As Good as it Gets: Queer Theory and Critical Disability

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In queer studies it is at this point a well-established critical practice to remark on heterosexuality’s supposed invisibility. As the heterosexual norm congealed during the twentieth century, it was the “homosexual menace” that was specified and embodied; the subsequent policing and containment of that menace allowed the new heterosexual normalcy to remain unspecified and disembodied. Although as early as 1915 Sigmund Freud, in his revised “Three Contributions to the Theory of Sex,” declared that “the exclusive sexual interest of the man for the woman is also a problem requiring an explanation, and is not something that is self-evident and explainable on the basis of chemical attraction,” such observations remained—indeed, as Freud’s comments literally were—mere footnotes in the project of excavating deviance. Heterosexuality, never speaking—as Michel Foucault famously said of homosexuality—“in its own behalf, to demand that its legitimacy or ‘naturality’ be acknowledged,” thereby passed as universal love and intimacy, coextensive not with a specific form of opposite-sex eros but with humanity itself.

Heterosexuality’s partners in this masquerade have been largely identified; an important body of feminist and antiracist work considers how heteronormativity reinforces dominant ideologies of gender and race. However, despite the fact that homosexuality and disability clearly share a pathologized past, and despite a growing awareness of the intersections between queer theory and disability studies, little notice has been taken of the connection between heterosexuality and able-bodied identity, perhaps because able-bodiedness, even more than heterosexuality, masquerades as a nonidentity, as the natural order of things.

In what follows I lay the groundwork for understanding how able-bodiedness and heterosexuality are intertwined. Bringing together queer theory and what I will call “critical disability,” this essay challenges how our culture continues to accommodate, despite and indeed through the shifting crises surrounding them,
heterosexual and able-bodied norms. I begin with a preliminary identification of some of the features that seem to distinguish the current moment in the history of heterosexuality. Undeniably, heterosexuality’s will to invisibility remains strong, but that characteristic has been supplemented by others; the recent history of heterosexuality includes periods when it is visible, however momentarily. I then examine how this new visibility has allowed for the emergence of a more “flexible” heterosexual and able-bodied subject than either queer theory or disability studies has yet acknowledged. I consider how this subject is represented in James L. Brooks’s 1997 film *As Good As It Gets*, which in many ways crystallizes current ideas about, and uses of, disability and queerness. Finally, I conclude with an overview of some of the critically disabled and queer perspectives and practices that have been deployed to resist able-bodied heteronormativity.

**Reinventing the Heterosexual**

In his essay “Tearooms and Sympathy; or, The Epistemology of the Water Closet,” Lee Edelman analyzes the popular representation of a sexual crisis involving a prominent member of Lyndon B. Johnson’s administration and provides thereby a snapshot of dominant attitudes in the mid–twentieth century. On 7 October 1964 Walter Jenkins, Johnson’s chief of staff, was arrested for performing “indecent gestures” with another man in a Washington, D.C., men’s room. The arrest was made after Jenkins entered the same restroom where five years earlier he had been arrested and charged with “disorderly conduct (pervert).” That the earlier arrest had not been detected as Jenkins rose to prominence in the White House only compounded the scandal in October 1964, given the widespread acceptance at the time of beliefs such as that expressed in a *New York Times* editorial: “There can be no place on the White House staff or in the upper echelons of government . . . for a person of markedly deviant behavior.” Edelman’s essay thoroughly considers how the events surrounding the Jenkins scandal codified contemporary anxieties about masculinity, homosexuality, American national identity, and national security during the Cold War. Jenkins resigned his position on 14 October 1964 (148–51).

Edelman contends that the response to the midcentury arrest of Jenkins and many others for indecency, deviance, or perversion took at least three forms. First, the individual involved could be defined and contained as a “homosexual.” This figure was understood as a distinct type of person, whose difference was legible on the body. Second, sometimes in contrast to and sometimes in tandem with the strategy of making visible an embodied “homosexual,” the individual could be understood as disabled in some way; that disability, again, was supposedly legible.
on the body. Although Edelman himself does not use the term disability to describe this second strategy, he clearly invokes mental and physical differences from a healthy, fit, and able norm. In 1964, for example, Jenkins could be viewed “as the victim of some illness, physical or emotional, whose transgressive behavior did not symptomatize his (homosexual) identity but rather bespoke an exceptional falling away from his true (heterosexual) identity.” This passage is notable for its twofold suggestion that, for Jenkins’s contemporaries, “transgressive behavior” was a virtual property of physical or emotional difference and that health and ability were naturally linked to heterosexuality.

Third, the crisis could foreground “a category-subverting alterity within the conceptual framework of masculinity itself.” In other words, the contradictions inherent in the masculinity that undergirds a system of compulsory heterosexuality (whereby deviance is simultaneously desired and disavowed) could be exposed. In scandals like the Jenkins affair, this third response was, not surprisingly, the least acceptable. The spectacle of bodily or mental difference was preferable to that of a threatened masculinity or heterosexuality requiring deviance to define and sustain itself. In 1964 the first two responses prevailed: queerness and disability came together in, and were expunged from, the upper echelons of government, effectively facilitating heterosexuality’s invisibility.

Elements of the Jenkins affair remain imaginable at the beginning of the twenty-first century, but the assumptions driving the scandal are arguably residual. Throughout the 1960s and 1970s, increasingly vocal liberation movements made disability and homosexuality spectacular in new ways; lesbian, gay, bisexual, and transgendered (LGBT) people, people with disabilities, and their allies attempted to define sexuality and bodily and mental difference on their own terms. Indeed, the dominant attitudes Edelman interrogates from the 1960s undoubtedly fueled the depathologizing movements of the 1970s and 1980s. Feminists and gay liberationists named compulsory heterosexuality and thus began the process of exposing heterosexuality’s passing as the natural order of things.

Its exalted status newly in jeopardy, heterosexuality continued to be defined against homosexuality, but the identity-constituting disavowal, in the last third of the twentieth century, was made explicit. “The coming out of the homo,” as Jonathan Ned Katz explains, “provoked the coming out of the het.” However severely lesbian and gay coming-out stories have been critiqued for simply replicating—in fact, demanding—the same old story of self-discovery, the anxious heterosexual coming-out story from the end of the century owes its existence to, and was necessitated by, that seemingly endless proliferation of lesbian and gay
Snapshots from this period might include the picture of New York City mayor Ed Koch declaring, “I’m heterosexual,” or of Magic Johnson insisting on The Arsenio Hall Show, after revealing his HIV-positive status, that he was “far from being a homosexual.” These and other heterosexual coming-out stories helped reassure and consolidate a newly visible “heterosexual community.”

