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Paul Banahene Adjei

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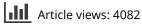
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# The (em)bodiment of blackness in a visceral anti-black racism and ableism context

Paul Banahene Adjei

School of Social Work, Memorial University of Newfoundland, St John's, Canada

### ABSTRACT

Over the years, many scholarly publications have extensively discussed disability'diagnoses' and placement practices in special education programs in the United States and the United Kingdom. These publications argue that racism and classism rather than clinically predetermined factors appear to influence the disability diagnosis and placement practices in special education. The present essay is contributing to the debate by critically exploring the relationship(s) between race, class, and disability 'diagnoses' and placement practices in special education programs in Toronto, Canada. The core ideas noted in the essay are drawn from a personal story of an African-Canadian parent – a story of a daughter with a diagnosed disability and her mother's struggle to resist the disability 'diagnosis' as well as her battle rejecting her daughter's placement in the special education program in a Toronto public school. Using this personal account, other literature, and anti-black racism theory, I argue that special education programming in Toronto, Canada helps white middle/upper class Canadians achieve a de facto race/class-based segregation in the Toronto public school system. Whereas the Supreme Courts' rulings on Brown vs. the Board of Education in the United States and Washington vs. the Trustees of Charlottesville in Canada have insisted that whites and non-whites attend the same school, special education identification practices ensure that whites and non-whites do not have to belong to the same classroom. I conclude that when educational practices move into spaces of pathologization, blacks and working-class students are continually at risk of facing exclusionary practices. One thing is clear: the significance of skin color in the mind of the racist cannot easily be dismissed.

### **ARTICLE HISTORY**

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Anti-black racism; anti-black racism; whiteness; blackness; special education; disability 'diagnoses' and placement practices; embodiment

# Introduction

Over the years, many scholarly publications have extensively discussed disability 'diagnoses' and placement practices in special education programs in the United States and the United Kingdom (see Hilliard 1987; Gillborn and Youdell 2000; Artiles, Harris-Murri, and Rostenberg 2006; Harry and Klingner 2006; Thomas and Loxley 2007). In recent issue of this very journal, *Race Ethnicity and Education*, essays have been published about the significant roles of race, class, and ethnicity in determining disability 'diagnoses' as well as students' placements in special education classrooms in the United States. In 'Dis/ability critical race studies (DisCrit): Theorizing at the intersections of race and dis/ability,' Annamma, Connor, and Ferri (2013) argue that there is a long held historical belief in the United States about race and ability, and that this belief influences disability 'diagnoses' as well

as enrollment processes in special education programs. Given the historical and contemporary use of race and ability in determining disability 'diagnoses,' the authors call for a new theoretical framework (that is, DisCrit) that incorporates a dual analysis of race and ability. Ferri and Connor (2014) also document ways in which race and social-economic class influence disability 'diagnoses' and outcomes in the education system in the United States. Finally, Dávila (2015) notes in his ethnographic study that there are racial microaggressions targeting Latina/o students in special education programs. What appears common and consistent in these publications is the suggestion that not only are racism and classism present in disability 'diagnoses,' but that these isms determine enrollment processes in special education programs in the United States.

This essay adds to the debate by attempting to explore the relationship(s) between race, class disability 'diagnoses,' and placement practices in special education programs in Toronto, Canada. The core ideas presented in the essay are drawn from the personal story of an African-Canadian parent, whose daughter was diagnosed with a disability, and her struggle to resist the 'diagnosis' as well as to reject her placement in the special education system in a Toronto public school. Using her story, other literature, and anti-black racism theory, I attempt to explore the following questions: (i) When we engage race, class, and disability through (em)bodied knowledge, what are the ontological and epistemological risks and tensions we inhabit? (ii) In what ways do disability 'diagnoses' succeed in concealing and conveying messages that racialized students, in particular, black students are 'other' to normalcy? (iii) In what ways do the language of ableism help naturalize certain contentions that some human beings are not simply 'human' enough?

The term 'knowledge embodiment' is used in this essay as a socially and discursively constructed form of knowledge acquisition associated with the habitation of a particular identity - in this context, identity of blackness. I acknowledge the limitation of using one person's narration to explore racism in disability 'diagnoses' and placement practices in special education programs in Toronto. As Riessman (2013) rightly notes, it is important to consider the nature of personal narration and the fact that such narratives do not assume objectivity. By solely considering an individual's personal story, one's own positionality and subjectivity become privileged. Yet, as Connor (2006) aptly notes, individuals' personal narratives can act to elevate ordinary occurrences to important experiences that are worthy of study and deliberation. The recognition of a personal narrative as a legitimate source of knowledge has political implications because it gives voices to ordinary people, whose lived experiences and stories have been silenced in our society (Langellier 1989). David Connor (2006, 155) reiterates, 'In many respects, a personal narrative is an authentic, political form of self-representation that holds power to promote change? For Richardson (1990, 65), the personal narrative 'is the closest to the human experience, and it rejuvenates the sociological imagination in the service of liberatory civic discourses and transformative social projects. Through the communication of personal accounts, racialized people are in a position to share their racist experiences to white and non-white audiences (Delgado 1995).

