New Dialogues in Feminist Disability Studies

Ruthie Bonan Gomes[1] 0000-0002-9873-5501
Paula Helena Lopes[1] 0000-0001-5724-7096
Marivete Gesser[1] 0000-0002-4091-9754
Maria Juracy Filgueiras Toneli[1] 0000-0002-9311-5020
[1]Universidade Federal de Santa Catarina, Centro de Filosofia e Ciências Humanas,
Departamento de Psicologia, Programa de Pós-Graduação em Psicologia,
Florianópolis, SC, Brasil. 88040-900 – psicologia@contato.ufsc.br

Abstract: *This study aimed to characterize the recent production of feminist disability studies, focusing on the intersection between gender and disability. Therefore, a review of the international literature was carried out, in which articles published in the last five years in journals available in the CAPES journal portal were included. The analyzed articles emphasize that the models of understanding disability have social and political effects in the ways of thinking about issues such as corporeality, sexuality, care and interdependence. Moreover, the studied productions point out that the inclusion of disability as a category of analysis to be considered in studies and social practices has an analytical and political potential.*

Keywords*: Feminist Disability Studies; Gender; Disability; Intersectionality*

Disability and its conceptual and theoretical paths

The models of understanding disability go through cultural dynamics and produce implications that mark trajectories and modes of social organization of spaces and relationships. Disability, therefore, can be understood as the product of the intertwining of diverse discursive productions, which interrelate with language, ideology and the social imaginary, influencing behaviors and practices regarding it. There are different models of understanding disability and the critical analysis of these models and of the effects produced on the trajectories of people with disabilities is essential from a social and political point of view. Furthermore, as well as gender, disability is a culturally fabricated narrative of the body and, as a result, permeates all aspects of culture. It structures institutions, produces subjectivities, cultural practices, historical communities and political positions (Rosemarie GARLAND-THOMSON, 2002).

The biomedical model has strongly influenced practices related to disability. Scientific knowledge and normality standards form the basis of this model and constitute the notion of what is meant by disability, which refers to physical, sensory and intellectual injuries and impairments, understood as abnormalities, such as the result of dysfunctions in some part of the body. From this perspective, the person with disability began to be seen as incapacitated, and should be rehabilitated to reach, as far as possible, normality standards. This narrative, when penetrating the formation of culture, creates deviant bodies and legitimizes inequitable distributions of resources, status, and power (Débora DINIZ, 2007; Marivete GESSER; Adriano NUERNBERG; Maria Juraci TONELI, 2012).

The Disability Rights Movement has strongly criticized the biomedical model and how it influenced their lives. These movements emphasized that, by restricting disability to the biological dimension, the medical model made invisible the other constituent elements of it, therefore, it is necessary to expand the dialogue with human and social areas to understand this phenomenon

(Sueli DIAS and Maria OLIVEIRA, 2013). Faced with this criticism and the need to overcome such biological and reductionist views, the social model of disability emerged.

The first generation of authors of the social model understands disability as a process of oppression and social exclusion. From this model, the problems faced by disabled people are the results of social oppression and not of their individual deficits. This transfers some moral responsibility to society. In other words, disability is withdrawn from the individual scope, and emphasis is placed on the architectural and attitudinal barriers that limit the participation of disabled people in society, on an equal basis with others (DINIZ, 2007). Based on this concept, once the social barriers that impede the participation of disabled people in society are removed, they could become independent. Thus, the responsibility for processes of oppression is seen as that of society, not of the disabled person, therefore, society should "rehabilitate" itself rather than the subject (Tom SHAKESPEARE, 2006).

After 20 years of hegemony, the premise of independence as an ethical value proposed by the early authors of the social model of disability began to undergo some questions, which, in turn, were influenced by the entry of postmodern approaches and of feminist critiques in the years 1990 and 2000. From this, a new conception of the model was defined: the second generation of the social model. This new generation of authors, mostly women, being some of them mothers of disabled children, introduced new concepts that considered gender roles, dependence, interdependence, experience of care and pain of the injury, as central themes in the life of the disabled person, worrying about discussing not only disability, but what it means to live in a disabled or injured body (DINIZ, 2007).

The authors of the first generation of the social model were predominantly male, intellectual, mostly with spinal cord injury, who rejected the curative medical model of disability and denied any charitable perspective before it. In other words, principles such as care, gender differences or compensatory benefits for the disabled person were not taken into account, because it was understood that the disabled person would be as productive as the non-disabled person if the social barriers to disability were removed (DINIZ, 2007).

Feminist theorists, therefore, criticized the emphasis on inclusion made by the early scholars of the model, who did not question the moral assumptions of social organization around work and independence. They strongly criticized the social model's argument that the elimination of barriers would allow disabled people to demonstrate their productive capacity, arguing that it was insensitive to the diversity of disability experiences, since not all conditions of disability allow full autonomy, even with the opportunities under discussion (DINIZ, 2007). Although there are divergences between these two generations of social model theorists, both converge in the understanding that one must fight for the breaking of the barriers present in the social context, which impede the participation of disabled people on equal terms. Moreover, it is not possible to understand the production of knowledge related to disability as a linear process, since several models coexist and produce different effects in the scientific and political fields.

The social model of disability played a major role in the advancement of discussions related to the experience of disability and offered contributions that ultimately reformulated and inspired some legal and political landmarks related to disabled people. One of these legal landmarks was the United Nations Convention on the Rights of Persons with Disabilities (CRPD)[1]. This Convention was built on the view that disabled people are the ones who know what is best for them and should therefore be heard in all actions involving them. As a result of this convention, disability has increasingly been seen as a human rights issue.

