulsory heterosexuality, and compulsory ablebodiedness which restrict their ability to challenge a number of limiting norms that inhibit new, radical and diverse disabled body-self relationships that are pleasurable and fulfilling. Their narratives are also used to provoke some reflections on how the very 'queerness' of their bodies might provide a corporeal resource for subverting sexualities and desires in sport and other domains (Caudwell, 2006).

### **Doing Hegemonic Masculinity: Restoring Heteronormativity**

Connell (1995:57) states that, 'To be an adult male is distinctly to occupy space, to have a physical presence in the world'. A physically disabled man symbolically fails the test of masculinity and is positioned as impotent, weak, dependent, childlike, and not a <u>real</u> man anymore. For 'straight' men with acquired disabilities it can appear that normative masculinity is restored through the assertion of (heteronormative) sexual prowess. Steve's social network status epitomises this restorative impulse which is formed in contrast to the mainstream interpretation of his disabled body.

The answer to the question that people are frightened to ask is yes I can [have penetrative intercourse], why wouldn't I be able to?!! (Steve; social network status)

I used to be able to pick up, I used to able to talk to all of the good looking women and meet them and go out with them and have no troubles at all. When I was playing football, and I didn't think of it at the time, but your body is quite physically attractive. Women like that. They like a nice ass just as much as men do. But now they won't give you the time of the day. Now they just rub my head, sit on my lap, have a quick chat or whatever, it's just one of them things.

Steve's narrative and online exclamation articulates his frustration both with the pathologisation of his body, and the condescending and desexualising actions that he experiences. In drawing comparisons with his previous heteronormative sporting body his comments also echo hegemonic sentiments where sex is the privilege of the heterosexual, young, non-disabled and normatively attractive. Steve's social network status resonates with contemporary Western society's emphasis on the functionality of the sexual organs, the

ability to orgasm and the performance of (hetero)sexual acts. As Sakellariou (2006: 102) states: 'Male sexuality in particular is perceived in an exclusive, phallocentric and oppressive way... the penis and its performance assume the leading role'. Such phallocentricity is performed to excess in the jock subcultures that Steve inhabited before his SCI where objectification, misogyny and sexualisation is common. Therefore, Steve has few resources available to him to re-evaluate his sexuality and develop new disabled body-self relationships.

In the immediate aftermath of his accident Jack also interpreted his body and sexuality within this phallocentric paradigm and could see no alternative to it:

There were two things that hit me when I came out of hospital and that was blokes were no longer afraid of me, I was no longer a threat. I was a nothing. I was a nobody, and I didn't give a shit at that point. And I never ever thought that another girl would ever find me attractive. It isn't so bad now, I don't mind now. I'm sixty bloody four, it doesn't matter now! But when you're 19 you might as well be dead. And I can remember being sat outside this local chip ship one night and this car pulled up and this absolutely stunning blonde got out and she smiled at me. And that was the first girl that smiled at me since my accident. And she went into this fish shop and she was waving at me through this fish shop window, and all my mates were in there, and she comes out of this fish shop and walks straight towards me. My heart was going 15 to the dozen. She came straight up to me....and...she gave me money to buy chips. I was absolutely gutted. I was devastated. I thought is this going to be my life, sat on the pavement with somebody throwing money at me.

Phallocentrism also informs medical rehabilitation which attempts to restore male heterosexuality. Here, penis functionality is omnipotent, resulting in the administration of drugs for cyborg erections regardless of how stimulating or pleasurable the result. As Killacky (2004), a queer crip activist, former dancer and marathon runner who had a tumour removed from his spine and as a result is paraplegic, ironically observes:

Before discharging us, Larry and I spent an overnight in a "transitional" apartment on the medical floor, replete with videos designed for couples dealing with spinal injuries. The sexuality tape was beyond ludicrous. Not only was it completely heterosexual, it postulated that the ideal position for a man was still on top. It seemed more than a mere oxymoron for someone who has lost proprioception and feeling in the groin to be advised that thrusting and insertion still defined the sexual act. (Killacky, 2004), p.59).

