

Disability and the Question of Identity

Vivek Singh(Research Scholar)

Ph.D. (Cultural Studies)

University of English and Foreign Languages, Hyderabad

This paper focuses on issues of 'identity of disabled people' and looks at the debates that have problematised the general notion of identity in Disability Studies. It starts with a brief description of what is disability and how it has been defined by the medical and social model of disability. It then moves on to explore why the question of identity is important in Disability Studies by differentiating it from other minor identities. It also discusses the theoretical tools which unravel negative meanings attached to the identity of disabled people and questions the perpetuation of discriminatory practices in our constructed 'normal' society. This paper aims to examine how discriminatory practices are produced and sustained. Through the review of literature, this paper claims that identity is very much unstable which lies not into the body but outside of it.

Keywords: Disability, Norm, Identity, Language

What is disability? World Health Organisation (WHO) defines it as 'any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for human being'. In this definition we come across to two words, 'ability' and 'normal' which have been naturalised in our society. These two words have been strengthened by various apparatuses; one of them is medical science. This definition has been derived from the medical model of disability which understands disability "as an individual defect lodged in the person, a defect that must be cured or eliminated if the person is to achieve full capacity as a human being" (Tobin Siebers, 2008: 3). In contrast, the social model of disability questions the understanding of the medical model in which the body is treated as a pathological problem and looks at the ways in which society excludes or includes them. The redefinition of disability, according to Tom Shakespeare, in the social model claims that 'sex corresponds to impairment and gender corresponds to disability' (Shakespeare 2006: 30), which he borrows from the de Beauvoir's argument that one is not born woman but rather becomes woman; that clarifies the understanding, one is not born disabled but rather becomes disabled. Disability is something which is given by structured society rather than being the property of individuals. Another definition in the emerging field of Disability Studies which resembles to the definition of social model which goes as "disability not as an individual defect but as the product of social injustice, one that requires not the cure or elimination of the defective person but significant changes in the social and built environment" (Siebers: 2008, 3).

The above two definitions question the conceptualisation of disability in medical discourse. Medical sociology reflects on the constructed fact that missing limbs of a so called real body-material and organic- cause problem for an individual and ignores the obstructing structure of socio-cultural environment. This notion of medical sociology justifies attached stigma to disability identity. Whereas, definition given by Disability Studies makes an attempt to study social meanings, symbols and practices of exclusion and inclusion and attacks the constructed notion of 'normal' and 'able'. Here my attempt is not to define disability but to look at the problems of definition that will lead me to examine the question of identity. In defence of its definition, the medical model argues that the disabled body has functional limitations. Due to one's impairment, one cannot access the environments and suffers from personal problems which result in individuals' inaccessibility of society. However, we know that there is no such body that properly adequates to the perfection. But

these reasons are unnoticed by the medical science and the impaired body becomes the individual problem. Here I am not arguing that impaired body is not weaker than non-impaired body which is also highly debatable argument. However the idea of 'weak' and 'strong' is a social concept that has emerged in normal society.

The process of globalization/industrialization values body in terms of its capacities. Capacities are evaluated in terms of its production of wage labour. In the same reference Nirmalla Erevelles states that labour is central organizing force in history, because human beings do not just live but instead 'produce' their lives within specific historical contexts through their relationship to labour which is basically understanding of Historical materialism of an individual in opposition to the poststructuralist discourses that see a body wholly constituted within language. In other words, the historical materialist framework reads the subject—its body, consciousness, and meanings as produced by and through labour. In day to day life, the oppression and exclusion of people with disability experience is an inevitable consequence of produced particulars forms of social development associated with western capitalism. If we trace the history of shift from feudalism to capitalism in terms of labour market, we will notice that efficiency and productivity are demanded from individual workers which lead people with disabilities to be dependent on the state. The very politics behind exclusion of people with disabilities, therefore, is essential for a surplus labour market which is demand of capitalism to minimize the costs of production and calls upon the industry—owners to maintain certain levels of unemployment.