The central proposition of the CRPD is to establish a place for disabled people to speak out from their active participation in society by broadening basic rights according to the principles of their elaboration: a) "nothing about us without us", which aims to guarantee the participation and the protagonism of the disabled person in relation to public, educational and other social issues; b) guarantee of non-discrimination and non-oppression in relation to disability; c) guarantee of full inclusion in all social spheres; d) acceptance of disability as part of human diversity, not as a health problem; e) pursuit of equal opportunities in broader terms, be it in the labor market, in education and in the most diverse spheres; f) guarantee of accessibility, aimed at ensuring access to and reducing the social limitations of people with disabilities; g) gender equality, in order that there is no distinction between men and women with disabilities from any social point of view, and, finally, (h) consideration and transformation in conducting the education of children with disabilities, in order to overcome the limitations imposed by the exclusion and propose different forms of education (Amita DHANDA, 2008).

The purpose of the CRPD is to protect and ensure the conditions for the equal enjoyment of human rights and fundamental freedoms for all persons with disabilities and, therefore, it becomes

---

[1] This Convention, approved on December 13, 2006, during the General Assembly of the United Nations in New York, USA, was ratified by Brazil together with its Optional Protocol in August 2008 and incorporated into the Brazilian legal system under the status of constitutional amendment through Decree No. 6,949/2009 (BRASIL, 2009).

a strong instrument of political action insofar as it adds to its legal framework an instrument of research, knowledge and action. The Preamble to the CRPD recognizes that disability is an evolving concept, however, it also stresses that disability results from the interaction between disabled people and behavioral and environmental barriers that impede their full and effective participation in society on an equal basis (BRASIL, 2009). Thus, the expansion of social participation of disabled people may occur by minimizing the barriers that affect them in daily life. One of the elements presented by the theorists linked to the Feminist Disability Studies integrated to the CRPD was the one referring to the intersectionality between gender and disability. This will be the subject of the next topic.

Intersectionality between gender and disability

As we have seen, the union of the theoretical fields of gender and disability contributed to a new way of thinking about disability, enriching the ways of understanding social justice, the constitution of the subject, subjugated knowledge and collective actions (GARLAND-THOMSON, 2002).

In addition, the second generation of the social model of disability began to deepen the understanding of disability as constituted in intersectionality with social markers such as generation, gender, ethnicity, poverty, religion and region. Thus, they aimed to question identity categories, broadening the notions of identity to ensure the viability of public policies that consider the diverse ways of being in the world.

Just as feminist theories sought to expand the view on the category of gender and the related cultural productions and, as a result, contributed to destigmatize the position of women in society, disability studies, influenced by them, also followed in the same direction. Feminist theories allow, according to Garland-Thomson (2002), the questioning and investigation of how culture impregnates meanings in the particularities of the body and what are the consequences of those meanings, i.e., how representations of gender, race, ethnicity, abilities, sexuality and poverty intersectionally construct, infer and contradict each other, producing identities and movements of social oppression.

Feminist disability theorists carefully problematize a wide range of materials and practices that involve the body, and this distinguishes them from other critical theories. They are based on the premises of critical theory which conceives that: representations structure realities; the margins define the center; gender and disability are forms of meaning relations of power; the human identity is multiple and unstable, and all analysis and evaluation have political implications (GARLAND-THOMSON, 2002). Just as race and gender, disability is everywhere, as long as we know how to look at them. This intellectual critique proposed by Garland-Thomson (2002) has a political potential, since it emphasizes that, the same way as gender, race, sexuality and class, to understand how disability operates it is necessary to understand all these existing and changeable crossings in the subjects.

In this sense, Kimberlé Crenshaw (2002) proposes that intersectionality is more than joining two social contingencies. She points out that these crossings are nodal points for the materialization and subjectivation of the dictated conditions, promoting spaces of marginalization and non acceptance of diversity as a historical and social way of life. By introducing this central issue to feminist studies, the author opens conditions for discussing intersections beyond race, and which make it possible to really understand the process of existence as historically and culturally produced (Kimberlé CRENSHAW, 2002).

However, although gender has been incorporated by disability studies as a category of analysis, disability has not yet been incorporated as a category in feminist studies. Garland- Thomson (2002) criticizes that themes that are intrinsic to disability – such as reproductive technology, the place of bodily differences, the particularities of oppression, ethics and care, and the construction of subject – are studied in feminism in isolation, without establishing relationships with the disability experience. For the author, this resistance of unification of the categories gender and disability is due to the fact that there is still a reductionist notion of identity in some feminist studies[2]. In this sense, the author proposes the integration of the disability category in feminist studies and creates a new theoretical landmark: the feminist disability studies[3] (GARLAND-THOMSON, 2002).

The feminist disability theory, therefore, will integrate feminist studies to those on disability, in a political context and of human rights movement to articulate its contributions, regarding the

---

[2] It is understood, in this paper, that the feminist movement extends in several branches that stand differently in relation to concepts and rights dispute.

[3] Feminist Disability Studies is a field of knowledge production that questions the medical discourse that characterizes disability as a flaw, a pathology, or a deficit to be corrected or eliminated and places this category as social and political and proposes the analysis of the disability experience in the context of rights and exclusions. Furthermore, this theoretical landmark: a) understands disability as a system of exclusion that stigmatizes human differences; b) make communities and identities visible, which the bodies that we consider deficient have produced; c) reveals discriminatory attitudes and practices directed at these bodies; d) defends disability as a social category of analysis; e) frames disability as an effect of power relations (GARLAND-THOMSON, 2005).

explicit relation that feminism assumes between the intellectual work and the commitment to create a more equitable and integrated society. For Garland-Thomson, this may be considered an academic area of research and it may be one of the categories of analysis within this diversity, broadening the notions of diversity and deeply integrating the academy and the collective context (GARLAND-THOMSON, 2002).

In a complementary way, feminist disability studies also contribute to the questioning of the constitution of subjects from normative concepts. The studies conducted by Judith Butler (2004) and Eva Kittay (2015) show how our discursive attempts emerge to humanize certain lives and silence others, and how this ends up perpetuating normative violence that privileges some lives to the detriment of others.