Heteronormative discourses and able-bodied ideologies are also prevalent in disability sport. Competing in violent disability sports such as wheelchair rugby can be an attempt to restore the sense of normative masculinity which is threatened by disablement. Many disabled men seek extreme forms of behaviour in order to distance themselves from their disability and the negative identities imposed on them by others. These hyper-masculine performances reiterate the misogyny and the relinquishment of intimacy found in masculine able-bodied sports as illustrated by Berger's (2009) analysis of dating patterns amongst wheelchair basketball players. He found men operated a double standard where they viewed dating able-bodied women as distancing them from their disability and restoring their masculinity. These attitudes were also echoed by Steve who experienced his own sexual identity through disableist double standards:

Friend: I saw this real fit blonde in a wheelchair last night – she would have been so lovely for you!

Steve: You what! (shocked)

Friend: Oh, real stunning blonde in a wheelchair, would have been right up your street...

Steve: Why do you think that she was in a wheelchair that she would be right up my street?! Why would I be interested? I am offended! I don't want to go out with anyone in a wheelchair, doesn't matter how nice or how horrible they are. I have enough problems of my own; I don't want to deal with anyone else's problems if I am honest. I wouldn't go out with anyone in a wheelchair. I wouldn't have gone out with anyone in a wheelchair when I was able bodied, so I'm not going to go out with anyone now just because I'm disabled.

Steve's comment is paradoxical. His sense of sexuality is entrenched in his previous able-bodied identity. Dating an able-bodied girl, therefore, is symbolic of restoring his sexuality as it was prior to his SCI. Conversely, by failing to recognise the reality of his altered body, Steve also reinforces attitudes others may hold towards his disability. This is potentially alienating and repressive, in terms of Steve engaging in sex but also in terms of him exploring his sexuality, the polymorphous nature of desire, friendship, love and intimacy in different ways.

The hypermasculinity embedded in normative sports culture is uncritically reiterated in these narratives where internalised disabled-phobia propels men to negotiate their masculine identities within the very structures of compulsory able-bodiedness in which they

will always remain emasculated and lacking. The next section explores the similarly limiting intersections of heteronormative femininity, sport, sex and disability.

### **Disability as Failed Femininity**

The ideal female sports body is defined as firm but shapely, fit but sexy, strong but thin, and, we would add, able-bodied. It does not challenge hegemonic norms of femininity. The confines of femininity mean that all women inevitably fail to measure up to heteronormative ideals in some way or at some point in their lives. However, as Garland-Thomson (2002; 17) notes, women with disabilities are entirely 'removed from the sphere of true womanhood and feminine beauty'. They are neither desirable to look at nor effective as objects for the expression of male desire. Their bodies, instead of drawing the desiring and affirming male gaze, attract 'the stare' which signifies revulsion and dehumanisation defining them as 'failed' women in terms of gender and sexuality . Lindsey, a GB para-dressage rider describes how she felt about herself as a woman post-SCI:

Most of the time, not much of one. I sort of try not to think of my body from the waist down because it is so revolting now and my legs are pretty much like corn beef, they are always purple and blotchy and horrible.

Lindsey's narrative reveals that her disability has deeply affected her sense of self based on the appearance of her body, leaving her unable to reconcile her transformed body with a gendered and sexual self. Richards et.al. (1997) report a similar 'shutting down and shutting out of sexuality' in the narratives of women immediately post-SCI. Lindsey comments on her new sense of embodiment:

I think if I was going somewhere I would want to sort of dress up and look nice. I do miss that a bit now, I just sort of, I don't think of my body in a sexual way anymore so I suppose I'm just a sort of <u>blob</u> in a chair. I always thought I was feminine even if I wasn't beautiful. But now I just think that it is so difficult because I know my body is even more horrendous than it was to start with. And I only wear trousers now and so hopefully people only sort of look at you from the waist up. But now I've turned into Michelin Man I don't want anyone to see my arms.

Lindsey's narrative is desexualising. Her unwillingness to dress up, to wear feminine clothes and being like the 'Michelin Man' illustrate the rejection of a gendered and sexual body altogether that feels unable to live up to hegemonic feminine ideals. Her comment that her body is 'more horrendous than it was to start with' highlights the multiple layers of complexity and repression in responding both to her disability and dominant ideologies of the female body-beautiful in contemporary Western society. Outside of these norms, however, the appearance and capacities of Lindsey's body would not necessarily desexualise her in the same way. For example, in sexual subcultures which operationalise an alternative sexual aesthetics and pleasure, such as the BDSM (bondage, dominance, sado-masochism) or devotee communities, Lindsey's body might be considered highly desirable and even sought after.