This essay is not the first to utilize one person's narrative to speak to the presence of racist and ableist ethos in special education. Jasmine Lavine, a racialized mother living in New York, has drawn upon her own experience of challenging the disability 'diagnosis' of her son to write about racism and ableism targeting black students in the public school system in the United States (Lavine 2010). Elliot Shelton has also used his personal experience as a former special education student to draw attention to the ways in which disability 'diagnoses' are utilized to segregate black students to special education classroom in the United States (Shelton 2006, 3). David Connor has equally expended the personal narrative of Michael, a black working-class young man, to discuss life-after-school for those individuals who are 'diagnosed' with learning disabilities and placed in special education programs (Connor 2006).

Although these cited essays were written from one person's narrative, they are significant in shedding light on the role of racism and classism in disability 'diagnosis' and placement in special education program. This essay also utilizes the personal narrative of a research participant to explore relationship between racism, classism, and the disability diagnosis in special education program in Toronto public school. In the follow-up discussion, I theorize experience of blackness in anti-black racism and ableism context.

# Theorizing black experience in anti-black racism and ableism context

In *black Skin, white Mask*, Frantz Fanon recounts a conversation between his brother and a veteran of the Pacific War who has lost his two limbs to the war: 'The crippled veteran of the Pacific War says to my brother, 'Resign yourself to your color the way I got used to my stump; we're both victims' (Fanon 1967, 140). In this section, I use the comment of the veteran of the Pacific War to lead a conversation about the experience of blackness in a context of visceral anti-black racism and ableism. I propose two possible interpretations of the veteran's comment: First, the embodiment of blackness in anti-black racism context. Second, the institutional pathologization of blackness makes it a form of disability in anti-black racism and ableism contexts. I expand these two deductions in the discussion that follows.

#### The embodiment of blackness is epistemic violence

In what appears to be a critique of Merleau-Ponty's (1962) theory of bodily perception, Fanon (1967) argues that in a visceral anti-black racism context, Merleau-Ponty's theory of normative universal corporeal schema is not applicable. If anything, the theory of universal corporeal schema seems to function solely in the world of the white middle/upper class, heteronormative, able-bodied male. On the contrary, in the anti-black racism context, there are other schemas – 'historico-racial schema' (Fanon 1967, 111) and a 'racial epidermal schema' (Fanon 1967, 112) – that black people have to endure. These schemas affect and shape black people's tacit sense of selves. Fanon (1967, 12) describes this experience as 'psycho-existential complex'; Du bois (1901) calls it 'double consciousness' and Asante (2007) describes it as a 'tortured consciousness'. The cumulative effect is what Fanon (1967, 111) describes as 'corporeal malediction' placed upon black bodies in which the bearers of black bodies and white glancers find themselves entrapped (Wynter 2001).

Within visceral anti-black racism context, there is a hypervisibility of blackness that is not accorded to any other community of color (Adjei and Agyepong 2009; Adjei 2013; Adjei and Gill 2013). Frantz Fanon puts this hypervisibility of blackness and its deliberating effects on black people in this way:

And then the occasion arose when I had to meet the white man's eyes. An unfamiliar weight burdened me. The real world challenged my claims. In the white world the man of color encounters difficulties in the development of his bodily schema. Consciousness of the body is solely a negating activity. It is a thirdperson consciousness. The body is surrounded by an atmosphere of certain uncertainty. (1967, 110–111)