From the feminist disability studies, contemporary studies on disability began to occupy a multidisciplinary space, considering the perspectives of medicine, anthropology, sociology and psychology. The varied nature of critical theory of disability studies has led Lennard Davis (2006) to define the contemporary field as dismodernist, in which disability joins other intersections as a point of reflection. For Dan Goodley (2013), critical disability studies begin with it, however, they never end with it: disability is the space from which to think through a range of political, theoretical, and practical issues is relevant to all.

In Brazil, the interface of feminism with Disability Studies has been carried out, above all, by Anis – Institute of Bioethics, Human Rights and Gender.[4] This institution develops training actions and knowledge production around issues of bioethics and disability, in partnership with the research group Ethics, Health and Inequality, of the University of Brasília (UnB). In addition, many scholars linked to the Center for Disability Studies[5] at UFSC have studied the relationship between gender and disability based on an intersectional and political perspective.

In order to broaden and update the studies already published in Brazil, this article intends to present the result of an updated integrative review on the topic of gender and disability at the international level, in order to draw closer the advances of the field of feminist disability studies that have already been carried out internationally to the national scientific production, in the productions of authors linked to the second generation of this model.

Methodological path

The field of disability studies, although quite extensive in the international scenario, is relatively new in Brazil. Anahi Mello and Adriano Nuernberg (2012) produced a similar work to the one proposed here, which aimed to present the intersections between gender and disability discussed until the year 2012. The authors presented the themes resulting from this intersection, based on the second generation of the social model of disability, already based on feminist studies, mostly international. In this work, Mello and Nuernberg (2012) addressed some axes of discussion identified by: a) masculinities, femininities and disability; b) disability, care and feminism; c) corporeality and disability; d) disability, sexuality and reproductive rights; e) gender violence and disability. In order to discuss these axes, the authors highlight the importance of the gender and disability intersection in the field of disability studies, as well as in gender studies.

Based on the aforementioned text, an update was made on the subject covering the period from 2010 to 2015. This text is therefore a result of an integrative review of literature and aims to make an update of knowledge production using the gender and disability intersection as the thematic marker.

As a search descriptor, the term *"feminist disability studies"* was used. The choice of this descriptor is justified by its use in the international scientific literature to refer to feminist disability studies field. The CAPES journal portal was chosen as a database because it is a virtual library that brings together and makes available a wide international scientific production.

Of the 49 articles found, 24 were used for fulfilling the defined inclusion criteria: to specifically investigate issues related to the perspective of "*feminist disability studies*". As an instrument for organizing the collected data, an index card was used. In this card, the authors, the titles, the year of publication, the participants and the main results were listed.

Throughout the process of the present review, the general proposal was to verify correlations that sought to promote some current understandings about the intersection of gender and disability, through the productions of feminist disability studies, using the international database, aiming to produce reflections for the field of disability studies and for feminist studies in Brazilian production and presenting its main findings. It is worth noting that the present article does not intend to exhaust the considerations produced by the original texts, allowing a general understanding of the themes, however, always suggesting the full reading of the referenced papers.

---

[4] The website http://www.anis.org.br presents the objectives and works of this organization.

[5] The website http://nedef.paginas.ufsc.br/ presents the objectives and works of this center.

Thematic axes

Throughout the review, in order to facilitate correlations and reflections, transverse axes have been identified, which specifically address issues discussed by feminist disability studies. Thus, 24 articles were cataloged, which address the following themes: the gaps of feminist studies regarding disability; care and interdependence; sexuality, and new possibilities of intersection. It is important to highlight the publication 'Proliferating Cripistemologies: The Virtual Roundtable', by Robert McRuer and Merri Johnson (2014), which brought together, in a virtual round table, queer, trans, feminist, disability, and black theorists around the question of how can crip epistemology operate. At this table, they debated on what aspects the queer, feminist and disability theories are drawing closer and distancing themselves; the impacts of activism; the captures by neoliberal capitalism that domesticates bodies; the twists and deconstructions in bodies and compulsory identities; among other topics. We believe that this debate deserves to be revisited. In the continuity of this text, we will present some of the findings that refer (and sustain) what was problematized in this article.

Gaps in feminist studies regarding disability

Some productions have interposed the need and relevance of intersectionality between gender and disability. Thus, the following axis summarizes the main ideas and approaches of these articles with respect to the importance of intersectional studies.

Arguing that the concept of sorority[6] has been compelling to think about the links among women in feminist politics, but that often installs an illusory equality among women of different races, sexualities and bodies, Helen Davies (2014) raises questions about the dangers in keeping this fellowship in disability studies. The author affirms that, because they exclude disability as a transverse category of analysis, feminist studies no longer consider important aspects in the process of constitution of identity and subjectivation. Davies (2014) also points out that in using metaphors of bodies – such as monsters, grotesques, and cyborgs – to suggest a transgressive potential in feminist politics, it is often overlooked that such terms often refer to the reality of bodies of disabled people.

In addition, Ashley Taylor (2015, p.194) argues that core issues established by feminism such as reproductive technologies and abortion have different implications for disabled women, whose "existence is called into question by the 'new eugenics'", emphasizing the need for such intersection to foster discussions in all spheres.

Therí Pickens (2015), on the other hand, points to the importance of Judith Butler's analysis of the concepts of precariousness, processes of intelligibility and frameworks that are given to marginalized lives, arguing that they are perfectly compatible with feminist disability studies, evidencing that these concepts are fundamental in this discussion.

In the production of Kim Hall (2015), there is an invitation to reflect on the position of disability and disability studies in feminism and feminist philosophy. According to the author, one of the goals of feminist disability studies has been to make the diversity of disabled life visible and to criticize assumptions on disability concerning feminism (HALL, 2015). Summarizing, she understands that disability plays a role often unrecognized and unauthorized in contemporary feminist analyses. She also points out that analyses with these intersections are vital for feminist philosophy and general philosophy. Hall demonstrates the need to produce a feminism without frontiers, in which the emphasis attributed to the singularities allows the transcendence of the theoretical limits that potentiate a rupture among feminist perspectives.