The cultural representation of that reassurance and consolidation is my subject in the rest of this essay. Following Emily Martin, I am concerned with the production and reproduction, at the end of the twentieth century, of more flexible bodies: gay bodies that no longer mark absolute deviance, heterosexual bodies that are newly on display. The out heterosexual works alongside gay men and lesbians; the more flexible heterosexual body tolerates a certain amount of queerness. The more flexible gay or lesbian body, in turn, enables what I call “heteronormative epiphanies,” continually making available, to the out heterosexual, a sense of subjective wholeness, however illusory. As I flesh out and critique the contours of that epiphanic process, my central argument is that people with disabilities are also caught up in it. Precisely because of their successful negotiation of the contemporary crises surrounding heterosexuality, flexible heterosexual bodies are distinguished by their ability. Distinguished by their ability, these bodies are often explicitly (and, in the case of film, visually) distinguished from people with disabilities. Thus I argue that heteronormative epiphanies are repeatedly, and often necessarily, able-bodied ones. As my concluding discussion of queer theory and critical disability demonstrates, however, such a consolidation of power is not, to say the least, the only resolution imaginable.

**Able-Bodied Sexual Subjects**

The spectacle of homosexuality or disability may have obscured a potentially fracturing masculinity or heterosexuality in 1964, but the situation had changed considerably more than three decades later. Indeed, 1998 might be seen as the Year of the Spectacular Heterosexual. The ex-gay movement, previously a marginal movement at best within the Christian Right, suddenly achieved national prominence, not only with the placement of full-page ads promoting its agenda in newspapers such as the New York Times and the Washington Post (the ads depicted men and women “cured” of their homosexuality) but with unprecedented coverage (of the ad campaign and the movement in general) in the mainstream media. Newsweek, while insisting that “few identities in America are more marginal than ex-gay,” did its part to end that marginalization with a cover story on “married couple John and Anne Paulk” and other ex-gays. John Paulk himself published a
book about his amazing conversion to heterosexuality: Not Afraid to Change: The Remarkable Story of How One Man Overcame Homosexuality. Despite naming only “homosexuality” in his book title, Paulk, and other ex-gays who told their stories, relentlessly focused on a newly visible heterosexuality. Indeed, Paulk described himself as “a heterosexual who has come out of homosexuality.”

From the pages of the New York Times to the Oval Office itself, heterosexuality was on display, with at least one performance of spectacular heterosexuality leading to the impeachment of a president. John and Anne Paulk, after all, were not the only heterosexual couple to make the cover of Newsweek or Time that year. Despite the national crisis occasioned by the heterosexuality practiced in the Oval Office by Bill Clinton and Monica Lewinsky, however, it remained clear in 1998 that the spectacular heterosexual would survive. In and through Clinton’s confession to the nation and apology to his wife and daughter, in and through the impeachment and its coverage, “proper” (married, monogamous) heterosexuality was restored and made visible—ironically, not unlike the way in which “natural” heterosexuality was restored in and through the ex-gay campaigns. The Clinton crisis did not, at least not obviously, present itself as a panicked moment in which heterosexuality needed to be explicitly named in order to be shored up. Nonetheless, the Clinton affair can be seen as part of the larger crisis of the past few decades in which hegemonic (hetero)sexuality has been increasingly questioned and threatened. A dominant strategic response to that threat has been to make visible, in order to resolve, a crisis. Despite their extreme differences, the contemporaneous Clinton and Paulk affairs were both thoroughly saturated with a rhetoric of “healing” that ostensibly restored heterosexuality to its rightful place.

In this larger context, in the midst of the compulsion to impeach improper sexuality and to make visible a “healed” heterosexuality, it is perhaps not surprising that the Oscars for best actor and best actress that year went to an on-screen (heterosexual) couple in As Good As It Gets. For her performance as the long-suffering waitress Carol Connelly, Helen Hunt took home her first Oscar. For his performance as Melvin Udall, an obsessive-compulsive romance novelist who lives in the Manhattan neighborhood where Carol works, and whose behavior—often accompanied by sexist, racist, and homophobic comments—isolates him from almost everyone, Jack Nicholson took home his third. After Hunt and Nicholson had received their Oscars, their performances were validated even more as a large set of bleachers filled with Oscar winners from previous decades was spun onto the stage and Hunt and Nicholson were asked to join, together, that special group. Greg Kinnear, who played Melvin’s gay neighbor, Simon Bishop, was nominated for best supporting actor but lost to Good Will Hunting’s Robin Williams.
As Good As It Gets itself, nominated for best picture, was sunk as far as the main award of the night was concerned, since its competition was James Cameron’s Titanic, the biggest box-office success of the century. In the Year of the Spectacular Heterosexual, however, it was perfectly appropriate for Titanic to win, since it overlaid an epic tale of heterosexual romance onto the shipwreck. Although the female protagonist (Rose DeWitt Bukater, played by Kate Winslet as a young woman and Gloria Stuart as an old woman) loses the love of her life (Jack Dawson, played by Leonardo DiCaprio) in the disaster, she remains forever true to him and tells the story of their passionate affair decades later to a small group salvaging whatever it can from the wreckage. The divers fly her to the scene of the shipwreck to help piece together the details of what happened that night; they hope to recover a priceless necklace Rose once wore, but they end up recovering much more. Titanic suggested that the problem of the twentieth century had not been—as W. E. B. DuBois predicted it would be in 1903—the color line, or even the class line, cartoonish depictions of bawdy working-class parties in Titanic notwithstanding. No, the problem of the twentieth century, symbolically resolved in its final years by this film, had been heterosexual separation and reunification. “What a shocker,” queer theorist Madonna acerbically opined as she presented the Oscar for best original song to Celine Dion, whose megahit “My Heart Will Go On” underscored heterosexuality’s permanence. Across the century and despite catastrophe (including eighty-odd years of separation and, amazingly, death), heterosexuality prevails:

Near, far, wherever you are
I believe that the heart does go on
Once more you open the door
And you’re here in my heart
And my heart will go on and on.

The supposed timelessness of the sentiment represented by Dion’s song and Titanic in general covered over how the film was implicated in other late-twentieth-century performances of heterosexuality.

