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Exploring the Invisible Knapsack of Able-Bodied Privilege

by

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In my efforts to infuse our university's liberal studies and education curricula with multicultural materials through Multicultural Studies and the Moorhead State University SEED Project, I encountered Dr. Peggy McIntosh's pivotal articles on white, male and heterosexual privilege (McIntosh 1988a, b). At last, I had found a discussion addressing the missing link in my quest to understand and explain ways racism and other systems of oppression worked! McIntosh identified and labeled the phenomenon of dominant group privilege, or systemic unearned advantage gained at the expense of another group. In doing so, she highlighted key power dynamics operating in systems of oppression which most discussions of dominant/subordinate relationships tend to ignore. She recognized that focussing on the disparate treatment and victimization of a group was insufficient in explaining the perpetuation of oppression and therefore, she shifted the nucleus of the discussion from the damage to the victims of oppression to the benefits bestowed on the oppressors. By exploring the privileges which perpetually advantaged one group over another, she exposed a hidden but fundamental component sustaining oppression. In reviewing her discussions of white, male and heterosexual privilege and their relationships to racism, sexism and heterosexism, I saw that the concept of privilege could be extended to other systems of oppression such as ableism.

Ableism is the systemic disempowerment of persons with disabilities for the advantage of able-bodied persons. Historically, people with disabilities have experienced pervasive patterns of segregation, exclusion, discrimination, and extermination which denied them full participation in society. Simultaneously, ableism has conferred privileges on able-bodied people which have permitted them to live in the world with false senses of comfort, security, perfectability, superiority and their responsibilities to others.

Unlike racism, sexism or heterosexism, ableism is a form of oppression that any one of us, at any age, may experience directly at some point in life, even if only temporarily. We only have to become incapacitated by sickness, age or an accident to join the ranks of people with disabilities. If we are fortunate enough to escape experiencing it directly ourselves, we will eventually know someone close to us who will confront ableism. Ableism cuts across racial, ethnic, religious, gender, sexual orientation and class categories. In this article, I will examine ways able-bodied privilege sustains ableism.

Having a disability, is not synonymous with experiencing ableism. Scholars seem to agree that terms such as disability and impairment refer to limitations in function resulting from physiological, psychological and anatomical dysfunction of bodies (including minds) causing restrictions in a person's ability to perform culturally defined normal human activities (Ingstad & Whyte 1995: 3; WHO 1980: 27-28). The concept of disability

encompasses a multifaceted coalition of diverse bodily conditions which can result from quite distinct causes such as chronic disease or accident based injuries; genetic, biological or environmentally based developments; and progressive illnesses. Each type of condition manifests itself in a variety of ways, uniquely shaping an individual's abilities and their experiences of disability.

Some scholars contrast terms such as disability and impairment with handicapped, which emphasizes "the resulting disadvantages [imposed upon people with disabilities] that may take the form of arbitrary barriers constructed consciously or unconsciously, by society" (McNeil 1993: 3). The pervasiveness of these arbitrary barriers at individual, group and institutional levels of society constitutes systemic oppression against people with disabilities or ableism. These barriers are not an inherent part of conditions of disability. Instead, they have been artificially imposed on people with disabilities as a result of prejudices and discriminatory acts by individuals and groups and institutionalized ableism embedded in policies, organizational practices and structures.

The able-bodied members of my family, community and I did not ask for or create these privileges. We did nothing to earn our able-bodies. We were born that way and even carefulness and hard work will not guarantee that we will remain able-bodied. Most of us have not even been aware that able-bodied privileges even exist. Yet, as McIntosh (1988a, b) points out, such

obliviousness does not erase the advantages that we, the privileged, have gained from those benefits which systemically stigmatize, disadvantage and exclude those with disabilities. We have been socialized since infancy to interpret and view the world in terms of these able-bodied privileges and taught that this is how the world should be. Consciously and unconsciously, we are taught not to see or question disparate power structures or unequal distribution of privileges in these arrangements. We are taught by socializing agents such as family, school, the churches, media, politics and other powerful institutions, that the status quo is the natural order of things. Beyond that, we are taught that when some folks do not have access to the privileges we have, they are either unqualified, lazy, or somehow inferior, therefore undeserving of those privileges. We learn that being able-bodied confers a superiority which we can take for granted. It is an asset which opens doors for us and protects us from insensitivities, hostilities and violence which people with disabilities encounter as part of their daily lives.