What Fanon suggests in his racial interpellation is that white's gaze of blackness can make black bodies feel insufficient – a sense of defect that prompts gravitation toward whiteness in an effort to cure themselves of blackness. As noted by Fanon (1967), 'For several years, certain laboratories have been trying to produce a serum for 'degentrification'; with all the earnestness in the world ... that make it possible for the miserable Negro to whiten himself [or herself] and thus to throw off the burden of that corporeal malediction' (111). As 'a disabling virus within literary discourse,' blackness has become a way in which the image and persona of black bodies are constructed and used to serve as both literary texts as well as 'the entire range of views, assumptions, readings, and misreadings that accompany Eurocentric learning about these [black] people' (Morrison 1992, 7). Anthony Paul Farley, using W. E. B Dubois' color line prediction (1901) as a script for and the performances of racial identity, argues that the function of the color line is not just to produce blackness but also to use blackness to construct a better meanings for whiteness (Farley 2002, 152). Farley (2002, 111–112) further uses the term 'nobodying of the other' to describe how the social construction of blackness as 'corporeal malediction' (Fanon 1967, 111) reinforces the discourse of white innocence in Euro-American/Canadian society. Morrison (1992, 5) also describes these parasitic relations between black and white as a strategic way of producing white freedom and innocence. In such toxic relations, there is a blatant 'institutional disregard' for black lives (Walcott 2016; also see black lives matters<sup>1</sup>). I use 'institutional disregard' to imply the ways in which policies, practices, and politics at institutional levels are structured to consider and treat working-class blacks as disposable and unnecessary burdens to the state and therefore expected to fend for themselves in times of crises.

Charlie Moses's reflection of slavery in Saidiya Hartman's book encapsulates the culture of 'institutional disregard' for black lives:

The way us niggers was treated was awful. Master would beat, knock, kick, kill. He done ever'thing he could 'acept eat us. We was worked to death. We worked Sunday, all day, all night. He whipped us 'til some jus' lay down to die. It was a poor life. I knows it ain't right to have hate in the heart, but God almight! ... God almight never meant for human beings to be like animals. Us niggers has a soul an' a heart an' a min'. We ain' like a dog or a horse. (Hartman 1997, 4)

Hartman (1997) further argues that whereas Charlie Moses sought his universal human rights and entitlements, he failed to understand that his humanity was not recognized under the chattel of slavery: 'In short, the selective recognition of humanity that undergirded the relations of chattel slavery had not considered them men deserving of rights or freedom. Thus in taking up the language of humanism, they seized upon that which had been used against and denied them' (Hartman 1997, 5). I ask, how do black people claim their humanity when there is an institutional disregard for their lives?

I ask this question within a broader context of schooling in Euro-American/Canadian society. The Supreme Courts' rulings in Brown vs. the Board of Education in the United States and Washington vs. the Trustees of Charlottesville in Canada have suddenly made racialized bodies - the previously deemed intruders in the school system - encroach into spaces previously reserved for only white-bodies. This development has created an intriguing paradox for the 'rightful occupants' - white people. Several legitimate strategies are being used to keep intruders away (Schick 2000, 118; Puwar 2004). Arguably, one of such ways is disability 'diagnoses' and placement practices in special education programming. According to Blanchett (2010), Sleeter (1987), and Ferri (2010), whereas Brown vs. the Board of Education and Washington vs. the Trustees of Charlottesville may have paved the way for all students, regardless of class, race, and abilities, to be physically present in the same school, disability 'diagnoses' and placement practices act to ensure that these students do not sit in the same classroom. According Meri Nana-Ama Danquah, a Ghanaian woman living in the United States who was diagnosed with depression, her identity (that is, a black female immigrant from Africa) matters significantly in the ways in which she is perceived by others as well as the ways in which she perceives herself (1998, 225). What, then, are the implications when an African-Canadian student shows up in an almost all-white classroom? Will her or his blackness give her or him away? The answers to these questions will be discussed in later sections of this essay. In the meantime, I discuss my second deduction in the next section.

# The pathology of blackness as a form of disability

In their individual works, Garland-Thomson (1997) and Davis (1995) characterize disability as a form of ethnicity and race, arguing that disabled people are equally members of oppressed groups. In this second deduction of the veteran's comment, I shift the focus from Garland-Thomson and Davis' initial claims and argue that the pathologization of blackness in anti-black racism context constitutes such identity as a form of disability. Fanon (1967) deploys the term 'epidermal schema' to describe how blackness is discursively scripted and encoded with genetic inferiority in a manner that renders its bearers as subhuman (112). History is filled with examples that pathologize blacks as human defects and the embodiment of mental deficiencies (Boas 1911; Bulhan 1981; Mama 1995; Thomas and Sillen 1974). Benjamin Rush in 1792 explained that black skin in and of itself is anomalous – a defect and a sign of degeneracy (Jordan 1968). In his essay in *The Boston Medical and Surgical Journal*, Dr. John Nott juxtaposes Caucasian females to African-American females and concludes that not only does the latter have defective brains, but they also represent an abomination of humanity (Nott 1843, 30–32). In fact, Charles S. Johnson, the chair of the social science department and the later president of Fisk University, told his students in a 1928 speech that 'the sociologists classify Negroes with cripples, persons with recognized physical handicaps which have social consequences' (Johnson 1928, n.p.).