In feminism and queer theory, of course, the work of Judith Butler has most famously established that heterosexuality constitutes itself through performance, although it has perhaps been less remarked that Butler’s insights themselves emerged from a particular moment (of openness and even spectacle) in the history of heterosexuality.18 Even more unremarked at this point, however, is the ubiquity of ability and disability in and around these heterosexual performances.
Although queer theorists are now used to unpacking how performances of heterosexuality depend on gay bodies and their repudiation, and although scholars in disability studies are used to noting the unacknowledged ubiquity of disability in our culture, neither field seems particularly or actively conscious of how performances of heterosexuality might have some relation to ability and disability.

*As Good As It Gets* throws all three of these points into relief. With such spectacular competition at the 1998 Academy Awards, *As Good As It Gets*—marketed not as a *Titanic*-like epic but as a mere romantic comedy—was lucky to take home any award. At the same time, it has some uncanny similarities to *Titanic*. On a much smaller scale, it too is about heterosexual separations and reunifications. Beyond that, however, it is virtually a textbook example of how heteronormative epiphanies are necessarily able-bodied ones. Indeed, I read the prizewinning moment of the film’s male and female leads as the culmination of an epiphanic process that begins on-screen, in the narrative of the film itself.

Although epiphany, as an artistic device, may seem to have had its (high modernist) heyday and to have been superseded by a repeated (postmodernist) exposure of how epiphanies are always illusory or ineffectve, the process retains wide currency, and Hollywood films in particular represent (and continue to produce) an intense desire for epiphany. The epiphanic moment (whether in high modernism or contemporary Hollywood film), despite its affinity with ecstatic religious experiences in which an individual is said to lose himself or herself briefly, tends to be a moment of unparalleled *subjectivity*. As the music swells and the light shifts, the moment marks for the character a temporary consolidation of past, present, and future, and the clarity that describes that consolidation allows the protagonist to carry, to the close of the narrative, a sense of subjective wholeness that he or she lacked previously.

The cultural representation of this epiphanic moment requires what Martin calls “flexible bodies,” in two senses. First, the bodies experiencing the epiphany must be flexible enough to make it through a moment of crisis. *Flexible*, in this first sense, is virtually synonymous with both *heterosexual* and *able-bodied*: the bodies in question are often narratively placed in an inevitable heterosexual relationship and visually represented as able. Second, and more important, other bodies must function flexibly and *objectively* as sites on which the epiphanic moment can be staged. The bodies, in this second sense, are invariably queer and disabled—and they, too, are visually represented as such.

Martin’s own interest in flexible bodies and the trope of flexibility crystallized when an immunology professor in a graduate course she was taking began to talk about the “flexibility” of the immune system: “In my mind, this language
crashed into contemporary descriptions of the economy of the late twentieth century, with a focus on flexible specialization, flexible production, and flexible, rapid response to an ever-changing market with specific, tailor-made products.21 The awareness of this discursive overlap leads Martin to trace flexibility’s deployment across discourses not only of immunology and economics but of New Age philosophy, government organizations, psychology, and feminist theory (150–58). She consistently foregrounds, however, the well-nigh universal pride of place given to flexibility in economic discourses. She quotes, for instance, management guides and vision statements from companies like Hewlett-Packard: “We encourage flexibility and innovation. We create a work environment which supports the diversity of our people and their ideas. We strive for overall objectives which are clearly stated and agreed upon, and allow people flexibility in working toward goals in ways which they help determine are best for the organization” (144).

Flexibility in this corporate context may seem, on the surface, to militate against subjective wholeness—the corporation would seem, in contrast to the subjective wholeness associated with the epiphany, to value multiple subjectivities, even a certain (postmodern) fragmentation of subjectivity. I would argue, however, that this is not the case; the flexible subject is successful precisely because he or she can perform wholeness through each recurring crisis. In the current economic context, in other words, individuals who are indeed “flexible and innovative” make it through moments of subjective crisis. They manage the crisis, or at least show that they have management potential; ultimately, they adapt and perform as if the crisis had never happened. Attention must be drawn to the crisis for the resolution to be visible, but to draw too much attention to the subjective crisis, and to the fragmentation and multiplicity it effects, would be to perform—or act out—inflexibility. Past, present, and future are thus constantly reconsolidated to make it seem as if a subject or worker is exactly suited to each new role.

Martin is well aware of the double-edged nature of the trope:

On the one hand, [flexibility] can mean something like freedom to initiate action: people set goals as they think best for the organization. . . . On the other hand, it can mean the organization’s ability to hire or fire workers at will, as in [the Los Angeles Times article] “Schools to Send Layoff Notices for ‘Flexibility,’” which describes how twenty-one hundred employees in Los Angeles were to be laid off. In this case, flexibility resides in the schools, and the employees have little choice but to comply. The powerful school system flexibly contracts or expands; the powerless employee flexibly complies.22
It is precisely the double-edged nature of flexibility that I find useful for reading heteronormative, able-bodied epiphanies. The successful able-bodied subject, like the most successful heterosexual subject, has observed and internalized some of the lessons of liberation movements of the past few decades. Such movements without question throw the successful heterosexual, able-bodied subject into crisis, but he or she must perform as though they did not; the subject must demonstrate instead a dutiful tolerance toward the minority groups constituted through these movements. If a residual model (such as the model Edelman identifies from the 1960s) explicitly demonizes queerness and disability, currently dominant and emergent models of heterosexual, able-bodied subjectivity implicitly or explicitly stress—as in Hewlett-Packard’s support of “the diversity of our people and their ideas”—working with people with disabilities and LGBT people. Martin’s understanding of flexibility, however, allows us to read those more tolerant models of subjectivity critically. In many cultural representations, disabled, queer figures no longer embody absolute deviance but are still visually and narratively subordinated, and sometimes they are eliminated outright (or perhaps—in the flexible new parlance—laid off). Flexibility again works both ways: heterosexual, able-bodied characters in such texts work with queer and disabled minorities, flexibly contracting and expanding while queer, disabled minorities flexibly comply. Because all of this happens in a discursive climate that values “diversity” (a climate that even allows for the actor playing the gay character to be nominated for an Academy Award), the heterosexual, able-bodied subject, as well as the culture that produced him or her, can easily disavow how much the subjective contraction and expansion of able-bodied heterosexuality is actually contingent on compliant queer, disabled bodies.