Care and interdependence

The issue of care appears recurrently in the articles. One of the main issues highlighted is the problematization, proposed by Garland-Thomson, regarding the quality of care as a critical argument against liberal eugenics, in which the choice to improve or eliminate human variations through reproductive and genetic technologies is understood as a matter of individual preference and consumer action, rather than a state public health policy. In this sense, it is explicit that the presence or absence of a disability during pregnancy does not predict the subjects' future quality of life. Care and interdependence are seen by the author as essential to guarantee the quality of life, showing that autonomy is linked to singular needs and that care is seen as a possibility to live better, not as submission or burden. According to Garland-Thomson (2015), we should include and create conditions of possibilities for disabled people, rather than eliminating them before even giving them a chance to live.

Care also emerges in association with the vulnerability of people with disabilities who need caregivers. Anita Silver (2015) problematizes care relationships from a case of aggression of the

---

[6] Sorority is called by Suely Costa (2004) as a mixture of feeling and utopia that has presided over the feminist movements, which are based on a supposed biological identity among women.

caregiver towards the subject of care, proposing, through the notions about aging and disability, the reformulation of justice based on dependency. In her article, the author politically states about the topic of care, discussing the legal issues of this practice and the need for diagnosis to receive the right to care. Furthermore, she is attentive to the complexity of the relationship and feelings between caregivers and people who are taken care of. For Silver (2015), if looked upon with disdain and being ill-treated by others, the self-esteem of people with disabilities are harmed, which may weaken their ability to effectively protest, answering for their own autonomy.

Both Garland-Thomson and Silver, when addressing the subject of care, rely on Eva Kittay's reference (GARLAND-THOMSON, 2015; SILVER, 2015) on the ethics of care based on conceptions of interdependence and social justice, evidencing the importance of the author in the productions regarding this theme.

Stacy Simplican (2015), on the other hand, problematizes the relationships of vulnerability of care with focus on the caregiver, stating that in complex cases of dependency, people who depend on care may find ways to exert power towards the caregiver's vulnerability. In this sense, she offers important reflections about the 'idealization of disability', by which people with disabilities are seen as incapable of becoming aggressive. Simplican (2015) argues that such idealization may be understandable when work regarding disability is situated within a discipline that routinely dehumanizes these people, in which any admission of negative traits apparently provides 'points to the opponent'. For her, the idealized notions of disabled people exclude nonconforming subjects and mask alternative experiences of care. The author expands the notions of dependency, introducing the term "complex dependency" to conceptualize the situations in which caregivers of people with disabilities may experience conditions of vulnerability.

Moreover, Simplican makes sensible reflections about the relationship between caregiver and the person who is being cared regarding the importance of interpreting the needs of others (in case of severe disabilities) and the emotional exhaustion of the caregivers who become the sole responsible for the complex care, since the State is not responsible for this. Based on Kittay's (1999 apud SIMPLICAN, 2015) thinking, interdependence is not a matter of voluntarism and points to the importance of a social structure that can meet the needs of care for the people who depend on it and for the workers that act as caregivers.

Concerning these situations, Simplican relies on Joan Tronto (2010 apud SIMPLICAN, 2015) to demand a care model that is rethought from the complexity and uniqueness that surrounds this relationship, and which points out how to handle and to respond to conflicts that emerge from this relationship without reinforcing the invisibility or vulnerability of caregivers. In this sense, she affirms that the feminist disability theory must also respond to the violence that occurs against caregivers and question how communities may protect and make their lives less precarious. For effective care, we must understand the possible risks that involve various forms of violence and abuse, making our ideals and institutions fit to deal with complex dependency (SIMPLICAN, 2015).

Endorsing this transverse axis regarding care and dependency issues, the article written by Laura Davy (2015) proposes that the feminist disability theory redefines fundamental philosophical concepts, aiming at creating opportunities and deconstructing barriers to the inclusion of people with disabilities. In this regard, the author also criticizes the concept of autonomy, giving relevance and broadening the discussion about interdependence as a form of experience of the disabled person (DAVY, 2015). In this sense, she corroborates the aforementioned study conducted by Kittay (1999 apud DAVY, 2015), which proposes that the ways of experiencing disability go through interdependence relationships that, if guided by the perspective of care, allow the maximum experience of autonomy, promoting the logic of equity.

Laura Back (2015) also makes reference to care and interdependence relations, awakening the reflection about dependence being directed only to first-degree kinship relationships, arguing that this relationship of interdependence is or should be intertwined with the state and public political sphere. She reinforces the need for collective and social support in a comprehensive way to caregivers and care subjects (BACK, 2015). For this argument, the author also relies on the premises on the logic and ethics of care coined by Kittay (1999 apud BACK, 2015).

The study of Margaret Price (2015) draws approximations between queer theory and crip politics, arguing that they are perspectives that, although distinct, show points in common, such as the perspective of the deconstruction of fixed identities, of contingency and flexibility, in order to merge academy and activism, as well as to allow a coalition among the various categories of disability. The author uses the neologism "bodymind" as an attempt to overcome the split between the two instances, arguing its sociopolitical and material constitution amid structural (crossed by power and violence relations) and singular (experiences of subjects) contexts (PRICE, 2015). From these considerations, Price problematizes the relation between desire and pain, desiring and desirable bodies in the context of disabilities, maintaining an intersectional perspective. The acceptance of the pain of the other and the gentleness in/of the care in their unique needs are fundamental in contexts like these (PRICE, 2015).

In summary, it is possible to conclude that the issue of care coined by Kittay (2011) and amplified in the feminist studies linked to the second generation of the social model of disability, comes as a pole of deconstruction of the search for independence and equality so widespread as the fighting flag of disabled people, from the first generation. With regard to care, feminist disability studies, through the premise of interdependence, evidence the complex dependency and its implications on the caregiver-care subject relationship, through political bias, denouncing how much the principle of interdependence requires a wide range of political concerns.