I became aware of some the able-bodied privilege I benefit from in my experiences as the able-bodied mother of a child with multiple disabilities who acquired permanent neurological, sensory, and mild physical impairments in infancy. While this situation does not provide me with the same perspective as someone with disabilities, these experiences have offered me a unique opportunity to raise my consciousness and to peer into, and even straddle, the boundaries of the world of people with

disabilities. Such a vantage point permits me to highlight some of the accrued unearned privileges often invisible to and taken for granted by able-bodied people which disadvantage persons with disabilities. In the process of working to increase my own awareness and in conversation with members of the 1998 Minnesota SEED Region IV training, I have assembled the following list of ways able-bodied privilege has benefitted me in my daily environments:

1. I can ignore the width of doors, the presence of steps and other architectural features of buildings.
2. I can use any bathroom stall I want including squeezing into tiny bathroom stalls without regard for the requirements of a wheelchair or of toileting assistance.
3. I can use the bathroom and take care of my personal grooming needs without assistance.
4. I am not dependent on hiring strangers and acquaintances to assist me with my daily routines and private matters.
5. I can be fairly sure that when people look at me, they don't assume that I would be better off dead or that I am a social burden because of my disabilities.
6. I can assume that I will not be perceived as angry, incompetent, childlike, or helpless just because of the condition of my body.
7. I can assume that I will be perceived as and treated as an adult after I have reached adulthood.
8. I can be fairly sure that the first reaction to me is not pity or revulsion due to the condition of my body.
9. I can assume that few people would think I had no right to be born.
10. I can turn on the television, read a book or magazine and be sure that I can see people operating with similar abilities to me and I can use their experiences as a gauge to understand my own.

11. I am assumed to be a social being in need of interaction with peers.
12. I am not expected to speak for all people who, like me, are able-bodied.
13. I can anticipate being employed and be perceived as capable of working.
14. I can expect to succeed or fail in my job or life without it reflecting on all people with similar abilities.
15. If I move to a new job, I am fairly sure that I can find both an accessible workplace and residence.
16. I can anticipate being able to physically enter homes of friends and family when visiting.
17. I can anticipate being able to walk through the aisles of any store I choose and rely on being able to take advantage of detours for where I need to go if elevators are out of commission.
18. I can anticipate being able to reach products on the store shelves.
19. I can see successful role models with similar abilities to mine in a wide variety of careers.
20. I can spontaneously participate in activities. I do not have to preplan routine trips.
21. I can assume that I can physically, emotionally or cognitively handle most everyday situations.
22. As a parent of a typically developing child, I can assume that at least one teacher in the public school she attends has been equipped with appropriate skills to adequately meet her needs.
23. I can look others in the eye in my daily interactions.
24. If I need to find information about my body, I am pretty sure that I can find someone who has the expertise to help me research the information I need and help me interpret it appropriately.
25. I can assume that my group is not viewed seeking handouts or deserving special favors whenever someone is nice toward my group.

