Eve Lacey


In *Feminist Queer Crip*, Alison Kafer endeavours to re-politicise disability and its relations to gender and sexuality. This entails a thorough examination of the ways in which time can be or become 'crip' – a critical term for 'imagining bodies and desires otherwise' – with a focus on those bodies that won't grow, age, labour or reproduce according to normal standards of growth and productivity.1 Kafer also examines bodies that are visually reproduced, or omitted, to facilitate the production of a political agenda, and how the continual reproduction of the able-bodied norm may be challenged or undone. She writes with an acute awareness of intersectionality and her understanding of reproductive politics repeatedly challenges ableist notions of care, future, and productivity. She first identifies problems with the medical model of disability, which constructs a timeline that can only lead to cure or failure, and with the social model, which risks ignoring the lived realities of pain until 'cure becomes the future no self-respecting disability activist or scholar wants' (p. 7). Kafer then arrives at a political and relational stance, one which prioritises coalition over diagnosis and which recognises that disability 'does not occur in isolation' (p. 8). Her relational model takes into account partnerships with carers and attendants and assisting animals, and a focus on political allegiance allows room for Robert McRuer's theory of a 'non-disabled claim to crip': an expansive identity politics which extends beyond diagnostics and towards the deconstructive principle that everyone is, has or will be disabled, and so has a stake in dismantling the able-bodied ideal.2 The bounds of these relations move from the social to the temporal – *Feminist Queer Crip* suggests that disability occurs in time, or out of it, and is often marked by a rupture in the rhythm of ableist lifetimes.

Kafer's methodology is questioning and inviting. She scrupulously marks every point of limitation in her own arguments, and continually offers their tenets up for debate. She is also attentive to the assumptions that other scholars take for granted, and questions Judith Halberstam's critique of the heteronormative desire for longevity '(under any circumstances)'.3 Kafer highlights this parenthesis as an instance in which the able-bodied 'we'

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is assumed to be self-evident: everyone is in agreement that some states of impairment are worse than death, so much so that the thought need not be properly explained, but merely euphemised in brackets and a gesture towards able-bodied commonality. It is this claim to self-evidence that Kafer seeks to unsettle and redress with Judith Butler's faith in imagination and the 'critical promise' of fantasy that allows us 'to imagine ourselves and others otherwise.'

Throughout the book, Kafer searches for a crip teleology. She challenges Lee Edelman's exclusively queer temporality and views (re)productivity through the lens of disability. For many, having a disability is synonymous with having no future, or having no future unless cured, and time is split into before and after an acquired impairment. Kafer uses Noam Ostrander's study of African-American men in Chicago to note that, for some disabled people, impairment is simply the sign that they had nothing to lose, or never had a future in the first place. Where heteronormative time constantly archives for a future that promises employment and marriage and children, crip time, Kafer argues, comes in fits and bursts, with the urgency of an epidemic and the delays of a disabling society. No-futurity is weighed against the extra time taken when impairment makes tasks more laborious, social infrastructures make processes more costly, inaccessible buildings take time to navigate and ableist social encounters require time for pause and recovery.

Kafer examines the temporal disjunctures that mark people as disabled through the case study of Ashley X. Ashley X was diagnosed with static encephalopathy soon after her birth: her cognitive or neurological faculties stopped developing at six months while her body continued to grow apace. Ashley's doctors and parents responded to this disjunction with oestrogen treatment – which caused Ashley's bones to fuse and stop growing – combined with a hysterectomy, a bilateral mastectomy and an appendectomy. The surgery was justified on the grounds of imagined pain, but Kafer notes that, in an instance of 'ableist forgetting' and the erasure of crip desire, no thought was given to the potential pleasure that Ashley might gain from a post-pubescent body (p. 138). Ashley X's hysterectomy was not presented as sterilization. The doctors and lawyers argued that it was merely the by-product of the Treatment's primary aim: to cease Ashley's growth so that her parents may always carry her, and to 'save' her from the pain of breast growth and menstruation. Kafer suggests that this oversight was founded on another claim to self-evidence: Ashley X's womb had no reproductive future, and so its loss was no great shame.