Sexuality

The subject of sexuality is addressed in feminist disability studies with a focus on ensuring the sexual and reproductive rights of disabled people, hitherto marginalized by disabling conceptions.

Tracy De Boer (2015) problematizes social attitudes about body image, sex, and sexuality that hinder sexual expression and sexual opportunities for disabled people. In this sense, the author argues about the choice of disabled people by commercial sex in dialogue with the idea of male domination that permeates this subject. The view of sexual choice that is crossed by the idea of male domination, according to the author, implies that disabled men construct their sexuality (and masculinity) in the same way as non-disabled men do. Despite recognizing the problems relevant to issues of gender and oppression, the author states that such a choice can play an important role for the affirmation of the subject as a sexual being, as well as to promote their sexual inclusion, since this search involves the search by connection, intimacy and pleasure (DE BOER, 2015). Faced with such a scenario, De Boer (2015) states that the reform of 'public feelings', understood by the author as prejudices, myths and fears about the full experience of sexuality of disabled people, is seen as one of the criteria that need to be deconstructed for sexual and affective inclusion.

Another issue addressed in this category concerns maternity of disabled women. Given the belief that disabled women are not able to provide maternal care, feminist disability studies, within the work of Harold Braswell (2015), point to the need to question normative conceptions of maternal care to recognize the diverse and alternative structures of kinship capable of assisting in this care, emphasizing interdependence as one of the alternatives of equity of possibilities. To support this argument, Braswell uses Butler's (2003 apud BRASWELL, 2015) studies on kinship to rethink Donald Winnicot's maternal studies in a critical conception of essentialism and forms of private care.

Another emerging theme in this axis refers to the reproductive choice of women who, in prenatal tests, identify 'anomalies' in fetuses. Alison Piepmeier (2015) aimed to understand the reproductive decision process of these women, evidencing that, although all of them identified themselves as mothers, they had difficulty deciding whether to maintain the pregnancy or to perform an abortion. However, Piepmeier (2015) found that most women opted for the continuity of pregnancy. The insights of this study allow reflections that incorporate feminist disability studies as far as the decision to continue the pregnancy, the right to abort, as in the understanding of the precariousness of a life that differs from the normative standards to the point of not being able to become a life.

Besides Piepmeier (2015), Catherine Mills (2015) also offered important reflections on the reproductive choice regarding the determinations made on fetuses with morphological anomalies. Using the reflections made by feminist studies on gender selection during pregnancy, the author states that a disabled fetus may be considered a normal pregnancy if we question the binary and normative models that cross social discourse. She concludes that the recognition of this indecision may be necessary for the responsible evaluation of the ethics of selective interruption (MILLS, 2015).

Within this same thematic axis, articles have emerged that point out the contributions of crip and queer[7] theories to disability studies. While acknowledging the fruitful intersection between queer and disability studies, Merri Johnson (2015) argues that queer theory is reluctant to address disability significantly. In addition to the classical classifications or the terminologies used by queer theorists, Johnson (2015), based on criticism of other thinkers and her own experience, problematizes the invisibility of certain disability conditions, especially mental disorders, to queer theory. She establishes a critical coalition between crip feminist theory and the 'queer-of-color' theory to promote a materialist and practical politics so as to recognize minority subjectivities rather than exploit them only in their metaphorical resonance (JOHNSON, 2015). The author concludes that crip feminist analysis must, once and for all, recognize the pleasures of 'flaw' – embodied in the choices to be placed apart from the normative markers of gender, sexuality, reprocentricity[8] and affiliation. In this sense, Johnson (2015) calls for a 'better romance' to emerge between crip and queer theories, especially with regard to the analysis of the differences between these two by feminist disability studies.

---

[7] Theoretical-political movements that become part, become more visible, as certain subjects seek to position themselves in specific ways (such as women, gays/lesbians, disabled people) and, consequently, create their own spaces for these positions to make sense (feminisms, gay/lesbian studies, queer, disability studies/theory, crip theory).

[8] The term reprocentricity may be characterized as a reproduction-related norm.

Another analyzed article was the one written by Joshua St. Pierre (2015), which, from what the author calls a feminist, queer and crip phenomenology, problematizes the place of the stuttering body and its temporality and (im)possibility of recognition when disturbing the normalized choreography of communication based on the 'straight-masculine time' hegemony. The author argues about the existence of a future-oriented linearity, captured from the body's time flow and how much this disrupts the performance of men with disabilities on their masculinities, because they are considered interrupted or diminished. For the author, the 'time clock' disciplines the subjects to move in standardized and efficient movements. By 'disturbing' this choreography of time, the disabled person is not recognized in his or her own voice (ST. PIERRE, 2015). Faced with this, St. Pierre (2015) states that subjects with disabilities are able to transform the established communicative space, not allowing imposed time control, but accentuating the 'co-constitution' of being. The author's proposal to deconstruct the 'straight-masculine time' is an existential opening: an invitation to guide within a non-productive present, as well as a call for the subjects to take responsibility for their role in creating a common horizon, aiming at the subsequent release of the voice of the disabled person, i.e., within a future of crip studies (ST. PIERRE, 2015).

Assuming this experience of diversity, the binary axes of capacity/disability – cisgender/transgender are pointed out by Alexandre Baril (2015) in order to question the boundaries between a transgender experience and a transabled one (voluntary modification of the body in order that it has some disability). The author identifies two aspects that prevent the conceptualization and placement of the two categories in the same segment: firstly, because trans studies do not assume the possibility of a trans identity with disability; secondly, because disability studies assume a cisnormative identity of persons with disabilities. The author then criticizes this logic of production in these two fields, emphasizing the difficulties in recognizing the intersections between these phenomena, once they are given by the normative attribution between sex/gender and cisnormativity and, simultaneously, by a normative interpretation of non-disability. By making relations between the two complex fields through deconstruction in naturalized norms, he seeks to draw closer and intensify dialogue between studies and trans social movements and those of disability (BARIL, 2015).

