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**Constructions and Materialities of (dis)abled
bodyminds**

A Spatial Analysis



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Abstract

The word *disabled* effectively narrows the scope for understanding the body as *dis-* functions is a negatively loaded prefix to the norm of being *able*. Subsequently, the 'disabled' body is lacking in comparison to the 'able' body, constructing one good and preferred category and one bad and undesired category of the same phenomenon – the body. Transforming this perspective on the body has the potential of contributing to a respectful and equal human relation independent of the body. This thesis applies the novel theoretical framework of (dis)abled bodyminds, grounded in feminist theory and disability studies, the framework analyzes how the constant circle of structural conditions, materiality, and the bodymind that disables specific bodyminds. The thesis analyzes how defining and normalizing disabled bodies is embedded within structural conditions, which manifests materially in our bodyminds in three spaces: public space, private life, and academia. Through applying this framework, the thesis finds that (dis)abled bodyminds become either invisible or abnormal when spaces are inaccessible to them. I conclude that the construction of 'disabled' bodies contributes to maintaining the status quo of society, contributing to the discrepancies of human relationships.

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Chapter 1

Introduction

This thesis questions why Western society accepts the neglect of disabled people. It adds theoretical and empirical ground to critical scholarship by analyzing constructions of ‘disabled’ bodies. The contemporary discourse on disability is focused on including disabled people in Western society. However, there is little attention to whether society needs to change in order to undermine inequities that stem from disabling structures and relations. Merely including disabled people in society is insufficient for ensuring equality (Young & Quibell, 2000). Transforming the discourse on – and thus our attitudes towards – disability is foundational to promoting meaningful social inclusion of (dis)abled bodyminds¹. A shift in discourse and attitude implies a change of focus – from adapting and conforming, to questioning and challenging the status quo. A change in discourse on, and attitudes towards disabled people implies shifting the focus from simply including disabled people, to how to dismantle the discriminatory structural conditions that maintain exclusion in Western society. Directing a change of focus prompts asking:

How are Western constructions of disability embedded in social structures that shape social differences?

This question is elaborated through two sub-questions that serve the critical function of discovering the relationship between structural conditions and society, and the liberating function of exposing the consequences of discrimination against stigmatized (dis)abled bodyminds:

¹ (Dis)abled bodymind is a term that references the individual, but emphasizes the fluidity of and between the body and mind through time and space (See Chapter 2.2 (Dis)abled Bodyminds).

- (1) How are disabled bodies defined and normalized through structural conditions?
- (2) What effects does the construction of disabled bodies produce?

This thesis situates the lived experiences of four (dis)abled bodyminds and presents the voices of numerous stigmatized (dis)abled bodyminds from across the West to explore where disablism occurs and what practical and structural conditions facilitate it. A pillar in this research is the idea that (dis)abled bodyminds' lived experiences are situated within how and where structural conditions manifest in society. This thesis serves both a critical and a liberating function by engaging with several models of disability and feminist theories. By critically examining the structural conditions that allow for defining and normalizing 'disabled' bodies, this thesis shows how constructing 'disabled' bodies reinforces discriminatory and hostile social spaces, as well as societal consequences of discriminating stigmatized (dis)abled bodyminds.

Feminist theory and disability studies underpin the analysis through the framework of (dis)abled bodyminds which consists of structure, materiality, body and mind. Ahlborg's and Nightingale's (2017; 2011) theory of relational power helps understand the discrimination of disabled people as emergent and produced structurally and relationally and therefore how ableism must be reproduced in order to maintain. Campbell's (2008) explanation of disbalism illustrate how structural ableism manifests in the material world of infrastructure. Longhurst's (2001) emphasis on the tangible body and corporeality ensures the critical point of acknowledging the lived experience of the (dis)abled bodymind. Butler's Heteronormative Matrix helps to show the processes through which norm-functioning bodies are constructed and the dangers of leaving them unchallenged (2006). Disability Studies is applied as a methodological approach throughout this thesis to question Western ideology and produce knowledge supporting justice for people with stigmatized (dis)abled bodyminds (Minich, 2016). The objective of applying disability studies' methodology is to bring stories of (dis)abled bodyminds subjected to disablism discrimination into the center of this thesis to challenge the status quo and expose the consequences of structural conditions that allow for defining and normalizing disabled bodies.

This thesis argues that ontological and epistemological assumptions construct people's perception of the body and its role in society. Specifically, I suggest that the definition and normalization of disabled bodies are rooted in Western binary ontologies and epistemologies of sight and measurability. By situating and comparing the lived experiences of both stigmatized and norm-functioning (dis)abled bodyminds, when and where the construction of disability privileges some bodies while restricting other bodies becomes clearer – exposing the ableist conditions of the structures in contemporary Western society.

Drawing on the informants' lived experiences and embodied knowledges, this spatial analysis of constructions and materialities of (dis)abled bodyminds adds to discussions on how to challenge ableist structural conditions. Exposing ableist structural conditions facilitates ways to dismantle the current discrimination of disabled people. This thesis contributes compelling arguments for including and respecting disabled people in mainstream research, development, and society on the grounds that ableist structures of Western society are the roots of the exclusion of disabled people. This thesis acts as a stepping stone towards the exploration of ableist structures that can inform how to better facilitate the inclusion, representation, and participation of disabled people in society.

1.1 Agenda

Several assumptions follow the research questions of this thesis. This subchapter presents and questions these assumptions. The first assumption is that structural conditions allow for constructing disabled bodies; thus, the research question implies that structures withhold the discrimination of disabled people through its conditions. Therefore, we need to explore the meaning of structural conditions. The second assumption is that disability, to some extent, is socially constructed. Therefore, we must also attend to what constructions are.

Social structures are the features of a social group that persists over time (Garfinkel, 1982; Haslanger, 2016). Social structures are the distinctive, stable arrangement of institutions whereby human beings in a society interact and live together. The social structures are interrelated and influence the functioning of the social group as a whole and its individual members' activity (Wilterdink, 2020). Subsequently, a structural condition is a feature of social structures, restricting the

room for maneuver for the social group and its members. The effects of structural conditions are both material and abstract; structural conditions are rules and norms, materially affecting social systems and relations, attitudes, and opportunities.

A social construction is the production of meaning-making of social phenomena. A social phenomenon is not constant, but shaped and reshaped through active interpretations and definitions that arise through social interaction. As exemplified in Section 1.2, the different models of disability have portrayed disability differently through time, with material effects on policies and the experiences of disabled people. Subsequently, socially constructed phenomena such as disability do not operate the same over space and time.

1.2 Historical models of disability

Disabled people have been living secluded from society for centuries (Slorach 2015). The wellbeing of disabled people is currently of governmental responsibility in Western states (Justice, 2020; Larsen, 2015; Lovdata, 2020; UN, 2021b). Despite the continuous transition of contemporary understandings of disability since the 1700s, traces of the historical neglect of disabled people are still prevalent in Western societies. The development of the contemporary understanding of disability originated in Britain with the industrial revolution (Slorach 2015). In Britain, the industrial revolution of the late 1700s changed society drastically; as families started working outside of the home, disabled people became of public concern. Throughout the 1800s, the state moved disabled people out of the family homes and into asylums, poverty house systems, workhouses, and penitentiaries (HE, 2021a; NAKU, 2020; Slorach 2015). Several countries institutionalized disabled people as the industrial revolution extended across the West. Throughout the 1900s, both rapid institutionalization and rapid deinstitutionalization took place across Western countries.

Disabled people and their allies have raised their voices in protest of their precarious situation which has been characterized by segregation and discrimination in Western society (Anderson & Carden-Coyne, 2007; J. Campbell & Oliver, 1996; Carmel, 2020; Charlton, 1998; Dreidger, 1989; Meldon, 2021; NHF, 2021). As a result, disabled people's situation has improved in line with the increased standard of living in the general population, welfare, increased activism and knowledge

production (Slorach 2015). Nevertheless, the legacy of segregating disabled people from society, and thus the definition of ‘disabled’ bodies, sustains. Separate community care homes, schools, and classrooms, as well as inaccessible public spaces, are manifestations of the traditional neglect of disabled people. Consequently, this thesis argues that structures of the industrialized Western state lead to the discrimination of disabled people.

Today, there is no prominent definition of disability in Western society. Disability can be defined by the means of several models, such as the medical, social, rights-based, cultural, biopsychosocial, Nordic and more (Lawson & Beckett, 2021). Today, the Western definitions of disability are mainly characterized by the medical, social and right-based model (Retief & Letšosa, 2018). Consequently, the background for this thesis bases on Western historical development of:

- (1) defining disability; and
- (2) discriminating against disabled people.

The following Sections 1.2.1 to 1.2.3 reiterates points 1, and 2 by presenting the medical-, social-, and the rights-based models.

1.2.1 The medical model: disability as deficiency

The medical model prevailed in the 1950s and 1960s, conceptualizing disability as a tragedy or problem in the individual body or mind. The medical model is popularly criticized for emphasizing physical rehabilitation and professional power (Swaine, 2011). The medical model is essentialist: inhabited by assumptions that shaped the actions invoked by professionals on the individual (Lesnik-Oberstein, 2015). The medical model thus enabled discrimination and marginalization of disabled people.

A rapid institutionalization degenerated during the prevalence of the medical model. In 1949, the Norwegian Government passed a law that "the mentally ill receive care, protection, and education" (translated). As a consequence, the development of institutions boomed throughout the 1950s and 60s (NAKU, 2020). Disabled people resided in institutions that were geographically separated from society. The residents were typically treated equally regardless of their individual

conditions and needs. The medical model of the West enabled systematic treatment of disabled people such as: numbing mass medication, involuntary sterilization, and physical restriction through apparatus. In other words, disabled people were systematically exposed to human rights violations during the prevalence of the medical model (Lesnik-Oberstein, 2015).

The situation in other Western countries was similar to the institutionalization in Norway; the general philosophy was that the state should take care of disabled people. The systematic treatments of disabled people during the prevalence of the medical model were characterized by unchecked professional power and a lack of research and knowledge on the diversity of disabled people. However, in the mid-1960s, the growth of institutions stagnated. By the 1980s, the West began a process of deinstitutionalization as a counter-reaction to the medical model of disability.

The medical model still influences the relationship between the state and disabled people. Disabled people still reside in community care homes, and are currently alarming us about a re-institutionalization. We see a trend where the number of disabled people per community home is increasing (FFO, 2019; UN, 2019a). Additionally, prior medical terms live on as slurs in our language (NCDJ, 2021). Thus, accommodating attitudes of negative character towards disabled people live on in our subconscious and conscious mind.

1.2.2 The social model: disabling effects of inaccessibility

As deinstitutionalization spread across the West, the social responsibility of disabled people was to be transferred to local governments (HE, 2021b; NAKU, 2020). Simultaneously, the social model of disability, as theorized by Oliver (1990), prevailed. Today, the social model of disability is the most widely adopted definition of disability. The social model presents disability as a social phenomenon caused by social oppression and prejudices, rather than individual impairments. The social model defines "impairments" as defective mechanisms in the body and "disability" as the exclusion from which impaired people suffer - making disability the result of social, physical, and structural barriers in society (Beaudry, 2016). The social model has influenced theory in social science and policies in Western society.

The social model has successfully influenced academic literature and political action since the 1980s. Consequently, the social model has contributed to increased

accessibility for disabled people in Western society since the prevalence of the medical model. However, the social model has also received criticism for its simplified definition of disability, neglecting the disabling effects of pain and fatigue. Not all disabilities can be alleviated by adjusting the social environment, and the social model thus leaves personal and social differences unacknowledged. In similarity to the medical model, the social model arguably becomes essentialist as well, portraying the disabled experience without nuance (Owens, 2015; Terzi, 2004). The social model is still the most prevalent model in Western society, still influencing policies and laws for making public space accessible.

1.2.3 The rights-based model: same needs by different means

The Human Rights-based model, or rights-based model, of disability bases on the social model of disability theorized by Oliver (1990). The rights-based model was presented in the UN Convention on the Rights of Persons with Disabilities (CRPD). CRPD includes the human rights, a definition of who these rights apply to, and a guide for how to secure these rights in practice - intended as a normative framework for states to implement. The rights-based model constitutes that all people have the same human rights, but achieve their rights by different means as Skarstad (2019, p. 10) exemplifies when underlining the difference between human rights as ideal and practice: the right to health is a universal *idea*, but women and men do not *practice* their right to health equally.

Today, the CRPD has become a valuable tool for disabled people to claim their rights (UN, 2019b). However, the rights-based model has received criticism for depending on the welfare state and focusing on facilitating practices of inclusion and accommodation at the individual, rather than the structural level. Therefore, the CRPD risks partial inclusion without genuine equality of opportunity (Grue, 2019). The goal of the CRPD is arguably to absorb disabled people into the normative way of living and maintain the status quo of Western society. The CRPD has been ratified by most Western countries, however, disabled people still experience human rights violations today (Skarstad, 2019). While developing and ratifying normative frameworks can be of affirmative value, its practical value dissolves when states are not held accountable.

1.2.4 Contemporary Western understanding

Disability is conceptually challenging. Neither the medical, social, nor rights-based model of disability can cover the complexity of disability. What all of the presented models of disability have in common, some more than others, is that they can reproduce a damaging negative ontology of disabled people's lives. A clear-cut definition of disability is not the goal of this thesis; the focus is rather on inspecting the system in which disability becomes something of a negative character. The common views norm-functioning people have on disabled people are binary: disabled people are either victims of a tragic destiny or as heroes that function despite their challenges (Tear, 2021). The study in Grøndahl, Eriksen, and Sæbønes (2021) suggests that norm-functioning people fear becoming disabled. Attitudes towards disabled people are characterized by a narrative that they are not living full lives. What is evident is that disabled people experience exclusion and discrimination – otherwise, norm-functioning people would not fear becoming disabled.

Developing models of disability and normative frameworks within oppressional systems will not lead to transformation. Several scholars stress the fact that being 'disabled' in Western society means to be Othered and necessarily entails discrimination. Disclosing as disabled means being categorized as a deviant from the norm, leading to stigmatization. In society, there are normative standards of embodiment that people ought to live up to, and anyone who does not is stared at, ignored, feared, or in various ways marginalized through oppressive practices (Ahlvik-Harju, 2016; Goffman, 1990). Thus, transforming the definition and normalization of specific bodies as 'disabled' can be of great value for many people. Human geographers can assist in a social transformation by conducting critical research and amplifying embodied knowledge from (dis)abled bodyminds. In the status quo, disabled people are disabled by a society that is not developed for them. Frictions occur when disabled people have to fit into a society that was not made for them. Correspondingly, disabled people are perceived as a problem by society, while society itself is the problem through its structural conditions.

1.3 Target groups

This thesis targets three specific groups: human geographers, disability studies scholars, and people with disabilities and their interest groups. Social science does not

reflect society sufficiently without the voices of stigmatized (dis)abled bodyminds. Geographers must account for disability and embodied knowledge in planning and academic research. Research shows that development without considerations of stigmatized (dis)abled bodyminds is neither socially, economic, nor environmentally sustainable (UN, 2021). This thesis offers tools to discover and understand the structural exclusion of stigmatized (dis)abled bodyminds that planners and scholars should strive to eradicate. It contributes new insights to disability studies by using human geography and its spatial properties to situate the lived experiences of (dis)abled bodyminds and use a scalar perspective to critically analyze how structural conditions manifest materially in infrastructure and bodyminds. Lastly, this thesis can serve as a source for arguing that stigmatized (dis)abled bodyminds' experiences of discrimination are rooted in ableist structures. It is the structural conditions of society that have a disabling effect on specific (dis)abled bodyminds. Stigmatized bodyminds simply reflect the structural conditions under which preferred and undesired categories of the body are constructed. I hope that people with disabilities and their interest organizations can use this thesis in some way to help drive change and to direct energy at contesting specific structural conditions of society.

1.4 Disposition

This section presents the structure of the chapters in this thesis. Chapter 2 presents the theoretical framework of (dis)abled bodyminds, consisting of four spheres that include theoretical concepts from feminist theory and disability studies. Chapter 3 presents the methodological positions of assemblage analysis and critical ontology and epistemology of embodiment. Furthermore, Chapter 3 reflects on positionality and reflexivity to ensure a rigid spatial analysis of the constructions and materialities of (dis)abled bodyminds. Chapter 4 presents the practical methods for the data gathering and analysis of the gathered qualitative data. Chapter 5 analyzes the gathered datasets and locates three spaces in which stigmatized (dis)abled bodyminds are defined and normalized as 'disabled'. Furthermore, Chapter 5 discusses the consequences of constructions and materialities of 'disabled' bodyminds in terms of social difference. Chapter 6 concludes the research questions and presents further research directions.

Chapter 2

Theoretical Framework

This thesis's agenda is to illuminate how the definition and normalization of 'disabled' bodies are embedded in social structures and their consequences for social difference. Furthermore, this thesis's key inquiry is to challenge the definition and normalization of 'disabled' bodies by proposing an unconventional understanding of the body: (dis)abled bodyminds. Attending to the normalization of 'disabled' bodies as a particular concept entails exploring the relational practice of reproducing 'disabled' bodies as we know them. Thus, the research questions call for analyzing how the concept of disability is reproduced through constructions and materialities, by situating where the normalization of the concept of 'disabled' bodies manifests materially and constructively.

Disability studies provide extensive scholarship on understandings of disability and a methodology that can ensure a justice-centered research approach. Meanwhile, feminist theory serves as a tool to question the status quo and to understand how structural conditions manifest in the material, the body, and the mind. Both disability studies and feminist theory emphasize the value of embodied knowledge, the importance of critical thinking and activism, effectively serving as tools to iteratively check the agenda of this thesis, and ensuring scrutiny of normative ideology and structures rather than 'disability' itself. Lastly, human geography allows combining the agenda of disability studies and the perspectives of feminist theory together in a productive manner and to visualize and analyze the theoretical concepts in a scalar manner.

The comprehensive work by feminist theorists in (Ahlborg & Nightingale, 2017; Alcoff, 1992; Butler, 2004, 2006, 2010; De Beauvoir, 1949; Flax, 1990; Nightingale, 2011; Warren, 2000) lays the groundwork for examining the process of discrimination of 'disabled' bodies and to develop a strategy for justice between (dis)abled bodyminds. The application of feminist theory in this thesis rests on an understanding of feminist theory presented by Flax in *Thinking Fragments* (1990, p. 20): Flax perceives feminist theory as something that recovers and explores the aspects of societies "that have been suppressed, unarticulated, or denied within male-

dominated viewpoints.” Flax states that feminist theories call for a transvaluation of values – a rethinking of our ideas about what is just, worthy of praise, moral, and so forth. Thus, this research interprets Flax’s definition of feminist theory (1990) as an invitation for any group that is discriminated against due to the traditional philosophy of science – such as ‘disabled’ bodies.

Warren (2000) justifies the transferability of feminist theoretical concepts on the grounds of social constructionism. Feminist theoretical concepts are fruitful for comprehending that the concept of disability is "not fixed, static, self-evident, given, or absolute" (Warren, 2000, p. 58). A conceptual link does not imply a universalism between all oppressed groups, but Warren (2000, p. 53) states that concepts that have been constructed within “an oppressive, patriarchal conceptual framework” throughout Western history can have a *conceptual* link between them. Based on social constructionism, this chapter finds a conceptual link between the constructed categories of women and disability – making feminist theory rewarding for understanding constructions of the ‘disabled’ body if used thoughtfully.

This chapter outlines abstract and material theoretical concepts in line with the agenda of this thesis, dissecting the Western concept of ‘disabled’ bodies and discovering which aspects are constructed and abstract or structural and material. Furthermore, this chapter illustrates how abstract and material aspects of disability relate, equipping us with an understanding of how material and abstract systems on different scales interact and constructs (dis)abled bodyminds. Thus, the theoretical framework allows for situating both where and how the Western understanding of the ‘disabled’ body is reproduced and its effects on social difference. The point of departure is to recognize the commonalities between the prevailing Western models of disability, and how they are embedded in Western ontological and epistemological assumptions.

2.1 Disability and the body in the West today

This thesis builds on the comprehensive work developed by disability studies scholars and addresses their important contributions throughout this chapter (Kafer, 2013; Minich, 2016; Oliver, 1990, 2009; Price, 2015; Schalk, 2018; Shakespeare, 2006). The extensive research in disability studies has developed several models of disability, some of which has been presented in Chapter 1: Introduction.

Subsequently, there are many approaches to disability scholarship within disability studies. This thesis follows Minich's (2016) methodological approach to disability studies that emphasizes its mode of analysis rather than its objects of study. Minich (2016) proposes defining disability studies methodology "as scrutinizing not bodily or mental impairments but the social norms that define particular attributes as impairments, as well as the social conditions that concentrate stigmatized attributes in particular populations." This thesis applies Minich's (2016) methodological approach to scrutinize the binary and negative ontology of the 'disabled' body in contemporary Western society.