Given that blacks were disabled by default, their every action and inaction were historically scrutinized through the prism of disability. As noted by Thomas and Sillen (1974), psychiatrists have been intrigued to know why black slaves resisted enslavements despite the repressive measures of slave masters to stop them. Psychiatrists developed two mental diseases – *drapetomania*, an incurable urge among black slaves to escape slavery, and *dysesthesia aethiopica*, a mental disease that causes only black slaves to be unfaithful and resistance to slavery – to explain the behavior of black slaves (Thomas and Sillen 1974). In spite of the fact that the urge for freedom is the basic desire of every human, in an environment of anti-black racism, black resistance was rendered pathological (Mama 1995, 20). Similarly, Danquah (1998, 184) argues that black people are hardly diagnosed with depression because depression is 'still viewed as a predominantly 'white' illness.' Instead, blacks suffering depression are misdiagnosed as schizophrenic, given antipsychotic medication, and institutionalized involuntarily (Danquah 1998). What is of interest to this author is not Nana-Ama Danquah's psychiatric construction of depression but rather her argument that racist ideology informs psychiatrists' assessment of black people.

There is an overrepresentation of black students, especially those from working-class families, in special education programs (Reid and Knight 2006). What accounts for this overrepresentation? This question is important because various studies have suggested that diagnoses processes and placement practices in special education programs are extremely ambiguous and that categories are based on subjective interpretations and value judgments of 'experts' than any biologically predetermined markers (Harry and Klingner 2006; Kliewer, Biklen, and Kasa-Hendrickson 2006; Thomas and Loxley 2007; James 2011). This is the context within which I examine the story of my African-Canadian parent. Was her daughter diagnosed with a disability because she was deemed 'an intruder' in an almost all-white classroom, or were there biologically-predetermined factors used in such labeling? Her story in the next section will provide some answers to this question.

# Personal narrative as a methodology: a counter story of an African-Canadian parent

There are considerable diversities in the definition of personal narrative as too there are methodological variations in its application in social science research (Riessman 2013). Myerhoff (1978) utilized personal narrative as a methodological tool to retell the narrator's entire life story. In Labov (1982), Attanucci (1991), and Bamberg (1997), personal narratives have been used in more restrictive ways to retell narrators specific stories embedded in particular contexts. In this essay, I employ personal narrative in a restrictive manner to recount the specific experiences of an African-Canadian parent who challenged the disability 'diagnosis' of her daughter and the decision to place her daughter in a special education classroom in Toronto, Canada.

According to Fraser (2004, 185), research involving personal narratives could be engaged in 'relatively informal and friendly ways,' occasionally given room for conversation to sidetrack to unrelated issues (see Coates 1996; Hollway and Jefferson 2000). In my conversation with my research participant, I did not have any set array of questions to pose; rather, as Hyden (1994, 101) suggests, I simply asked the participant to 'tell me what happened' to begin the conversation and to translate her personal experiences into her own story. Because the participant's story was emotionally charged, I afforded her the time to recount the narrative as she deemed fit with few interjections and probing. The conversation lasted about one hour. With her permission, I recorded the participant's story using a digital-recording device. The conversation was later transcribed and edited to remove pauses, grammatical errors, and other unrelated issues that were told alongside her story. In addition, names of persons and places mentioned in her story were replaced with pseudonyms to protect the anonymity and confidentiality of all people involved. Here is the participant's edited story as she narrated it:

In September of 2009, when my daughter started kindergarten at a public school in Toronto, I was then pregnant with my second child. My husband (who is an attorney with his own private practice) and I (undergraduate student and a business woman) were excited about the opportunity for our first daughter to begin her kindergarten education. This is because our family has always worked with the assumption that education is the way-out of poverty and any individual who wants to create a successful career must take education seriously. For our daughter, the prospect of meeting other children and making friends was so exciting that she could not sleep the night before her first day at school. In fact, she woke up at 5am on her first day at school with an excuse that she does not want to be late to school. Early in the morning, I dropped her at school and returned home.

If there was any excitement for my daughter starting kindergarten education, it was just for a moment as her facial expression when I went to pick her after school was devoid of the early enthusiasm. My first question after picking her was, 'are you alright?' She would not answer me. Then I saw her teacher (a white male) saying goodbye and making jokes with couple of kids (they are all white).