It is easier perhaps for Aimee Mullins, the American former Para Olympian and double amputee who is now a fashion model, actress and motivational speaker to challenge ableist aesthetics of the female body. Tellingly, media discourses frame her as *too pretty to be disabled*. Mullins' sensual body, shaped through her athletic career, her long blonde hair and

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<sup>&</sup>lt;sup>1</sup> This is not to uncritically endorse these aesthetics and pleasures as the devotee community remains largely heteronormative in that disabled, and particularly amputee women's bodies are simply recast as exotic new objects of for the desiring male gaze (Aguilera, 2000).

exquisite looks exude (hetero)sexual suggestiveness. As Garland-Thomson (2002: .25) observes, 'Photographed in her functional prosthetic legs, she embodies the sexualised jock look that women be both slender and fit'. In highlighting that the disabled sporting body can be erotic and aesthetically sexual, Aimee Mullins offers some resistance to the erotophobic attitudes held towards other disabled bodies. However, simultaneously, the ways in which her body is represented by herself and others can undermine this resistance via its support for traditional notions of femininity that are validated by the normative gaze of the able bodied majority. This has implications for Lindsey as evidenced by her following comment about how she attempted to explore her sexuality post-SCI:

When I finally got home and we were brave enough to have a go, he was just so terrified of hurting me it was quite a big deal for him and, and then it sort of.....I know people do but as far as I am concerned if there's no feeling there and if you want me to be brutally honest because you're flaccid there's nothing to keep him erect, you know. It's not the same. I think the thing I will never get used to is bowels and bladder and umm you know sort of lack of sex, feelings. I remember it was like the first time I got in the bath. I was so looking forward to getting in the bath, that lovely feeling of the hot water all over you and I suddenly thought, 'well I can only feel it from the waist up'. You know they're just floating, I don't know whether we're in hot water, cold water you know. So that was a disappointment and a shock and it's sort of the same I suppose with sex.

Lindsey's experiences reflect what Richards et.al. (1997) refer to as "sexual disenfranchisement" amongst women with SCI, resulting in feelings of relationship disconnection and disappointment. Her comment also reveals how the norm of heterosexual

vaginal intercourse erases more polymorphous forms of sexuality enjoyed by those with nonnormative bodies and/or desires (McRuer, 2006). Lindsey's disappointment and anxiety
could be re-articulated by moving away from the phallocentric ideals of sex she has
internalised which confirm that the failure of sexual pleasure is a straightforward result of her
'failed' body. It is also significant that Lindsey measures her sexuality by choosing an act
which she can neither feel nor participate in. She might find that activities which fall outside
of heteronormative limits are both enjoyable and empowering to her as well as novel and
stimulating to herself and her partner. As Penny, a disabled woman in Shakespeare's (2000:
163) research commented: 'If you are a sexually active disabled person, and comfortable with
the sexual side of your life, it is remarkable how dull and unimaginative non-disabled
people's sex lives can appear'.

Nonetheless, for Lindsey her attempt at intercourse reiterates that she feels asexual, a "blob" and "not much of a" woman. It is (tragically) ironic that Lindsey views the experience of disappointment and disconnection during intercourse as quite different from the experiences of able-bodied heterosexual women. Wilton's (2004) research found that a large proportion of heterosexual women cite disappointment, disconnection and lack of stimulation as the ongoing features their sexual lives with men. Likewise, Shakespeare (2000) points out that the idea of free-flowing orgasmic eroticism is one of the pervading myths of contemporary capitalist culture which leaves many people, able-bodied and disabled alike, feeling lacking, inadequate and disappointed.