Disability is conceptually challenging as the category of disabled people is highly diverse, in terms of diagnosis, other social markers, cultural localization, and class position, and subsequently, every experience of the body is unique. The models which were presented in Chapter 1: Introduction – the medical, social, and rights-based models - locates disablement differently, which in turn informs policy development and social attitudes differently, ultimately having material effects on the lives of (dis)abled bodyminds. Nevertheless, all the mentioned models arguably essentialize 'disabled' bodies, because all models that define and categorize disabled bodies are inherently constructing a social group that excludes and includes particular bodies and minds. In the three specified models of disability, disability relates to the body to varying degrees. To understand their perspective on the body and intrinsic consequences, the following sections present ontological assumptions about the body in Western society.

Ontologies answer the question: 'What is the nature of social reality?' Ontological assumptions about the body therefore make claims regarding the types of body that do or can exist, the conditions of their existence, and their inter-relationships (Blaikie, 2007, p. 13). The Western ontology is characterized by binaries such as male or female, society or nature, body or mind, living or dead, knowledge or experience, child or adult, and so on (Barbour, 2016, p. 228). The Western ontological understanding of the binary is arguably manifested in the word "disabled," where "dis" functions as a negatively loaded prefix to the norm of being "able." Thus, Western Ontology creates one "good" and preferred category and one "bad" and undesired category of the same phenomenon – the body.

The Western understanding of 'disabled' bodies in this thesis references a subjective interpretation of the epistemological and ontological commonalities within

current prevailing framings of disability in Western society and academia. While local, national and individual understandings vary, mainstream Western understandings are arguably underpinned by similar attitudes towards the body and philosophical logic. It is difficult to imagine that binary perspectives do not appear in other world ontologies. However, regardless of existing alternative ontological positions, the Western binary ontology regards a substantial part of the world and is arguably insufficient and worthy of scrutiny. Feminist theorists suggest that binary ways of thinking fuel hierarchies between humans (Nightingale, 2019). By attending to how the body is characterized by Western ontological binaries one can better understand how the three models of disability, while different, all locate within the same matrix of binaries that essentialize the body. Essentialism of disability is damaging because it creates a depiction of disabled people as homogenous a group – while in reality, every experience of disability is as unique as every experience of having a body. This thesis argues that for people with visible and chronic ‘disabilities’ essentialism generates pity or awe, while for people with invisible or temporary ‘disabilities’ essentialism generates skepticism and disbelief.

‘Disabled’ bodies are in a precarious situation worldwide and it is logical to ask whether applying new understandings of the body and disability on public and personal levels can lead to a better situation for (dis)abled bodyminds. The current description of ‘disabled’ bodies is weighed by stigma, arguably imposing disparity and fear for all bodies and minds. Here, fear constitutes fear of the disabled experience for the norm-functioning, and the fear of becoming disabled for the “ambiguous” bodies, and lastly, fear of discrimination for disabled bodies. A new understanding of the body should not only scrutinize disability but scrutinize where and how the current description of ‘disability’ is failing (dis)abled bodyminds.

The Western concept of disability, like other social constructions in the West, such as *gender* and *the nuclear family*, has its primary basis in biological determinism. Biological determinism is the idea that the physical body controls and determines human behavior. The Western concept of "body" determines one’s social positioning; examples such as educational attainment, employment, marriage, and positions of power, are all perceived to be determined by the body's physical appearance (Oyěwùmí, 1997). Concepts such as ableness and BMI are 'scientific' examples of how enshrined biological determinism is in Western society.

The Western ontology, what we deem to be real, is based on Western epistemology, how we know what is real. Western epistemology is characterized by sight and measurable science (Oyēwùmí, 1997). By seeing something or being able to measure it, something can be said to be real. Western society prefers sight over other senses to determine the nature of reality; thus, seeing is believing. Therefore, Western societies emphasize how a body looks and try to categorize the body we see in a system of characteristics that we already possess in our minds. The hyperfocus on the visual body narrows our scope for understanding disability and might be why for (dis)abled bodyminds with visible and invisible (dis)abilities essentialism generate different reactions from others.

This thesis seeks to oppose the binary understanding in Western society. However, to discuss the current understandings of the body I find it necessary to account for the binary notion of the body as well as opposing understandings linguistically. Thus, this thesis applies the concept of *norm-functioning* bodies to reference the bodies that comply with the norm in Western society, however, strictly in terms of ‘ableness’. The concept norm-functioning itself addresses that the ‘able’ body is a *norm* - a structural condition that some bodies can conform to. Correspondingly, this thesis applies the term ‘disabled’ bodies when attending to the current understanding of disability. However, to underline the opposing understanding of the body and illuminate the constructivist nature of the understanding of the body, this thesis addresses the category of all people as (dis)abled bodyminds. Stigmatized (dis)abled bodyminds thus include those who are defined and normalized as ‘disabled’ and subsequently exposed to exclusion and discrimination.

2.2 (Dis)abled bodyminds

The tag ‘disability’ is seen to indicate studies of the non-normative body. Leaving norm-functioning bodies unmarked and un-researched is a clear representation of the weight of heteronormativity in human geography: norm-functioning bodies are simply not legible as problematic (Longhurst, 2001). The concept of (dis)abled bodyminds turns this narrative on the head by including all people in the same category. Minich (2016) argues that disability studies as a *methodology* rather than a *subject* recommits disability studies to its origins in social justice work. This methodology allows for understanding ‘disabled’ bodies as

philosophically equivalent to norm-functioning people, but not yet socially equal, which is why this thesis presents the novel term of (dis)abled bodymind.

As elaborated, no theoretical description of disability can entirely capture the complexity of the empirical world. Disability activists report that material and structural theoretical understandings of disability lack understandings of diversity and subjectivities. In contrast, abstract constructivist descriptions of disability lack understandings of the restrictions of the body (Longhurst, 2001). As a response to said concerns, this thesis includes four categories that consists of theoretical concepts from disability studies and feminist theory, fathoming abstract and material aspects of constructions of the body. *Material theories* references Structures and Materialities. Here, structures are abstract concepts as presented in Marxist theory and historical materialism, and materialities are the physical reality. *Abstract theories* reference the socially constructed. I call this categorization of theoretical concepts from disability studies and feminist theory the theoretical framework of (dis)abled bodymind because it illustrates how disability is constructed and not empirically applicable. The concept of (dis)abled bodyminds implies that bodies become disabled through four spheres:

- 1) Structures: the structural world
- 2) Materiality: the material world
- 3) Body: the body world
- 4) Mind: the abstract world

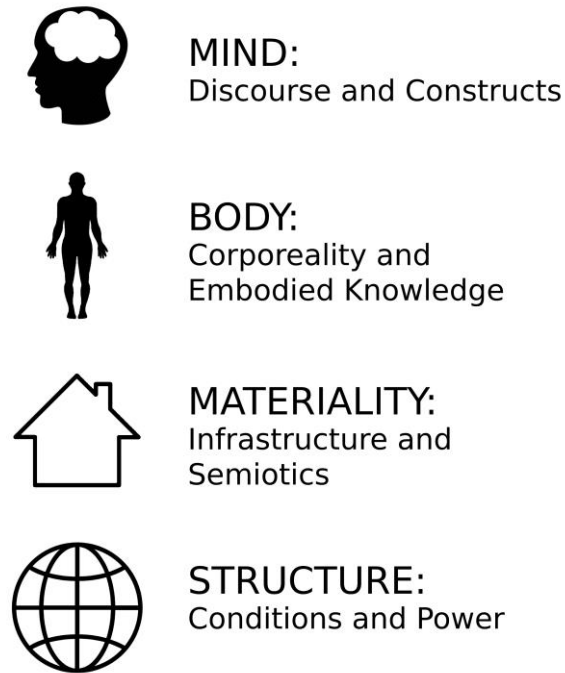


Figure 1: A scalar visualization of four spheres

Human geography methodology allows for understanding the four spheres in a scalar manner. Figure 1 illustrates that structures that are invisible to the eye, withholds society as we know it in exchange for (dis)abled bodyminds acceptance of its conditions. The first level in Figure 1 constitute the structural world. Structures in Western society include the economy, the state, the school system and the workforce. Section 2.3 explores the structural world, its inherent power relations and ableist character. The second level in Figure 1 is the material, this is where structures manifest and (dis)abled bodymind accept structural conditions, through such as currency, national borders, school buildings and curricula, offices and workhours. Section 2.4 explores the material world, infrastructure and its affordances and semiotics and how structural ableism manifest as disablism. The third level in the scalar visualization of the four spheres is the body, the body is always within, and experiences, the material world and is where discrimination becomes real. Section 2.5 explores the body world and elaborates on the material body, corporeality and embodiment. The fourth level in the scale in Figure 1 is the Mind. Section 2.6 explores the mind world. It is on this level that discourse, and constructs reproduce the discrimination that manifests in the material world. Thus, the scalar visualization

cannot fathom the enmeshed nature of reality – unlike Figure 1, the mind world is not only built upon, but also reinforces the subsequent scalar levels. However, the scalar visualization is helpful for simplifying and thus discussing constructions of ‘disabled’ bodies in an understandable and productive manner. The following section complicate the scalar visualization by introducing the particular understanding of (dis)abled bodyminds. Figure 2 exemplifies the interrelation between all of the levels in the scalar visualization of the four spheres in Figure 1.

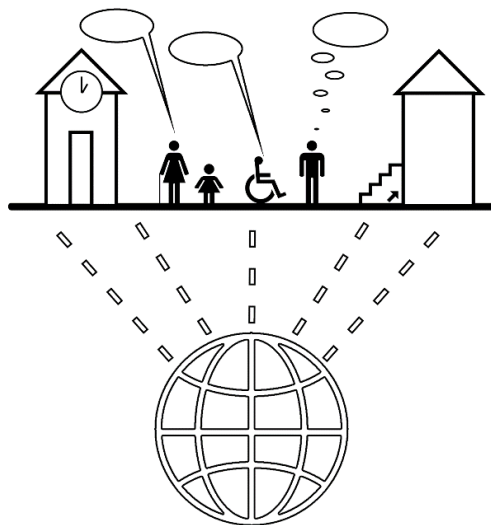


Figure 2: A visualization of mind, body, materiality and structure

2.2.1 Spelling (dis)abled

Inspired by Schalk (2018, p. 6) this thesis choses the spelling “(dis)abled” to deprecate the negative connotation of the contemporary definition of disability. The spelling of “(dis)ability” is a way to challenge the Western ontology of binaries that currently dominate understandings of disability. While some scholars spell “dis/ability” instead of “(dis)ability”, this thesis intends to abolish the connotation of binary in the contemporary definition of disability. The presented spelling of “(dis)ability” accentuates the fluidity of our bodyminds; (dis)ability can be temporary due to the bodyminds’ spatial location, its inhibitory fluidity or alleviating assisting devices. Thus (dis)ability recognize that ‘disability’ can be tentative to circumstances. Consequently, the concept of (dis)ability recognizes the constructivist nature of regarding ‘disability’ as opposed to the ‘norm-functioning’. While (dis)ability challenges the assumed binary between disability and ability, it is not intending to subvert people who identify as disabled. (Dis)ability does not suggest that those that

identify as disabled are partly non-disabled. We cannot divorce ourselves from our experience any more than we could divorce us selves from being human.

2.2.2 Spelling ‘bodymind’

Also inspired by Schalk (2018, p. 5) and (Price, 2015), I chose to spell bodymind in one word for two main reasons: First and foremost, ‘bodymind’ challenges the Western ontology of binaries by acknowledging that the body and mind affect each other. Material, bodily experiences lead to discourse in our minds that can create actual physical responses. Increased adrenalin, sweat or laughter in our material body are examples of bodily experiences enmeshed in mind-discourse (Feely, 2016). Secondly, the term “bodymind” recognizes the unique and fateful composition of social markers, genes, and experiences – our corporeality. Recognizing corporeality means taking height of the diversity of those who are considered ‘disabled’ and critiquing the wrongful essential understanding of categorizing ‘disabled’ people as *one* group. Furthermore, in contrast to differing between the body and the mind, “bodyminds” allows for fathoming, yet respecting the diversity among disabled people, such as people with sensory impairments or mobility issues, chronically ill people, people with developmental disabilities and neurodivergent people.

The four presented spheres, initially presented in a scalar manner, constitute a constant circle. Exposing the interlinkages between the channels intends to transform the Western scope for perceiving the body, specifically by understanding the body as a potentially stigmatized (dis)abled bodymind. The concept (dis)abled bodymind resists loathing the Other body and seeks to scrutinize how structural conditions allow for constructing the One and the Other. This thesis stresses that the novel concept of (dis)abled bodyminds is not intended to incapacitate disability-identity, recognizing that some (dis)abled bodyminds that are considered as disabled would like to be identified as someone with varying degree of function. Furthermore, this thesis acknowledges that some (dis)abled bodyminds identify as disabled and do not want to dissect their disability from their identity. Applying (dis)abled bodyminds is simply a theoretical move designed to think creatively about the body and critically about structural conditions.

THE ITERATIVE PROCESS OF DEFINING 'DISABLED' BODIES

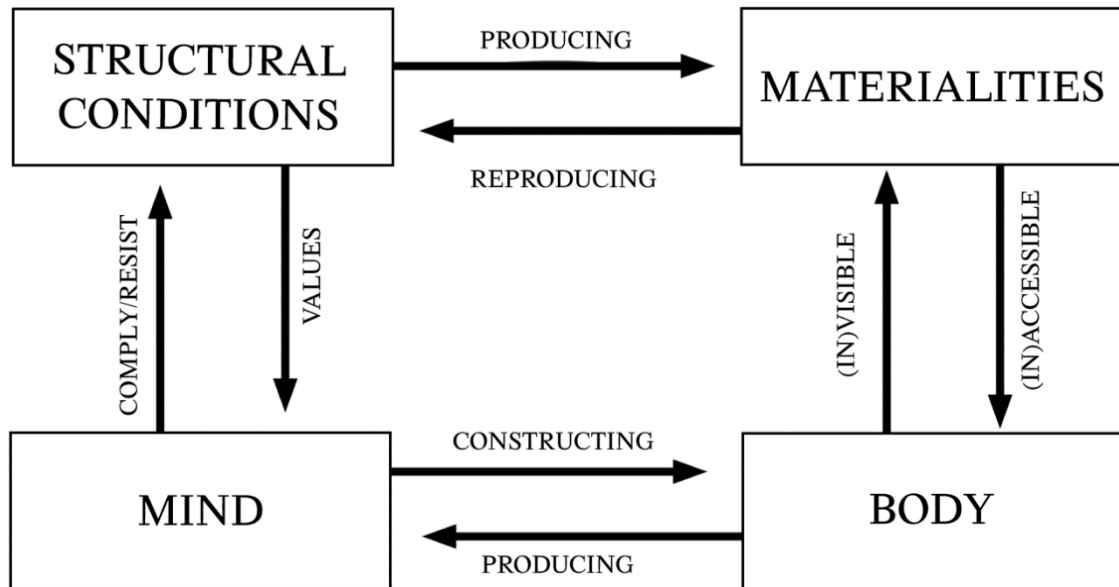


Figure 3: The iterative process of defining 'disabled' bodies

Figure 3 illustrates a complex system consisting of the four spheres which guides the theoretical framework: Structural Conditions, Materialities, Body, and Mind are mutually integrated in the disability term as a whole. The structural cannot be separated from the material, just like the mind and the body cannot be separated. With Figure 3 this thesis intends to find where the structural and material intertwine, where the body and mind intertwine, and how all four relate in a constant circle that allows for defining and normalizing 'disabled' bodies. While the structural, material, body, and mind are discussed separately throughout this chapter I stress that they are in fact not separated. Minds and perception are shaped by the embodied bodymind and discourse in society. Whether the specific bodymind is Othered or not affects their perception of semiotics, nevertheless, through its experiences, it normalizes the binary between those with access to material space and those without. The mind thus constructs bodyminds – defining 'disabled' bodies based on what it sees in the material world.

2.3 Structures: The structural world

Structures maintain society conforming to the Western epistemology and ontology. The structural world is invisible – but as visualized in [Figure 3](#), the structural world has conditions for the material world, our minds, and bodies. Structural conditions produce materialities, and materiality serve as the tangible space in which the structural conditions are maintained and reproduced. The school system, the labor market, the family, and the state itself are examples of structures which we can see materializations of in the school building, the workspace and the home. All structures have conditions; the school system has conditions in terms of the tempo and quality of the *progress* the student should have. Furthermore, the student’s standard of achievement has direct effects on their opportunities for further education and employment. The structural conditions of the job market include the workers’ competition for employment, the five-day work week, and the employers’ pursuit for cost-effective labor. The structural conditions of the family include marriage and having children. The state is a structure consisting of numerous structural systems with conditions for how the relationship between the state and the individual should be: the voting system, the tax system, the social security benefits system, and the justice system, to mention a few. The consensus is that complying with the structural conditions means being a good citizen (Pykett, Saward, & Schaefer, 2010). A society privileges citizens complying with its structural conditions, be it economic, educational, or social.

Complying with the structural conditions of Western society reproduces the status quo. However, some (dis)abled bodyminds cannot comply to the structural conditions of relational practices such as the school, the job market, or the family. Chapter 2.3.1 argues that *power* is an outcome of relational practices that produce social differences. Structural conditions of Western society interact with social markers, such as 'disability' to locate citizens along power axes which structures a population into those with power and those without power. Observing power in interaction with social markers allow noticing how defining some bodies as 'disabled' locates citizens along power axes. This section discovers that the structural conditions of Western society privilege norm-functioning bodies over 'disabled' bodies. Privileging norm-functioning people over disabled people based on their ability to comply to structural conditions is what F. K. Campbell (2008, p. 152) and Tyler

(2015, p. 659) describes as *ableism*. Therefore, Chapter 2.3.2 argues that structural conditions of Western society are ableist.

2.3.1 Power

This thesis applies an embodied and situated conception of power, understanding power as relational, emergent, and productive (Ahlborg & Nightingale, 2017, pp. 387-390). Implicitly, this thesis understands the production of social difference as emergent and as an outcome of (dis)abled bodyminds exercising power through everyday relational practices in space (Nightingale, 2011). The embodied and situated conception of power acknowledges power as both emerging from human agency as well as power as a result of interactions between human and non-human elements. Incorporating a constitutive understanding of structural power to our situated, embodied, and relational understanding of human agency helps to place, understand, and analyze the iterative definition and normalization of 'disabled' bodies (Ahlborg & Nightingale, 2017, p. 388). Ahlborg and Nightingale (2017, p. 387) explain the interactions between human and non-human elements as taking shape as discursive, institutional, material, or social 'pressures' – that often do not have any clear human sender. I understand this as the structural – laws, norms, and rules that are upheld by the discursive and material, such as written law and abstract norms, as well as the infrastructural. This approach to power allows for understanding that definitions of 'disabled' bodies and its normalization are rooted in both the embedded and relational and the constitutive and structural.

Human agency and the constitutive are always in interplay and in tension in complex and dynamic networks that consists of humans and non-humans. For example, laws, norms, infrastructure and nature are constructed and interpreted by humans, but they are not human. Resultantly, the non-human, in likeness with the human, is not fixed. The relations between the human and non-human are found across multiple levels and scales and are embedded within each other, making the boundaries between them often unclear spatially, temporally, and analytically (Ahlborg & Nightingale, 2017, p. 387). Thus, one can observe that the structural and underlying power in society, such as rules, laws, and norms in interaction with human agency creates power axes along which individuals situate. (Dis)abled bodyminds are enabled and constrained by their relative position on power axes and alignment within

and contestation of dominant discourses, institutions, and resource entitlements (Ahlborg & Nightingale, 2017, p. 388). However, as both the structural and the human can change behavior – where individuals situate along the power axes is never fixed.

"Actors are not 'in power' and they do not 'hold power.' Rather, human power is produced through the continuous and ambiguous (Butler, 2006) exercise of power, such that power is only evident in relational, performative moments" (Ahlborg & Nightingale, 2017, p. 387). (Dis)abled bodyminds must iteratively perform exercises of power to create social differences. Subsequently, this thesis understands social difference as an emergent process that must be continually renewed, which challenges the idea of fixed identities and the idea of the 'disabled' body as normalized in Western society (Nightingale, 2011, pp. 153-154). The act of recognizing the continual performative production of social difference undermines essentialist notions of 'disabled' bodies. Therefore, it is possible to illuminate how subjectivity, such as the difference between 'able' and 'disable', is ultimately a contradictory achievement with subjects exercising and internalizing multiple dimensions of power within the same acts (Nightingale, 2011).