A body is valued, as one of the understandings of bio-politics is, if it produces maximum labour which is demand of capitalism. But I am proposing that impaired body should not be treated as a pathological problem, as it leads to the emergence of discriminatory practices in society. In other words, we need to realise that an individual body is subjected by normal society and compelled to adapt to the environments, if it fails in doing so it becomes the case of pathology. There are certain environments in which impaired body works as able-bodied works in its accessible environment and able-bodied fails to do so there. It is very much clear here, that a so called normal, able-bodied may become disabled in different environments which may be very appropriate for people with disabilities. Let me give a brief example which will clarify this argument and at the same time will question the medical discourse. In our normal society, a deaf person is considered as disabled and needs medical care and medical instruments to live a normal/happy life. But they do not need medical care and instruments in their community, they communicate through sign language to each other without facing any problems. Deaf children who are not taught signed language communicate through gestures which they learn naturally. M. Lynn Rose in her article, 'Deaf and Dumb in Ancient Greece' quotes in the reference of a mother who describes gestural communication of her profoundly deaf daughter; "She uses little gestures with me that I understand, that her sisters and brothers understand...We don't have conversations, because that is impossible with a deaf person, but when I want her to go fetch water, I can take the jug that she always uses, show it to her, and point my finger in the direction of the well, and she knows that I need some water." This instance makes it clear that the very idea of disability and ability, of normal and abnormal is constructed and socially determined.

Let me get back to the social model of disability in which we find that it is environment that disables those bodies which do not adequate to the structure. It opposes the labelling of disability as "a physical or mental defect but defines it as a cultural and minority identity" (Siebers 2008:4). The concept of identity has been broadly debated in the field of disability studies and is still a contested and prolific issue in recent years. Siebers' argument that disability is a cultural and minority identity rejects identity as essential, fixed and stable. Because we know, identity is not a universal entity but is produced by socio-cultural discourses, it attacks the notion of essentialism where we find that language reflects the

reality rather than language constructs the reality. Language is a structure not of representation but of signification. It does not represent a reality that is outside of it or prior to it. Language is a structure of signs; it constitutes the reality that is to be represented. It is not denied here that there is no reality outside language, but the knowledge of reality that we have is constituted in language. Language, Saussure, Benveniste and Austin argues, constitutes the *I* through the process of signification and utterances. Saussure argues that sign constitutes both the signifier and the signified because the relationship between signifier and signified is arbitrary and they, the word and the concept, are constructed through the differences. We derive the understanding from here is that we cannot think about reality without language. Benveniste proceeds this argument further and argues that subject is the effect of structure whose self is represented in language. Therefore *I* does not represent the self but constitutes it through the process of signification. Even Austin proposes that if a person makes an utterance, it signifies that he is not simply saying something but he is performing that action intended in utterance. The anti-essentialist claims that identity is a process of becoming and is produced always by similarity and difference. As Derrida argues the meaning of identity categories-Brutishness, Blackness, Masculinity etc- are held to be subject to continual deferral through the never-ending process of supplementarity or difference. So we come to the conclusion that there is no such identity that is an essential and natural. Disability as an identity is a social category rather than a biological and natural property.

The medical model identifies certain bodies as disabled/diseased and exerts the power over *it* that results in the marginalisation of those bodies. It empowers the dominant model of ability by differentiating it from disabled/diseased body. As I have argued in the above paragraph language generates meaning through relational differences. The able body comes to acquire meaning in the difference of the disabled body. However, it is also regulated within the discourses by producing knowledge. It goes without saying that there are other discourses too that empower the 'norm'. Norms are constituted by the population and are constitutive of population. Norm constitutes the essence of the sense of the self. Norm emerges through community experiences. Another question arises how 'norm' comes into the existence that regulates discriminatory practices. Norm prescribes certain 'performances' which are perpetuated by the subject. It is an individual who becomes subject by putting himself into the process of performances. He perpetuates the structure of normality by reiterating that performing process. Norm comes into the existence by restraining certain behaviours or practices, it attaches negative meaning to certain performances and stigmatizes them. Butler argues that the subject is produced through the performativity of norms (normative representations, normative practices). These issues are very clear from here, that certain practices are considered abhorred or deviant if it does not fit into the norm. We have seen in our society that if a person behaves abnormally, he is treated as a mad/diseased person and becomes subject of medical treatment.