As soon as the teacher saw me, he turned around and asked me, 'Oh are you Vida's mom [not the real name]?' I responded in affirmative. He then said, 'I think there is something wrong with Vida.' I looked at my daughter again and then asked, 'Really? Is she sick?' He said, 'No, but she does not talk in class.' He then turned to my daughter and asked, 'Vida, are you going to eat lunch when you go home?' My daughter did not answer him. He then turned to me and said, 'See, mom, I told you something is not normal.' I was so confused at this point that all I could say was, 'Well, let us give her some time; it is her first day. Maybe she is new to the environment.' He then said, 'No. All other kids are normal; she is not the only one in the class.' At this point, everybody has left and my daughter could hardly raise her head up to look at me and the teacher. I told him to have a good-day and will see him the next day. He then said, 'Okay, eh I am just doing my job.'

When we got home, my daughter did not say a word to me, and I did not ask her any question. After lunch [she meant supper], she came to me and said, 'Mama, Mr. Collins [referring to the teacher – not the real name] is not happy to me' [sic]. I asked her why she would think that way. She then said, 'Mr .Collins told me, "I am slow" and everybody [she meant all the other students in the class] was laughing at me.' I then told her to be fast next time so that nobody laughs at her anymore.

The next day, she came home with a form asking us to sign so that the school can book an appointment with Ontario Speech Therapist because something was wrong with my daughter and they do not know what it was. My husband refused to sign the form and rather booked an appointment to speak with the School Principal.

During the meeting, my husband told the Principal that the child the school was describing in the letter they sent was not the same child we have at home. That there was nothing wrong with our daughter. It was then agreed at the meeting that in order for my daughter to settle in the school, I have to come to her class every day till she become acquainted with her environment. What was quite interesting here was the fact that this option was not first placed on the table but only came up after we rejected the option of speech therapist. Any way to continue my story, although I was seven months pregnant, I was made to sit on a little daycare chair while Mr. Collins, the classroom teacher was sitting on a rocking chair. His only comment to me was this superficial apology: 'Mom, I am sorry that is all we have in our classroom.'

At the classroom, I noted that all the students with the exception of my daughter were white. I was also struck by the demeanor of Mr .Collins, and I understood for the first time why my daughter could not speak in the class because she was afraid of her teacher. Mr .Collins was about 6 feet 2 inches tall. He stood in front of these little children with his giant looking nature and talked to them like a university professor talking to matured students. Mr .Collins gave the class a ball to move around before talking in class. He asked the class if everybody moved the ball before talking. He then pointed at my daughter, 'Vida, did you move yours?' My daughter was quiet and the teacher turned to me and said 'Mom, you see what I mean?' I kept quiet. He then moved on to his next item for the day, which was asking the children while he was sitting at a little distance on his rocking chair. He asked which child would go first. Some of the children raised their hands; not my daughter. The teacher ignored them and called out my daughter, 'Vida, you want to tell us what you did with your parents last night?' As soon as he mentioned my daughter's name, the class turned to her and started laughing. My daughter kept quiet, the teacher then spread his hands and made a funny face. At that point, the laughter became louder. I left to the washroom to cry. I knew my daughter needed help but not the kind of help she was getting from the teacher and the school.

When I got home, I shared my experience with my husband. Right then, we resolved not to sign any form that will suggest that our daughter have any problem. At the end of one week, my husband and I went back to the School Principal for update on our daughter's situation. As soon as we went to the Principal's office, she handed over a form to see a Speech Therapist without asking about my experience at the classroom. We left without saying a word. When we went to see the Speech Therapist, the 'specialist' was shocked to see my daughter happily playing with toys she had at her office. The Therapist sat with my daughter on the floor and spoke for about 30 min. She then sent us home with a report to come back any time we feel a need.

We took the report to the School Principal and went home with our daughter. After three days, the teacher handed another form to my daughter asking our permission to send her to Special Education program. Since my husband was not at home, I called the School Principal to inquire the meaning of the letter. The Principal told me that it was the best decision for my daughter because the Special Education program will teach her special skills that will benefit her later in life. My husband and I called the School Board with our complaint and a meeting was immediately scheduled with a representative of the Board.

After listening to our complaint, Mr. Collins said, 'My major concern is that Vida is not meeting the expectations of the required milestone at her age (4 years). Her fine motor skill, social interactions, and language skills do not meet up to the standards normally accepted by the curriculum. There is something just wrong with her.' She does not know how to handle a pair of scissors in cutting paper shapes and this is not 'normal' and generally unaccepted in the Toronto public school curricula. This assertion was very surprising to us, to say the least. Growing up in Nigeria, a pair of scissors was something we were never taught how to handle as a child. In fact, a child will be severely punished if caught holding a pair of scissors. So in raising our daughter in Canada, we hardly encouraged her to handle a pair of scissors for fear that it may harm her. Obviously, by trying to protect our daughter from harming herself, we did not know we were setting her up to 'fail' in school. Anyway, to cut a long-story short, we agreed with the school to allow our daughter to complete the year in Mr. Collins' class and make a decision at the end of the year whether to agree to send her to Special Education Program or not.