2.3.2 Ableism

When the production of social difference is emerging as an outcome of (dis)abled bodyminds exercising power through everyday relational practices in space, something about the structural conditions behind these relational practices must allow for creating social difference. I understand this as structures being ableist – someone has the agency to comply to them, whilst others cannot. Therefore, the structural conditions of Western society are privileging norm-functioning bodies over disabled bodies. Ableism is a concept describing disability discrimination in favor of norm-functioning people (F. K. Campbell, 2008, p. 152; Tyler, 2015, p. 659). The contemporary Western society contains ableist qualities when (dis)abled bodyminds cannot fully participate in and comply to the structural conditions of for example school, the job market, or the family based on their insaccessibility. When (dis)abled bodyminds do not comply with the structural conditions of the contemporary Western society, they become less valuable to the rest of the society. Therefore, this thesis argues that discrimination of (dis)abled bodyminds is implicit in the structural

conditions maintaining status quo of the contemporary Western society, and that structural conditions can be ableist when their maintenance depends on disability discrimination in favor of norm-functioning people.

2.4 Materiality: The Material World

As illustrated in Figure 2, materiality is produced by and reproduce structural conditions. The material world is a materialization of the structural world – reflecting the agenda and priorities of the structures (F. K. Campbell, 2008). Furthermore, materiality is the space where bodies travel, bridging the body to the structural world. A bodymind becomes visible and normal in accessible spaces. In contrast, a bodymind becomes invisible or abnormal in spaces that are inaccessible to the bodymind. Domosh (1997, p. 85) states that accounting for social markers, space, the personal and the political is beneficial for geography. This thesis accounts for these topics by looking into the symbolic ideas of difference and how they are produced and expressed through embodied, spatial interactions that are material (Nightingale, 2011, p. 154). Furthermore, this thesis applies the theoretical concept of semiotics, a collective term for the signals that society sends to (dis)abled bodyminds through the material infrastructure and the relational discourse, to aid understanding how social differences are embodied in material spaces, creating challenges for (dis)abled bodyminds. This subchapter presents semiotics to explain how the material world communicates differently to different bodyminds. Furthermore, tracing the materialization of structural ableism, this subchapter presents disablism as its manifestation.

2.4.1 Semiotics

Semiotics is a study of culture that explores the communication of meanings and how messages are encoded and decoded (Foote & Azaryahu, 2009, p. 89). As an example, by imagining the *city* as *writing*, it is possible to comprehend the city as a space that tells multiple stories and that what story the (dis)abled bodymind decodes vary depending on individual position. The (dis)abled bodymind who moves about the city are readers engaged in decoding the symbolic messages inscribed unto the built environment. Reading the material city is embedded into urban experience and creates a sense of place for the user; the readings actualized by the users of the city are

fragmentary and partial, conducted in the space–time coordinates of everyday life. The city does not have a single and definite meaning but comprises a vast number of signifiers that communicate different senses of place to different audiences, depending on personal experiences and filtered through the unique (dis)abled bodymind’s experiences (Foote & Azaryahu, 2009, p. 91).

2.4.2 Disablism

Interpreting the material world is dependent on individual social markers. Like structural conditions manifest in materiality, structural ableism manifest as hostile semiotics for a particular (dis)abled bodymind in space. Thus, disablism and ableism are concepts describing disability discrimination on different scales; ableism at an underlying structural scale, and disablism at a more apparent and subjective scale, making disablism a manifestation of ableism. Disablism is a set of assumptions and practices promoting the unequal treatment of (dis)abled bodymind because of actual or presumed disabilities. Disablism is the social, political, cultural and psycho-emotional exclusion of stigmatized (dis)abled bodyminds (Tyler, 2015, p. 660). Consequently, disablism is discrimination happening at the material scale, discrimination towards people that are rendered part of a collective category of disabled people.

Literature within disability studies often focus on the practices and production of disablism, examining attitudes and barriers that contribute to the subordination of stigmatized (dis)abled bodyminds in society (Campbell, 2008:151). However, by scoping out the relation between the structural and the material, we are able to theorize ableism and disablism as simultaneously reproducing discrimination at different scales. As a result, ableism and disablism render radically different understandings of the status of disability to the norm (F. K. Campbell, 2008, p. 152). The emphasis of the two concepts is different; disablism emphasizes discrimination against disabled people, while ableism emphasizes discrimination in favor of norm-functioning people (Tyler, 2015, p. 659).

Ableism relates to the structure withholding the notion of disability and fits well into a material understanding of disability. However, disablism relates to the production of disability and fits well into a social constructionist understanding of disability (F. K. Campbell, 2008, p. 152). The seemingly heuristic circle of ableism

and disablism shows the utility of using both material and abstract theories to understand the production of (dis)abled bodyminds. The following two subchapters concerns the material body and the abstract mind – which I show how in connection.

2.5 Body: The bodymind world

The stigmatized (dis)abled bodymind and the norm-functioning bodymind experience different semiotics in the same space. The body experiences and knows the material world through embodiment, constantly bridging the material world and the mind world. This subchapter emphasizes and justifies the importance of acknowledging the material body, in the sense of its tangibility, in social research. The tangibility of the body is intrinsic for how other bodyminds think about, speak about and behave towards the bodymind (Foucault, 1984), and therefore, how the bodymind experiences the material world. The tangibility is also intrinsic for how the bodymind itself experiences its material surroundings. Laws (1997) explain that "Geographers need to attend to both the conceptualization and material construction of bodies *because our bodies make a difference to our experience of places*: whether we are young or old, able-bodied or disabled, Black or White in appearance does, at least partly, determine collective responses to our bodies" (Laws, 1997 emphasis in original in; Longhurst, 2001)

2.5.1 Material understanding of the body

Disability studies and post structural scholars has underscored the importance of avoiding essentialist materialism when discussing the body (Feely, 2016; McRuer, 2006), and thus the theoretical framework of this thesis emphasizes structures and constructions. However, (Longhurst, 2001, p. 24) states that one of the downsides of the abstract theories of social constructionism is that they can "render the body incorporeal, fleshless, fluid-less, and the materiality of bodies becomes reduced to systems of signification." Focusing solely on social constructions implies ignoring the material struggles of real life. Similarly to Longhurst (2001), Feely (2016, p. 867) points out that poststructuralist approaches to disability remain relatively silent on the embodied and visceral aspects of (dis)abled bodyminds, including pain. Even though some theorists challenge the experience of pain (Best, 2007) - I cannot ignore that (dis)abled bodyminds' impairments can cause pain and thus restrictions for the

individual. Shakespeare (2014) underlines the importance of accounting for the tangible body and acknowledging the restrictiveness of pain drawing on personal experience:

“I confess to a certain discomfort when it comes to non-disabled researchers ... telling me, who has two rather painful and disabling impairments, that impairment does not exist or is only the product of discourse ... My problem is my physical embodiment and my experience of negative symptoms arising from impairment” (Shakespeare, 2014, pp. 66-67).

Scholars cannot ignore that (dis)abled bodyminds with impairments communicate an importance of including the visceral experience of the tangible body and experiences of pain that are real. Similarly, while one can argue that discriminative systems are constructed, the system's outcomes are simultaneously material in interaction with (dis)abled bodyminds.

Geographers have conceived identity as fluid for decades. Dorn (1998, p. 184) urges geographers to acknowledge the material environments that bodies must negotiate: we must not take “*flight from the messiness of disability into myth and metaphor.*” When geographers speak of the body, they still often fail to talk about a body that breaks its boundaries. The fluid, the body that bleeds and vomits, and the body as objects of sexual desire tends not to be discussed in academia. Longhurst (2001, p. 24) reports on little attention to the runny, flowing, watery nature of bodies in the discipline. The messiness of the body remains invisible in the geographical canon. Dorn (1998, p. 184) correctly points out that disabled people are likely to find numerous material environments more difficult to negotiate than norm-functioning people. However, *all* bodies have a weighty materiality and boundaries enmeshed in specific social and cultural systems of signification. Consequently, there are no neat binary divisions between disabled and norm-functioning bodies.

2.5.2 Corporeality

Corporeal may at first seem to be a fancy synonym for bodily, tangible, or material. However, the word becomes helpful when conjugated to the form *corporeality*. How we perceive the semiotics of the material environment, and how

disablism manifests varies to our corporeality. In this thesis, corporeality includes the experienced reality that emanates from the body. One's corporeality is the unique experience of one's body and the world in interaction. Our corporeality may change through time and space, depending on the fluid bodily conditions in addition to the material and abstract circumstances. Our corporeality is unique and fluid because the norms telling (dis)abled bodyminds that what our bodies "are" may change through time and space. Simultaneously, fluid corporeality includes bodily sensations, such as pain that flare up in periods for chronically ill people. Subsequently, corporeality consists of both material and abstract concepts which may intertwine and affect each other.

Shakespeare (2014) argues that the (dis)abled bodymind is also produced through pain and bodily restrictions. While bodily restrictions can be alleviated through accommodation in urban space, in the face of the more-than-human, we cannot ignore the effects of our corporeality. Shakespeare (2006, p. 201) challenges the social model of disability when he states that "the concept of a world in which people with impairments were free of environmental barriers is hard to operationalize." Shakespeare (2006, p. 201) elaborates on how the more-than-human remains inaccessible to many 'disabled' people: "*mountains, bogs, beaches are almost impossible for wheelchair users to traverse, while sunsets, birdsong and other aspects of nature are difficult for those lacking sight or hearing to experience.*" Thus, corporeality is a way to address the tangible body which must maneuver the structural, material and constructional world. Corporeality allows for understanding that seemingly similar (dis)abled bodyminds maneuver the world differently, exactly due to their unique composition of body, mind, and situatedness. The culmination of our (dis)abled bodyminds and their locations in physically and relationally can be understood as embodiment.

2.5.3 Embodiment and embodied knowledge

Embodiment is the unique experience of being a (dis)abled bodymind in time and space. Embodied ways of knowing offer an alternative understanding of mind/body and the knowledge/experience dualisms. Price (2015) illustrate this point well as she analyses Kafer's (2013, pp. 3-4) statement "I am not interested in becoming more disabled than I already am" underlining that "not only are there

descriptive differences between conditions of (dis)ability; there are also evaluative differences. Such evaluation is, of course, subjective; one person's intolerable circumstance could as easily be another's joy" Price (2015, p. 276). The epistemology of embodiment acknowledges diversity as a result of cultural and corporeal aspects and location, and simultaneously incorporates individual difference in knowing. Embodied ways of knowing explicitly acknowledges the importance and influence of who a person is (Barbour, 2002; 2016, p. 234). Thus, it is important to account for what this thesis call *diversity within a constructed group* when exploring embodied ways of knowing.

The concept of diversity refers to the material diversity within the constructed category of 'disabled' bodies and serves the purpose of challenging essentialism. Within the category of 'disabled' bodies, there are a myriad of categories of diagnoses and combinations of diagnoses. Additionally, each experience of the one diagnosis is tinted by the unique culmination of social markers in the individual, as well as their spatial position. This theses also acknowledges that each category and specific type of disability also comes with different ableist stereotypes and intensities of discrimination. Furthermore, diagnosis can manifest from birth or later in life, and they can be temporary or cyclical or chronic. Shakespeare (2006, p. 201) exemplifies such diversity when he points out that (dis)abled bodyminds with visually impairments access text differently: some in Braille, others in large print, audio tape or electronic files.

Barbour defines embodied knowledge as a position where a person can view all knowledge as contextual and embodied. The (dis)abled bodyminds experiences itself and others as embodying knowledge, valuing the (dis)abled bodymind's experiential ways of knowing (Barbour, 2002; 2016, p. 234). Thus, embodied ways of knowing are active and creative adaptations of personal beliefs and behaviors to address and potentially resolve the tensions inherent in living in Western society. Appreciating embodied knowledge includes a thorough interrogation of personal daily behavior, movement, relationships with other individuals, and with dominant Western culture and geographical environments (Barbour, 2016, p. 235).

By including corporeality but also embodiment as theoretical concepts, this thesis opens up for understanding a (dis)abled bodymind as having capacities of what they can or could do. The idea of 'I can' allows for accounting for the bodymind's relation to the world, and thus implies that the body knows how to respond to

affordances from the environment. We move the body as the situation demands, although remaining aware of our behavioral goals. The bodymind is always embedded in a situation, and the surrounding objects induce the bodymind to move appropriately; for example, a chair affords the (dis)abled bodymind to sit down on it. There is a pre-reflective correspondence between bodymind and situation, and the bodymind moves almost spontaneously, just following the affordances provided by the situation. We do not move the body, but the body moves by itself (Tanaka, 2011, pp. 152-153). Thus, the bodymind is the center of experience. The affordances of the material world carry different semiotics depending on the composition of the unique (dis)abled bodymind. Some (dis)abled bodyminds can react accordingly to the affordances of the material world, whilst others either does not experience it as an affordance, or must use it in another way, or not answer to the specific affordance. When a (dis)abled bodymind cannot answer to an affordance, various emotional responses are produced.

2.6 Mind: The abstract world

The mind, consisting of emotional responses and constructs, is inherent in the bodyminds and is in a constant interaction with the material world, reacting consciously and unconsciously to the environment. As illustrated in Figure 3, the mind is produced by the structural world through conditions such as rules, laws and norms as well as discourse, to which the mind resist or complies. However, the mind is also connected to the material world as it is enmeshed in the bodymind. In the mind world we can reproduce or question the material world in which we exist and the structures on which the material world rests. However, the (dis)abled bodymind does not necessarily have a choice whether to comply with the structural conditions, and can be forced by materiality to resist the structural conditions and disturb its iterative process.

The mind defines and normalizes ‘disability’ based on what the bodymind observes and experiences in the material world. When the norm-functioning bodymind observes that another bodymind is abnormal or invisible in a specific space, the norm-functioning bodymind produces a mind-world where those who are invisible or abnormal remain excluded and Other. The (dis)abled bodymind thus defines a (dis)abled bodymind that experiences inaccessibility as ‘disabled’ and

normalizes it as Other. Meanwhile, the norm-functioning (dis)abled bodymind complies with structural conditions, avoids Othering, and contribute to maintaining the status quo. In contrast, the stigmatized (dis)abled bodymind experiences inaccessibility or that they cannot comply with the affordances of material space, which provokes certain emotional responses of exclusion. Their (dis)abled bodymind thus knows, through embodied knowledge, that the specific place becomes a place of struggle.

2.6.1 Constructing the ‘disabled’ body

Ever since De Beauvoir (1949) coined the theoretical concept of Othering, which explains the process of constructing the One and the Other, the concept has been interpreted and developed in several manners. The exploration of the One and the Other, the Occident and Orient (Said, 1978), and the normal and abnormal (Butler, 2006) influences the theorization of constructions of the norm-functioning ‘Able’ body and the stigmatized ‘Disabled’ body in this thesis. Othering is a helpful theoretical concept to this thesis because the ‘Able’/‘Disable’ binary replicates the One/Other binary, where the One is ‘Able’, accepted self, and the Other is the ‘Disable’ deviant. This section is using Western ontological binaries of Able/Disable analytically to criticize persisting and challenging narratives about the body. From a personal perspective, I find binary constructions of reality misrepresentative, however, the binary serve analytical advantages.

All (dis)abled bodyminds have a material body; however, through the process of Othering, some (dis)abled bodyminds are rendered normal inside this range of bodies, while others are rendered abnormal. Here, I draw lines to Butler’s (2006) heteronormative matrix of sex, gender, and desire. In the heteronormative matrix sex is the (dis)abled bodymind’s biological gender, which foundations their socially constructed gender, which lays the groundwork for what they desire, which should be their opposite – following heteronormative logic. Consequently, there are expectations of how one should perform one’s gender. The biological sex is often said to concern chromosomes; however, society also expects a specific kind of body, which should have a specific gender expression. This gender expression is supposed to be either what your culture considers masculine if you are a male and feminine if

you are a female. Where do “disabled” people fit into the heteronormative matrix? Is a man in a wheelchair masculine? Likewise, is it feminine to be bedridden?

(Dis)abled bodyminds can perform various expressions through regulatory practices, also known as performativities. Performativities are the unconscious and conscious regulatory practices through which a category becomes real (Butler, 2006, pp. 34-46). A performative act, for example to use a wheelchair, to use a cane, to use sign language or to look at certain way, is a constitutive speech act, which for Butler means that whatever we "become," it is the discourse that constitutes the identity one claims to hold. It is the performative act of the (dis)abled bodymind that awakens discourse in other's (dis)abled bodyminds, which forces the performative (dis)abled bodymind to 'become disabled'. The reification of such practices makes up the performativity. Moreover, the heteronormative matrix serves the heteronormative hegemonic discourse – (dis)abled bodyminds sustain the heteronormative matrix' presence in society by performing according to the expected discursive gender expressions. As a result, the heteronormative matrix sustains the status quo of cultural and economic structures.

The process of Othering iterate itself; the Able creates a world for the Able; in which the Disable qualities is less, the Disable gets less and becomes less, simultaneously ensuring the Able with more power. Thus, the reification of practices, the performativities that constructs the Able and the Disable and places (dis)abled bodyminds on power axes due to their social markers completes the circle between the structural, material, the body and mind as visualized initially in Chapter 2: Theoretical Framework. This thesis argues that the disablism stigmatized (dis)abled bodyminds experience are rooted in ableist structures and associated negative attitudes towards those considered disabled. The credibility of the constant circle of structures, materiality and bodymind illustrated in Figure 3 is strengthened by Butler's argument that we can stop reifying the heteronormative matrix; however, due to cultural and economic structures, we keep up the performative gender binary, through the structural conditions of such as the nuclear family. Following Butler's (2006) logic, this thesis argues that the social construction of 'disabled' bodies serves the heteronormative hegemonic discourse because performativity of disability creates a category which is “outside within itself.” The stigmatized (dis)abled bodymind, the Disable can arguably never comply with either of the gender expressions. Therefore, the Disable becomes an "outsider" within the range of bodies because the

substantivistic effect of ableness is produced and enforced performatively by the regulatory "abled/disabled" practices. Nevertheless, the Disable and the Able are only constructed versions of the same phenomena – the (dis)abled bodymind. Thus, ‘disabled’ bodies are examples of how the established discourse maintains itself by creating an "outside within itself."

However, if a (dis)abled bodymind that is deemed as a ‘disabled’ body would perform in a different manner, the words we used to describe that body could change. Thus, when one "becomes" disabled, it is the discourse that constitutes disability identity. Even if becoming Disable, or Able, includes interpreting and reorganizing the disabled/abled norms within the discourse, the reorganization and interpretation may disturb the established categories, which in turn “reveals they are just ideas about what is natural” (Butler, 2006). Therefore, performativity is not just a performance but a performance that makes itself real. Simply put, exclusion of stigmatized (dis)abled bodyminds reproduces a discourse within which it seems natural that ‘disabled’ bodies are excluded. The Othering of people with "disabilities" can therefore be said to be reproduced by performativity. This thesis has shown how Butler’s explanation of performativity illustrates that ‘disability’ is a social category, and use passing as an empirical example of how performativity can work in practice. Butler’s (2006) definition of performativity allows for observing seemingly inevitable social categories as only *ideas* about what is real. Feminist theorists have exemplified how constructions of the One/Other have material consequences (Butler, 2006; De Beauvoir, 1949; Said, 1978), likewise, building on the arguments of Haslanger, this thesis finds that the Able/Disable binary has material consequences.

According to Haslanger (2006, p. 20), a constructivist approach can challenge the appearance of the inevitability of the category in question, which in this case is disabled bodies. The first step to challenge the appearance of inevitability is to make the category visible as a social, as opposed to a physical category. This thesis has already shown that ‘disabled’ bodies is an extremely diverse category and that it does not make sense to combine all stigmatized (dis)abled bodymind in one category, but that we traditionally sort bodies into established categories in our mind-worlds to give meaning to the world in an understandable way.

We are all discursively constructed, in a sense that we are who we are due to what has been attributed and self-attributed to us. This does not mean that discourse brings a material object into being. Rather, something in existence comes to have a set

of features that qualifies as a member of a sort because of categorization (Haslanger, 2006, p. 19; Warren, 2000). In the case of the ‘disabled’ body, a stigmatized (dis)abled bodymind requiring a wheelchair for movement due to a physical condition is not a social construction but a material fact. However, calling this (dis)abled bodymind disabled and relate it to the same category as one would relate someone who is hard of hearing or neurodivergent is discursively constructing someone and categorizing bodies as a member of a sort, and as such essentializing (dis)abled bodyminds. However, we now know that disability is a social group, which is socially constructed and consequently possible to de-naturalize (Butler, 2006; Haslanger, 2006; Nightingale, 2011).

The theoretical concepts of passing add to the argument that disabled bodies are merely ontological ideas about what is real. Social difference creates precariousness for both passing and non-passing (dis)abled bodyminds and is also a proof that discursive constructs are social constructs with material effects. The construction of the Able and the Disable allows for imagining “us” and “them”, allowing for precariousness for “them.” Western society accepts, and even contributes to precariousness for stigmatized (dis)abled bodyminds.