"Undoubtedly, the central purpose of disability studies is to reverse the negative connotations of disability, but this pursuit tends to involve disability as an identity formation rather than as a physical or mental characteristic"(Siebers: 2008,4). Above sentence claims that negative connotations have been attached to those bodies which do not properly adequate the norm. For example if a body cannot run, it is unfit and can be considered as problematic body for coherence of norm or for society. Let me first question the idea of adequation that norm always looks for. We have already seen in Saussure that each signifier has a signified and each signifier differs from another signifier. The difference between one signifier and another signifier is negative difference. Signifier constitutes the meaning though relational differences too. But in Derrida we find that there is no fixed meaning, each signifier refers to another signifier rather than a fixed signified. The effect of difference generates the

'unfinalizability' of the meaning, the perpetual postponement of the closure of meaning in the sign, the same, postponement of the sought-for adequation of signifier to signified. So there is no such body that can properly fulfil the expectations of norm. In the case of the disabled body, it continuously becomes the threat to coherence of norm because it does not adequate to the norm. Needless to say, the disabled subject is also the effect of that same structure which has produced able/normal subject. But to escape from incoherence and threat, that structure excludes disabled subject and exercises discriminatory practices by attaching the negative connotations to it.

Many disability theorists argue that 'disability as an identity is never negative'. We have heterosexual normative culture in which sexual relations among people of the same sex are prohibited. It produces the practices of homosexuality as abhorrent and deviant. The body which desires the same sex is labelled as disabled/deviant body and keeps them under medical treatment. But we have also a democratic society where each person has equal right and to disparage a person by the use of disability should not be normalised and legitimatised. There are groups of people who celebrate the difference of their body. For instance, in the postcolonial discourse, on the basis of the colour of third world's people, white people discriminated against them and considered them as a sort of surrogate people and even underground self. The negritudists propagated to celebrate their difference rather than feeling bad for their colour and applauded with new aphorism, 'Black is Beautiful'. Feminist movement which ran parallel to postcolonial movement celebrated their biology and sexuality, which were major causes in the subjugation of women in the patriarchal society, in narratives rather than suppressing their inherent biological traits.

According to Giddens, "self identity is not a distinctive trait, or even a collection of traits, possessed by the individual...it is the self as reflexively understood by the person in terms of his or her biography" (Giddens 1991, 53). Identity is how an individual does sense of his own self. According to Giddens, we are free to choose our identity and can reject identities imposed on us as a result of ascribed characteristics. A disabled person may not carry disability identity because he has never felt discriminated in environment and has never seen his body as incapable in performing certain acts. A so called able person may fit into the ascribed characteristics of disability because he has always found his sense of self weak and disabled. Here the words 'able' and 'disabled' have been used as they have been understood in the normal society. We reject fostered identities by the creation of narratives about the self and "provided we can sustain these narratives we are able to maintain our sense of self" (Giddens 1991: 54). This understanding of self and identity questions the ascription of the single identity which was supported by essentialists. Our sense of self is continuously evolving and we everyday emerge with the new sense of our own self. We interact with new situations everyday which make us feel, sometimes, abled, sometime disabled, sometime possessing masculinity, sometime femininity etc. However, these all categories are culturally constituted. Disability identity is a possibility of being which is carried by everyone.

In our society, discriminatory practices emerge also through the idea of difference. The idea of celebrating difference was one way to ignore discriminatory practices. Therefore, for disability Studies, it is very necessary to question the idea of difference that also can be questioned by the idea of 'cyborg'.