**Able-Bodied Heterosexuality: As Good As It Gets?**

For LGBT communities and for people with disabilities, such subordination, in a contemporary context that supposedly values diversity, is often as good as it gets. So it would seem, certainly, if we judge by the film itself, which I take here as representative of a whole range of contemporary texts. Queering disability studies or claiming disability in and around queer theory, however, helps create critically disabled spaces overlapping with the critically queer spaces that activists and scholars have shaped during recent decades, in which we can identify and challenge the ongoing consolidation of heterosexual, able-bodied hegemony. *As Good As It Gets* is a romantic comedy that tells the story of the budding and conflicted love affair between Melvin Udall and Carol Connelly. Simon Bishop and his dog,
Verdell, inadvertently facilitate the affair, accompanying Melvin and Carol through a series of separations and reunifications. Simon, initially represented as able-bodied, is attacked in his home by burglars and, after being hospitalized for several weeks (during which Melvin is forced to care for Verdell), ends up using a wheelchair and cane for the remainder of the film. It is through the crises surrounding Simon and another character with a disability—Carol’s son, Spencer (Jesse James)—that Carol and Melvin’s relationship develops. “Spence,” according to Carol, has “gotta fight to breathe. His asthma can just shoot off the charts, he’s allergic to dust, and this is New York, so his immune system fails on him whenever there’s trouble. . . . An ear infection, whatever, sends us to the emergency room five, six times a month.” As Carol and Melvin are placed in various situations in which they individually or together must care for Spence or Simon (or Verdell, during Simon’s hospitalization), their affection and love for each other are ultimately and inevitably consolidated.

Melvin lives in a Manhattan apartment and, at the beginning of the film, is established as an unlikable character—in fact, the first scene shows a neighbor emerging from her apartment in a light, cheery mood (“I’m so happy,” she says to someone inside) that quickly changes to hostility (“son of a bitch”) when she sees Melvin in the hallway. Her reaction, we learn, is due to Melvin’s irritability and general meanness. As the scene continues, Melvin attempts to entice Simon’s dog out of the building; when he fails, he simply picks the dog up and stuffs him down the trash chute. (Verdell is later rescued by a maintenance worker.) Melvin’s irritability usually translates into explicit bigotry: until almost the end of the film he makes anti-Semitic, racist, sexist, and homophobic comments. His bigotry encompasses people with disabilities as well; at one point he vocalizes what John Nguyet Erni describes as “a fantasy structure of morbidity.”

Erni is delineating cultural fantasies about AIDS in particular, but some of the cultural assumptions that he identifies—AIDS is “invariably fatal,” and people with AIDS are in some ways already dead or better off dead—circulate around other people with disabilities, who find that their bodies are read in ways that only confirm the ableist notion that such bodies face “imminent deterioration” (42). Similarly, after overhearing Carol talking with her coworkers in the restaurant about caring for her son, Melvin offhandedly remarks, “Well, we’re all going to die soon—I will, you will, and it sure sounds like your son will.” Melvin’s banal observation about the inevitability of death depends on the assumption that Spence, because of his physical differences, will die much sooner than most.

That Melvin is played by Nicholson, a major star who can be read as portraying one of the outrageous characters he is famous for, makes it possible for the
film to pass Melvin’s behavior off as individual eccentricity. (If Melvin were played by an unknown actor, he would not stand out so visibly as an eccentric or outrageous individual.) This construction of the “outrageous character” allows the audience—which, supposedly, does not identify with Melvin but nonetheless laughs at the scenes in which he makes bigoted wisecracks—to indulge without avowing its own racist, sexist, homophobic, and ableist fantasies. Melvin’s bigotry is more complicated, however, than individual eccentricity, because Melvin himself is established from the start as someone living with a disability of sorts, explicitly identified later as obsessive-compulsive disorder.

Obsessive-compulsive disorder pulls Melvin into the orbit of medical and psychiatric institutions designed to guarantee the production of “docile bodies.” As Foucault explains, “A body is docile that may be subjected, used, transformed, and improved.” Such bodies come into existence because of the modern era’s “disciplinary methods,” which make possible “the meticulous control of the operations of the body [and have] assured the constant subjection of its forces and imposed upon them a relation of docility-utility.” In other words, during the last two or three centuries bodies have been monitored (by disciplinary institutions and by increasingly compulsory self-policing) for signs of behavioral and physical difference that might impede their productivity; these signs of difference have been duly marked and, if possible, “transformed, and improved.” Because Melvin’s behavioral differences position him outside relations of docility-utility, he is of necessity caught up in objectifying and taxonomic discourses that would “fix” him as obsessive-compulsive.

Of course, Melvin is very different from many people living with disabilities. He is certainly not involved in the movement to develop a minority consciousness among people with disabilities (a reverse discourse of disability that speaks back to, or stares back at, dominant understandings of disability), and those marked as obsessive-compulsive are not near the forefront of such a movement. Indeed, the crisis Melvin experiences can be read as ultimately reinforcing—through its resolution—heteronormativity and ableism.

Whether or not Melvin is a good representative of a person with a disability, he is undeniably linked to other people with disabilities in at least four ways. First, from the beginning of the film, the audience is encouraged, even obliged, to see behavior that sets Melvin apart from others and from unacknowledged norms. As the opening scene ends and the opening credits begin, Melvin retires to the private space of his apartment, and the audience sees some of the behavior that later buttresses the diagnosis of obsessive-compulsive disorder: he ritualistically locks and unlocks the door five times (the odd number would confirm that the door was
indeed locked), turns the lights on and off five times, and then proceeds to the bathroom. After dispensing with the gloves that he wears to protect himself outside the apartment, Melvin opens the medicine cabinet, which is filled with two kinds of soap, meticulously arranged on two different shelves. Melvin washes his hands under intensely hot water—saying to himself, “Hot, hot!” as he does so—and, after throwing out the first bar of soap, repeats the ritual with a second bar. Opening credits often provide filmmakers with a space in which to present “background information” efficiently; as the credits roll, many films, for instance, give the audience a sense of the setting by moving through different locations in the city or region where the story takes place. Melvin’s behavior is thus flagged as something that the audience should note to understand fully the story it is about to see. Later his behavior is differentiated from other people’s as he leaves his apartment and heads to breakfast at the restaurant where Carol works—a journey he takes, again ritualistically, every day. Along the way he is careful not to step on cracks in the pavement and to avoid physical contact with others (“Don’t touch,” he says nervously as he moves through the crowds). Melvin brings his own silverware to the restaurant and will eat only at one particular table in Carol’s section. In one scene she draws attention to his behavior (and to the usually unacknowledged norm) by saying, “I’m finally gonna ask—all right, what’s with the plastic picnicware? . . . Give yourself a little pep talk: ‘Must try other people’s clean silverware as part of the fun of dining out.’”