Butler sees precariousness as a generalized human condition that stems from the fact that all humans are interdependent and therefore vulnerable. When the stigmatized (dis)abled bodymind is dependent on the Western state, and the Western state allows for discriminating against the stigmatized (dis)abled bodyminds, the stigmatized (dis)abled bodymind becomes precarious. Precarity is experienced by (dis)abled bodyminds who are exposed to violence and discrimination and is different for every (dis)abled bodyminds precisely because it is unequally distributed (Butler, 2004, 2010). As a result, social value is ascribed to some (dis)abled bodyminds, while it is denied to others, and some are protected, while others are not. Butler sees the potential for emancipation in embracing the common circumstance of precariousness, as against the unequal fate of precarity. Thus, Butler’s arguments gives validity to the claim that our common goal should be respect for all people, rather than mere inclusion of ‘disabled’ people – favoring an egalitarian precariousness for all (dis)abled bodyminds can be a liberating moment (Butler, 2004, 2010).

While we all are discursively constructed, Haslanger (2006, p. 19) underlines that there are different ways of socially constructing something, namely as an idea or as an object. Following Haslanger's (2006) logic on why gender is both an idea- and

an object construction, one can argue that disability is too. Haslanger (2006) explains that Man/Woman classification is social, which is similar to theorists arguing through the Social Model of Disability that the classification disabled/abled is social (Goodley, Lawthom, Liddiard, & Cole, 2017, pp. 11-13). However, this social understanding leaves out the intersexed, and likewise, the social model alone leaves out the fluidity of disability. Haslanger recognizes that we admittedly could divide genders into several classifications. Likewise, we could theoretically divide into different levels of "dis/ableness" – as we do in diagnosis of 'disabled' bodies – nevertheless, the categorization can never account for the nuances. No matter how many classifications, interactive kinds of classification have profound, material effects on the classified individual (Nightingale, 2011). Classifications have a material effect on a person's social position, experience, and self-understanding, making the social classification into a material classification (Haslanger, 2006, p. 19).

The concept of passing is a good empirical example of how discourse constructs of the Disable/Able has material effect. Passing is to intentionally or unintentionally strive to pass as norm-functioning and proves as an example of how performativities and discourse *construct* categories and that these categories only are *ideas* about what is real. When someone passes as norm-functioning but in fact "belongs" to the constructed category of a 'disabled' body, the individual does not directly experience social stigma directed towards 'disabled' bodies, but they might experience microaggressions. Thus, some (dis)abled bodyminds, are in fact identifying as disabled, but because they can perform in line with for example the gender expressions of the Heteronormative matrix, or comply with particular structural conditions, they are not discursively perceived by others as Disable. Passing is thus not just the act of an individual hiding their impairment or morphing their disability, ableism also involves a failure to accept the Disable.

The theoretical framework in this thesis draws on the spatial qualities of human geography, the political and critical lens of feminist theory, and the justice-centered approach of disability studies to develop the concept of (dis)abled bodyminds. The intersection of disciplinary perspectives allows for a spatial analysis of where inequality between (dis)abled bodyminds occurs, prompting a desire of change to achieve justice and equality. This thesis applies the spatial approach of human geography as a practical tool in Chapter 2: Theoretical framework to comprehend the connectedness between the abstract and material, and its influence on

the experiences of (dis)abled bodyminds. Specifically, this thesis applies a scalar perspective to comprehend the connectedness between structural and subjective, such as ableism and disablism, and norms and norm-functionality, allowing for visualizing the interrelation between structures, their conditions, materialities and bodyminds as in Figure 1, 2 and 3. In the following chapters, this thesis utilizes space and place as tools to situate the experiences of (dis)abled bodyminds in three specific spaces in the analysis of the data.

This chapter started with an explanation of the ontological and epistemological assumptions underlying the current understanding of ‘disabled’ bodies. While the presented theories allow for understanding the body as a (dis)abled bodymind, I still find it necessary to be transparent about the ontological and epistemological assumptions in which the selection of research questions, theoretical concepts and research methods are embedded. The following chapter presents how the presented theoretical concepts are embedded in methodological positions about what is legitimate knowledge, and the worldview this thesis is embedded in.

Chapter 3

Methodology

Before the presentation of the methods for data gathering and the analysis of the empiricism, we go back into theory, now in a more philosophical manner. The presentation of methodology functions as extension of Chapter 2: Theoretical framework that seeks to challenge the Western ontology of binaries and epistemology of seeing and measuring. This chapter can be understood both as theory and as a philosophical tool to engage with the research questions of the thesis – which explains the logic of bridging the theory and methods with a philosophical debrief considering my perspectives and goals. Thus, the purpose of this chapter is to present the coherence between research questions, theory, methods, and data in the design of the research project: the presentation of the methodological considerations exposes the consistency between the theory, epistemological and ontological position, and discussion, allowing for a comprehensive analysis of the research question. This chapter presents alternative epistemological and ontological perspectives that can contribute to the novel understanding of the (dis)abled bodymind, as well as critical reflections on my social, philosophical, and academic position. In combination with the Chapter 2: Theoretical Framework, this chapter makes up the conceptual framework for analyzing and explaining the gathered empirical data.

3.1 Methodological considerations

In this research, ontological and epistemological positioning represents a crucial element theoretically, methodically, and analytically. Methodological considerations include an exploration of how different disciplines have influenced the development of the research questions and the selection of theories applied to answer the research questions. The data-gathering process, the framing of the research questions, and the selection of theories are rooted in ontological and epistemological positions.

The theoretical framework of (dis)abled bodyminds consisting of structure, materiality, body, and mind, builds on the extensive work of disability studies and

feminist theory scholars. The methodology of assemblage analysis corresponds very well with my theoretical framework (see Table 1). Feely (2016, p. 874) explains that the beauty of the methodology of assemblage analysis is that it allows for thinking about how orders of existence traditionally considered separate, as an assemblage that makes up a whole, exemplifying the biological, economic, and the discursive – which can be understood as another, yet similar, approach to the structural, material, body and mind. Thus, the assemblage analysis methodology gives credibility to understanding the ‘disabled’ body as an assemblage of the structural, material, body, and mind.

3.1.1 Methodology of assemblage analysis

Deleuze and Guattari (2004) present a new-materialist methodology and an accompanying ontology, called *assemblage analysis* and *assemblage ontology*. The methodology of assemblage analysis is compatible with the presented conceptual framework allowing for including both abstract and material perspectives in the same analysis of the construction and normalization of (dis)abled bodyminds. The assemblage ontology allows the exploration of both material and abstract perspectives on the production of (dis)ability - without returning to essentialism. The methodology of assemblage analysis provides a means of combining the apparently oppositional perspectives of the constructional and material, whilst adding additional perspectives. An assemblage account of why a bodymind is currently (dis)abled considers the same four channels as the presented in the Chapter 2: Theoretical Framework:

Forms of barriers			
Body	Material	Structural	Mind
- The impairment in the particular body and its actual physical capacities, including what the body can and cannot do in its current material context	- What funding for treatments and assisting devices is or is not available; - Whether infrastructure is universally developed	- Existent technologies and current research; - How the relevant legislation and policies enables and constrains access to assistive devices or services	- How societal discourses construct (dis)abled subjects and the provision of expensive technologies to them

Table 1: Forms of barriers

The assemblage analysis’ significance is that it encourages thinking about how elements that are traditionally considered separate, such as the body, material, structural, and mind, come together and form a particular whole (Feely, 2016:873-4). Assemblage analysis can be thought of as networks of heterogeneous elements “whose unity comes solely from the fact that these items function together, that they ‘work’ together as a functional entity” (Patton, 1994, p. 158). Understanding (dis)abled bodyminds as assemblage requires new modes of thought; it requires new ontological understandings of the body.

3.1.2 Critical ontology and the ontology of assemblage analysis

Blaikie (2007, p. 13) defines ontology as “a branch of philosophy that is concerned with the nature of what exists”. In the context of social science, our ontological positions answer the question: “What is the nature of social reality?” In other words, which values, beliefs, and conceptions of reality is embedded in our understanding of reality? Our ontological position influences what we believe exists. This subchapter presents the ontological position of this thesis and how that position shapes our world view and thus challenges the Western ontology of binaries as introduced in Chapter 2: Theoretical Framework. Furthermore, Butler (2006) as well

as disability activists has encouraged me to question hegemonic heteronormative ontologies and how it reflects shortcomings in the understanding of the body and social justice. Therefore, I believe it is necessary to present another ontology that can contribute combating current challenges of social difference between (dis)abled bodyminds in Western society. Specifically, the thesis is written from the positions of critical ontology and ontology of assemblage in this thesis.

This thesis asks the main research question from a critical ontological position. The research question implies that (dis)ability becomes what it is through structural conditions, which are and produce power relations, and subsequent beliefs that become taken for given as truths. Thus, the research question allows for questioning what we *think* about (dis)abled bodyminds, and ultimately how we *speak* about and *treat* (dis)abled bodyminds. A critical ontological position contains a belief that power exists, and that power influence what we *think*, *say*, and *do* (Foucault, 1984). Thus, it prompts us to question why we think the way we do. A critical ontology position encompasses being aware of how power shapes us, our interpretation of the world, and how we perceive our role in the world and allows for attending to and analyze the workings of power through discourse.

Assemblage ontology bridges the abstract critical ontology and assemblage analysis as it arguably is compatible with both. Critical ontology focuses on discourse, which allows exposing and for fruitfully analyzing power relations. However, real life is more than discourse: (dis)abled bodyminds must navigate matter and endure physical pain and restrictions (Shakespeare, 2006, 2014) An assemblage ontology position contains a belief that discourse affects matter, and that matter affects discourse. The assemblage analysis allows for keeping the critical ontological conviction that power shapes what we say, think and do. However, assemblage ontology adds to the critical ontological position by collapsing the traditional discourse/matter divide and suggests that both discursive statements and material objects are real. Assemblage ontology explain how discourse and matter are mutually affecting. The following sections introduces the assemblage ontology perspective on materialism, embodied affect, and embodied subjectivity that allow for analyzing the data material in line with the assemblage perspective (Feely, 2016).

Assemblage ontology accounts for materialism by implying that whatever discourse constructs is also material, so implicitly in accounting lies accounting for the material. However, it is important to avoid essentialism because it constructs

‘disabled’ bodies as one group. By highlighting the variability through space and time in the language used to describe disability, disability studies scholars have made productive attacks on essentialist thought and demonstrated that essence is historically and geographically variable. Consequently, it has become challenging to discuss the body as material. However, the assemblage ontology materialism arguably accommodates thinking and speaking about material bodies without being essentialist.

Assemblage ontology account for materiality rests on the post structural understanding of the body as *becoming*, which effectively allows for challenging essentialisms existence. The assemblage ontology materialism entails that the material world precedes any human observer and exists outside human concepts and language, stressing ‘change and difference’ (Taylor, 2013, p. 47). Nothing has existed forever or will exist forever: from a particular human body; to the human race; to the planet Earth and the Sun. The universe is in motion, continually becoming at different rates of speed. This account for the material avoids essentialism by affirming that all human bodies differ from each other and that each and everybody is in a process of continual change and becoming, always differing from its younger and older self. Crucially for disability studies, assemblage ontology materialism avoids a return to essentialism or ‘able/disable’ distinctions, whilst allowing us to recognize the very real limitations some bodies face (Hickey-Moody & Woods, 2008). To account for the real limitations of our (dis)abled bodymind, an assemblage ontology perspective on materialism explains that at certain points in its process of becoming, and within certain contexts, a particular body will experience a whole range of limitations or things they cannot do. Acknowledging the limitations of the (dis)abled bodymind without essentializing it becomes possible is by underlining that the concept of the essence was imagined by minds that were unaware of the continually becoming of materialities, for example the evolution or plate tectonics. Thus, essence becomes an ontologically questionable concept (Ereshefsky, 2007, p. 9; Feely, 2016, pp. 869-871).

The assemblage ontology perspective on materialism rejects essentialist questions about what a body is and rather focuses on *actual capacities*: what *can* a body do? And *virtual capacities*: what else *could* a body do? A body might currently be unable to speak, thus, speaking is not an actual capacity of the body. However, this does not mean that an inability to speak is an essence of this body, a brute truth that

must exist at all times and in all places (Feely, 2016, p. 870) - a body could speak through sign language or eye tracking in another space or time. Because a body always exists within a specific material context, its capacities – the things it can and cannot do – are always contextual and relational. Therefore, a list of these capacities will necessarily be ongoing (Feely, 2016, p. 871).

Assemblage ontology accounts for discourse through the theory of embodied affect. An assemblage ontology of embodied affect collapses the discourse/matter divide and illustrate how our body and minds are intertwined in our bodyminds: embodied affect relates to discourse. Whilst embodied sensation and affect in some respects exists outside of discourse, its relationship to discourse remains complicated. Affect can only be discussed through discourse which, as Butler (2006) suggests, necessarily shapes what it attempts to describe. Our affects cannot necessarily be fathomed sufficiently into discourse, and we cannot guarantee that the recipient has the same understanding of the discourse as ourselves. Moreover, whilst embodied affects and sensation sometimes precede discursive thought, discursive thought can also trigger embodied affects and sensations. Our thoughts, or discourse, may trigger biological processes such as a release of adrenaline, increased heart rate and the experience of an effect we label as ‘fear’ (Feely, 2016, p. 871). Therefore, it is arguably most productive to think of affect and discourse as different but inextricably linked and mutually affecting. Doing this allows us to move beyond purely discursive accounts of (dis)ability and to consider the importance of visceral experiences of our (dis)abled bodymind (Feely, 2016, p. 873).

3.1.3 The epistemology of embodiment

An epistemology is a theory of how we come to have knowledge of the world around us, and different positions has different criteria for deciding how knowledge can be judged as being adequate and legit. From a social science perspective epistemology offers answer to “how can social reality be known?» Epistemological positions make claims about which scientific procedures produce reliable social scientific knowledge (Blaikie, 2007). Thus, what is deemed legit truth varies in line with epistemological positions – making the search for what is true an epistemological quest. The epistemological position applied in this thesis is an epistemology of embodiment, which entails acknowledging embodied knowledge as adequate and

legit. This thesis argues that embodied ways of knowing is an alternative epistemological strategy to the Western epistemology of sight and measurability as presented initially in Chapter 2: Theoretical Framework.

Several feminist scholars have critiqued the Western epistemology's preference of mind over body and pointed out that body and mind are interrelated. Thus, privileging knowledge and mind over body and experience might be deficient in the epistemological quest. Grosz (1994, p. 5) states that "philosophy has established itself on a profound somatophobia", privileging the mind and excluding the body. Flax (2012) points out that we never encounter another person without a body, nor encounter knowledge existing without an embodied knower (Barbour, 2016, pp. 229-230). Minds never existed without fleshy bodies, body and mind cannot be separated, and consequently, we should understand the body as more than distinct from the mind or as a 'house' for the mind (Barbour, 2016, p. 229).

Feminist theorists argue for reconstructing 'knowledge' by in-alienating and grounding knowledge in individuals and their contexts, and thus accepting multiple knowledges (Barbour, 2016, pp. 227). As discussed in Chapter 2: Theoretical Framework, bodies are discursively constructed to some extent, but the unique history of the bodymind always limits our embodied options; thus "what you can become is limited by the social history of your body" (Barbour, 2016, p. 229; Diprose, 1994/1995, p. 15). Bodyminds are not fixed; they are neither simply culturally produced nor genetically pre-determined; instead, bodyminds are always in the process of becoming. This position resonates with the assemblage otologist claim of the continual becoming of materialities (Barbour, 2016, p. 229). (Dis)abled bodyminds being constantly becoming means that every (dis)abled bodymind has knowledge unique from other bodyminds, including earlier and later versions of itself; knowledge is also a constant movement process. What a (dis)abled bodyminds knows is always contextual, and thus (dis)abled bodyminds will never know the universal truth but can know its embodied truth. Hence, assuming bodymind as contextually becoming as fact, a bodymind and its knowledge is never free from its context.

The thesis must account for bodyminds' relation to the world. Phenomenologist Merleau-Ponty (1962, 1964) aimed to locate the "lived body" at the center of individual experience. He argues that it is the body, not simply the mind that understands and experiences the world. By understanding the origin of consciousness as 'I can' rather than 'I think,' Merleau-Ponty (1962, 1964) challenges Descartes's

findings of the mind as dominant. The driving intention of ‘I think’ reflectively objectifies the world and ignores the correspondence, while the intention of ‘I can’ relate the bodymind to the world (Tanaka, 2011, pp. 152-153). Understanding consciousness as ‘I can’ is a philosophical move resonating with the anti-essentialist assemblage ontology of materialism and its philosophical questions addressing *actual* and *virtual* capacities of the body: what *can*, and *could* a body do? Thus, the mind/body dualism can be replaced with an understanding of the bodymind, which do not privilege mental activity and mind but express the relation of a person to his or her world (Barbour, 2016, p. 228; Merleau-Ponty, 1962). The knowing-subject is the body itself, the bodymind (Tanaka, 2011, p. 149).

The moment in which the body is the center of experience is an act of embodiment, where mind, body, culture and location culminate. The context, the mind and the body become interfused and entwined – embodied. Embodiment is the existential condition of being in the world. Barbour (2016, p. 230) states that ‘embodiment’ incorporates many things as one; a “person’s biological, intellectual, emotional, bodily, social, gendered, artistic and spiritual experience”, within their place specific location. The assemblage ontology emphasizes how our bodyminds are unique spaces where discourse, affect, material environment and material embodiment intersect – therefore, to write a thesis about (dis)abled bodyminds requires acknowledging the experiences of (dis)abled bodyminds as the most legitimate knowledge.

It is through our bodyminds that we both attain and mediate knowledge. Bodies have all the explanatory power of minds and bear our social markers. All bodies are specific, and concrete in their determinations, such as (dis)ability, sex and physiognomy (Barbour, 2016, p. 229; Grosz, 2012, p. 19). Thus, the issue of difference becomes central to understanding individuals. Difference relates to both the corporeal aspects of an individual and the “manner in which culture marks bodies and creates specific conditions in which they live and recreate themselves”(Barbour, 2016, p. 229; Gatens, 1995, p. 71). “(Dis)abled bodyminds are always already situated both culturally and naturally in a relational, spatiotemporal, fleshy world before they creatively adopt a position in it” (Bigwood, 1991, p. 66). The corporeality ensures (dis)abled bodyminds with the kinesthetic sense, which provides the (dis)abled bodymind with information about space, time, movement and objects, and their relationship to these things. Thus, the kinesthetic sense is fundamental to knowledge

of what we are, to our basic knowledge of the world and our ability to move knowledgeably in the world. Therefore, embodied movement in itself is a source of knowledge; movement is the condition of all forms of perception, and movement experience becomes of profound epistemological significance (Barbour, 2016).

By acknowledging the relationship between environment and individuals we draw “attention to the context in which bodies move and recreate themselves, and to the complex dialectic between bodies and their environments” (Barbour, 2016, p. 229; Gatens, 1995, p. 69). The detailed understanding of bodies in their specific instances reveals the effects of cultural construction and corporeality (Barbour, 2016, p. 229). Accounting for the relationship between the material context and the (dis)abled bodymind is to situate it in space – which will be helpful for deducing what structural conditions allow for limiting specific bodies, which in turn allow for defining them as ‘disabled’.

3.2 Situating myself as researcher

My own ontological assumptions, values, and understandings has influenced my work, and for this reason I consider it relevant to discuss my position in terms of disciplines, relevant social markers and motivation. For instance, my position directly influences why, how and which question I ask and in which direction I lead the research. My personal background within development and human geography studies have equipped me with critical analytical tools, curiousness and a drive to investigate underlying structures of asymmetrical power, social difference and taken for granted truths. Addressing my positionality is important as the ideas and understandings I carry into my project may affect my academic choices, and my project may affect my personal ideas and understandings (Rose, 1997; Waitt, 2016, p. 296). Addressing positionality is a methodological move that has three purposes in this thesis: transparency, ensuring reflexive academic work, and personal development.

Presenting and contemplating my position, motivation and goals is of value for the reader as it allows for being transparent and thus for the reader to understand on what grounds I have selected theory, methodologies, and arguments. Second, contemplating my position is of value for the quality of this thesis. For me to be aware of and reflect on my own position in academia and society at large allows me to monitor my power and check what agenda I am pushing. This awareness also allows

me to seek out and reflect on contradictory arguments. However, I underscore that my embodiment, both academically and personally, tints my conception of what are valuable theories and data. Thus, introspectively considering my motivation and goals necessarily calls for a reflexive thought process and acknowledging that my research is embedded in my assumptions about the world. Third, contemplating my position is of value to me personally. This thesis suffices an opportunity for me to ponder on my epistemological, and ontological assumptions.