The cyborg embodies the idea that there are no clear divisions between the non-human and the human, the technological and the biological, the artificial and the natural. The innovation in the field of technologies and medical science reshaped the human body. Prostheses, devices which replace a missing part of the body, are used to make the body strong and are used more by disabled person. At present, virtually every part of the body can be replaced except the brain and nervous system. By using the idea of cyborg, disability scholars argues that the notion of ability can be incorporated by a disabled body and a able

body also uses prostheses to feel strong and capable. The cyborg presents 'pure, clean, hard and tight bodies that are associated with the notion of ability that is "the able body has a great capacity for self transformation. It can be trained to do almost anything; it adjusts to new situations" (Siebers: 2008, 10). Therefore, we have the notion of cyborg that questions the notion of ability and the notion of disability and cyborg trains the body to do almost anything and challenges the notion of disability that is "the disabled body is limited in what it can do and what it can be trained to do. It experiences new situations as obstacles" (Siebers 2008: 10). On the other hand, the cyborg was highly criticised by disability scholars who examined as it is reproducing and empowering the notion of ability. But important here is to problematise the distinction between ability and disability and also in the fixing identities of disabled.

There are certain signs and symbols that are attached to the impaired people against them. For instance, a wheelchair user is considered as a disabled person who cannot walk/run as an able body does. A normal person discriminates against them because they use wheel chairs. Using wheelchair is just to empower their physical capabilities and make their work viable which also can be seen by in case of normal person who uses cars/bikes . It is the problem in our society that prejudiced ideas have been attached with certain symbols and signs. People with disabilities do not want to be othered on the basis of their impairments; they are normal and able in some other way. The sense of self is a sense of knowledge about the self that questions any sorts of imposed constituted knowledge on one's self. It goes without saying one's sense of self also often derives from normative knowledge of the human. Constituting one's identity is very much the political act that can be questioned by personal narratives which may challenge the stereotypical image of the disabled subject. In opposition to this argument, it can be said that the 'able' or the 'disabled' may be biased in the production of their self image and self-narratives. Those people, whose bodies are not used as signifier of difference, claim that biographical narratives are one of the tools for those whose bodies are not universally accepted to construct a self and are a way of reconstructing bodily image and self identity. But in contrast to this charge, I have already proved that a person who has never comes across to those obstructions which have never impeded in the functioning of their works and have never frustrated their demands should not be tagged with disability identity. Nick Watson concludes, "Self identity and subsequently agency is achieved through a practical demonstration of his skill and abilities and it is through this agency that he is able to reaffirm his own sense of biography and challenge identities ascribed to him on the basis of his impairment".

As I proposed one understanding of disability is not a property of individual bodies but the effect of social structure that privileges ability. Later on I discussed how with the help of prosthesis and positive thinking an impaired person can overcome her/his condition which is disabling in this normative culture. My argument here is with these mechanisms such as prosthesis and positive thinking, a disabled person produced in normative culture can challenge the privileged notion about 'ability'. Such mechanisms create space where both, able and disabled body, comes together without having the sense of each other's bodily difference.

In our normative society, disability is considered as a negative identity which is not true always, it also has positive valences. For example, there are many disabled persons who do not consider their disability as a defect or flaw. Let me quote the interview of Joyce by Nick Watson:

Well, I know this is going to sound very strange to you, but I don't see myself as disabled person. I see me as an ordinary person, sort of being a housewife, being an auntie, just doing ordinary things that ordinary people do.

In the case of Joyce, she puts herself in the category of a normal lady who performs social relationships properly. She is quite comfortable with her family and with her colleagues. She faces no problem in playing the social roles. Her impairment never obstructs her in performing social relationships. These relationships construct her self-identity. I found it very true when I interacted with Harshini, student of 9th standard studies in Durgabai Deshmukh Vocational Training and Rehabilitation Centre for Handicapped, Andhra Mahila Sabha, Vidyanagar, who has a profound hearing impairment. After talking to her, I came to the conclusion that she has never felt that she is different from others. Nick Watson concludes, “if this is accepted then it has to be acknowledged that identity formation for disabled people is not a unique experience contingent on the presence of an impairment...but is part of the experience of identity formation common to people as much research has shown”. Joyce and Harshini, both, have impairments who feel as a normal person feel. In the case of Jane, she has been born and brought up in such an atmosphere where being disabled is to be normal and her impaired body does not occur as a problem for her, “...But I just don’t see myself as disabled-I am a wheelchair user, big deal. The chair is my legs, I save a hell of a lot of money on shoe leather, I just don’t see myself as disabled.”