Second, Melvin’s behavioral differences congeal beneath a label that is both institutionally imposed and offered to the audience as a comprehensive explanation for his actions. At one point Melvin, clearly distressed, enters a building with the sign Fifth Avenue Psychiatric Group on the wall. He storms into his doctor’s office and yells, “Help!” When the doctor (Lawrence Kasdan) insists that he “take responsibility for his actions” and make an appointment, Melvin responds, “Doctor Green, how can you diagnose someone as an obsessive-compulsive disorder and then act as if I had some choice about barging in?” The audience later learns that Doctor Green has prescribed drugs to alleviate Melvin’s condition. Melvin is thus “fixed” (contained, stilled, defined) by an institution that then offers to “fix” him in the Foucauldian sense (transform, or improve). The scene in the psychiatrist’s office is not a major scene (in terms of length), but it does not have to be: its function is to mark as natural modern culture’s division of bodies into discrete categories (able-bodied, disabled), and the message works most effectively by simply repeating, not spelling out at length, that cultural common sense. At the same time, the end of the scene confirms its importance by invoking the film’s title. Frustrated in his attempt to gain a session with his doctor, Melvin
reemerges into the waiting room and says to the roomful of patients, “What if this is as good as it gets?”

Third, Melvin is located in what Martin F. Norden calls “the cinema of isolation.” Norden’s comprehensive history of physical disability in film demonstrates how “most movies have tended to isolate disabled characters from their able-bodied peers as well as from each other.” In *As Good As It Gets* Melvin’s apartment is the scene of his isolation. The ritualistic locking represents that isolation as chosen, while the bigotry represents that isolation as deserved. This leads me to the fourth, and perhaps most important, way in which the depiction of Melvin parallels other cultural representations of people with disabilities: his disability (the anomalous behavior for which he has been diagnosed and which sets him apart from other people) is conflated with his character flaws (his bigotry). The film marks no separation between Melvin’s disability and his bigotry; on the contrary, they are repeatedly linked, narratively and visually, and the link is naturalized. *As Good As It Gets* and ableist ideologies in general cannot comprehend it, of course, but there is nothing natural about this link: an obsession with order and cleanliness that translates into ritualistic behavior uncomfortable for people around him (and for Melvin himself) need not simultaneously translate into bigotry. Indeed, for most people diagnosed with obsessive-compulsive disorder, it does not. The film is concerned not with truth or falsity, however, but with truth effects: the message that does not need to be sent, because it has already been received, is that there is no material separation between disability and serious flaws in character.

A key scene in the film lays bare this conflation. Significantly, it was one of the scenes used to market *As Good As It Gets* in previews. Melvin and Carol are at a restaurant together for the first time, and after she threatens to leave because of his constant wisecracks, he tries to fix things by saying, “I’ve got this, what, ailment? My doctor—a shrink that I used to go to all the time—he says that in 50 or 60 percent of the cases a pill really helps. I hate pills. Very dangerous things, pills. Hate. I’m using the word *hate* about pills. Hate.” Melvin then reminds Carol of an earlier evening when she told him that she would never sleep with him. “The next morning,” he says, “I started taking the pills.” When she fails to see his point, he explains, “You make me want to be a better man.” The scene slides seamlessly from a discussion of Melvin’s disability and ways to deal with it to a discussion of his character and ways to improve it. The assumption is that overcoming his disability would improve his character; his sexism, ableism, homophobia, and racism can be treated with a pill. By representing Melvin’s disability or “ailment” as his character flaw, the scene positions his story firmly in already pervasive cultural discourses of disability.
All four of these links to representations of other people with disabilities dissolve, however, as Melvin experiences a heteronormative epiphany: as his love affair with Carol develops, the behavior that audiences have been encouraged to look at slowly disappears, meaning that the diagnosis of his condition is no longer relevant. The romance ends his isolation, of course, and he is represented at the end of the film not as a bigot but as a romantic with a heart of gold. During the film, in short, Melvin's identity flexibly contracts and expands. Able-bodied status is achieved in direct proportion to his increasing awareness of, and need for, (heterosexual) romance.

Both disability and nonheterosexual identity must be visually located elsewhere to allow for this subjective contraction and expansion, and the need for such a relocation or containment of difference to be visible helps explain the complex supporting role played by Simon, Melvin's gay neighbor. Simon provides what might be seen as the thesis of the film. He is a painter who is shown, in an early scene, working with a model whom one of his friends has recruited from the street. (It is this model and his own friends who later burglarize Simon's home.) Trying to find just the right pose with this model, Simon—with soft music breaking in to accompany his speech—provides viewers with his philosophy as a painter:

What I do is I watch. You ever watch somebody who doesn’t know that you’re watching them? An old woman sitting on a bus or kids going to school or somebody just waiting—and you see this flash come over them and you know immediately that it has nothing to do with anything external because that hasn’t changed. And when you see it, they’re just sort of realer and they’re more alive. I mean, you look at someone long enough, you discover their humanity.

This insight changes everything (momentarily) for the model, who suddenly understands and accidentally falls into a thoughtful pose that Simon finds ideal. More important, this scene is offered as a context for Melvin's story. As the music abruptly shifts to a fast-paced, even anxious clip, the audience sees his legs moving through the streets of New York. The audience has already seen Melvin jumping around on the sidewalk to avoid the cracks, but the focus on his legs, by reducing him to his body parts, more efficiently objectifies him and highlights his condition. It also shows more dramatically the disruptive effect of his behavior on other people (it even causes one man to fall off his bicycle). In the context of Simon's speech, the implication is threefold. First, Melvin's humanity is not visible at this point; second, his disability, and not his bigotry, is the sign of his inhu-
manity; but third, a transformation can and will come: the audience will see even Melvin’s humanity by the end of the film. Of course, the transformation does come as Melvin moves away from disability to a picture-perfect (heterosexual, able-bodied) Hollywood ending.

This transformation happens over and through disabled bodies—most visibly Simon’s, but also Spence’s. Spence requires so much care that Carol begins to miss work. Since the break in his routine is so distressing, Melvin arranges to pay for Spence’s medical services, including the attendance of a personal physician at Carol’s home. Meanwhile, because Simon’s own medical bills are so large following the break-in, and because it has broken his spirit so badly that he can no longer work, his friends convince Melvin to drive Simon to Baltimore to petition his parents for money. Because Carol feels obligated to Melvin, she cannot refuse when he asks her to accompany them.