26. I can assume that the entrances I use will not be service entrances or take me past the dumpsters.
27. I can assume that I can select where I sit at the movies, concerts or in church.
28. I can assume that most materials I encounter appearing in the languages I read are readable without adaptive equipment or assistance.
29. I can assume that public safety information, e.g. traffic signs, curb cuts, detour information, will be accessible to me.
30. I can assume that when I am in need of public or private transportation, it will be accessible to me.
31. I can assume that I do not have to make advance reservations in order to attend most public events or facilities.
32. I can buy a car without having to purchase adaptive equipment to make it usable.
33. I can assume that I can go into any restaurant and find something on the menu that I can eat and it will be served in a form that I can eat without too much difficulty.
34. I can assume that when people look at the condition of my body, they will not question the appropriateness of my right to be a sexual being or a parent.
35. I can talk to myself without being accused of hallucinating, or abusing drugs or alcohol.
36. I can be insured and can afford to be insured.
37. I can assume that the items I need for my personal daily care will be conveniently available and their costs will be affordable.
38. I do not have to prove myself as superhuman in order to be respected as a full human being.
39. I can feel fairly sure that I am not viewed as subhuman, defective, or deviant due to the condition of my mind, body or emotional self.
40. People do not recoil from me because they fear that the condition of my mind or body is contagious.

41. I can remain oblivious to the use of language which demeans those with disabilities without feeling penalties for doing so.
42. My lack of participation in an activity can be assumed to be a matter of choice.
43. I do not have to depend on and negotiate with institutional bureaucracies to obtain the majority of the support services I need to live my daily life.
44. If I underachieve, my performance is not assumed to be my level of competence.
45. When I am told about or given curricular materials about our national heritage, they will include the achievements of people with similar bodily condition to mine.
46. As a child, I did not have to be educated about systemic ableism for my daily survival in society.
47. I am not frequently the target of exploitative scams nor do I need to regularly sift through and weigh an assortment of real and false promises of imminent cures to fix or improve my physical, emotional, or cognitive condition.
48. I am assumed to be capable of making my own life decisions.
49. I can feel confident that the condition of my mind, body or emotional self is not perceived as the result of sin and evil.

AND THE LIST CONTINUES

As McIntosh (1988b) notes, not all of these points are negative advantages. Many of the privileges like being insured, having access to information and places should be the norm in a just society. Others such as viewing people with disabilities as subhuman, contagious, sinful or evil denies their humanity and provides able-bodied people with a false sense of consciousness.

As an African American woman, I have regularly encountered and learned to address stigma and disadvantages resulting from racism and sexism. However, being denied privilege in some

systems of oppression has not precluded holding privilege in another. Furthermore, having insight into the ways one or two other systems of oppression work, does not guarantee automatic sensitivity to oppression in a different system. Similarly to people benefitting from white or male privilege, I have lived much of my life oblivious to those privileges upon which I, as an able-bodied person, unconsciously cashed in on daily. Because American society segregated many people with disabilities until the 1980s, I had little contact with people living with developmental disabilities until my daughter's extremely premature birth. As a result, I did not have to confront my prejudices and was able to politely mask feelings such as awkwardness, uncomfortableness, revulsion, pity, fear of doing something wrong when I interacted with them, and relief that I wasn't in their shoes, during my limited encounters.

Becoming a parent is one of life's transformatively enlightening experiences and the love it can generate can force even long overdue personal growth. Fortunately, my husband and I have been able to embrace the sudden challenge for increased awareness thrust upon us by our daughter's circumstances. So as a result of my increased stake in disability issues as a parent and advocate addressing my daughter's needs (and not because of any independent nobleness on my part), I have increased my knowledge and awareness of the concerns of people with disabilities. My efforts to raise my consciousness in this area will be a lifelong journey. Each stage of my daughter's life

continues to bring new challenges and lessons. One effect of my daughter's disability on my family's life is that it is like having to look at the world through a permanent filter. Her circumstances tint every aspect of my family's lives. This inescapable, omnipresent factor in our lives moves to the foreground in times of crisis or recedes into the background as my daughter matures and becomes more independent or as we get used to our routines, but it never disappears.