Advocates of the Treatment responded to disability activists' outrage at the
sterilization with the defence that Ashley, a 'pillow angel', did not qualify as a disabled person; rather, she was 'unabled'. This alarming new category is perhaps the starkest example of the de-politicisation of disability: Ashley is quarantined from the campaign for her rights when those who would make decisions on her behalf seek to present their actions as self-evident and beyond critique. The category of disability is troubled again with the consideration that Deaf people are not disabled but instead part of a linguistic and cultural minority. This is the problem that leaves Kafer most uncertain, the flip side of McRuer's 'non-disabled claim to crip': all those people with impairments – low sight, low hearing, temporary and chronic illnesses – who do not identify as disabled. Here, Kafer notes, the decision to define an identity group by political allegiance rather than diagnosis falls short, or at least risks losing as well as gaining numbers. Mourning for lost support, or a lost cause, pervades Kafer's analysis of the Ashley X Treatment, and the sense of time gone wrong stretches to her own despair: 'Finally, Ashley has run out of time. We are too late to stop the Treatment, too late to interrupt this representation of her as endangered by her future self or as embodied asynchrony' (p. 66).

The case of Duchesneau and McCullough raises questions of criping reproductive rights from a different perspective. When a lesbian couple elected a Deaf sperm donor in order to increase their chances of bearing a baby just like them, their choice was met with outrage. Kafer examines the ways in which homophobia intersected with ableism in the vitriolic response to this case, and wonders whether the choice would have seemed so calculated or so cruel had the conception of a Deaf child been 'natural', between a Deaf man and a Deaf woman. Duchesneau and McCullough's decision was perceived as wrong on two counts – their reproduction was both queer and crip – but nevertheless they managed to subvert the bias of foetal genetic testing, to pose a non-reproductive challenge to the able-bodied norm and to expose the extent to which reproductive rights are always already curtailed for those who would choose or desire disability.

With a nuanced study of technological time, Kafer revisits Donna Haraway's 1985 essay and challenges any easy alignment between cyborgs and crips. This equation, she argues, veers dangerously close to a curative temporality in which technology is seen as a 'fix' for the 'problem' of disability. Not only does this reading fail to take into account the lived reality of prosthetics and the potential pain of adaptive technologies, it also serves to further alienate people with disabilities from the realm of the natural. However, Haraway's theory is too good to abandon completely, and Kafer calls for a renewed critical study of the cyborg as human-
animal or human-human hybrid, an interdependency that is more thoroughly political and relational, and which incorporates carers and attendants into a wider identification with crip.

The dangers of characterising people with disabilities as more cyborgian than the rest become all the more apparent in the following chapter, when Kafer's study of natural parks suggests that trails remain inaccessible because ableist thinking aligns assistive technologies with man-made destruction of the environment and intimates that the only humans who may enjoy nature responsibly are those who require no additional mechanised equipment. Slopes are no more assistive than stairs, and a trail need only be a few inches wider for a wheelchair than a footpath: it is the political, rather than the medical or ecological, that hinders accessibility in the great outdoors.

Kafer closes with an examination of the terrain still uncovered, the places where disability studies have not yet intervened. She highlights the untrodden ground of environmental justice, not just in terms of accessible natural parks but in combating polluting companies without deploying disability as a scare tactic for the campaign. She calls for further examination of the ableist bias in genetic counselling, and for the deconstruction of the pro-life/anti-abortion dichotomy, in which both sides deploy the spectre of future disability to further their cause but undermine individual women's decisions. Kafer's appendices offer the 'hopeful horizon' of trans/gender accessibility that arises from the politics of the public toilet and proposes reproductive rights as a site of potential coalition for feminist queer crips; her closing remarks anthologise the work done so far to show that the category of disability is myriad and that its scholars are legion (p. 16). There is solidarity in her summation and hope in the promise of re-imagined futures that allow for time lost and gained, time slowed to a standstill and cut to the quick.

2 McRuer, p. 36.

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References


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