The transfer from New York to Baltimore is only one of a series of epiphanic transfer scenes between Melvin and Simon. The most important one precedes the Baltimore trip. Upset over an encounter in which Carol informs him that she will not have sex with him, Melvin—unable to sleep—brings Simon some Chinese soup, and the two of them sit on a bench in Simon’s apartment. The men are positioned on either side of the screen: Simon, facially disfigured, wearing a cast, and using a cane, on the left; Melvin, whose body is not visibly marked as different, on the right (fig. 1). Melvin begins to talk about how distressed he is: “I haven’t been sleeping. I haven’t been clear in my head or felt like myself. I’m in trouble. It’s not just the tiredness. Boy, it’s—” Simon chimes in and completes the thought: “—sick . . . nauseous.” “Sleepy,” Melvin adds, but Simon has taken over the conversation. With a pained expression, he continues, “Where everything looks distorted and everything inside just kind of aches and you can barely find the will to complain.” His insight completes a transfer; whatever Melvin was experiencing when he entered the apartment, it is Simon who is experiencing it now. Simon’s insight somehow enables Melvin to get up from the bench, refreshed, and say (oblivious to the pain Simon continues to feel): “Yeah, I’m glad we did this. Good talking to you.” As the scene opens, the two men are in sync; they work together to make sense of the their anomalous feelings, which are grounded, for both men, in their bodies. However, Melvin progressively sheds his sense of physical difference, so that by the end of the scene difference is wholly located in, and embodied by, Simon.

The audience “discovers Melvin’s humanity” as he works with Simon through such epiphanic scenes, and as Simon flexibly complies. The extreme homophobia that Melvin exhibits early in the film subsides, and he learns to be
tolerant of the difference Simon embodies—or rather, of the differences Simon embodies as he comes to be the main representative not only of homosexuality but of disability. No one in the film, however, comments on the shift Melvin experiences. As I have suggested, the successful heterosexual subject performs as though there were no crisis and no shift, as though he or she were exactly suited to the new role of working with rather than against queerness and disability.

Ironically, Simon experiences a temporary heteronormative, able-bodied epiphany of his own and, through that heterosocial, if not heterosexual, experience, teaches Melvin about the flexibility that he needs to succeed with Carol. Tired of Melvin’s jabs and gaffes at the restaurant in Baltimore, Carol leaves and storms into Simon’s hotel room, informing him that Melvin will not come looking for her if she stays there. As he watches Carol draw her bath, Simon suddenly is inspired to draw again. She at first resists, but soon the two are laughing together, surrounded by his new drawings. Simon is so exhilarated that he rips off the cast (although he uses a cane for the rest of the film).

Simon’s epiphany angers Melvin but also demonstrates to him what he
needs to do. As Carol tells him in the morning, when he demands to know whether she and Simon had sex: “To hell with sex—it was better than sex. We held each other. What I need, he gave me, great.” Ultimately, Melvin learns the lesson, and he too works with Simon as the film moves rapidly toward its conclusion. Simon’s apartment has been sublet, so after the threesome returns to New York, Melvin sets up a room for him in his own apartment. The stage is thus set for a final scene between the two men, and what Melvin needs, Simon gives him, great. After Carol calls to tell Melvin that she is sorry for getting angry with him but also is not sure if she should see him again, Melvin demands that Simon help him. “You people are supposed to be sensitive and smart,” he sarcastically comments. As Simon, hobbling with his cane, follows Melvin around the apartment, he convinces him that going over to Carol’s is the best thing to do. Simon, in his very last lines, facilitates the affair between Carol and Melvin, telling him to “go over there, do this, catch her off-guard.” Having served their purpose, Simon, disability, and queerness are then hustled offstage together. As Melvin turns to leave the apartment, he realizes that he has changed: he has forgotten the ritualistic locking of the door.

The film concludes with a fairly traditional reconciliation between the male and female leads. In the last frame, as Melvin and Carol enter a bakery together, he realizes that he has stepped on a crack in the pavement. Thus the heteronormative epiphany that ends the film is once more visually linked in this frame to Melvin’s own able-bodied epiphany.

**Accessing Queer Theory and Critical Disability**

Cultural representations of ability and heterosexuality like those in *As Good As It Gets* are unique to the past few decades. The homophobia and ableism represented in films and other cultural texts throughout the twentieth century—and carefully documented by Vito Russo in *The Celluloid Closet* and Norden in *The Cinema of Isolation*—have been superseded (but not entirely replaced) by new, improved, and flexible homophobia and ableism. The more efficient management of queerness and disability suggests that a heterosexual, able-bodied culture has learned some, but most certainly not all, of the lessons of contemporary movements for liberation that queers and people with disabilities have shaped.

What if this is as good as it gets? It is not only award-winning Hollywood films that provoke such resignation. As President George W. Bush took office in 2001, the appointment of an openly gay Republican to the position of AIDS czar covered over the antigay alliances that had propelled the new administration to power, just as the almost immediate signing of the “New Freedom Initiative”
masked the fundamentally antidisabled positions that sustain both the Republicans and their New Democratic predecessors and allies. The New Freedom Initiative allows people with disabilities to take out low-interest loans to buy equipment from businesses and rehabilitation centers, but it does nothing to address the systemic economic inequality that many people with disabilities face. Most important, it is the businesses and rehab centers that receive grants for the initiative, not people with disabilities themselves. Beyond that, the general emphasis on “smaller government” by both New Democrats and Republicans inevitably requires cutting programs on which disabled people often rely for survival. Despite the supposed emphasis on diversity, and despite the temporary visibility of disability and homosexuality even in the new administration, the flexible corporate strategies that undergird contemporary economics, politics, and culture invariably produce a world in which disability and queerness are subordinated or eliminated outright.30

According to the logic of such a culture, all disabilities—and, for that matter, all varieties of queerness—are essentially temporary, appearing only when, and as long as, they are necessary. Although the disabilities resulting from the attack on Simon in *As Good As It Gets* would seem to differ from disabilities (such as Melvin’s) that can be “transformed, and improved” and disabilities or conditions (such as Spence’s) that are more chronic, all ultimately serve the expansion of able-bodied identity and—most important—can be moved from center stage as that expansion takes place. Similarly, the model who beats Simon and is initially represented as a street hustler, and Simon’s black gay friend and colleague, Frank Sachs (Cuba Gooding Jr.), who is portrayed as a much more flamboyant character than Simon, may have very different lives from Simon; all have sexualities, in turn, that are different from the “sexualities” of Spence and Carol’s mother, Beverly (Shirley Knight) (Spence and Beverly are, in fact, represented as having no sexuality). Ultimately, however, the range of real or potential sexual identities only facilitates the heteronormative coupling represented by Melvin and Carol at the end of the film; it is no longer needed once that coupling is secure.