Self and identity are always embodied. Giddens argues that most people are absorbed in their bodies, and feel themselves to be a unified body and self. But it should adequate properly; otherwise the self comes into the question. The improper adequation may result in dislocation of the self and may create an unembodied self, in which, Giddens argues, the body appears as an object or instrument manipulated by the self from behind the scenes.

How an individual get subjected? Debate on this question will help to unravel the enigma of ‘process of becoming disabled subject’. The subject is an effect of structure in which she/he is produced. Butler and Lacan extend this argument which shifts from the structure that produces the ‘empty forms’ as Benveniste suggests. According to Benveniste, linguistic structure constitutes the empty forms which we come to occupy as speaking subjects. Butler and Lacan argue that through the ‘process’ we come to occupy them. Butler and Lacan extend the arguments of structuralists by saying that this process generates effects that the structure does not fully control. According to Althusser, we don’t have pure distinct ideas in our minds; it is the ideological structure that produces these ideas. Ideology and language, both, have their structure in the unconscious. In his “Ideology and Ideological State Apparatuses”, Althusser says individual is subjected not only through the structure of ideology but also equally through the ‘process’. Knowledge, as Foucault states, is produced about the disabled subject through the various apparatuses which are incorporated into the minds of disabled subject and produced structure is normalised and perpetuated via processes’ of the disabled subject. The very politics behind this is to insert social meaning into the social experience, by which power is linked to subjectivity. The subject looks the social meaning as personal attributes such as self-esteem and empowerment. Individuals view it as a matter of personal growth and choice rather than an artefact of power. Constituting identity is a tool of government that is imposed on the subjects by governing their beliefs and behaviours. Government is in Foucault’s words “conduct of conduct” which he discusses in his essay “The Subject and Power”. Foucault goes further by saying that there are many institutions that help government to regulate the behaviours of individuals and through which they exert the power over the individuals, one of them is ‘technology of the self’ that is deployed by the “pastoral power” in which one acts on own body/conduct. In that way, one transforms her/himself in the form of subject and understands as it is her/his freedom and her/his own choice.

If we trace the history, we see a new kind of knowledge emerged in 18th and 19th centuries. Industries and technologies were rapidly progressing. During that time, administrative state, capitalism, positivist science and liberal philosophy came into being.

During that time disability was medicalised and institutionalised. A new form of power was generated by instituting hospitals and new form of medicine was produced in terms of to practice on healthy and sick/mad body. They were constructing hospitals to construct new power relationship between state and citizens through which new kind of discourse was shaped. Discourse as a total system of knowledge makes true or false statement possible. The disabled believe unreal things to be true because the discourse that structures their belief dictates it. Disability discourse does not originate in the mind or body. Disability is part of a historically constructed discourse, as Lenard J Davis says, an ideology of thinking about the body under certain historical circumstances. Disability is not an object but a social process that works on everyone who has “body and lives in the world of senses”. The disabled body adapts the phenomenon of disability discourse which has motive to regulate that body and through this process, the normal structure gets empowerment. Here, I am not going to discuss the various apparatuses of ideology like art, religion, and institutes etc. that control the human behaviour and reshape it, I want to trace the genealogy of disability in brief to question the constructed identity of disabled people and also to look how it has been perpetuated.