Margrit Shildrick, starting with Donna Haraway's (1990 apud SHILDRICK, 2015) question – "why should our bodies end at the skin?" - explores the foundations of the senses to re-evaluate the multiple and variant forms of existence. She relies on Gilles Deleuze and Jacques Derrida and their conceptions on the positioning of celebration of difference and 'transcorporeality' as the very conditions of life, producing discussions on the various forms of bodies in the world, including disability and its surroundings as diverse and transcorporeal expressions (SHILDRICK, 2015).

It was also found an article that proposes the unification between disability studies and LGBT studies[9] from a post-racial and post-spatial perspective, constructing and producing critical engagement with visibility discourses and their followers of post-racial and post-spatial ideologies, corroborating the creation of a new theoretical panorama in feminism. Carly Thomsen (2015), through the analysis of speeches of disabled and LGBT activists, illustrates how the search for visibility of the discourses by both categories produces as effect the invisibility of certain material bodies intersected by the markers of race and geographic space. The author proposes the creation of a feminist transforming theory of disability and practice, which should have as premise the rupture with fixed understandings about identities and with the hierarchy of oppression. This theory must be based on the belief that alternative modes of operating in the world (including those beyond the outside) are actually possible (THOMSEN, 2015).

Sexuality is always a delicate subject, and it is not done differently in disability studies; it is an arduous task to envisage the deconstruction of the prejudices around this theme. The pertinent issues to the studies on sexuality, sex and other issues that permeate this intersection are perceived in the aforementioned studies as a source of prejudice, taboos and myths. Thus, the deconstruction of normalizing narratives becomes fundamental in the process of guaranteeing sexual and reproductive rights.

New intersections

In this axis, innovative correlations are evidenced within feminist disability studies. Anna Mollow (2015) associates fat studies to disability studies and argues about the importance of the contributions of feminist disability studies to think about obesity and vice-versa, since obesity crosses the cultural imaginary as well as disability, creating social barriers in a similar way. For the author, the same ways that exist to rehabilitate disabled people to fit the society are seen in relation to obesity, crossed by the discourse of health and the need for diets and surgical procedures in order that these people may be considered as normative within the context, which generates suffering and rejection of human diversity (MOLLOW, 2015). Based on the author's reflections, we may say that

---

[9] Term used by the author in the original article.

the medical model of disability produces similar effects on the obese population, considering them "defective" and recommending their rehabilitation to fit normative standards.

Another study, carried out by Diane Herndl (2013), also of peculiar nature, refers to the BRCA[10] diagnosis as a form of identity, and talks about the influence of diagnosis as a narrative structure that may frame the person in a history of illness that it is not the case yet. When a subject discovers to be BRCA positive, cancer is not only a potential, however, it becomes a part of the identity. The author uses stories about this test to clarify a definition of post-human as existing in the intersection of bodies, technologies and narratives. In this sense, the term post-human emerges as a form of technologization of bodies. Using feminist disability theories to frame these stories, the possibility of understanding the transformations emerges for these subjects, designated as beings of the future, in the post-human logic (HERNDL, 2013).

Ashley Taylor (2015) proposes the association between race and intellectual disability, evidencing an existing relationship between the two categories, since black people are often considered non-intellectualized and, therefore, silenced in academic discourses. Thus, Taylor (2015) argues that when academic discourse does not problematize the social issue of intellectual disability associated with race, it reproduces the pathological discourse that forms the barriers of oppression and marginalization. The author calls this 'racialization of intellectual disability'. According to her, the academy must be careful to privilege 'capable minds' and their association with the enhancement of racial identity to be protected against easy mistakes in the discourse of pathology (TAYLOR, 2015).

In these new crossings that have emerged, it is understood as important to look at the bias of care and interdependence on these subtle margins. Thus, it will be possible to visualize all expressions of human diversity.

In an elaboration on social inclusion, Amber Knight (2015) examines, in her production, the necessary and significant conditions, within a deliberative democracy, proposed as a way for carrying out inclusion. The analysis concludes that a true inclusive and multicultural democracy requires the redistribution of wealth and a broader model of political deliberation, which recognizes unconventional (even nonverbal) modes of communication, through translation practices (KNIGHT, 2015). The author states that listening to disabled individuals is fundamental for the construction of public policies adequate to their social reality.

Finally, these issues that intertwine inclusion in different contexts will enable new understandings and expand themes already discussed in the intersectional field of disability and gender studies. In summary, these productions aim to problematize the exclusion resulting from the social appropriations of normativity and the frameworks they designate.

Final considerations

The field of feminist disability studies emerges with the aim of breaking the historical division between gender and disability. Until then, this division was present both in gender studies – which did not include disability as a category of analysis – and in disability studies – whose authors of the first generation of this model did not consider gender, race, generation and other social markers of differences as constituent elements of the disability experience.

Based on the assumption that different models of understanding disability have social and political effects, an important contribution of feminist disability studies was to show that the framework of disability based on the biomedical model produces oppression and vulnerability, rendering the conditions of existence of disabled people precarious. This is because this model, when establishing a normative body standard, renders unintelligible the corporealities that escape this model. In addition, the biomedical model, by establishing a pattern of normal sexual response, corroborates the process of transforming disabled people as asexual, limiting the sexual and reproductive rights of this social group.

As seen throughout the text, the field of feminist disability studies offers important contributions to the social and human sciences as well as to the production of public policies that have the potential to consider/include all forms of being in the world. One of these contributions is to expand the notions of identity to ensure the viability of public policies that consider the various forms of existence. Another contribution regards the concern to make non-normative lives more intelligible, especially those of disabled women who suffer from a double condition of oppression and vulnerability. The defense of disability as a category of analysis is also presented as a contribution with an important analytical and political potential.