At the end of the school year, my husband and I moved our daughter to another school to get an opinion from a different teacher since the same teacher (Mr.Collins) was going to teach the Senior Kindergarten the following year. At the new school, my daughter excelled in every department that Mr. Collins and the school administrators of her previous school claimed she was lacking. In fact, not only did she excel but also she became the best student in her class and even received a school award for her excellent academic work [Interview, November 29, 2011]

In the next section of the essay, I analyze and interpret her story.

### Hunting for disability: the search for normal body

The postmodern feminist writer Joan Wallach Scott argues, words – whether spoken or written – lack fixed and intrinsic meanings; therefore, the interpretation of words must be drawn from the contextual and social processes of the speaker (Scott 1988). As noted in the above narration, Mr. Collins demonstrated little to no support to help Vida adjust to her new learning environment. Instead, Mr. Collins was quick to describe Vida *not normal; something is wrong with her,* and *too slow* (Interview, 2011, para. 3). Even when Vida's mother requested more time for her daughter to settle in her new environment, Mr. Collins was quick to point out that: *All other kids [whites] are normal* (Interview, 2011, para.3). So let us, for a moment, explore the concept of a normal body in Mr. Collins's classroom by asking two key questions. First, what does it take to be normal in Mr. Collins's classroom? Second, how did Mr. Collins's gaze of Vida suddenly opens her up to what Foucault (1976, 105) calls 'a domain of clear visibility'? – a gaze that encourages the 'othering' of Vida to what Garland-Thomson (1997, 6) calls an 'embodiment of corporeal insufficiency and deviance'?

According to Mitchell and Snyder (2003) 'normal standard' in Euro-American/Canadian society is characterized as white, middle/upper class, heteronormative, able-bodied male. Anything outside this categorization is marked abnormal or degeneracy. When Mr. Collins insisted that all his other

students were normal with the exception of Vida, we need to bring attention to the qualities that his 'normal' students possessed that Vida was not perceived as having. To start, Vida is black and was the only black student in Mr. Collins's all-white classroom. Could it be that Mr. Collins saw Vida's blackness as a symbol of her abnormality? Such an observation may not be so farfetched given that the history of Euro-American/Canadian society provided numerous examples of occasions in which non-whites, women, individuals of lower social classes, and homosexuals have been deemed 'abnormal,' 'freaks,' and 'deviant' (Baynton 2001; Mitchell and Snyder 2003; Smith and Erevelles 2004). As noted in the narrative, Vida was called upon (by Mr. Collins) to experience the corporeal reality of her body, as one already having been transformed into subhuman. Like Frantz Fanon, when Vida subjected herself to objective examination, she discovered that her blackness 'was battered down by tom-toms, cannibalism, intellectual deficiency, fetichism, racial defects' (Fanon 1967, 112). Mr. Collins did not appear to need any empirical evidence outside Vida's blackness to perceive her as an embodiment of abnormality as Vida was observed to possess no 'ontological resistance in the eyes of the white man [Mr. Collins]' and appeared exactly as she has been constructed (Fanon 1967, 110). As Fanon (1967) writes, 'My body was given back to me sprawled out, distorted, recolored' (113). In many respects, Vida's 'disability' did not exist in her learning abilities but was rooted in her blackness. The normalization of whiteness provides an opportunity for Mr. Collins to encode genetic inferiority onto the body of Vida. In many ways, Mr. Collins did not expect Vida to be normal because normalization only exists in those who embody white middle-class heteronormative identity.

However, it is important to note that Mr. Collins did require more than his personal observation to validate his perception of Vida's abnormality. He needed the support of the school administrators and the 'experts.' Thus, as the narration suggests, Vida returned home after two days in her new school with a referral letter to see a specialist. According to Baker (2002), in order for the process of 'hunting for disability' to appear fair, objective, and even magnanimous, teachers and school administrators often follow a certain protocol and fulfill necessary roles in referral, diagnosis, labeling, sorting, and placement.