In late eighteenth and nineteenth century, notion of normalcy was enforced and was constructed. However, the idea of norm also existed in the medieval period in which people had an inherent desire to compare themselves to others. For Davis, the idea of norm was the feature of certain kind of society; it was less a condition of human nature. “...the social process of disabling arrived with industrialization and with a set of practices and discourses that are linked to late eighteenth and nineteenth century notions of nationality, race, gender, criminality, sexual orientation and so on” (Davis: 1995, 24). Words such as normal, average, abnormal, etc came into existence very late in human history. These words, later, were conceptualised in European culture. Before being conceptualised, ‘norm’ and ‘average’ were general vocabularies in the branch of knowledge known as statistics. It was first used as a data for the promotion of state policy but later it was applied on the body to illustrate the natural history of health and disease. In the same era, we find that industries were established which demanded for a healthy and normal body. Bourgeoisie society gave birth to an able worker who produces good amount of wealth. When we have the concept of norm, it also generates, in its relation to, the concept of deviations. When we have the concept of able body, it also needs for its own existence the concept of disabled body. So, when we think of bodies where the concept of norm is operating, automatically, disabled people will be thought of as deviants. The intervention of eugenics as a bio-social movement advocated such discriminatory practices. “Darwin’s ideas serve to place disabled people along the wayside as evolutionary defectives to be surpassed by natural selection. So, eugenics became obsessed with the elimination of defectives, a category which included the feeble minded, the deaf, the blind, the physically defective and so on” (Davis: 1995, 31). An important consequence of this idea was dividing the total population into ‘standard and non-standards subpopulations’. The ideology of the normal body was justified by the various apparatuses, literature being one of them.

In the same discourse, the significance of finger printing for the person’s identification created by Galton is important for analysis. As a part of modern system, fingerprinting was for personal identifications. It was a kind of investigation to see the hereditary features as evidence of one’s parentage and near kinships. Galton’s modern system of fingerprinting for personal identification generated a desire to show that certain physical traits could be inherited. “As he wrote:

One of the inducements to making these inquiries into personal identification has been to discover independent features suitable for hereditary investigation....it is not improbable, and worth taking pains to inquire whether each person may not carry visibly about his body undeniable evidence of his parents and near kinships (J Davis: 1995, 31).

Fingerprinting as a physical mark of parentage is inscribed as a serial number on the body. But through the finger printing, the idea of standard body also emerges that contains a serial number which is embedded in its corporeality. Thus the body, Davis argues, has an identity that coincides with its essence and cannot be altered by moral, artistic or human will. This indelibility of corporeal identity only furthers the mark placed on the body by other physical qualities-intelligence, height, reaction time” (Davis: 1995, 31). In this way a person establishes an identical relationship with the body. It also forms an identity which later becomes unchangeable and indelible as ‘one’s place on normal curve’; we have already challenged this notion of identity. Through fingerprinting, physical difference is formed and becomes synonymous with the identity of person. It becomes a tool of the State to criminalise and suppress those bodies which become deviant from the norm. Whoever’s physical qualities cannot be measured is considered as deviant from the norm and suffers from identity crisis. In the case of disability, conceptualised attributes of norm such as tallness, high intelligence, strength, fertility, ambitiousness etc are not possessed by them are general notion in the hetero-normative culture.

Needless to say, disabled people existed in the ancient world too but they never were treated as supernatural human beings/wretch/an evil. Labda and Spartian king called Agesilaus are major evidences who were never excluded from their respective society. “People who were unable to care for themselves were not routinely segregated from the public, but part of the family and the community (Martha L. Rose 2003: 28). It goes without saying that a transition occurred in the scientific age where private realm was transformed into the public. Lennard Davis discusses about the eighteenth century which was the point of transition in which people with disabilities became a distinct category, the objects of pity and fear, deserving of charity and scorn. A kind of paradigm shift took place in transactions of mutual hospitability in which various attitudes were exchanged, even the State that was never the part of people’s everyday’s life started intervening in their private life. The physically handicapped people whose assistance were being taken care of by their family and by respective community too now are dependent on perspectives of people from multicultural society. However, various communities have their own prestigious/distinct culture. Certain good understanding of a particular community is evil for another one that is the very nature of arbitrariness of “language”- not in terms of Saussure but of Wittgenstein. But now the very nature of ‘difference’ of culture has been lapsed but is maintained by various tools of body-female body, impaired body, untouchable body, ill body plugging in different cultures and measuring in strength. This extreme definition of different kinds of body that exist in modern literature could not be found in the surviving literature of ancient. The stigma of solicitousness and exclusion are one are two instances which were attached with the old and ill people that is now blurred and is being associated to disabled persona in literature and in society too.