*As Good As It Gets* is thus unable to imagine critically disabled positions and practices. Critical disability may be an able-bodied culture’s worst nightmare, but theorists and activists have nonetheless begun to claim critically disabled identities and to position them as permanently contestatory conditions. To “claim [critical] disability,” it would seem, is to reject the cultural devaluation of disability and to recognize disability as a vital force that constantly reshapes culture despite ableist norms that would relegate it to a supporting role.31 The verb phrase thus parallels *queer*, which similarly has been used to describe not just a thing but a process. “To queer,” I suggest elsewhere, is “to bring out the difference that is
compelled to pass under the sign of the same.” An alliance between queer theory and critical disability allows us to affirm, strategically, that the two activities are in many ways of a piece: queering entails rejecting cultural devaluation and reshaping heterosexist norms, and claiming disability entails bringing out the multiple differences that are compelled to pass under the sign of the same.

The projects of queer theory and disability studies overlap or—at the very least—inform and engage each other in several other ways; some of these points of convergence are both defined and contested in this special issue of *GLQ*. To further the development of critically disabled and queer perspectives, I enumerate in closing five ways in which the two movements already come together. First, both LGBT movements and the disability rights movement (along with disability studies in the academy) have deployed what has been called in gay studies the “minority thesis.” This thesis has two forms, and it is only the second that the dominant culture seems able to comprehend. The first suggests that a group is socially constructed as a minority because of structural oppression: a heteronormative or able-bodied society has structured the world so that those who do not fit the norm are constituted as a minority. Minority consciousness, in this scenario, is a liberationist consciousness that entails recognizing one’s position as a member of an oppressed minority and fighting to demonstrate that the world would be a better place for all people if the conditions that produced that minority status in the first place were changed. The second understanding of minority identity, which significantly dilutes the first, is the understanding represented in films such as *As Good As It Gets* and in token appointments such as the Bush administration’s openly gay AIDS czar. It simply suggests that there are various types of people in this multicultural world and that difference is a good thing that should be (at best) celebrated or (at worst) tolerated. This multicultural model takes note of difference but cannot comprehend the transformation of the structures that privilege heterosexuality and able-bodiedness. Queer theory, which has critiqued minority identity precisely because of the tendency of the resistant sense of minority identity to devolve into mere celebration of difference, posits instead a more contingent, fluid sense of identity. Disability studies’ current emphasis on a strong (and nonessentialized) minority identity emerging from a common experience of able-bodied oppression, however, might usefully inform, and reinvigorate, understandings of minority identity in and around queer theory.

Second, queer and disability movements have interrogated the construction and presumed naturalness of the norm, whether it be able-bodiedness, heterosexuality, or—since they are mutually constitutive—able-bodied heterosexuality. As I have suggested, because of such interrogations, heterosexual, able-bodied sub-
jects are not always invisible; dominant discourses now position heterosexuality—and even sometimes able-bodied identity—as partly visible and as working with newly acknowledged LGBT and disabled subjects. Interrogation of the norm, however, remains a major project for disability and queer studies, since able-bodied and heterosexual norms have proved so resilient, epiphanically reconstituting themselves through the very crises that would seem to dissolve them.

Third, both disability studies and queer theory have attempted to move the conversation forward in the humanities, positioning people with disabilities and LGBT people as subjects rather than objects of (scientific or psychological) scrutiny. The project that David T. Mitchell and Sharon L. Snyder, for example, establish from the first sentence of their anthology *The Body and Physical Difference* is the introduction of “questions on the representation of disability to critical discourses in the humanities such as the body, cultural studies, minority studies, history, and aesthetics,” since disability has only been “the province of numerous professional and academic disciplines that concentrate upon the management, repair, and maintenance of physical and cognitive incapacity.”

Fourth, and related to the move from object to subject and from the sciences to the humanities, both queer and disability movements are attuned to how queerness and disability are metaphorized. Linton (echoing many other scholars in disability studies) points out that “the metaphors that allude to disability or that invoke disability imagery are everywhere, and the ideas they are based on are accepted so casually that we will have a hard time dissuading people from using them.” In my mind, this is where the two projects come together in the most promising ways, since queerness can be so easily metaphorized as disability, and vice versa. This is also one of the reasons that a disability studies perspective needs to be named as such in queer theory, and vice versa. Without such an explicit naming, it would be possible, for instance, to respond to how queerness is metaphorized as disability, even in a film like *As Good As It Gets*, by insisting that homosexuality is not a disability, all the while leaving intact the cultural assumption that disability is equivalent to a lack, a weakness, or a character flaw. Claiming critical disability in queer theory (and vice versa) allows us to challenge the conflation of disability and queerness from a perspective that challenges even more the cultural devaluation of both.

On this point, in particular, current debates in Deaf studies seem instructive. Deaf activists have insisted for some time that deafness should not be understood as a disability and that Deaf people should be seen instead as having a distinct language and culture. As the disability rights movement has matured, however, some Deaf activists and scholars in Deaf studies have rethought this position and have claimed disability (i.e., disability *revalued* by a disability rights
movement and disability studies) in an attempt to affirm a coalition with other people with disabilities. Gay and lesbian liberation, like Deaf liberation, includes a historical refusal of dominant discourses of disability—a refusal that spurred an activist campaign culminating in the 1974 removal of homosexuality from the American Psychiatric Association’s list of mental disorders. Almost thirty years later, under very different historical circumstances, it is worth rethinking the discursive strategies that fueled that campaign and, following the lead of some Deaf activists and scholars, affirming the coalition between LGBT communities and people with disabilities.37

Finally, critical disability and queerness have the capacity to speak back to the ubiquitous discourse of flexibility in our culture. Queers and people with disabilities should insist, inflexibly, that we will not serve as metaphors for each other and will not simply be tolerated, especially when that tolerance is used, paradoxically, to shore up heterosexual, able-bodied perspectives that continue to subordinate queerness and disability. Cultures of queerness and disability founded on access might, in fact, be positioned in explicit resistance to cultures founded on flexibility. Queer theory and critical disability, however, would demand not simply literal, physical access to already existing cultural spaces and institutions but access to the always shifting locations where identities, communities, and publics are both shaped and contested.38 We cannot predict what critical and transformative identities will emerge as alternatives, but able-bodied heterosexuality is undoubtedly not as good as it gets, and accessing queer theory and critical disability means continually imagining other possibilities.