#### Reworking the disabled sporting body and sexuality

We now explore the ways in which the sexual, disabled sporting body, here exemplified by Jack as he reflects back on how his views of his sexuality have changed over time, can challenge and exceed hegemonic norms and offer radical and pleasurable ways of being. Though disability sport participation Jack developed a greater understanding of his

body; learning new sensitivities of touching and feeling which he translated to his sexual life. This offered an alternative outlook on his sexual body and abilities enabling him to adapt to his post-SCI sexuality, creating a communicative body that transgresses hegemonic gender roles and is a source of pleasure and fulfilment:

I was absolutely petrified of women. And we had gone out for a meal, and it was pissing it down with rain and we come back to my place like, like my heart is going a bit you know and she is a stunner, she was stunning but a brilliant personality too. We got back to my place her figure was unreal and then she said to me, and we started talking and kissing, and she said...and I was scared stiff, she said, can you make love and I said y-e-s! But it was brilliant, but she understood, she kind of understood but she made love to me, put me on the floor actually, put me on the floor, undressed me and she just straddled me and she gave me one. And I thought, what have I been worried about you know?

When asked how he felt about this event, Jack responded as follows:

I think that there are two emotions When I cum now I know I am going to cum but it isn't that massive explosion that you have before. And it's nothing to do with age or anything like that, it is the actual disability. But the bonus is that I can keep going and going and I have found out that a long time ago, that what I can't use down there sometimes, or when that goes off a bit, or if I lose my hard-on I will use my tongue and I found that equally as good. I learnt a long time ago that that was important. And talking...talking and touching. I have become a really touchy person, sensitive to touch. The upper part of my body has become hypersensitive and if they know which

buttons to press there for me I will do the same I will reciprocate. Sex now can be as good as it ever was before my accident and stuff you know and I think a lot of it is feeling in my mind too as well.

Such adjustment of the sexual body is a crucial part of the transformative process. Although Jack holds on to the importance of the performance of sexuality (he can keep going) not only does he show willingness to relinquish the dominance of his male sexual role by letting the female partner take the lead, but also alludes to the importance of talking and intimacy in sexual interaction. By "re-mapping" his erogenous zones (Sakellariou, 2006) and embracing the sensuality of his upper body, he is recognising that sex does not have to be centred on the functionality of his sexual organs. Jack's carnal articulation offers both phenomenological hope for the sexual body through exploration and poses important questions regarding the assumed biological realities of our sexualities. This reverberates with Whipple et.al.'s (1996) findings that areas of the body that have remained sensate can become erogenous zones. As Shuttleworth and Sanders (2010: 4) note this "complicates the neat categorisation of research issues and methodologies" in sexuality. This radical remapping through self-exploration is common to disabled (and queer) sexuality as Ann a participant in a study by Gillespie-Sells, et.al. (1998) explains: "My neck is my clitoris and my shoulders are my 'G spot'. I don't have to feel my body to get off on watching my girlfriend touching the numb parts of me" (p.52). Likewise, living with progressive multiple sclerosis Mairs (1997: 54) points out that with her disabled partner, even their most mundane interactions can bear an erotic change: 'he may stroke my neck when he brings me coffee. And since my wheelchair places me just at the level of his penis ... I may nuzzle it in return'.

Jack's narrative also reveals how explorations in sport can provide him with a positive sense of his body and improved confidence. His sense of self both included and transgressed hegemonic norms of masculinity. Jack described how through disability sports he developed a muscular self which resulted in him <u>feeling</u> more attractive. However, for Jack, acquiring disability was also an opportunity to explore new forms of sexuality and intimacy, just as it was an opportunity to take part in alternative sports and become a full-time athlete.

After the accident I couldn't stand a woman looking at me naked, I just couldn't stand that thought of her looking at me naked. But the stupid thing is, is that that is a man thing. Because women...they just don't see it like that. Sport is has been great to me. You think you've got good guns [biceps], these are 64 year old fucking guns! I'm sixty bloody four now, but I still look fucking good!

The story told by Jack highlights that it is not his body, but societal attitudes towards disability and sexuality that inflict limitations. Despite the pressure to conform to hegemonic norms, sport may offer heightened opportunities for creating positive sexual and gendered identities (DePauw, 2000). Therefore, disabled athletes may be in a unique position to move beyond the limiting hegemonic norms of gender, sexuality and embody a radical politics of sex and sport which can transform sports theory, research and culture.