Feminist disability studies also point to important contributions regarding the precariousness of life, the interdependence as a constituent element of human relations, and the importance of the right to care as an ethical principle of social justice. Therefore, the critique of the modern notion of

---

[10] BRCA (breast cancer) is a human gene that belongs to the class of genes known as tumor suppressor genes, which regulates the cell cycle and prevents uncontrolled proliferation.

independence appears as a central axis in the intellectual production of many authors. Furthermore, considering the principle of interdependence, there is a tendency to argue that care should no longer be thought of as something reduced to the private sphere, encompassing the public sphere and also provided by social policies.

The fights of the Disability Rights Movement draws closer to the fights of the feminist and lesbian, gay, bisexual, transvestite, transsexual, transgender and intersex movements when they question the construct of the body as a natural datum that precedes the construction of the subjects. We understand that the denaturation of the body has the political potential to show that the experiences of these social groups are marked by power relations anchored in the norm, producing deviation and denying the condition of humanity.

References

BACK, Laura. “Private dependence, public personhood: Rethinking ‘nested obligations’”. *Hypatia*, v. 30, n. 1, p. 115-131, fall 2015.

BARIL, Alexandre. “Needing to acquire a physical impairment/disability: (re)thinking the connections between trans and disability studies through transability”. *Hypatia*, v. 30, n. 1, p. 30-48, fall 2015.

BRASIL, Decreto n. 6.949, de 25 de agosto de 2009. Promulga a Convenção Internacional sobre os Direitos das Pessoas com Deficiência e seu Protocolo Facultativo, assinados em Nova York, em 30 de março de 2007. [Publishes the text of the Convention on the Rights of Disabled People and its Optional Protocol, signed in New York on March 30, 2007]. *Diário Oficial da União*, 26 de agosto de 2009, seção 1, p. 3.

BRASWELL, Harold. “My two moms: disability, queer kinship, and the maternal subject”. *Hypatia*, v. 30, n. 1, p. 234-250, fall 2015.

BUTLER, Judith*. Precarious Life: The Powers of Mourning and Violence*. London: Verso, 2004.

COSTA, Suely G. “Movimentos feministas, feminismos”. [Feminist movements, feminisms]. *Rev. Estud. Fem*. v. 12, n. spe., p. 23-36, 2004.

CRENSHAW, Kimberle W. “A intersecionalidade da discriminação de raça e gênero”. [The interseccionality of race and gender discrimination]. *In*: VV.AA. *Cruzamento*: *raça e gênero*. Brasília: Unifem, 2002. p. 7-16.

DAVIES, Hellen. “Uncomfortable connections? Conjoined sisterhood in contemporary women’s writing”. *Contemporary women’s writing*, v. 8, n. 3, p. 409-427, nov. 2014.

DAVIS, Lennard. J. “Constructing normalcy: The bell curve, the novel, and the invention of the disabled body in the nineteenth century”. *In*: DAVIS, Lennard. J., *The disability studies reader*. New York: Routledge, 2006, p. 22-35.

DAVY, Laura. “Philosophical inclusive design: intellectual disability and the limits of Individual autonomy in moral and political theory”. *Hypatia*, v. 30, n. 1, p. 132-148, 2015.

DE BOER, Tracy. “Disability and sexual inclusion”. *Hypatia,* v. 30, n. 1, p. 66-81, 2015.

DHANDA, Amita. “Construindo um novo léxico dos direitos humanos: Convenção sobre os Direitos das Pessoas com Deficiências”. [Constructing a new human rights lexicon: Convention on the Rights of Persons with Disabilities]. *SUR - Revista Internacional de Direitos Humanos*, v. 5, n. 8, p. 42-59, 2008.

DIAS, Sueli de Souza; OLIVEIRA; Maria Cláudia Santos Lopes de. “Deficiência intelectual na perspectiva histórico-cultural: contribuições ao estudo do desenvolvimento adulto”. [Intellectual disability according to the cultural-historical approach: a path to adult development].*Revista Brasileira de Educação Especial*, v. 19, n.2, p. 169-182, 2013.

DINIZ, Débora. *O que é deficiência*. São Paulo: Brasiliense, 2007.

GARLAND-THOMSON, Rosemarie. “Integrating disability, transforming feminist theory”. *NWSA Journal*, v. 14, n. 3, p. 1-32, 2002.

GARLAND-THOMSON, Rosemarie. “Feminist Disability Studies”**.** *Signs,* v. 30, N. 2, p. 1557- 1587, 2005.

GARLAND-THOMSON, Rosemarie. “A habitable world: Harriet McBryde Johnson’s ‘case for my life’”. *Hypatia*, v. 30, n. 1, p. 300-306, 2015.

GESSER, Marivete; NUERNBERG, Adriano Henrique; TONELI, Maria Juracy Filgueiras. "A contribuição do modelo social da deficiência à psicologia social". [The contribution of the social model of disability to the social psychology]. *Psicologia & Sociedade.* v. 24, n. 3, p. 557-566, 2012.

GOODLEY, Dan. "Dis/entangling critical disability studies". *Disability & Society*, v. 28, n. 5, p. 631–644, 2013.

HALL, Kim. "New conversations in feminist disability studies: Feminism, philosophy, and borders". *Hypatia*, v. 30, n. 1, p. 1 -12, 2015.

HERNDL, Diane Price. "Virtual cancer: BRCA and posthuman narratives of deleterious mutation". *Tulsa Studies in Women's Literature*, v. 32, n. 2, p. 25-45, fall 2013.

JOHNSON, Merri L. "Bad Romance: A crip feminist critique of queer failure". *Hypatia*, v. 30, n. 1, p. 251-267, nov. 2015.

KITTAY, Eva F. "The ethics of care, dependence, and disability". *Ratio Juris*, v. 24, n. 1, p. 49–58, 2011.

KITTAY, Eva F. "Centering Justice on Dependency and Recovering Freedom". *Hypatia*, v. 30, n. 1, p. 285-291, 2015.