3.2.1 Positioning on an academic level

The lines between my academic and personal positions and motivations are blurred. As already illustrated in this thesis, dualisms are entwined, and thus distinguishing between the academic and the personal is challenging. My academic interests and my personal values interweave in an iterative process of influencing each other. My academic background is necessarily a result of my personal choices, that essentially descent from my own, and my network's values.

3.2.1.1 Human geography

My academic background in Development Studies has ensured me with a critical perspective on the cause of social difference. Furthermore, my specialization in Human Geography has ensured me with tools to understand the interconnectedness between the global, national, local, and the human; the structural, the political, the physical and the emotional. Academically, my interests became tainted by yearning justice, and questioning how individuals and societies are shaped by and shape their circumstances. Engaging with feminist theory has proven advantageous for understanding disability studies by ensuring me with an understanding of how and why my position in academia and society affects how I see the world, and how the world sees me, and thus helped me question my epistemological and ontological positions. Through my academic education I have attained academic knowledge and thus a position of privilege and responsibility. My position as an academic student and author of a qualitative master thesis leave me responsible for deeming what quotes, data and theories are worthy of including and not, and my academic background will necessarily be the basis of these choices.

3.2.1.2 Disability studies

Debates in the disability literature show that some scholars are dubious about norm-functioning academics forwarding visions for disabled people, questioning both the motivation and positionality of researchers (Tregaskis & Goodley, 2005). As a norm-functioning woman in academia, my position and motivation, and basis for understanding the comprehensiveness of disability studies may be questionable. However, several measures are taken to exert critical reflexivity, and there are particularly two reasons why I justify my choice of thesis: first, my agenda is not to understand and convey the (dis)abled experience, but rather what creates (dis)ability – thus my focal point is not disability, but structural conditions and society at large. Secondly, because of my focal point, I interview people who consider themselves disabled, people who consider themselves partly disabled, and people who do not define as disabled.

Nevertheless, I am an outsider to stigmatized (dis)abled bodyminds, which calls for a reflexive and inclusive approach. I need (dis)abled bodyminds as participants to get perspectives from insiders across the specter. While I can offer my systematic knowledge and theory-led, second-hand experience, people with (dis)abilities insider position offers knowledge on practical-led, first-hand embodied experiences. Thus, the participants got the opportunity to correct misinterpretations and influence the direction of the research. By using such feedback loops, I aim to make my research more representative of the subjects' views and experiences and ensure validity (Kitchin, 2000, p. 230). As this this project is of an activist character, it seeks to avoid saviorism, and what Dickson (1982) calls systematized selfishness; the study of a subject without giving anything in return (Kitchin, 2000, p. 225). As presented initially in this thesis, I hope to contribute to the important work that disability activists do in contemporary society. Thus, my role is not as an expert, I am instead constituting as a facilitator, from a place of learning. I aim to take an emancipatory position that seeks to inform and impart my knowledge and skills to the stories of (dis)abled bodyminds who contribute to the project and provide an outlet to inform human geographers in academia and the workforce, and disability interest groups (Kitchin, 2000, p. 230). While I have used my own academic experience as basis for my theoretical framework, voices from disability studies have guided my choices. Thus, my conceptual framework, consisting of disability history, a selection

of theoretical concepts, and my methodological position, bases on both my academic background and the voices of (dis)abled bodyminds in academia and society.

3.2.2 Positioning on a personal level

My mother has been working as a caregiver and educator for children, teenagers, and grown-up considered ‘developmentally disabled’ – and consequently, I have spent hours after day care and school playing with children and learning to care for them. However, I would like to include a digression at this point as I want to underline that I reject the term ‘developmentally disabled’ – but I declare that it is challenging to talk about stigmatized (dis)abled bodyminds without participating in the jargon I seek to resist. I argue that classifications of disability such as ‘developmentally disabled’ are misleading. The term ‘developmentally disabled’ implies that there is a certain *right* way to develop, or that some (dis)abled bodyminds do not develop – another example of the binary Western ontology. All people develop and change through time and space. ‘Developmentally disabled’ is a term that objectifies stigmatized (dis)abled bodyminds as static and lesser, and I am happy to finally see terms describing various ‘disabled’ bodies discussed publicly in Norway (Gjesdal, 2021). Growing up, I perceived my friends and me as equal (dis)abled bodyminds, contributing with our unique qualities to our friendships. My proximity to (dis)abled bodyminds fostered my understanding of us taking up the same space in society – our lives were different, but I never saw them as victims, nor as heroes. I saw professionals and parents treat them the way they would me. However, as I grew older, my ontological understanding of (dis)abled bodyminds was challenged as I heard my peers talk about the bodyminds which were my friends in demeaning manners – reproducing the stigmatization and essentialization of specific (dis)abled bodyminds. Thanks to my proximity to stigmatized bodyminds, I posed myself incomprehensible to their fear and disgust: it became clear to me that lack of knowledge meant hostility.

When I stepped into the profession of caregiving myself, I saw the burnt-out parents, the traumatic experiences children endured, the restrictions imposed on grown-ups, and the unworthy care some (dis)abled bodyminds were subject to. I am angered in solidarity with stigmatized (dis)abled bodyminds – my norm-functioning peers accepted, and even actively contributed to, diminishing the dignity of (dis)abled

bodyminds. Yet again, the Western ontological binary understanding is blurred, this time in relations to private and professional life. Caring for (dis)abled bodyminds raises questions on issues of power, definitional justice, and the line between personal and professional life. I believe that one needs a relationship of trust and mutual respect when caring for someone, and stepping inside their private space. I come to care deeply for those I am a caretaker to, wanting to give them all they need – but I, just like their families, am restricted by funding, space, and time. Thus, I had an epiphany that I could use my academic position to shine a light on and resist the injustices directed at stigmatized (dis)abled bodyminds and their families.

3.2.2.1 Personal motivation

My personal motivation for writing this thesis originates in the realization that not only history display various perspectives on disability, we understand the body differently within contemporary society. I do not subscribe to the mainstream Western understanding of disabilities. However, the current mainstream understanding sets the framework in which families, caregivers and others can maneuver. Seeing how families and individuals struggle to ensure a good life in the Norwegian welfare state made me realize that the current system must be changed. Why do we not ensure the quality that these families need, when we certainly have the potential to? I believe that increased knowledge and compassion would certainly change the situation. As my frustration considering the situation for stigmatized (dis)abled bodyminds and their families grew, I sought for more information and like-minded (dis)abled bodyminds – and found a myriad of reflected, compassionate, and strong activists online, confirming my frustrations. I realized that we as society are in fact looking the other way.

Stigmatized (dis)abled bodyminds should not be left responsible for making society accessible and enlightening norm-functioning people. Therefore, my goal is to be an ally and to use my position of privilege as a norm-functioning woman in academia to spotlight the current system under which (dis)abled bodyminds are defined as disabled, and discrimination is normalized. My privilege leaves me able to spread awareness about the taken-for-given "truths" about the body that permeates several scales in current society. Consequently, this project's focus is not on what bodies are 'disabled'. The goal is rather to focus on how exclusion is (re)produced and for what reasons. However, this thesis does not aim to diminish disability-

identity, but rather seek new standards for attitudes towards people who identify as or are defined as disabled.

3.2.3 Critical reflexivity

As a qualitative researcher, I acknowledge the importance of being self-aware and reflexive about my role in the process of collecting, analyzing and interpreting the data, and in my pre-conceived assumptions in this research (Korstjens & Moser, 2017, p. 123; Mauthner & Doucet, 2003, pp. 413-431). This thesis does not aim to speak on behalf of disabled people, but rather question the taken-for-given ways of categorizing people. As a type of discursive practice, speaking for others has come under increasing criticism, and in some communities, it is being rejected. There is a strong, albeit contested, current within feminism which holds that speaking for others is arrogant, vain, unethical, and politically illegitimate (Alcoff, 1992, p. 6). Thus, I am expressing the need to explain my justification of speaking about 'disabled' bodies.

Only speaking for oneself also raises problematic questions: if I don't speak for those less privileged than myself, am I abandoning my political responsibility to speak out against oppression, a responsibility incurred by the very fact of my privilege? If I should not speak for others, should I restrict myself to following their lead uncritically? Is my greatest contribution to move over and get out of the way? (Alcoff, 1992, p. 8). Alcoff (1992, p. 24) argues that the practice of speaking for others remains the best possibility in some existing situation. My role as a researcher of this project cannot be characterized as absolute objective, however, it has been motivated by carrying out the research with integrity, honesty and respect for the sources.

Research is never a view from nowhere, but influenced by personal perspectives. I have sought out information through social media, news, my personal life as well as my employment working for stigmatized (dis)abled bodyminds to be knowledgeable of the thematic space which I research. Furthermore, I have read disability studies to comprehend the different representations of disability prior to conducting the data collection. I claim that removing all form of subjectivity is an impossible task, nor should it be a qualifying factor for proper research. Likewise, complete objectivity or neutrality is inaccessible for academic research as we all

commence and explore our research questions with personal experiences as well as collective attributes for interpretation from our research communities (Baxter, 2016).

To evaluate attempts of speaking for others in particular instances, we need to analyze the probable or actual effects of the words on the discursive and material context. As stated in the Chapter 1: Introduction, terms previously deemed legit medical language are slurs in contemporary society. Thus, we cannot be strangers to the idea that current language can be damaging. Naturally, my aim for the future is not compatible with contemporary discourse and finding other ways to describe bodyminds are a tedious task outside the scope of this thesis. Alcoff (1992) underlines that researchers must ask questions about the effects of how they speak for others, namely whether the research will “enable the empowerment of oppressed people?” (Alcoff, 1992, pp. 24-29). A central goal of this thesis is to support stigmatized (dis)abled bodyminds through influencing human geography and disability studies.

Chapter 4

Research methods

This chapter concerns the practical methods for the spatial analysis of constructs and materialities of (dis)abled bodyminds. While Chapter 3: Methodology concerns theoretical and philosophical considerations, this chapter concerns the *practical* considerations of conducting the research. The methods presented in this chapter involve how data is collected and analyzed. The goal of this chapter is to ensure technical transparency – presenting and justifying my methodic choices. In line with application of feminist epistemology and ontology, this qualitative project recognizes lived experience as legitimate sources of knowledge (R. Campbell & Wasco, 2000, p. 773; Hay, 2016, p. 447). Thus, the data gathering relies on (dis)abled bodyminds' embodied knowledge. This chapter presents, discusses, and justifies the choice of methods used to conduct the qualitative research which this analysis rests upon. To establish the trustworthiness of the project, I provide as much transparency as possible regarding credibility, transferability, dependability and confirmability (Hay, 2016, pp. 453,457; Stratford & Bradshaw, 2016, pp. 125-127).

First, this chapter addresses the trustworthiness of this thesis, by simply posing the question 'can the findings be trusted?' This chapter discusses said question by defining and reflecting on four criteria for trustworthiness: transferability, credibility, dependability, and confirmability and what strategies I have applied to evaluate trustworthiness (Korstjens & Moser, 2017, p. 121; Lincoln & Guba, 1985). This chapter aims to present a thick description of the research process in this thesis, to assess whether the research is transferable to other contexts or settings with other respondents or not (Korstjens & Moser, 2017, pp. 121-122). However, both disability studies and feminist theory, which this thesis builds upon, is argued to be transferrable by Warren (2000) on the grounds of social constructivism, and Flax (1990) on the grounds of oppression, as well as Minich (2016) on the grounds of her belief that critical studies of social norms and social conditions that damage stigmatized bodies and minds can develop in cooperation.

The level of credibility establishes whether findings represent correct interpretation of the participants' original views. In terms of credibility, this thesis

applies two strategies to ensure trustworthiness: applying data- and method triangulation in the process of interpreting the data, and including quotes from (dis)abled bodyminds in Chapter 5: Analysis. Because opinions and experiences among (dis)abled bodymind can vary a lot, applying data- and method triangulation to the data collection helps ensuring a nuanced data gathering and analysis process. As elaborated in section 4.3.1, data triangulation refers to using multiple data sources from different people in time and space, while method triangulation refers to using different practical methods for gathering data (Korstjens & Moser, 2017, p. 121).

In terms of dependability, which is defined as the stability of findings over time, the research participants contributed their insights on the implementation and implications of this thesis. Dependability involves participants' evaluation of the findings, interpretation, and recommendations of the study such that all are supported by the data as received from participants of the study (Korstjens & Moser, 2017, p. 121). At the end of the interviews, I presented the research questions as well as my approach of (dis)abled bodyminds to the research participants and asked if they had any questions, input or critique to my approach or understanding. I mostly received confirming reflections on the approach of the thesis, however, the research participants shared several valuable prompts for the focus of this research.

Confirmability is the degree to which the findings of the research study could be confirmed by other researchers. Korstjens and Moser (2017, p. 121) states that "confirmability is concerned with establishing that data and interpretations of the findings are not figments of the inquirer's imagination, but clearly derived from the data." I have used a relative rigid framework embedded in the theoretical concepts of this thesis for analyzing the data. However, I argue that any research in social sciences must be tainted by the inquirer's imagination to some degree. My choice of theories, methodology and my choice of informants as well as online data selection is necessarily tainted by my interests and personal subjectivity. Although one cannot be entirely independent of the object of research, attempting to become aware of the nature of one's involvement and the influence of social relations is a useful starting point that can help identify the implications of subjectivity in research projects (Dowling, 2016, p. 39). Thus, this thesis applies critical reflexivity, as elaborated on in the Chapter 3: Methodology, as strategy for dealing with issues of subjectivity. Nevertheless, the interpretation is grounded in the data, and I have used audit trail as a strategy to ensure trustworthiness in terms of dependability and confirmability. That

is, transparently describing the research steps taken from the start of a research project to the development and reporting of the findings, as well as keeping the records of the research path are throughout the study (Korstjens & Moser, 2017, pp. 121-122).

4.1 The Data Gathering Process

The three gathered datasets include different people from different places through three different channels:

1. transcribed and coded data from semi-structured interviews,
2. transcribed and coded data from an online data gathering, and
3. coded data from available relevant news articles, literature and statistical reports.

The gathered data from the informants that participated in the interviews is data that is prompted by my specific questions and interests. The data from social media is information that has been presented to me in an unfiltered manner - data that the sender felt important to share. Lastly, the data from the news articles, academic articles, and reports is data that has been filtered - others have interpreted raw data and conveyed the data in a specific way.

4.1.1 Semi-structured interview

The interviews all base on the same interview-guide but were semi-structured, meaning they were sufficiently structured to address specific topics related to (dis)abled bodyminds while leaving space for participants to offer new meanings to the study (Galletta & Cross, 2013). Conducting semi-structured interviews contribute to the reflexiveness of the data collection process. While the all over progress of the interviews were similar, the semi-structured interview style allowed for picking up on and allowing elaboration on relevant anecdotes. The semi-structured interview showed to be beneficial by allowing for exploring the unique embodied experiences and perspectives of all participants and thus contributing to an increased breadth of relevant topics, while still allowing for addressing theoretically driven interest (Galletta & Cross, 2013, p. 24).

Understanding (dis)ability necessarily requires scrutinizing ‘norm-functioning’ just as much as ‘disability.’ Therefore, this research includes two selections: people that identify as disabled and people that do not identify as disabled. By asking the participants of both selections the same questions, the analysis can detect where societal difference between the selections appears or not.

Through my personal, professional, and academic life I have acquainted with the research participants of this thesis, who do and do not identify as disabled. In terms of rigor, I have attained an approximate balance between the two selections. The four informants participated in semi-structured individual interviews are given the pseudonyms: Yasmin, Fredrik, Peter and Nora. Yasmin is a woman in her early 20s, who works several jobs and volunteers in different organizations. Yasmin identifies as disabled but prefers the term “different function variation” to talk about bodies. Fredrik is a man in his mid-20s, who’s an actor and he writes plays. He uses a wheelchair and identifies as someone with “legs that will not cooperate”. Peter is a man in his mid-20s, he works as a consultant and enjoys making music. Peter identifies as a norm-functioning person. Nora is a woman in her early 20s, she works in a public community care home for people with disabilities and define herself as norm-functioning.

4.1.2 Conducting Interviews

I conducted the four semi-structured interviews online due to infection control measures of social distancing. I used the video-call service Zoom. All informants signed an informed consent form prior to the interview, which outlined what would happen to the material they share with me - what their rights are, who will own copyright, where recordings will be stored under and for how long, what they will be used for and so on (Hay, 2016, p. 440). The project aligns with the UiO Privacy Regulations (GDPR) and all criteria of NSD (Norsk Senter for Forskningsdata). I have ensured that all of my notes, tapes, and transcripts have been stored in a safe place where only I have had access. I have also ensured that my research does not enable others to identify my informants (Dowling, 2016, p. 31). Technically, the interviews were recorded on a handheld device with the consent of the informants. This was to ensure proper processing of potential sensitive data. Recording the interview allowed me to use all my focus on the informants and their stories, which

proved very helpful as it would have been challenging to take notes simultaneously to keeping control of the interview guide. I structured the interview into two segments: the first part being about the participant as an individual and more open-ended questions; the questions revolve around their day-to-day life and their emotional life. The second part of the interview was more theory driven, and designed to make the participant reflect around their understanding of and thoughts on ‘disability’ (Galletta & Cross, 2013, p. 24).

The interview starts off in an introspective manner and the introductory questions are designed to kick start reflection. I asked the participants questions on when they last felt included, excluded, and safe and where this was. The participants situated these feelings and reflected further on whether there are any commonalities between the spaces and times they feel these feelings. This was beneficial as we were able to take a step back and find what characterizes the situations in which they feel these feelings. The goal of asking when and where the participants last felt excluded or discriminated against is to observe whether the stigmatized (dis)abled bodyminds are subject to disablism that allow others to define them as ‘disabled’ bodies. Similarly, the goal of asking when and where the participant last felt strong, safe and included was to look for similarities and differences between the two selections.

I created a translation into the second part by making the participant attentive to their own body and how it travels through space and how it affects their emotional life. My initial idea was that focusing on the emotions and the body in an introspective manner would prompt a reflective thought process in the interviewees. By starting this reflective thought process, the participants were in a critical mindset when we started to discuss (dis)ability. In the second part of the interview, we discuss (dis)ability more explicitly. The questions regarding (dis)ability are designed to make the participant reflect on what disability means to them. We discussed what ‘disabled’ bodies and healthy bodies constitute, and reflected on whether the body is binary, as well as the positive and negative connotations to the word ‘disability’ itself. The informants also presented their perspectives and alternative understandings of disability and reflected on the importance of definitional justice.

4.1.3 Ethical and practical challenges

Ethical dilemmas arose both in the process of developing and conducting the interview. All participants accepted to conduct the interview after having read the

information letter, and they were all informed that they could cancel the interview at any time. Nevertheless, I aimed at being responsive to their answers and potential hesitations. Yet, based on my informants detailed responses, as well as how we concluded the interviews and conversations afterwards, I believe the interview was a positive experience.

I was concerned about the character of my relationship with my informants. Our relational proximity could potentially constitute both positive and negative aspects to the situation for my informants, as our relation becomes slightly adjusted in an interview setting. My concern was that I was going to ask my informants to share aspects of their emotional life with me, which would put them in a vulnerable situation. Regardless of small talk and friendly behavior, we stepped into a professional space, and their position became more vulnerable than mine. Although I have a personal relation to my participants, the information I was going to ask of them to share could be of private character – shifting our power relation, as they disclosed personal information that I asked for from a position of academic power. Thus, when developing the interview guide, I reflected on, particularly referring to the selection of participants that have stigmatized (dis)abled bodyminds, and carefully weighed the potential benefits of my project against the potential personal costs to individual participants (Kitchin, 2000, p. 229).

The semi-structured nature of the interview called for my ability to be responsive in the interview setting. When interviewing stigmatized (dis)abled bodyminds, one may raise issues that can be emotionally challenging for the research participant (Dowling, 2016, p. 32). An unexpected challenge arose in the first part of the interview, where I had included questions regarding society's expectations to the participant, and whether the participant felt that they lived up to these expectations. I did not foresee that the first question would trigger as disheartening answers as it did, and I did not foresee the emotional toll it would have both on the research participant as well as on me as an outsider. However, the semi-structured nature of the interview allowed me to consider whether it seemed necessary to ask potentially challenging questions – and allowed me to bypass further questions on expectations and move over to more positive charged questions. As the interviewer I had to listen actively and consider whether I should continue to talk about expectations and the participants experiences, or if the conversation became too negatively laden. While embodied

experience of negative character can be valuable, I did not see it as worth making the participants linger with negative emotions.