Before industrialisation, people with disabilities were associated with mainstream society. Their differences were being accommodated and their skills were utilised. They were considered as productive for their environments. For example, Aspasia, an ancient character, was never felt excluded; people learnt rhetorically speeches from her. These allowed them to be with their communities and share a fruitful and happy relationship. In other words, they did not constitute separately a socially discriminated group. ..”With the onset of large scale factory production came the requirement for workers to fit the mould stamped out by mechanisation and the timetable, and this put people who lacked the qualities necessary for this kind of labour at a distinct disadvantage (Rose Galvin 2006). As Marks argues, mechanised production required a uniform workforce and work was not organised to cater to the range of intellectual and bodily difference between people. People were understood as people with disabilities who were unable to produce proper labour. It is the modernised

labour force which is quite distinct from the ancient times defines the people's lives and ensures their survival. Foucault argues that, while work has always had a productive function, in the modern era it has taken on two additional functions, 'the symbolic function and the function of dressage, or discipline. Those who could not participate in this modern structured social sphere were considered as not able to adapt to new conditions and not having the symbolic qualities. They were defined as aberrant. Through this, two separate categories, abled and disabled were established. Able who possessed disciplinary attributes understood as part of mainstream society because they could adequate to the structured modern social spheres and could support the capitalist's production through the conducting their body. Another category called disabled were a threat to social order. But the medicalisation of people with disabilities is an attempt to integrate them into the mainstream society. They are being rehabilitated and normalised, so that they can be productive for the modern society. By quoting Foucault, Galvin states, "as disabled people emerged from the close fortresses in which they functioned and (began) to circulate in a free state, the methods of control over their subjectification became more flexible and more diffuse" (Rose Galvin: 2006).

An identity is very much unstable and unfixd comparatively to other minority identities. For example, a black man will never be a white woman but may turn up the very next day as crippled. Disability as an identity can be occupied by anyone, at anytime. Disability theorists consider disability as an anchor for other minority identities. By quoting David Mitchell and Synder, Siebers argue that 'stigmatised social positions founded upon gender, class, nationality and race have often relied upon disability to visually underscore the devaluation of marginal communities' (Siebers 2008, 6). Their discrimination is being justified by considering them as disabled. When minority identities are pathologised by association with disability, Siebers argues, the effect is never merely metaphorical, it becomes also referential. Disability is the reality of the human condition. So the association with disability of other minority identities rationalize the prejudiced attitudes of people towards them.

In case of minority identities, framing identity is considered as politics. Individuals need identity who are in the crisis of it. They are in the crisis due to their helpless and hapless position. Framing identity seems to other people as they are in need and they are demanding extra help, they cannot live independently .Siebers says the word identity is seen as crutch for them. It is viewed that they 'lack' something. Psychoanalysts explain that lack lies at the heart of identity. And those unable to overcome this lack fall into patterns of dependence and aggression. Recent theorists reject identity's associated with lack, dependence, and pathology. But identity is always thought negative in the case of minorities. It is seen that they posses unhealthy identities. But this can be justified because it is born due to pain, suffering, resentment, bitterness. They have been repressed in dominant culture by majority groups. J.C. Lestler and Nancy Fraser like contemporary theorists argue that identity politics is a political action to homogenise the various marginalised groups. Identity politics is an attempt to recognise the suffering of other marginalised people. It is a political action by which people's genuine need will be ignored . In defense of identity politics, Siebers says that it can be justified because it is linked to pain and suffering. It is very true in the sense that disability is not a pathological condition but disability identity is embodied via various apparatuses. Alcoff says that "identity is not merely that which is given to an individual or group, but is also a way of inhabiting, interpreting and working through, both collectively and individually, an objective social location and group history (2006, 42)". A person's identity is not always recognised by his individuality but the structure by which "that person identifies and becomes identified with a set of social narratives, ideas, myths, values and types of knowledge of varying reliability, usefulness and verifiability" (Siebers:2008,15).