A secondary influence on my growth in understanding ableism has been as a result of my scholarly research on cultural perspectives on the body and bodily expression. Understanding what cultures find important to express about the body offers an effective way to understand some of a culture's values. American culture prioritizes beauty as one of its dominant values. Whatever falls outside the boundaries of defined beauty, tends to be devalued and labeled as different and abnormal. The juxtaposition of the valued ideal against stigmatized categories ties ableism to other systems of privilege and oppression. In American culture, those groups whose appearance or behavior differs most from the dominant Euro-American normalized ideals are those who have been stigmatized, labeled deviant and different and as a result, have systematically been afforded the least access to privilege. Persons with mental, physical and emotional disabilities, people of color (and even elderly people) have all been labeled as ugly, unfit, mentally or physically incompetent less intelligent and abnormal based on differences in

their appearance and behavior in comparison to these normalized ideals. These labels have been used to justify systemic restrictions in their access to personal, political, and financial power, jobs, housing, and education.

McIntosh (1988 a, b) points out that no form oppression operates without drawing on other forms of oppression. Ableism is no exception. It interlocks with and is difficult to entangle from racism, sexism, heterosexism, ageism, looksism, classism, and religious oppression. Although I am aware of synergistic complexities caused by interlocking systems of oppression on ableism, I have chosen to concentrate my discussion primarily on able-bodied privilege for the purposes of this article.

Ableism, like other systems of oppression, creates and maintains dominant group privilege at the expense of a stigmatized subordinate group by operating hierarchically through patterns of discrimination on individual, group and institutional levels toward those who are defined as different. Able-bodied privilege is bolstered by ideologies, language and stereotypes which systemically support, normalize, structure, rationalize and maintain disparate power relationships as the status quo. In American culture, body images are one means used to reinforce the dominant ideology linking health, strength, intelligence and beauty. An implicit hierarchy dichotomizes a positive - negative pair of attributes for each of these major concepts. Each of the positive characteristics reinforces, normalizes, supports and uplifts dominant cultural values, while their opposites refer,

accordingly, to stigmatized categories. Being able-bodied encompasses ideals of being healthy, strong, fit, attractive and competent, all essential components of American concepts of normal and beautiful bodies. The paired opposites of these terms, sickly/unhealthy, weak, unfit, unattractive and incompetent/retarded, are states of being deemed undesirable, deviant and ugly, and are terms used to refer to people with disabilities. Even the term, disability, tends to emphasize the lack of some ability rather than stressing what abilities people do have.

Living with disability is not inherently a negative human experience of life. True, life is not necessarily the same as living as an able-bodied person but, it still is a life which holds inherent value. A major part of what can make living with a disability negative has to do with the quality of life created by their daily confrontations with pervasive barriers, restrictions, devaluation, inconveniences, insensitivities, and life-threatening and altering policies. Able-bodied people use these incidents to control those with disabilities for their own convenience and benefit. Too often able-bodied business owners complain about the costs of having to comply with the Americans with Disabilities Act (ADA) in order to accommodate people with disabilities, assuming that they have the right not to meet the needs of all customers. Too often there has been substantial resentment among able-bodied people about the "so-called special privileges" people with disabilities receive in order to

participate in the world. Reserved parking spaces, special license plates and tags, special education programs and financial handouts from the government are all cited as special advantages bestowed on people with disabilities which some have felt discriminate against the able-bodied population. But are these really special privileges when people have been historically and still are denied access to productive jobs, education and public accommodations? Why should able-bodied people have the right to deny others opportunities to participate however they are able? Too often, able-bodied people assume that those who do not meet the standards of dominant group perfection (and few of us really do), are disposable, until they find themselves or someone they love among those disabled. What is the price we are willing to pay as a society not to empower our full complement of human resources, whatever the package?

With the awareness and knowledge of our unearned privilege comes with the responsibility to continue our growth and to begin making changes to make the world more just. The disparity in advantage between those who are able-bodied and those who live with disabilities is can be changed. The lion's share of the responsibility for change lies with those of us who believe in justice and equality and have passively accrued advantages assuming that those privileges were rightfully ours to keep.

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