Furthermore, the interview guide included a question regarding feelings of exclusion, which might trigger emotionally exhaustive memories. The interview guide only included one question regarding exclusion, which also was tentative. Nevertheless, to combat getting stuck in a negative headspace, the prior and following questions are predominantly positively charged, regarding feelings of inclusion, sense of achievement and safety. I feared that questions about the emotional life of the participants, in particular the negative emotions as feelings of exclusion and unattainable expectations would make the participants seclude. However, my participants opened up to me and elaborated on their own initiative.

Thus, I felt a responsibility to make the interview space as safe as I could. However, I experienced that my room for maneuver was restricted by the nature of the videocall-format. In a video-call it is more challenging to read body language and hear nuances in the voices of the participants. While sharing negative experiences and trauma can be empowering or feel valuable for the participants and for me, I did not feel comfortable potentially putting my informants in a stressful and emotionally challenging space when I could not ensure comfort. It was challenging for me to convey the responsive body language I wanted to, and I did not have the opportunity to comfort them in the same way I would have been able to in person. Therefore, I restricted potentially upsetting questions. Nevertheless, my informants were open-hearted and more or less unprompted shared frustrations and trauma. When I noticed my informants getting emotional, I acknowledged the hardship of the situation, and did my best to show my respect to their experiences without ascribing them feelings and led the conversation over to more lighthearted topics.

Finally, it was challenging to conduct the interview in terms of producing good follow up questions. It was a challenge to understand what direction the conversation would take, despite having prepared a rather detailed interview guide. In terms of the presented time frame, it is necessary to keep a balance between how much the conversation can rail off the preliminary course of the conversation. Moreover, it was a challenge to balance the follow up questions in relation to the timeframe I had presented to my participants. I had to consider how much time and energy it was worth spending on talking about things I had not included in the interview guide. While some stories and reflections proved useful for my

understanding of the topic, my imagination for how and where 'disabled' bodies are defined and elevating the analysis, other anecdote had to be discarded. However, it was also very important to me to not cut my participants short and show them that their stories are valuable in themselves and to me.

In terms of ensuring credibility of the findings, I must address that elements of my subjectivity seemingly influenced the dialogues between informants and me. First of all, I take the responsibility of respectful interpretation seriously as my thesis will represent others' experiences (Stake, 1995, p. 12; Stratford & Bradshaw, 2016, p. 125). Therefore, I shared my findings with my informant and allowed them time to review how I presented their voice in this thesis. As for within the interview setting, there are points of similarity and dissimilarity between myself and my research participants such as nationality, gender, and interests which seemingly influenced what my participants shared with me. For example, the women I interviewed gave me more intimate information regarding the body itself, both in terms of physicality and sexuality. Additionally, the points of similarity between my informants have probably affected how I interpreted what they shared. However, I experienced what Dowling (2016, pp. 39-40) points out: my position as an outsider lead to insiders making more of an effort to clearly articulate events, circumstances, and feelings to me to make sure I understood. Several of the participants regularly checked in to make sure I understood the points they were making.

4.1.4 Online data collection

The online data collection make up two datasets: one data set that consists of data that is directly derived from the statements of stigmatized (dis)abled bodyminds, and one data set that consists of data that has been through the filter of journalists, academics or organizations. Due to the infection control measures that was a response to the Covid-19 pandemic in 2020 and 2021, I had to approach the data gathering process in another manner than first anticipated. Many (dis)abled bodyminds have endured hardship and consequently it has been challenging to encounter (dis)abled bodyminds with time, energy or safeness to participate in a research project. Thus, I had to adjust accordingly and be pragmatic in the data gathering process. I found valuable data on social media, in newspapers articles and reports by governmental and non-governmental organizations. Gathering data in this manner proved valuable for

collecting data from several countries in the West, as it proved more challenging to obtain interviewees from abroad due to the Covid-19 pandemic.

The first data set from the online data collection consists of transcripts of videos, pictures, descriptions, and comment sections from social media. Additionally, I have included coded data from various news articles in this data set. The online data collection that bases on social media was a pragmatic approach to acquiring embodied knowledge produced by stigmatized (dis)abled bodyminds. Because many people on social media does not operate under their genuine name, I have decided to give them a pseudonym. However, I was able to ensure that all included quotes from (dis)abled bodyminds on social media is from Western Countries. The data in the analysis that derives from news articles are obtained from various newspapers that I deem legitimate.

I sought out activist (dis)abled bodyminds on social media early in the data gathering process, initially to gain general insight into experiences of inaccessibility and learn more about how I as a norm-functioning person can be an ally for stigmatized (dis)abled bodyminds. I discovered that stigmatized (dis)abled bodyminds have a strong internet presence. I realized that knowledge- and experience exchanges on social media can be valuable for academic research as well. I hypothesize that as stigmatized (dis)abled bodyminds that are excluded from accessing public space and decision-making processes occupy online spaces and speak directly to those willing to listen. Therefore, I have transcribed podcasts, videos, pictures, comment sections and text-posts from social media. All the data I have gathered are on open profiles and thus accessible for applying in a research project. I could not get in touch with all the people that posted online, neither could I obtain the real name for everyone, thus for practical reasons and consistency, all transcriptions are signposted with a pseudonym.

The second dataset from the online data collection includes data from news articles as well as reports from multiple organizations. The online data collection is to an extent a coping mechanism applied to ensure that I can gather enough data despite the exhaustive infection control measures of social distancing in 2020 and 2021. Even though most of the data I gathered from social media concerned individual experiences, many of the posts on social media referenced specific events presented in the news. Thus, I sought out the original sources and found several relevant news articles and reports. I consider that news articles can be tainted by the subjectivity of their authors. Therefore, I ensured using newspaper articles that amplified the voices

of stigmatized (dis)abled bodyminds or their relatives. The news articles often referenced statistic findings presented in reports that were developed by governmental or non-governmental organizations. Many of these reports proved valuable for highlighting the systemic discrimination of stigmatized (dis)abled bodyminds. I note that the data I gathered from reports is data that has already been analyzed and interpreted. However, this thesis does not rely specifically on the data from news articles or reports but use this data as indicators of how ‘disability’ can be defined and normalized in society.

The last data set bases on relevant statistical reports, most of which were presented in news articles. The reports are developed by governmental as well as non-governmental organizations and revolves around those deemed ‘disabled’. Consequently, the basis for conducting and analyzing the research that is presented in the reports varies. I have not taken further stance to the reports other than ensuring that the organizations are legitimate. I have coded the data presented in the reports and structured them into categories that nuance the other data sets.

4.2 Analysis process

I used Nvivo throughout the process of interpreting the data, a suitable tool for transcribing, systematizing, and analyzing empirical data. On that account, the following paragraphs will present the process of interpreting the data and developing metadata in the forms of codes, categories, and analytical memos (Saldana, 2009). An important facet throughout the data gathering, and analysis, has been to practice critical reflexivity. Critical reflexivity involves thinking about how my thinking came to be, critically interpreting my own interpretations. I have tried to continuously reflect on how my pre-existing understanding changes in the light of new understandings and how this in turn affects my research. Critical reflectivity is thus self-conscious scrutiny of oneself and the social nature of research, recognizing and negotiating relations of power. Further, critical reflexivity means asking how the research and the gathered data are socially conditioned (Dowling, 2016, p. 41) (Haynes, 2012).

I transcribed all the data I gathered directly in Nvivo, here, a transcript is the written record of the data collection, including interviews, social media posts and comments, news articles and reports. The transcript also included textual descriptions

of informants' gestures and tones in the interview, as well as descriptions of the visuals in videos and pictures where that was relevant (Hay, 2016, p. 457).

Transcribing the data allowed for using Nvivo to code and analyze the data.

4.2.1 Analyzing datasets through triangulation

This thesis applies triangulation, a technique for using multiple approaches, throughout the analysis. Methodological triangulation is applied through gathering data by means of different data collection methods such as in-depth, semi-structured interviews, online data gathering and reading news and reports and developing three different data sets (Korstjens & Moser, 2017, p. 122; Sim & Sharp, 1998). In Nvivo, the datasets were independently analyzed, and combined through triangulation to explore the research questions. Triangulation is a means to validate the results by comparing the results to, and including, news articles and statistical reports. The datasets were compared for convergence and complementarity. If datasets agree with each other, they converge (Nightingale, 2009, p. 489). This thesis observes and collect online data and interviews, and check that responses given in interviews are consistent with observations made online. Due to the different nature of the data gathering, I expect the data to be complementary, which Here, complementary means making sense in relation to each other and to help perceiving the complete picture of the research question (Nightingale, 2009, p. 490).

4.2.2 Coding

A code can be said to represent the data's primary content and essence in the same way a title captures a book's content and essence (Saldana, 2009). Coding is a mental process that has the purpose of describing, analyzing, and organizing data. There are two main reasons for utilizing coding: First, assigning qualitative values to chunks of data. Second, categorizing data into groups based on commonality or along thematic lines (Hay, 2016, p. 439; Saldana, 2009). Coding served as a helpful tool for trying to understand what I actually saw in the data through the lens of the theoretical framework. Coding creates a critical link between the data collection and the data analysis, and allowing the translation of data for the categorization and pattern detection in the analysis. There are several ways to carry out a coding process, I had a grounded and creative coding process to which I employed consistency and

transparency. Here there is three steps in the coding process: coding in terms of the theoretical concepts, coding in terms of space, and finally in terms of elimination.

The first step of the coding process in this thesis constitutes retaining themes based on the selection of theoretical concepts. I applied code-lumping: the activity where the essence of the phenomenon was captured (Saldana, 2009). Initially, I assigned the data codes based on my intuition of what the participant was saying. By looking at the data that was marked with the same keywords, I was able to find patterns, similarities, and differences between and within the selections, such as different theoretical concepts and spatial positions. I categorized the empirical data in terms of different theoretical concepts. As a result, I was able to outline whether something was structural, material, concerning body or constructions. Most of the empirical data could be interpreted to include all the mentioned channels, however, I strived to code only one or two theories in the first round of coding to stratify the data.

For the second round of coding, I localized the empirical data in space and in specific places – this meant code-splitting the lumps from the first round of coding (Saldana, 2009). During this stage I detected many specific spaces, such as hospitals, emergency rooms, public restrooms, but also discovered that the transitions between places make up disablist spaces, such as entrances and transportation.

For the third round of coding, I did an elimination process and created a coding structure, which is the organization of codes into meaningful categories (Hay, 2016, p. 439). I sorted my codes into hierarchies of how important they were regarding my project. I also sorted my codes into mind maps. These mind maps were a form of concept mapping. Concept mapping is a part of concept building, referring to visually represent data (Hay, 2016, p. 440). This process was useful for eliminating data that did not speak to the research questions from the analysis.

In other words, the process of coding shifted naturally into concept building. Concept building is the process of entering and coding data in a systemic way that relates to the research question being asked (Hay, 2016, p. 440). Furthermore, I opted for keeping a codebook for keeping track of the codes in the research project. As the codes become more comprehensive it proved useful to keep track of what meanings were assigned to the code and where the code should be applied (Hay, 2016, p. 439). Additionally, I wrote down notes regarding the coding process in the code book for two reasons: the first reason was to remember my reasoning for applying the code to the specific part of data. As my reflections regarding the data and my findings evolve,

it was sometimes challenging to remember my trail of thoughts. Secondly, I wrote down notes regarding the coding process in order to use this text in my methods-chapters and in the discussion of the findings.

I kept memos for encouraging the thought process throughout the analysis. I wrote what the analysis would be able to capture, different ways of sorting the data and created relationships between codes in the analysis. This is called memoing (Gibbs, 2018), and is something I used spontaneously throughout the data gathering process to write down all the ideas I got on the go. I used memos as remarks in the transcripts, where I wrote notes or reflections on the research process, which I later incorporated as data for further investigation (Hay, 2016, p. 447). For example, when transcribing the interviews, I used memos to write down potential follow up questions or other ways to improve my upcoming interviews. Thus, the memos were helpful when developing follow up questions in the interview setting. Moreover, the memos were valuable for remembering my acute ideas on new concepts to seek out in literature and online.

Chapter 5

Analysis

The basis for the spatial analysis of constructions and materialities of (dis)abled bodyminds is a collection of three data sets based on the lived experiences of (dis)abled bodyminds. These data sets include individual (dis)abled bodyminds' personal stories, relevant news articles, and various relevant statistical reports. This chapter presents three sections (5.1-5.3) on how 'disabled bodies' are defined in three specific spaces and what structural conditions allow it. Lastly, section 5.4 discusses the findings of the spatial analysis on how social structures allow for constructing disabled bodies and consequences in terms of social difference. Due to current circumstances where the Covid-19 pandemic response intervenes with our daily lives, the consequences of infection control measures for (dis)abled bodyminds are a reoccurring theme throughout the analysis.

The conceptual framework, consisting of the theoretical framework and the methodological considerations, guides the analysis. The theoretical framework presented in Chapter 2 allows for recognizing how structural conditions manifest in materiality and influence the lived experiences of (dis)abled bodyminds, where lived experiences are understood as a culmination of body, mind, and place. The methodological considerations allow for understanding what structural conditions manifest in the specific spaces, and what the effects are for social difference. This chapter presents the empirical findings and scrutinizes who experiences inaccessibility in terms of physical, social, and emotional barriers. Scrutinizing who experiences inaccessibility entails situating the lived experience of (dis)abled bodyminds in materiality and analyze whether the (dis)abled bodymind becomes Othered.

STRUCTURAL CONDITIONS MATERIALIZED IN SPACE

1. Space	2. Normalized characteristics	3. Practical Conditions	4. Structural conditions
Public space	Infrastructure	Accessibility	Productivity
	Identity	Power	Agency
Private life	Valuable life	Success	Betterment
	Self-reliance	Norm-functionality	Individualism
	Social distancing	Resourcefulness	Independence
Academia	Conducting research	Productivity	Efficiency
	Knowledge production	Legitimate knowledge	Measurability
			Competition

Table 2: Structural conditions materialized in space

Table 2, Structural conditions materialized in space, summarizes the analysis of sub-question 1. The concepts in the cells reflects the central codes that were developed during the analysis of the data. Column 1. Space presents the three social spaces found in the data sets. Column 2. present three normalized characteristics of the social spaces based on which topics were most prominent throughout the different data sets. Column 3. presents the practical conditions of the normalized characteristics of public space, private life and academia. By analyzing the underlying values of practical conditions, we arrive at column 4. Column 4 presents structural conditions of public space, private life and academia, based on the collected datasets.

5.1 Public space

This section includes statements from the datasets concerning public spaces. The experiences situated in public spaces are further subcategorized into two different normalized characteristics: infrastructure and identity. Infrastructure is a part of the material world that (dis)abled bodyminds maneuver. Infrastructure includes sidewalks, buildings, and traffic. Identity can be considered as a part of the public space due to the social markers (dis)abled bodyminds bear. Social markers allow people to assign identity traits to others in the mind world.

5.1.1 Infrastructure

Accessibility is a practical condition of infrastructure. The infrastructure must be accessible for the (dis)abled bodymind to use it. The research participants were asked whether society is sufficiently accessible to them. This was one of the questions where the difference between the two selections was the most substantial. Their answer is a testimony to how society is developed for norm-functioning bodies.

There are no apparent limitations. No physical limitations. If that's what you're asking? [What can limit you from accessing society?] Yeah, right. What could really limit me? I guess what everybody is limited by: time and my own mind (Peter, translated).

Not on all arenas. I have a good relationship to my colleagues, so I can access social life there. I feel like I have all the opportunities, however, it is challenging to take the opportunities. I find it challenging to participate in hobbies, exercising and those kinds of activities (Nora, translated).

Here, both Peter and Nora acknowledge that society is accessible to them. Nora underlines that she finds it challenging to approach new social spaces and detail how her mind restricts her. Nora thought of specific spaces where she feels uncomfortable but seems to understand her own limitations as a part of the norm-spectrum of being nervous in new social spaces. Likewise, Peter, who identify as norm-functioning, noted that the only thing that restricts him is his own mind and time. When asked whether he has access to participating in society as he would like, Fredrik points out the unusual ways he must maneuver society in his wheelchair.

No, not without letting people know weeks in advance. I can't be spontaneous. I feel excluded when I want to do something spontaneously. You can go and grab a beer on a second's notice. It is more fuss for me. We're sort of excluded from the nightlife. The nightlife you guys take for granted; I cannot take that for granted. (...) Do you know what I thought to myself when the pandemic hit? "Hehe! Finally you norm-functioning people suffer a bit." Have you learned anything from lockdown? (Fredrik, translated)

When Fredrik cannot access the infrastructures of public space his mind-world intersects with his body-experience, creating an embodiment of exclusion. Fredrik confesses a sort of relief washed over him when the Covid-19 lockdown hit his community. Here, I interpret that he feels lonely in his bodymind-experience, and that he would like norm-functioning people to understand what it is like to experience inaccessibility as he draws lines between his deprivation of freedom, and how all citizens have all felt our freedom being limited the last year due to social distancing

measures. Likewise, Marie states that inaccessible public spaces of infrastructure restrict her from spending time with friends.

I've both not been invited and rescinded invitations because of my accessibility (Marie, transcript).

Thus, both Fredrik and Marie experience being Othered as they cannot access the same spaces as their peers. When I asked Yasmine whether she has the access to society that she would like she answered distinctly: *No, I don't*. I asked Yasmine which spaces were inaccessible to her.

Pretty many. Going out, there are barely any places that are accessible. The doctor's office. If you are in a wheelchair, and you're a woman that has been subject to domestic violence, not all crisis centers are accessible to you. If you're raped and don't want to go to the emergency room, nothing else is accessible to you. If you're doing drugs, which isn't that unthinkable, because many people with disabilities have easy access to medication - losing control can be a normal thing, exactly because you have many other underlying challenges and easy access to medication. However, not all the support centers for drug use are accessible. Your only option is the emergency room. Not many people want to do that, because it's public, and you'll have to be put under control and all those things. If you want to participate in the march on the 17th of May in Oslo, there are cobblestones all the way. If you're in a manual wheelchair, you'll like die because of the cobblestones. And old buildings are protected by the law. The law says that everything must be universally designed, however, that law only applies to new buildings. In old buildings, okay, but if it's very challenging you don't need to.

Yasmin's description of inaccessible public spaces illustrate how inaccessibility is a disablist practical condition of infrastructure that permeates several aspects of life for stigmatized (dis)abled bodyminds that use wheelchairs. Her detailed description shows exclusion from emotional and physical safety, community, culture and infrastructure.

The amount of people who've gone out with me and been shocked at every single obstacle that doesn't ever have to cross their minds says it all. Accessibility is a basic human right. It should not be allowed that it is done so often as a formality to tick boxes without actually working or being accessible (Hannah).

Hannah's quote underlines how the same cityscape conveys very different semiotics to the recipient, depending on their material (dis)abled bodymind. Furthermore, Jess points out that accessibility often is a formality in development projects, and consequently seemingly accessible infrastructure in fact often inaccessible. The data collection confirms Hannah's statement, showing that

accessible public restrooms are in fact inaccessible to many stigmatized (dis)abled bodyminds for several reasons. The two next quotes are from an online comment section, where people were asked what accessibility issues they have faced.

Accessible loos used as storage is inaccessible to me (Susan).

Our accessible loo at work is also the women's loo. Like, it's not a separate toilet, they are the same toilet. Also, some places lock their disabled loos, and I get they are trying to stop people who don't need them from using them, however it also makes them immediately inaccessible and slightly defeats the point (Kate).

The accessible restrooms being used as storage rooms is received as a lack of respect for disabled people that need to use the restroom. The accessible restroom is spacious to be accessible for anyone, thus, using it as storage space is a disablist action that creates the social exclusion of (dis)abled bodyminds (Tyler, 2015:660). Just because (dis)abled bodyminds do not use the specific restroom daily, (dis)abled bodyminds need the space to be available for them when they show up. The accessible restroom that is the women's restroom forces stigmatized (dis)abled bodyminds that identify as male to perform as abnormal in that space. When stigmatized (dis)abled bodyminds must ask for permission from employees in the public space to use the accessible restroom because it is locked, the employee has power over the stigmatized (dis)abled bodyminds, making them precarious.

It should be possible to change diapers for older children and grown-ups in public restrooms. (...) Right now, we bring a towel, put it on the floor and change him there. It's obviously disgusting that he has to lie on the floor of a public restroom. A simple bench would work (Elaine).

Elaine and her son's experiences show that stigmatized (dis)abled bodyminds are unaccounted for in the public space. The inaccessibility of the public restroom is rooted in structural conditions of what a public restroom should constitute. While Elaine's son can access the public restroom, he cannot use the accessible restroom in a way that does not conform to its practical conditions. As a consequence, Elaine's son is forced to perform as either abnormal or as invisible in that material space. This performativity is normally not visible to anyone else than him and his caregivers, but Elaine posts the video on social media because she wants others to see what their reality is like. Based on Elaine's comment about disgust, and her body language in the video, I interpret her experience as a clear representation of the bodymind; through her bodymind, Elaine experiences her own her son's corporeality in the particular material space which provokes emotional affect in her bodymind. As Elaine puts the

towel on the floor in the material space, her body knows what to do, and what is best for her son in the moment, it is a physical ritual contaminated with emotions of disgust. They can enter the space and do what they need to do, but it comes with avoidable emotional toll, feeling of otherness.