Notes

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1. Eve Kosofsky Sedgwick writes: “To the degree that heterosexuality does not function as a sexuality . . . there are stubborn barriers to making it accountable, to making it so much as visible, in the framework of projects of historicizing and hence denaturalizing sexuality. The making historically visible of heterosexuality is difficult because, under its institutional pseudonyms such as Inheritance, Marriage, Dynasty, Family, Domesticity, and Population, heterosexuality has been permitted to masquerade so fully as History itself—when it has not presented itself as the totality of Romance” (Tendencies [Durham: Duke University Press, 1993], 10–11). David M. Halperin, similarly, argues: “By constituting homosexuality as an object of knowledge, heterosexuality also constitutes itself as a privileged stance of subjectivity—as the very condition of knowledge—and thereby avoids becoming an object of knowledge itself, the target of a possible critique. . . . (Heterosexuality, not homosexuality, then, is truly ‘the love that dare not speak its name’)” (Saint Foucault: Towards a Gay Hagiography [New York: Oxford University Press, 1995], 47–48).


6. For an analysis of able-bodied heterosexuality that is closely related to this essay and that includes a more comprehensive reading of critical disability through Judith Butler’s and others’ ideas of “critical queerness,” see my “Compulsory Able-Bodiedness and Queer/Disabled Existence,” in Disability Studies: Enabling the Humanities, ed. Sharon L. Snyder, Brenda Jo Brueggemann, and Rosemarie Garland-Thomson (New York: Modern Language Association of America, 2002), 88–99.

8. Ibid., 162–63.

9. Ibid., 163.

10. For a discussion of what he calls dominant, residual, and emergent discourses see Raymond Williams, *Marxism and Literature* (Oxford: Oxford University Press, 1977), 121–27. In this essay I intend not to deny the ongoing power of residual discourses—discourses, for instance, that stress heterosexuality’s “invisibility”—but to consider how other discourses are emergent or even dominant. A discourse is “residual” not because it is weak or uncommon but because it was formed in an earlier era: “The residual, by definition, has been effectively formed in the past, but it is still active in the cultural process, not only and often not at all as an element of the past, but as an effective element of the present” (122). Didi Herman’s work on the Christian Right, for instance, attests to the power that residual discourses can have (*The Antigay Agenda: Orthodox Vision and the Christian Right* [Chicago: University of Chicago Press, 1997]).


19. It is a “striking fact . . . how much we overlook the prevalence of disability and the frequent presence of disabled characters. Why are there so many disabled characters, and why do we overlook them so much of the time?” (Paul K. Longmore, “Screening Stereotypes: Images of Disabled People,” Social Policy 16 [1985]: 31). Similar observations are made throughout disability studies; for example: “A disabilities studies consciousness can alter the way we see not just novels that have main characters who are disabled but any novel. In thinking through the issue of disability, I have come to see that almost any literary work will have some reference to the abnormal, to disability, and so on” (Lennard J. Davis, Enforcing Normalcy: Disability, Deafness, and the Body [London: Verso, 1995], 43).


21. Martin, Flexible Bodies, 93.

22. Ibid., 145.

23. Heteronormative, able-bodied epiphanies are probably most common in mainstream films and television movies about AIDS, even—or perhaps especially—when those films are marketed as “new” and “daring,” like the 1997 Christopher Reeve–directed HBO film, In the Gloaming, in which the disabled, queer character dies (yet again) at the end, but not before effecting a healing of the heteronormative family. I focus in this
essay on a non-AIDS-related film about disability and homosexuality because I think that the epiphanic processes I theorize here have a much wider currency and can be found in many cultural texts that attempt to represent queerness and/or disability. For an extended discussion of both In the Gloaming and the Nuveen Investment Corporation advertisement in which Reeve—through computer simulation—is shown walking, see my “Critical Investments: AIDS, Christopher Reeve, and Queer/Disability Studies,” in Thinking the Limits of the Body, ed. Gail Weiss and Jeffrey Cohen (Albany: State University of New York Press, forthcoming).


26. Those marked as obsessive-compulsive are not among the leaders of a movement driven by such a discourse because it is easier for blind people, Deaf people (see n. 37), people who use wheelchairs, and people with visible bodily differences to embrace the minoritized identity I discuss in my conclusion and to resist the ideologies of treatment and “cure” that are arguably still central, even in some instances exclusive, organizing principles for people with obsessive-compulsive disorder or some other mental or behavioral disabilities. This is not to say that a reverse discourse or minority consciousness is impossible (it seems to me that a reverse discourse is virtually always possible), but there has been fairly little space for, or collective discussion of, such a consciousness, and thus it is at this point difficult to imagine. Although Emily Colas is not at all in conversation with the disability rights movement and only partly comprehends a minority identity, her work points to other possibilities, if only because Colas herself, and not the psychiatric establishment, tells the story (Just Checking: Scenes from the Life of an Obsessive-Compulsive [New York: Pocket, 1998]). The idea of staring back comes from Kenny Fries, ed., Staring Back: The Disability Experience from the Inside Out (New York: Plume, 1997).


28. In fact, Colas’s worries often produce extra concern for other people: when she hits a chipmunk while driving home from her children’s school, she repeatedly returns to confirm that she has not hit a small child (Just Checking, 108–9). Even medical information on obsessive-compulsive disorder, which would be more complicit than per-


33. It is in cultural activism and cultural theory about AIDS that a collaboration between queer theory and disability studies is proceeding, and has been for some time, even though it has not been acknowledged or named as such.


37. In this paragraph I follow the accepted practice within Deaf and disability studies of using deaf, with a lowercase d, to refer to the auditory condition and Deaf, with an uppercase D, to refer to the cultural and linguistic identity.

38. José Esteban Muñoz provides numerous examples of “disidentificatory” practices, for instance, the ways that Pedro Zamora refused identification with the corporate goals of MTV and used his appearance on *The Real World* during the 1993 television season to shape a public, politicized Latino AIDS activist identity (*Disidentifications: Queers of...*)
Like queer cultures of disidentification, cultures of disability and queerness founded on access would continually work to multiply the locations where sexual, bodily, and mental difference can be understood (and can materialize) in terms other than those demanded by a heteronormative, able-bodied culture.