## Reflections: Connecting disability, queer and crip theories in sporting lives

In this chapter we illustrated how the experiences of three elite disabled athletes are framed by heteronormativity, compulsory heterosexuality, and compulsory able-bodiedness in ways that reproduce dominant ideologies of sexuality. We also indicated that these ideologies can be resisted and that individuals can change their lives in ways that have profound implications for how they experience themselves as disabled, gendered and sexual

beings. We now wish to suggest that there is much to be gained from reflecting on the experiences of Steve, Lindsey and Jack through the lenses of queer and crip theory. Here, we take our lead from Sykes (2006) who notes how disability studies have always challenged what counts as a 'normal' body and recognises how the bringing this perspective together with queer theory and crip theory offers possibilities for future interdisciplinary approaches to studying sport. Likewise, Shildrick (2007: 27) notes that in recent years, disability studies, particularly those working with queer and feminist theory, 'have increasingly problematized the conventional parameters of sexuality, in order to explore non-normative constructions of sexual identities, pleasures and agency that more adequately encompass multifarious forms of embodied difference'.

Queer theory, which emerged in the nineteen nineties at the intersection of gender and sexuality studies, psychoanalysis, and HIV/AIDs activism, has provided a radical new intervention. By positing queer as a verb, rather than a sexual identity (i.e. gay, lesbian, bisexual), queer theory offers a new means of interrogating the structures of power which operate through idealised norms which appear as natural and inevitable – such as ablebodied heterosexuality (Edelman, 2004). Because of its history queer theorists have paid particular attention to the ways in which power operates through gender, sexuality and bodily norms in cultural representations. More ore recently queer theorists have focused on ethnicity, disability, and human rights in a lived, global context (Butler, 2004).

Queer theorists challenge and transform limiting norms through recasting taken for granted positions. They operationalise a queer framework which opens up new forms of interpretation, knowledge and praxis. Queer is then, "a suggestive rather than a prescriptive concept" (Doty, 2000: 7), more accurately understood as a verb, as a *doing* – or, rather, an "undoing" – than an identity (Butler, 2004; Edelman, 2004). Thus, in adopting queer as a political strategy, we become "queer positioned" (Doty, 2000: 4) in relation to normative

society and utilise queer as an interrogative, transformative force. Queer theory then, offers a powerful lens through which to re-figure the stigmatising norms which position the disabled body as failed, un-gendered and asexual.

Queer theory has been a primary influence on the emergence of crip theory which brings the "queerness" of disabled bodies to the fore as a powerful vehicle for the interrogation and transgression of (ableist) norms. Instead of measuring the disabled body against such norms, crip theorists use the disabled body as the starting point to interrogate and undo them, exposing their limitations, contradictions and inequalities.

Cripping spins mainstream representations or practices to reveal able-bodied assumptions and exclusionary effects. Both queering and cripping expose the arbitrary delineation between normal and defective and the negative social ramifications of attempts to homogenize humanity, and both disarm what is painful with wicked humor, including camp (Sandahl, 2003: 36).

Utilising the lenses of crip and queer theory our analysis of the experiences of Steve, Jack and Lindsey exposes the impact of the intersections of heteronormative and ableist approaches to gender, sexuality and the body and suggests how these might be transgressed, as indeed they are in Jack's case.

Initially, their narratives illustrate how being 'fully human' (Butler, 2004) is experienced exclusively through normative bodily, gender and sexual practices. When individuals fall outside of those norms through, for example, SCI, the loss of normative gendered and sexual identity has devastating implications for their sense of self and their social and sexual relations. However, from a crip perspective, we would suggest that it is

precisely this location, outside of normative structures of the body, gender and sexuality that enables radical theory and praxis. These are new ways of knowing and being which expose the limitations of heteronormativity and ablism and challenge others to think in new directions. Furthermore, the expansiveness of the bodily, gender and sexual possibilities which are celebrated within crip and queer approaches provide opportunities for individuals who experience damaged or stigmatised identities not only to transcend the limitations imposed on them but also to exemplify modes of praxis which exceed compulsory able-bodiedness and compulsory heterosexuality. This is epitomised in Jack's delight in his body and his pleasure in his sexuality.

We suggest, therefore, that crip and queer perspectives have much to offer, not simply in terms of understanding those who are disabled or LGBT, but rather, in exposing the limitations of normativity and opening out new ways of knowing and being. By their very existence sexual, disabled, sporting bodies queer hegemonic norms of body, gender and sexuality. Interrogating these norms from crip and queer perspectives is essential if sports theory and praxis is to embrace the full spectrum of human potential and avoid reiterating hierarchies of oppression and exclusion.

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