It can be considered a disablist assumption that all older children and grown-ups use the restroom in the same way. Elaine and her son could act in line with the boundaries and rules of the public restroom if someone installed a bench. The nature of accessible restrooms is a confirmation that the diversity amongst (dis)abled bodyminds calls for planners that can account diversity within constructed groups. 'Disability' as a category is theoretical and not applicable in real life, (dis)abled bodyminds travel the world in very different ways and their experiences of public space cannot be considered the same. When planning public space, various corporealities must be accounted for (Hughes, 2009, p. 405).

The data sets of this thesis reveal that the accessible parking bay is another space that is designed to be accessible, which in fact is inaccessible to many stigmatized (dis)abled bodyminds. The two next quotes are from an online comment section, where people were asked what accessibility issues they have faced.

Disabled parking that is next to a bush, garden, pothole, or some other strange obstacle (Emma).

Nature necessarily intersects with the infrastructure at some point. While the bush or the garden may be planted by humans, we still regard them as the more than human, the nature necessarily lives on without the humans. While bodily restrictions can be alleviated through accommodation in urban space, in the face of the more than human we cannot ignore the effects of our corporeality Shakespeare (2006, p. 201). Therefore, if the accessible parking bay is to be accessible to stigmatized (dis)abled bodyminds through time, planners must account for the more than human and how it will develop.

This disabled bay at work only has scored lines giving you more space on one side of it (the passenger side). This means that getting out on the driver side is just like using any other parking spot because there isn't any extra space (Luna).

As the Luna states herself, the supposed accessible parking is in fact inaccessible. Furthermore, I am inclined to suppose that the planners that developed this particular parking bay believed that stigmatized (dis)abled bodyminds do not

drive cars. While accessible parking arguably is a trope of accessibility in Western society, it keeps being inaccessible or occupied: the infection control measures during the Covid-19 pandemic has intersected with accessible parking as well.

The two next quotes are from Jane, who has been out to eat with Evan and David. Evan and David both have disabilities. Evan uses a wheelchair and has a tube in his mouth that helps him breathe. David sits in a restaurant chair. Evan's disability is thus more visible than David's. Jane videotapes herself, Evan, and David and explains their experience to the viewer.

(...) and Evan just doesn't even exist; 'cause we only got two menus. And then, when I ordered my Pepsi, I asked Evan what he wanted, so I could tell the waiter, 'cause it was really loud, but when he got David's and my order he just left. (...) And also, I forgot to mention that their outdoor dining is set up on the accessible parking spots (Jane).

Jane, Evan, and David are out getting food at a local restaurant. I suppose that when the waiter sees Evan, he assumes that Evan's cognitive abilities are restricted because of his physical impairments. This is a faulty deduction, but not uncommon, as stated in section 5.1.2.2 Microaggressions, and in Fredrik's and Yasmin's lived experiences. Here, the waiter's action is perceived to be a generalization of who Evan is, and a construction of Evan as lame and mute based on the waiter's previous knowledge. Thus, the waiter ignores Evan and caters to the others customers. Regardless of the reason for not serving Evan, it is highly probable that the waiter's actions were disablist. He did not cater to Evan because of Evan's visual disability.

Furthermore, due to social distancing restrictions, the restaurant only serve food outside. Consequently, the tables are placed at the parking spots closest to the restaurant, which entails that Jane, Evan and David is having their meal at the accessible parking spot. The next quote is also a transcript of a videotape made by Jane. This videoclip is filmed at a different restaurant, with a different waiter, and goes to show that using the space of the accessible parking spots as seating space has become a common practice due to social distancing during the Covid-19 pandemic. Additionally, the waiter at this restaurant also ignored Evan, and only catered to Jane and David.

We're getting brunch and we're sitting on Evan's parking spots. Again, they brought us three waters, there's four of us. Three sets of silverware. We ordered hash browns for all, but they [the waiters] think these two are for me (Jane).

It is evident from the empirical data that inaccessibility is a considerable part of stigmatized (dis)abled bodyminds daily experiences. Inaccessibility in the public space relates directly to infrastructure, however as theorized in Model 2, infrastructure, structural conditions, and bodyminds reproduce each other in a constant circle. Therefore, the inaccessibility of a space provokes affectional and linguist responses in all bodyminds that perceive the situation, building on and developing the embodied epistemology of the individual.

The analysis of the empirical data in this section shows that inaccessibility is a practical condition of infrastructure for many stigmatized (dis)abled bodyminds. Furthermore, the findings illustrate that an inaccessible space forces stigmatized (dis)abled bodyminds to perform as either invisible or abnormal. Thus, the inaccessibility of space allows for defining some bodies as ‘disabled.’ However, a space and a body are not essential, they are becoming through time. Planners must account for diversity among (dis)abled bodyminds. The analysis of the infrastructure in public space finds that productivity is the cause of inaccessible infrastructure, as developing accessible spaces necessarily entails including stigmatized (dis)abled bodyminds in the planning process (Hansen & Turnbull), and allowing time to think creatively and innovative about the development of place. Furthermore, the inaccessibility of public space allows for defining stigmatized (dis)abled bodyminds as ‘disabled.’ The data shows that inaccessibility of public space is a result of both structural and relational power (Ahlborg & Nightingale, 2018) that leads to precarity for stigmatized (dis)abled bodyminds (Butler, 2004, 2010).

5.1.2 Identity

So far, the data collection has illustrated how the materiality of infrastructure allows for defining stigmatized (dis)abled bodyminds with restricted access to the space as ‘disabled.’ As the stigmatized (dis)abled bodymind has to perform as either abnormal or invisible, the nuance of their identity is washed away. The following section contains empirical data on disparity between who (dis)abled bodyminds identify as and what they identify they experience being perceived as. To discuss identity with the research participants. I asked them whether they feel like other people see them for who they are and what expectations others has of them. The

objective is to find whether there is disparity between how the research participants perceive themselves and how others perceive them.

[Do other people see you for who you are?] I think so. I feel that particularly through my jobs, where I've been assistant for people with disabilities, I have found that it's important to come forward as the person you are, so you can have a better collaboration both on the personal and professional level (Nora, translated).

Nora experiences that people see her as she is. Furthermore, she seems to be under the impression that it is up to her to disclose her real self. Thus, Nora experiences that being honest about who she is allows others to perceive her as she wants them to, and it seems Nora experiences that she can obtain more genuine relations to others by being honest.

I feel that different people see me in their own way. I might also be a different person together with different people. And that's not necessarily a negative thing. We have different relations with different depths. Some relations are only open for positive things. Others are open for negative aspects as well, and those relationships are deeper (Peter, translated).

Peter experiences that people see him differently and assigns how others see him to their relational proximity. What Peter explains is that how people see him vary, however, it seems that he feels some sort of in control of how people see him. His experience is that he presents himself different to different people, and that he does not necessarily present his genuine self, or does not strive to make others see his genuine self, if they do not have a close relationship. However, in similarity to Nora, Peter experiences that he has some control over how others perceive him.

Yasmin, who uses a wheelchair, answers in a similar manner to Peter when asked whether people see her for who she is: "it depends on how they relate to me." Yasmin had already told me about herself. She is taking a year off after high school, living alone and paying rent, so she has several jobs. She defines herself as a human rights activist, working in rights organizations, in a magazine, she is in a committee for the Norwegian government, volunteers on a mental health hotline. "...and some other things. It's a lot." However, when I asked Yasmin who has expectations of her, she answered firmly "no-one." I asked her to elaborate:

Unless people know me, people have no expectations of me. Those who know me expect what they would expect from anyone else. Doing my job. Being present. Focused. Engaged.

Therefore, I asked her why she experience that strangers do not have any expectations of her. Yasmin's experience of being constructed as lame by others is a testimony to the lack of understanding of diversity within a constructed group.

I often experience being underestimated. People look past me. Particularly a comment I often get is that people just guess that I'm lame, even though I'm not. And that's not something I can do anything about. If you think that go ahead.

Others people's epistemological positions allow them to acquire the wheelchair properties it does not have in their mind-world, based on their previous knowledge. When others assume that Yasmin is lame because she sits in a wheelchair, her bodymind is altered in others mind-worlds, her (dis)abled bodymind is succumbed by the wheelchair.

[How do you handle it?] I don't really care. I cared about it more when I was younger.

However, Yasmin does not care that people assume things about her. Maybe Yasmin has come to terms with the fact that others assumptions are just ideas about what is real (Butler, 2006). While performativity may change what "Disable" or "Able" constitutes through reinterpretations, stigmatized (dis)abled bodyminds cannot necessarily control how they are perceived by norm-functioning minds as they cannot perform as un-stigmatized without material change. Thus, stigmatized (dis)abled bodymind that is restricted by public space depend on material change in order to perform differently and use their agency to convey what their true identity is. Fredrik experiences a disparity between who he is and what others see him for:

No, I feel like they look at me like you would look at a three-year-old. At that level. [So you feel like the picture others have of you does not resonate with your own picture of yourself? That must be very frustrating]

Yes, it really is! (Fredrik, translated)

Fredrik, who identifies as someone with disabled legs, feel like there is a big gap between the way he sees himself and the way other people perceive him. Fredrik feels like people underestimate him, and that people have low expectations of him because of his wheelchair. Fredrik elaborated on his experiences of being disabled. He underlined that a norm-functioning person could never comprehend what it was like to be a wheelchair user.

You should come join me and see how people look at me when I go to cafés and stuff like that, I think you would be scared by people's attitudes.

Fredrik sense that other define him as ‘disabled’ in public space. When Fredrik enters the material space in his wheelchair, he is Othered as abnormal and defined as disabled in others mind-worlds. Through his embodiment, Fredrik experiences that in the public space, his identity is shrunk to ‘disabled’ in others minds.

You just should've known how many times in high school age I've wanted to give you people a lesson and put you all in a wheelchair and see you would tackle that (Fredrik, translated).

I interpreted his statement as a confession about him feeling lonely as a stigmatized (dis)abled bodymind that uses a wheelchair. It seems Fredrik suppose that putting his peers in a wheelchair would help them understand how their looks affects those in wheelchairs. I asked Fredrik about what is bad about sitting in a wheelchair.

It is the looks from strangers. When children look at me, and their mother is like, "No, don't look at him". But I'm like, "Yes, look at me!" [Do you think the mother's intention is that her child shouldn't be rude?]

Yes, but it is the parents that are rude by not letting children ask questions. That's why I consciously want to talk about my life.

Fredrik wants to use his agency to show that he is not what others define him as. However, it seems that in contrast to the norm-functioning research participants, Fredrik cannot just perform in the way he wants to in order to shape others perception of him. His agency is hijacked by others definition of him as ‘disabled’ as soon as he steps into the public space. Therefore, Fredrik must prove others wrong before he can start to perform his genuine identity. Fredrik is in a wheelchair, and he writes theater plays, work as an actor and has debuted as a singer on stage. However, it seems like the wheelchair diminishes people’s imagination of who he can be. For Fredrik, that is evident in the expectations people have of him.

There are extremely low expectations from people. Because everyone thinks that there's only one kind of disability. And that is that you are simply a vegetable. (...) People simply think that I am stupid, so people have very low expectations when talking to me.

[How does that make you feel?]

I experience it as very degrading (Fredrik, translated).

When asked whether he feels like he proves people wrong for their low expectations when succeeding with his work in the theater, Fredrik says;

Oh, yes! [Does that give you joy?] Yes, I enjoy it when people have expectations and then I can say or think that “Hah! You shouldn’t have thought that about me!” (Fredrik, translated)

Fredrik enjoys using his performativity to disprove those who underestimate his abilities. The assumptions others have of Fredrik is a construction of disability that they produce in their mind worlds. Fredrik changes the narrative by performing in ways that people did not think Fredrik would be able to do, that most norm-functioning people are not doing. When Peter and Nora are asked which expectations, people have of them and, they focus on pragmatic expectations. Furthermore, I asked them whether they are able to live up to these expectations and both Peter and Nora feel that they have been able to live up to the expectations people have of them:

The expectations of me at work are met. And as for my parents' expectations, I have met them in the sense that I have completed my education. That way, I feel accomplished in terms of expectations at this stage in life (Peter, translated).

Yes, I would say I feel that I meet the expectations that other people have of me, both at work and in my spare time. They all know I do my best (Nora, translated).

As they both reported on living up to the expectations at work, they were encouraged to talk more about what other expectations they feel like they should live up to, and who has these expectations.

Perhaps society's expectations of starting a family. That is a more general expectation. An expectation for life, which is as much from me as from others (Peter, translated).

Coworkers, my roommate and family members and such. I guess it's keeping in touch in general, behave and don't do stupid things (Nora, Translated).

Both Peter and Nora focus on family and work in their answers on who has expectations of them. When asked what expectations they are subject to, Peter and Nora focus on the expectations they live up to. The largest gap between the two selections was when discussing the expectations they are subject to. Both selections to some extent mentioned work as a place where they lived up to the expectations people had of them. However, the norm-functioning selection focused on pragmatic and general expectations that their close ones have of them. The selection of those who defined as disabled focused on how low expectations people have of them. The norm-functioning respondents focused on their own agency in their performativity of their identity. On the other hand, the stigmatized (dis)abled research participants had another experience of whether they have agency to affect others perception of them.

5.1.2.2 Microaggressions

A microaggression is a subtle but offensive comment or action directed at a member of a marginalized group that is often unintentionally offensive or unconsciously reinforces a stereotype (Dictionary, 2021). Microaggressions towards people with disabilities thus reveal norm-functioning people's opinions or assumptions about people with disabilities. When Fredrik can sense that people expect him to be stupid when talking to him, he experiences microaggressions. Microaggressions are not necessarily rooted in an active choice to discriminate, however, we all are conditioned to have some expectations of what to expect from groups, in this case, in particular from stigmatized (dis)abled bodyminds.

I have experienced that people have touched me without my permission, talked to the person next to me but not to me, asked me what's wrong with me, followed me to see if I needed help, told me they'd never date someone disabled, given me unsolicited advice, and talked to me in babytalk or just louder speech (Marie, transcribed).

Microaggressions towards stigmatized (dis)abled bodyminds can be, among other reasons, a result of the binary construction of people with disabilities either as victims or as heroes. Many people with disabilities report on being considered a victim of their disability. When considered victims, people with disabilities become objects of pity for the norm-functioning, and an Other to measure oneself against. All of the microaggressions presented in this section is Marie's experiences. Marie is a woman in her 20s from the US. Thus, the norm-functioning person praises himself lucky for not suffering the same destiny as the stigmatized (dis)abled bodymind. Many people with disabilities also report on being considered a hero for being able to endure or even enjoy life despite their disability. Marie have heard: "I could never live through that pain, I'd kill myself – you are so strong" and she experiences that "people call me inspiring for no reason." Here, what the norm-functioning person may believe is giving a compliment, is a microaggression; essentially saying that the lives of chronically ill people are not worth living. However, as Marie points out "it is not like it is a choice to be strong. This is how I live my life."

The binary construction of disabled people either as victims or as heroes objectifies stigmatized (dis)abled bodyminds - they become Other to the norm-functioning. However, Butler's (2006) point is that the abnormal is never fully expelled. It remains part of the normal, denied but lurking from the outside, but still within the hegemonic discourse. I argue that constructing stigmatized (dis)abled

bodyminds as either heroes or as victims is a coping mechanism for norm-functioning people to deal with the Disable. The outside within the heteronormative matrix blurs the line between what we wish to be and what we are, or fear becoming. Disabled people possess something that the Able just as easily could possess. By accepting Disabled people as equal, as part of the normative, the Able must accept that the norm-functioning body's exclusive status as normative is not absolutely linked to ableness and that if there are non-able people and they are acknowledged, their own body is somehow attacked and imperiled. It is too terrible for the norm-functioning to imagine oneself in the disabled position. Therefore, for norm-functioning people to construct the stigmatized (dis)abled bodymind as a trope, a victim, or a hero, in their mind world as a consequence of their disablist attitudes about what lives are worth living.

The normalized characteristic of identity is conditioned by who has power to construct others. The norm-functioning person has power through working in planning and development and develops inaccessible public spaces. Furthermore, the norm-functioning person has power to define and normalize the 'disabled' body as abnormal or invisible in the public space, and as long as the infrastructure is the same, the 'stigmatized (dis)abled bodymind cannot perform otherwise (Butler, 2006; Haslanger, 2006). Thus, relational power is a practical condition of identity. Normalized characteristics of public space, infrastructure, and identity, are respectively practically conditioned by inaccessibility, and power, which leads to Othering of stigmatized (dis)abled bodyminds. Lastly, the analysis of the normalization of 'disabled' bodies in public spaces finds that using power is a practical condition of identity, and that agency is a structural condition of public space.

5.2 Private life

This section includes statements from the datasets coded as 'private life.' This section localizes the statements as experiences of three different normalized characteristics of private life: valuable life, self-reliance, and social distancing. A valuable life is arguably a normalized characteristic of private life because Western perspectives on what a valuable life is entrenches the private life. Following Western ontological logic, a valuable life includes belonging and being liked, working and

contributing to society, starting a family, owning property, and being healthy. Second, self-reliance is a valued trait in Western societies, where (dis)abled bodyminds seek moving out from home relatively early, being economically independent, and attain higher education (Markus & Kitayama, 1991). Independence implies the private life, as independence involves being less reliant on others. Lastly, social distancing has become an aspect of contemporary private life because of the Covid-19 pandemic outbreak and related infection control measures. This section acknowledges that private life is closely linked to public life. This section discusses lived experiences from public spaces such as the school and the workspace, in addition to senses of inclusion and safeness which relies on social relations. However, the private life of the subjects and their feelings are at the core of the analysis.

5.2.1 Valuable life

Based on the collected datasets, this thesis finds that a valuable life includes four interconnected traits: feeling safe, feeling included, sense of achievement, and feeling valuable to others. I stress that “valuable” life is not addressing whether life itself is valuable, but underline some aspects of life that are valuable to us. The research participants were asked where they feel safe.

I feel most safe when I'm with my mom. But I don't know, I never feel completely safe. I don't have anyone I feel completely safe with if I'm being completely honest. That might be because I have experienced many traumatic things. I don't know (Yasmin, translated).

Yasmin's feeling that she is never completely safe is a manifestation of her embodied experiences of trauma. Her trauma is a part of her corporeality that she carries with her - making her bodymind an unsafe space to reside in. When I asked Fredrik where he feels safe, he answered *I am a bit unsure because I generally feel safe everywhere*. However, at another point in the interview, Fredrik started to talk about elementary school. He stated that he felt like he was excluded throughout elementary school, and that parts of elementary school were socially and emotionally challenging for him.

I don't think kids would get the same attitudes served to them today. I think it is much more acceptance for people with disabilities now than back in the early 2000s. Back in elementary school, I was the outcast. (...) It was hard for me to go to the class reunion last summer, because some guys that were very mean to me back in

elementary school was going to be there (...) It was easier for me to bond with the girls (Fredrik, translated).

Based on the transcript, one can suspect that Fredrik did not always feel safe. He was not prompted to talk more about his bad experiences from elementary school because he should not need to relive trauma. However, it became clear from our conversation that Fredrik had felt unsafe together with the guys that treated him poorly, and that he preferred to instead spend his time with the girls in his class whom he found accepting and considerate. While Fredrik spoke about his former classmates with fury rather than with fear, his embodied experiences from childhood had manifested in his bodymind, making him consider not going to the reunion. Thus, bullying allows for defining ‘disabled’ bodies: Fredrik was bullied based on his disability, and as such Othered.

While bullying is not rare in elementary school (Hanne Svarstad, 2021; Christian Wendelborg, 2020), stigmatized (dis)abled bodyminds are disproportionately exposed to bullying and hate speech (Hanne Svarstad, 2021; Christian Wendelborg, 2020). Among students in public schools in Norway, the average amount of students experiencing bullying or hate speech is almost six times as many among stigmatized (dis)abled bodyminds than among norm-functioning children (Hanne Svarstad, 2021; Christian Wendelborg, 2020). This statistic is based on two independent surveys, nevertheless, without going deeper into the foundation of the statistics, it is safe to say that there is a considerable amount of (dis)abled bodyminds in school who cannot feel safe in school, a place they are supposed to spend a considerable part of their lives. The informants were asked when they last felt included, and what typically characterizes the situations or spaces in which they feel included.

That people see me as me, that they don't see the wheelchair but the human in the wheelchair (Fredrik, translated).