#### When difference means deficiency: the eclipse othered in our midst

According to Jeffery and Nelson (2011), 'The question 'what are we to do about difference?' is one that is asked often and by many, and answered to the satisfaction of few' (252). Difference is understood in multiple and varied ways by many subjects in the school system. There are those who see difference as a source of tension that must be avoided (Dei et al. 2006). According to Memmi (1965, 115), difference under colonial racism is a site of 'otherness' to affirm asymmetrical distribution of power and resource. We know that within the school system, differences can be othered through the process of using certain standards that are familiar to only students of European descents (Dei et al. 1997; Ferguson 2001; Youdell 2003). As Mr. Collins pointed out when expressing his concerns about Vida's learning needs:

My major concern is that Vida is not meeting the expectation of the required milestone at her age (4 years). Her fine motor skill, social interactions, and language skills do not meet up to the standards normally accepted by the curriculum. There is something just wrong with her. She does not know how to handle a pair of scissors in cutting paper shapes and this is not 'normal' and generally unaccepted in the Toronto public school curricula. (Interview 2011, para.9)

In the opinion of Mr. Collins, Vida does not measure up to generalized 'standards' as required by the 'accepted curriculum'; 'standards' that failed to include Vida's racial, cultural, and ethnic history and individual lived experience. According to Reid and Knight (2006), these educational standards are rooted in and drawn from white Eurocentric and ableist ideals that view non-white students as inferior spawning a 'need' of *specialized* instructional techniques (19). Fine (1991) rightly notes that the rhetoric of 'standards' has been detrimental to racialized bodies. Indeed, standards, such as those set out by the Education Quality and Accountability Office in Ontario, have a long-term impacts on the marginalization and subjugation of black working-class students as degenerates. As Paterson and

Hughes (1999) justly argue, oppression lies not only in the barriers put before certain bodies but also in 'corporeal and *inter-corporeal* norms and conventions' that these bodies are subjected to (608). Titchkosky (2008) notes that disability is presumed to be a 'bodily difficulty which subjects its possessor to the problem of not doing, ... or a reduced ability to do things that are not considered normal for a human being to do' (73). Thus, once the problem of doing or not doing is established, the possessor of disability is asked whether this lack of ability can be interpreted into a physical or mental condition of a health problem (Titchkosky 2008, 73).

Vida's experience at her school clearly reveals that some teachers, as Thomas and Loxley (2007, 27) note, view special education classrooms as the rightful place to offload students that teachers have some difficulty teaching. Surprisingly, when Vida was transferred to another school, her 'disability' disappeared and she was soon recognized as one of the best students in her class and by receiving an award for academic excellence. What does Vida's story tell us about the embodiment of blackness in visceral anti-black racism context?

The central question to ask, is Vida's experience an isolated issue, or an example of an emerging pattern in the school system in which race collaborates intersectionally with other configurations to mark black students as disabled and in need of special education? In a study done by Ferguson et al. (2005) that explores the overrepresentation of black and Aboriginal students in special education programs in Ontario, the authors note that many black and Aboriginal parents strongly feel that racism plays a central role in disability diagnoses and the placement of children in special education programming. As a black parent puts it in the manuscript: 'They didn't want my daughter there [white dominated classroom], I know that .... To me ... it was clear that they were segmenting and casting out those who were easy to get rid' (Ferguson et al. 2005; 37). Again, in Bennett and Wynne's (2006) investigation of special education program in Ontario, they note that Ontario is ranked among the highest provinces or states in North America with high incidence of disability diagnoses and placement practices. Like in Ferguson et al. (2005) report, Bennett and Wynne (2006) also identify black and Aboriginal students as the most disability-diagnosed groups in the school system in Ontario. Oswald, Coutinho, and Best (2005, 1) have also made similar observations about black and Latino students in the special education program in the United States. In fact, Dunn (1968) notes that African-American students are more likely to be diagnosed with disability and placed in special education classrooms than their white counterparts. Even where evidence shows that white students are doing more poorly, academically speaking, compared to African American students, the latter get diagnosed with disabilities and placed in special education classrooms (Dunn 1968). Following investigation into one school with a high incidence of speech language impairment, Slee (2013) also reveals that students with deprived and delayed communication skills have been misdiagnosed with 'speech language impartment' (904). As noted in the Slee's essay (2013), these students were, of course, blacks working class.

While my African-Canadian parent's story and other examples cited herein may not be sufficient to conclusively conclude that race and class determine disability diagnoses, the accounts presented raise critical questions for researchers investigating the embodiment of blackness in visceral anti-black racism and ableism contexts. In the discussion that follows, I conclude my thoughts.