The constructed notion of disability defines the politics of imposing social codes and norms on bodies. Viewing disability as the mismatch between the society and bodies is the strategy of imposing norms. We have already discussed how disability deconstructs the notion of 'norm' and interrogates the politics layered behind the social construction. Social constructionism fails to see the physical realities of people with disabilities. We come to the conclusion that, in this 'normal' society body hardly matters. It privileges 'performativity over corporeality'. In addition to this Siebers favours pleasure to pain and illustrate social success in terms of intellectual achievement, bodily adaptability and active political participation'. It is power relations that bring us into social relationship. As Foucault says, power is productive and it only functions on "free subjects" it needs that because power has to function on 'free subject'. Social success can only be defined in terms of our relationship with ourselves that will change if power structure will be revealed. To transform the relation of social exclusionary/discriminatory practices maintained by power, we need to know that subjectification is a socially mediated process. Galvin says in the relation of this argument that, "It is possible to build new identities within the fractures and fault lines out of which power erupts and along the border of the norm where new meaning and new identities can be created"(Rose galvin:2006). We have to know the virtual fractures, as Foucault says, which open up a new space for freedom.

Work Cited

- Abbinnett, Ross. *Culture and Identity: Critical Theories*. Sage Publication. 2003.
- Addlakha, Renu, Blume Stuart. Devlieger, Patrick. Nagase, Osamu. & Winance, Myriam. *Disability and Society: A Reader*. Orient Blackswan. 2009 Print.
- Barnes Collin. Mercer Geof. & Shakespeare Tom. *Exploring Disability: A sociological Introduction*. Polity Press. 1999. print.
- Barker Chris & Galasinski Dariusz. *Cultural Studies and Discourse Analysis*. Sage Publications. 2001 Print.
- Cavallaro, Dani. *The Body for Beginners*. Orient Longman Limited, 2001. Print.
- C. Wilson James & Lewiecki, Wilson Cynthia. *Embodied Rhetorics: Disability in Language and Culture*. Southern Illinois University. 2001. Print.
- Foucault. Michel. *Madness and Civilization. A History of Insanity in the Age of Reason* Knopf Doubleday. 1988. Print.
- Galvin, Rose. "A Genealogy of the Disabled Identity in Relation to Work and Sexuality". *Journal of Disability and Society*. Vol. 21. No 5. August 2006. 3rd October 2011.
- Hughes, Bill. "Wounded/Monstrous/Abject: A Critique of the Disabled Body in the Sociological Imaginary". *Journal of Disability and Society*. 24:4, 399-410. 28 September 2011.
- J. Davis, Lennard. *Enforcing Normalcy: Disability, Deafness and The Body*. London Verso. 1995 Print.
- L. Rose, Martha. *The Staff of Oedipus: Transforming Disability in Ancient Greece*. Michigan Press. 2003. Print.
- Mansfield, Nick. *Subjectivities: Theories of the Self from Freud to Haraway*. St Leonards: Allen & Unwin. 2000 Print.

- Martin, L.H. (1988) *Technologies of the Self: A Seminar with Michel Foucault*. London: Tavistock. pp.16-49.
- Siebers, Tobin. *Disability Theory*. Michigan Press. 2008. Print.
- Sarah L.Schulz(2009). "Psychological Theories of Disability and Sexuality: A Literature Review". *Journal of Human behaviour in the Social Environment*, 19:1, 58-69.
- Shakespeare, Tom. *Disability Rights and Wrongs*. Routledge. 2006.
- Stiker, Henri Jacques. *A History of Disability*. Michigan Press. 1996. Print.
- Titchkosky, Tanya. "Disability Images and the art of theorizing normality". *International Journal of Qualitative Studies in Education*, 22:1, 75-84.(2009). 18 July 2011.
- Watson, Nick. "Well, I know this is Going to Very Strange to You, but I don't See Myself as a Disabled Person: Identity and Disability". *Journal of Disability and Society*, vol.17.No.5. 2002. 1st Novemebr, 2011.

The Criterion