KNIGHT, Amber. "Democratizing disability: achieving inclusion (without assimilation) through 'participatory parity'". *Hypatia*, v. 30, n. 1, p. 97 -114, 2015.

MCRUER, Robert; JOHNSON, Merri Lisa. "Proliferating cripistemologies: A virtual roundtable". *Journal of Literary*, v. 8, n. 2, p. 149-169, 2014.

MELLO, Anahi; NUERNBERG, Adriano. "Gênero e deficiência: intersecções e perspectivas". [Gender and disability: intersections and perspectives]. *Revista Estudos Feministas*, v. 20, n. 3, p. 635–655, 2012.

MILLS, Catherine. "The case of the missing hand: gender, disability, and bodily norms in selective termination". *Hypatia*, v. 30, n. 1, p. 82-96, 2015.

MOLLOW, Anna. "Disability studies gets fat". *Hypatia*, v. 30, n. 1, p. 199-216. 2015.

PICKENS, Therí. "Octavia Butler and the aesthetics of the novel". *Hypatia*, v. 30, n. 1, p. 167-180, 2015.

PIEPMEIER, Alison. "Would it be better for her not to be born?: Down Syndrome, prenatal testing, and reproductive decision-making". *Feminist Formations*, v. 27, n. 1, p. 1-24, spring 2015.

PRICE, Margaret. "The bodymind problem and the possibilities of pain". *Hypatia*, v. 30, n. 1, p. 268-284, winter 2015.

SHAKESPEARE, Tom. "The social model of disability". *In*: DAVIS, Lennard. *The disability studies reader.* New York: Routledge, 2006, p. 216-223.

SHILDRICK, Margrit. "'Why should our bodies end at the skin?': Embodiment, boundaries, and somatechnics". *Hypatia*, v.30, v. 1, p. 13-29, winter 2015.

SILVER, Anita. "Becoming Mrs. Mayberry: Dependency and the right to be free". *Hypatia*, v. 30, n. 1, p. 292-299, winter 2015.

SIMPLICAN, Stacy Clifford. "Care, disability, and violence: Theorizing complex dependency in Eva Kittay and Judith Butler". *Hypatia*, v. 30, n. 1, p. 217-233, winter 2015.

ST PIERRE, Joshua. "Distending straight masculine time: A phenomenology of the disabled speaking body". *Hypatia*, v. 30, n. 1, p. 49-65, winter 2015.

TAYLOR, Ashley. "The discourse of pathology: Reproducing the able mind through bodies of color". *Hypatia*, v. 30, n. 1, p. 181-198, winter 2015.

THOMSEN, Carly. "The post-raciality and post spatiality of calls for LGBTQ and disability visibility". *Hypatia*, v. 30, n. 1, p. 149-166, winter 2015.

Ruthie Bonan Gomes (rbgomes89@gmail.com). Master in Psychology from UFSC. Develop studies on disability at the intersection with education and gender. Bachelor of Psychology from the University of Caxias do Sul. She also works as a Clinical Psychologist for young children with Autism.

Paula Helena Lopes (paulahelenalopes.phl@gmail.com). Master in Psychology from UFSC. Currently working as an associate psychologist at CRP 12, representing the referred entity in the State Council of Women's Right of Santa Catarina - CEDIM, working on the following topics: gender, disabilities, aging and psychological violence.

Marivete Gesser (mariveteg@gmail.com). PhD in Psychology at UFSC. Full Professor of the Department of Psychology at UFSC, where she works in the undergraduate Course of Psychology and in the Graduate Program in Psychology. She is also the coordinator of the Center for Disability Studies and a member of the School and Educational Psychology Laboratory. She is interested in the following subjects: disability studies, inclusive education, public policies and human rights.

Maria Juracy Filgueiras Toneli (juracy.toneli@gmail.com). PhD in School Psychology and Human Development at USP. Full Professor of the Department of Psychology at UFSC, where she works in the Graduate Program in Psychology and is the coordinator of the Margens Research Group. She works in the area of Psychology, with emphasis in Social and Institutional Psychology, with interest in the following topics: gender, feminisms, masculinities, sexual and reproductive health, diversity and sexual rights, gender violence, travestilities and transsexualities.

HOW TO QUOTE THIS ARTICLE, IN ACCORDANCE WITH THE RULES OF THE JOURNAL

GOMES, Ruthie Bonan; LOPES, Paula Helena; GESSER, Marivete; TONELI, Maria Juracy Filgueiras. “Novos diálogos dos estudos feministas da deficiência”. *Revista Estudos Feministas*, Florianópolis, v. 27, n. 1, e48155, 2019.

CONTRIBUIÇÃO DE AUTORIA

Ruthie Bonan Gomes - Concepção. Coleta de dados, Análise de dados, Elaboração do manuscrito, revisão e aprovação da versão final do trabalho.

Paula Helena Lopes - Concepção. Coleta de dados, Análise de dados, Elaboração do manuscrito, revisão e aprovação da versão final do trabalho.

Marivete Gesser - Concepção. Análise de dados, Elaboração do manFinanciamentouscrito, revisão e aprovação da versão final do trabalho.

Maria Juracy Filgueiras Toneli - Concepção. Análise de dados, Elaboração do manuscrito, revisão e aprovação da versão final do trabalho.

FINANCIAMENTO

O presente trabalho foi realizado com apoio da Coordenação de Aperfeiçoamento de Pessoal de Nível Superior - Brasil (CAPES) - Código de Financiamento 001.

CONSENTIMENTO DE USO DE IMAGEM

Não se aplica

APROVAÇÃO POR COMITÊ DE ÉTICA EM PAESQUISA

Não se aplica

CONFLITO DE INTERESSES

Não houve conflito de interesses.

LICENÇA DE USO

HISTÓRICO

Recebido em 13/12/2016
Reapresentado em 14/06/2018
Aprovado em 01/08/2018