# The unforgivable blackness: my final thought

In his editorial 'The prize fighter,' W.E.B. Dubois states the following about the sham trial and conviction of the first black Heavyweight champion Jack Johnson who was charged of violating the *Mann Act* for bringing his white girlfriend across state lines before their marriage:

Why then this thrill of national disgust? Because Johnson is black. Of course, some pretend to object to Mr. Johnson's character. But we have yet to hear, in the case of white America, that marital troubles have disqualified prize fighters or ball players or even statesmen. It comes down, then after all to this unforgivable blackness. (Du bois 1914, 181)

Jack Johnson's story, much like the story of Vida as expressed by her parent, anchors the historical and contemporary experience of blackness in a visceral anti-black racism context. Vida's story and other

examples cited in this essay point to what Reid and Knight (2006) describe as widespread practices where students of color are marked as disabled in order to justify their perceived segregation within the school system. What even makes this observation quite disturbing is that educators and general society publically condone and defend these practices based on 'the enduring belief that impairment and disability are empirical facts' (Reid and Knight 2006, 19). As many studies corroborate, what constitutes 'empirical facts' in disability diagnoses are nothing more than social constructions whose definitions change throughout time and perceived context (Linton 1998; Longmore and Umansky 2001). For example, in 1973, the American Association of Mental Deficiency (AAMD) was forced to revise its definition of 'mental retardation' from including individuals with a measured Intelligent Quotient score of 85 to those with an Intelligent Quotient score of 70. The revision was in response to intensive criticisms at the Association level for targeting black students in the United States school system. The irony is that the revision in the definition suddenly 'cured' those who were previously deemed 'mentally retarded' without any medication or therapy (Parrish 2002). For many black students, the embodiment of blackness in anti-black racism context has profound costs and consequences. My participant's story aptly reveals that when educational practices are moved into spaces of pathologization, racialized and classed bodies continue to be at the risk of facing exclusion. For many black students, there is no place to stand outside this race/class-based pathologization.

Sadly, the practice of using disability to justify unequal treatments of black people is not limited to the school system. As already revealed in the present essay, the language of ableism has been used to justify and rationalize the racist experiences of black people. blacks are diagnosed with schizophrenia more often than any other group (Fernando 2012). This situation has reached such a disturbing point in Toronto, Canada that Kumsa et al. (2014) go so far to assert that many blacks in Toronto 'do not go to hospitals for fear of misdiagnosis or for fear of being misunderstood due to the lack of English proficiency' (28). For black people whose bodies already evoke a sense of fear, anxiety, and distrust, simply being diagnosed with mental illness puts their lives in a great danger (Kumsa et al. 2014, 30). As noted by Danquah (1998) and as demonstrated in Russel Crowe's Oscar nominated role in *A Beautiful Mind*, mental illness is characterized as a pathology – an unequivocal sign of weakness (20). For black women, a group that has been historically described as 'strong – caretakers, nurtures, healers of other people – any of the twelve dozen variations of Mammy' (Danquah 1998, 19) being weak is intolerable. As Danquah (1998) puts it, 'When black women start going on Prozac, you know the whole world is falling apart' (19–20).

In conclusion, the personal challenge I experienced while writing this essay was reflective of my social location as an able-bodied black male addressing an issue that has both racist and ableist undertones. I did not want my position in the essay to suggest that disability is a personal tragedy that black people have to avoid or to imply that black students cannot be placed in special education programming. Mitchell and Snyder (2000), 2) argue that many minority fields of study have 'inevitably positioned disability as the 'real' limitations from which they must escape.' As Baynton (2001) noted in the women suffrage's debate in the nineteenth and twentieth centuries, when disability is used to deny women of their rights, the suffragists did not challenge the medical model argument against disability. Instead, they disputed the claim that women suffered disabilities with these three points:

(i) women were not disabled and therefore deserved the vote; (ii) women were being erroneously and slanderously classed with disabled people, with those who were legitimately denied suffrage; and (iii) women were not naturally or inherently disabled but were *made* disabled by inequality – suffrage would ameliorate or cure these disabilities. (Baynton 2001, 43)

Mollow (2006) warns us that 'If race and disability are conceived of as discrete categories to be compared, contrasted, or arranged in order of priority, it becomes impossible to think through complex intersections of racism and ableism in the lives of disabled people of color' (69). Thus, I do not want this essay to be perceived as either pitting race against disability or attempting to escape disability. My interest is not to escape disability but to employ it in a manner to investigate the myriad of ways in which ableist languages justify classifications of some people as less than human, re-enacting pervasive colonial racist ideologies and practices. One thing is clear from my participant's story: the significance of skin color in the mind of a racist cannot be dismissed easily.

### Note

 Black Lives Matter is an international movement, which originated in the United States and now in Canada, working for the validity of black life. The mission of the movement is to interrogate as well as challenge statesponsored violent policies, practices, and politics that intentionally render black people powerless and devoid of basic human rights and protection (http://blacklivesmatter.com/).

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