I think that what makes me feel included is that nothing reminds me of my wheelchair. No people, no things that remind me of my wheelchair. In my dreams, I'm not in a wheelchair (Yasmin, translated).

Both Fredrik and Yasmin feels included when they feel like others perceive them as they perceive themselves. When nothing reminds them that they use a wheelchair, they do not perform as abnormal. When Yasmin said this, I reference back to something she told me earlier:

I might be a 'special case,' because there is nothing I have wanted to do and haven't done. If there's a building with stairs, I'll fucking stand up, go those stairs and I'll fucking carry my wheelchair if that is necessary.

Subsequently I ask Yasmine if she can carry her wheelchair and *make* a space accessible, is the fact that she is reminded she is in a wheelchair that makes her feel not included?

Yes, exactly that is what makes me feel excluded. I remember when I was in high school, sometimes the elevator didn't work on the subway. So, I'm like, I'll wait until the next subway comes, I'll take the subway to the next stop, and I'll walk home from there, right? But the school assistants, was like "no come on, I'll just carry you, and someone else will take the wheelchair." And I was like "no!" And I've always been very strict on this, like, why should I need to be violated? Why should I let a man hold around me?

It seems like Yasmin subjectively has internalized the individualistic ontology of Western society – because if we regarded each other in a more inter-relational manner where we all the responsibility for everyone in community were equally distributed, she might could have felt more comfortable. Nevertheless, in contemporary Western society, no matter what Yasmin would do in this situation, she would have to perform as either invisible or abnormal.

I feel included at home and with my friends. When there's open room for being heard and listening to others that dare to speak freely and truthfully. And that is when you feel safe. That's when you feel appreciated, when people dare to speak truthfully. When people are their authentic selves, you feel safe (Peter, translated).

For me [feeling included] is to be invited out of the blue, that people are happy to have me there. When I'm included in conversations and feel like I can start conversations as well (Nora, translated).

For Peter, feeling included relates to being able to be himself, and sense that others are comfortable with being themselves around him. Nora initially focused on just being invited. However, it is also important for her to feel wanted in the space. For the informants, feeling safe seemed to be closely related to feeling included. Furthermore, all informants focused on being able to feel like themselves and that others recognize and accept them as who they are. Furthermore, the informants were asked when they feel a sense of achievement.

The other day. I finally ... this sound weird. I recently had a surgery, and it made me lame. It wasn't because my nerves didn't work, it was this rare pain condition where I was numbed by pain. So, I couldn't move. Breathing hurt. Everything hurt, all the time, for weeks. After some time, I was able to deal with the pain. But what I was most scared of... it was my sex life. I was good in bed before

this! Imagine if I can't have sex! What if I can't feel anything? Am I even able to have an orgasm now, or am I numbed there as well? Because I can't feel my back. I have worked very hard and come a very far way, but some of my body and my muscles are still numb. I have to exercise to get back in touch with those muscles. So, I felt a sense of achievement when I was able to have sex. (Yasmin, translated)

Yasmin felt a sense of achievement as she was able to do something because she has worked hard for it. It was solely something she did for herself. She had experienced what Kafer (2013, pp. 3-4) explained as becoming “more disabled” by pain. Yasmin’s corporeality changed through time, and she had to accept and get to know her embodiment all over again. Yasmin’s statement also resonates with Shakespeare’s (2006) explanation about the (dis)abled bodymind itself being a root of restriction. The pain that Yasmin experiences has not only drained energy from her, but also changed the actual capacity of her body (Feely, 2016; Shakespeare, 2006). Nevertheless, the period of time where she was numbed by pain did not limit the virtual capacities of her body, because her body could have sex the way she currently prefers both before and after the period of numbness. In contrast, all the other research participants felt achievement when they were doing things that others expected of them.

I feel a sense of achievement every day when I complete small sub-tasks at work that lead to bigger goals. It is often associated with hours of work that one has put down, tasks that you didn't get to finish immediately. So, when you complete them, you feel a sense of achievement (Peter, translated).

I felt a sense of achievement at work yesterday. I succeeded at a task; it was so great! I was able to collaborate good with one of the residents at work and did something that tends to be difficult (Nora, translated).

When I step outside after a production meeting. That's when I feel a sense of achievement that I think most student and others would be envious of (...) My sense of achievement and my self-confidence is beaming afterwards! (Fredrik, translated)

Among the research participants, senses of achievement were mainly related to living up others’ expectations. When asked when the last time they felt a sense of achievement was, Peter, Nora, and Fredrik all thought of when they succeeded at a task in their workspace, and was able to contribute to community with their success.

As shown in the response to questions about sense of achievement, work seems to be closely related to feeling accomplished among the informants. However, work is not accessible to all (dis)abled bodyminds. Employment is a normative goal in Western society. Valuable citizens in Western society offers value production and their economic resources to contribute to democracy. For many (dis)abled bodyminds,

employment is essential for feeling valuable to Western societies. However, many stigmatized (dis)abled bodyminds that want to work are unemployed (Bufdir, 2021; Halvorsen, Hvinden, Beadle Brown, Tøssebro, & Waldschmidt; Van Dalen, 2021). In 2021, researchers at Oslo Metropolitan University in Norway found that disclosing a disability reduced the probability of being invited to an interview with 48%. Their findings also indicate that wheelchair users must apply for approximately twice the number of jobs as an identical norm-functioning applicant in order to be invited to an interview (Bjørnshagen & Ugreninov, 2021). Thus, disabled people are robbed of (dis)abled bodyminds' main reason for experiencing senses of achievement and feeling valuable.

The Norwegian Government has started a project they call *inkluderingsdugnaden*, or the jointly performed, unpaid, and voluntary work of inclusion of significance to the community. Inkluderingsdugnaden involves inclusion of people with disabilities in workspaces. The wording “dugnad” maintains a notion of “us” as a savior with authority over “them,” - which implies denying autonomy to stigmatized (dis)abled bodyminds (Said, 1978). Thus, the wording implies a notion that it is kind to include people with disabilities. However, including stigmatized (dis)abled bodyminds in society is not “kind” – being including in society is a right. Furthermore, the discourse the Norwegian Government presented to employers was: “Give people a chance. Take one for the team” (translated).

The discourse maintains a notion of stigmatized (dis)abled bodyminds being a special case that society must adapt to. The discourse constructs stigmatized (dis)abled bodyminds as a burden to society. On the contrary, the reality is that stigmatized (dis)abled bodyminds always have had to adapt to the inaccessibility of society. Social inclusion without respect is not sufficient for equality (Collins, 2003). Inkluderingsdugnaden is an example of how inclusion can be a buzzword without substantial meaning. Employment as a key to feeling included, accomplished, and valuable. Employment is closely tied to what we would deem success in Western society: to have high achievements in school, take higher education and be able to work. The analysis finds that success is a practical condition of having a valuable life, and that betterment is a key structural condition for achieving success in Western society.

5.2.2 Self reliance

Self-reliance plays a significant role in constructing a valuable life. This section observes how the research participants use self-reliance as a criterion for defining disabled and healthy bodies. What characterizes a disabled body and what is a healthy body?

Something that prevents them from doing an everyday thing, something that prevents them from traveling with public transport, out of the country, or out the door. There are different degrees of disability there perhaps. Something that hinders mobility, or that once one gets out, prevents them from going where everywhere that “everyone” can? Can you experience what “everyone else” can? And when they are at home can they do what everyone else can? Can you make your own food or dress yourself? (Peter, translated)

Maybe a body that can do all these things by itself? (...) but it seems that when I mention what a disabled body is, it is really very much related to how adapted everything is to that body. It is very clear that most people can actually do all these things if it is only facilitated enough? (Peter, translated)

Peter arguably sees disability in line with the social model of disability. At first, he reflects on what a disabled body is, and focuses on what the body cannot do. However, Peter actually takes on an assemblage ontology of materiality position, as he asks himself, what ‘could’ a body do? And he is able to imagine that a body could be more self-reliant and thus not be constructed as ‘disabled’.

It’s body that maybe can’t do all the things society says a body should be able to, or a body that can’t do all it “should” do. But it cuts across so very big scales. A disability could be that you have a limp and maybe can’t run, or it could be that you’re lame. It’s such a wide range. It is not appropriate to put bodies into two categories, you can find a better way to talk about it. When we talk about a disabled body, we take away the humanity in it (Nora, translated).

When Nora is asked what a disabled body is, she focuses on the ontological and epistemological signals that society send the individual. She believes that the perspective on what a ‘disabled’ body is could be different. Nora acknowledges that expectations for what an individual should be able to do is constructed, it is something we as society has agreed upon. It is natural to think that we potentially could have agreed on something else than self-reliance as a criterion for being norm-functioning. She also speaks to the fact that the ‘disability’ marker is not appropriate for the real world – bodies that are categorized as ‘disabled’ are very diverse. I asked Nora what a healthy body is:

A body that does and achieves what you want your body to achieve. My view of healthy body, or my own body as healthy is if I manage to do the physical activities I want to do and I do not hurt for example. If it works the way I expect it to work, based on my body's potential or starting point. But others have different ideas and opinions about what a healthy body is. For some, a healthy body is just that it works. Or that all of the intestines work as they should. It is very, very different from person to person (Nora, translated).

Nora mentions that she would consider her body healthy if it does not hurt. Here, she caters to Shakespeare's (2006) critique of the social model and acknowledges that pain can be restricting. This raises interesting questions about whether (dis)abled bodyminds that experience pain is temporarily disabled? Are old people disabled? While these questions are beyond the scope of this thesis and are purely rhetoric in this context, they serve a purpose of helping us question our assumptions. Furthermore, Nora accounts for the relativity of health; she believes it is up to the individual whether they experience their bodyminds as healthy or not. Here, Nora is open minded and acknowledges for embodied knowledge as legitimate knowledge. Nora's answer is very similar to Yasmin's:

A body that is able to do what you want... The same as what we call good mental health – it is very individual what that entails. A healthy body is body that is able to do the daily tasks that you need to get done. A body that is able to do what you need to be happy. It doesn't have to mean that you can climb a mountain. Maybe that you can go to the toilet. Maybe you have someone to help you go on the toilet, and it can be a body that keeps you alive. It is very individual what you yourself self see as important (Yasmin, translated).

Yasmin points out that what a body needs to get done in a day is individual. She uses our perspective on mental health to talk about physical health; the (dis)abled bodymind's starting point is different and relational, however, likewise is the standard for what healthy and good is – and it does not make sense to compare (dis)abled bodyminds to each other. Fredrik on the other hand said that “*I don't think there is any healthy bodies.*” He elaborated:

I think a healthy body is the body you're happy with. Not a barbie-body like I call it. It is always the same in modeling, we always see the slender figures. Where is the not-perfect bodies? They are hidden (Fredrik, translated)

The research participants seemed to agree that a healthy body is a body that can do what the person wants it to do. However, what we want a body to do is very often colored by what our role models tells us a body is supposed to do. The research participants took the question very seriously and took a step back to truly reflect on

what a healthy body is. However, I will argue that what a healthy body is presented to us through media. I have not seen any mainstream commercials, social media posts or similar things where a disabled body is the healthy ideal.

5.2.3 Social Distancing

The Covid-19 pandemic is a crisis that arose unexpectedly and led to intervention in the private life, making the private life of public matter, as (dis)abled bodyminds had to practice social distancing for the sake of the public. In particular, the infection control measure of social distancing and the relocation of health care workers has intervened with the lives of stigmatized (dis)abled body minds. Based on the datasets, this thesis finds that the unexpected crisis of covid-19 became a catalysator for social structures of inequality, effecting several aspects of private life for stigmatized (dis)abled bodyminds: the home, assisting services, health care and school. The social inequalities that become exposed when disasters arise are not caused by the crisis, but by the structural conditions of society (Chmutina & von Meding, 2019). The Covid-19 pandemic intersects with neoliberalism and render these inequalities especially acute. This section shows how the stigmatized (dis)abled body mind has been subject to precariousness disproportionately to the rest of the public due to the infection control measures of Covid-19. Precarity is different precisely because it is unequally distributed. In Western society, the stigmatized (dis)abled bodymind is reliant on the Western state, and the Western state has allowed for discriminating against the stigmatized (dis)abled body mind, making the stigmatized (dis)abled bodymind precarious.

In Norway, the state' municipalities have the responsibility for housing for the stigmatized (dis)abled bodymind. In Norway, the Corona Commission published a report stating that about a third of the municipalities introduced visitation bans in community care homes, affecting almost 6000 stigmatized (dis)abled bodyminds living in municipal housing. More than half of the municipalities that introduced a visitation ban stated the Norwegian Directorate of Health guidelines as the most important basis for the decision. In total, about 60% of the municipalities in the survey introduced a visiting ban or visiting conditions in care homes for people with disabilities (Koronakommisjonen, 2021). The Norwegian Directorate of Health should have specified earlier that the municipalities did not have the opportunity to introduce

general visitation bans in care homes. The visitation bans were ethically wrong and legally an act of deprivation of liberty. The Corona Commission further states that during the pandemic, infection control measures have been introduced, restricting the exercise of these rights, but which must nevertheless be regarded as legitimate (Koronakommisjonen, 2021). However, the choice of the municipalities to exert visitation bans reflects a lack of knowledge, resources, and creativity in the face of crisis.

Likewise, in the UK and the US, many stigmatized (dis)abled bodyminds live in community care homes. Empirical statistical research from the US and the UK articulates how extensive the precariousness of stigmatized (dis)abled body is due to residing in community care homes. In most states in the US, many workers in care homes earn below the poverty line and did not get any bonus pay that is sometimes offered to other front-line health care workers. Consequently, health care workers in community care homes rely on public transportation for their commute to work (Shapiro 2020), making them and their patients exposed to infection of Covid-19.

According to research from the US and UK, stigmatized (dis)abled bodyminds that live in community care homes are more exposed to both contracting Covid-19 and are more likely to die from Covid-19 infection than the rest of the population (FAIR Health, 2020; Jenkins, 2020; Landes, Turk, Formica, McDonald, & Stevens, 2020; PHE, 2020; Statistics, 2020). People with disabilities are likely to live in a setting with roommates and staff, where two or four or 10 or more people live together (Landes et al., 2020; Shapiro, 2020). The chances of actually contracting Covid-19 are high due to their living situation, and if someone in your home gets it, there is nowhere you can go because you rely on the care workers' services (Shapiro 2020). Similarly, in Norway, social distancing is not an option for the stigmatized (dis)abled bodyminds that rely on visits from care workers or various health services outside of their homes. Relying on caregivers for medication, help with your daily chores, or personal hygiene means being in a precarious situation where the stigmatized (dis)abled bodymind cannot exercise social distancing – putting their lives in the hands of others.

The quotes following quotes originate from surveys conducted by the Norwegian interest organizations NHF (Norwegian Handicap Federation) and FFO (Disabled People's Joint Organization) (FFO, 2021; NHF, 2021). Due to infection control measures and relocation of health care workers, several stigmatized (dis)abled

bodyminds lost their access to assisting services and health care practices that they rely on. Practical assistance, and assisting aids are necessities for some (dis)abled bodyminds' everyday life. Many stigmatized (dis)abled bodyminds have stated that the infection control measures has restricted their access to assistance they are dependent on. Many say that they had to resort to family, where that opportunity existed, others had to come to terms with the fact that health and function were reduced (NHF).

Physiotherapy that the person should have daily ceased and is also postponed indefinitely. The family performs all of the care, nursing, medication management and physiotherapy now, but cannot further develop the rehabilitation process alone (NHF).

According to a survey examining the consequences of the infection control measures, more anxiety and depression are among the consequences of anti-social life and canceled services for stigmatized (dis)abled bodyminds (Flølo, 2020).

The level of function has receded, and it will take at least a year to get it back as it was before the physiotherapy was stopped. I have never in adulthood considered taking my life, but during this period I planned this several times, and it was a miracle that it did not happen one of the days. I wanted to die because I could not live with the extreme pain and suffering, I got without physiotherapy (FFO, 2020).

The Covid-19 response affected disabled children and their families. Among the respondents that had children with disabilities, 17% stated that they had either lost their access to municipal or private care relief, or that their access had declined. Children with disabilities and their families often rely on relief services, such as shared housing where children live temporarily on a regular basis. For many, the welfare system was replaced by family care - with critical ripple effects for many families who have been left without offers of follow-up, relief and educational opportunities for their disabled children (NHF).

*Intervening infection control measures that have created social isolation:
Being left alone with heavy care tasks (NHF).*

Reduced offer (...) means that the family has become extremely tired: Little sleep, many heavy lifts. No opportunity to work for long periods that led to full work ALL day and evening to make up for lost working time on relief day = round-the-clock shift (NHF).

Many desperate and exhausted parents describe a demanding everyday life without relief and with extensive care tasks that have been at the expense of their own needs and the opportunity to be at work (NHF). Throughout the Covid-19 pandemic,

many relatives of stigmatized (dis)abled bodyminds have felt the burden of extra responsibilities and increased workload. Several people chose to take over the responsibility of family members who otherwise reside in care homes to avoid the regime of the visitation bans. Others despair of not being able to visit their children with developmental disabilities. Some stigmatized (dis)abled bodyminds do not have the means to understand why family, who may have been visiting every day, suddenly miss out for months (FFO, 2020).

My daughter, who lives in a shared apartment but in her own apartment, was not allowed to visit me and her sister. The municipality refused (NHF).

The precariousness of the stigmatized (dis)abled bodymind has repercussions for broader society. Precariousness is a generalized human condition that stems from the fact that all humans are interdependent on each other and therefore all are vulnerable (Butler, 2004, 2010). Families allowing their stigmatized (dis)abled bodymind to be reliant on them are consequently absorbing the discrimination that the stigmatized (dis)abled bodying is subject to, making the private life of the entire family precarious.

Lost support contact (...) Lost school offer. Partly lost private relief but got started eventually (NHF).

Furthermore, disabled children and adolescents has lost access to school disproportionately to their peers. The FFO survey also shows 40% of the respondents in the age group that should have access to adapted teaching, have lost their access to it. Many children and adolescents lost licensed special education and adapted education. Several parents say that the responsibility for their children's learning is placed on them, and that this does not work. Many have not received special education or adapted education after the schools reopened (FFO, 2021). A parent of a young stigmatized (dis)abled bodymind reports that their child is isolated as all activities are cut off due to social distancing. The other children have made their own "friend groups" but the parent's child cannot participate without an adult companion (NHF) and must perform as invisible in the friend group.

Lack of social contact with other children during the home school period has led to problems with knowing how to join the playtime now that the school has reopened (NHF).

When the disabled child cannot participate in the material space with their peers they perform as invisible and become Othered. Furthermore, the affect in the

mind intersects with the bodymind experience of the material world - the physical exclusion of the (dis)abled bodymind affects the child's ability to include themselves in playtime. NHF points out that the story of the pandemic in Norway did not have to be a story about how people with disabilities were let down. Pandemic preparedness and infection control measures have been introduced in several places without this having been at the expense of services to the inhabitants. After all, not everyone claims to have lost their offers for therapy, personal assistance or school. Many respondents describe that they have been well taken care of and felt safe in the situation. Such answers show that the adverse ripple effects of the Covid-19 measures could have been avoided if one had strived to ensure good, caring solutions in the first place (NHF). Thus, the story of people with disabilities does not need to be like this, it is a matter of preparedness and ontological standpoint.

It should be noted that this thesis is written in the midst of the Covid-19 pandemic and that social science data on the pandemic is limited. However, I have observed a narrative in social media that people either survive the pandemic or not, and that only those who already are weak are going to die from the virus, implying that the lives of stigmatized (dis)abled bodyminds and older lives are less valuable. As presented in this section, the consequences of the Covid-19 pandemic are not binary, but consists of a myriad of outcomes across the specter of the personal life. For example, (dis)abled bodyminds that has been norm-conforming struggle with lower lung-capacity and fatigue as a result of having been infected with Covid-19 (Marshall, 2020).

A practical condition of being able to ensure social distancing is resourcefulness. Resourcefulness can be understood as resilience in times of uncertainty – not only in terms of inner “strength,” but also that (dis)abled bodyminds are independent from some of the resources around them, and can practically draw on their own resources instead. Based on the reflections on private life; valuable life, self-reliance, and social distancing, this chapter finds success, norm-functionality and resourcefulness to be practical conditions of what we know as private life in Western society. Furthermore, the underlying structural condition of norm-functionality is betterment, individualism, and independence. All these structural conditions are testified to the pursuit for the individual rather than the collective.

5.3 Academia

Academia might seem to be a surprising empirical space; however, I was surprised that my education in human geography and planning lack a focus on stigmatized (dis)abled bodyminds. I found that the exclusion of embodied knowledge from stigmatized (dis)abled bodyminds in my curriculum, in addition to the lack of stigmatized (dis)abled bodyminds in my academic circle seem to be profound exclusion. This chapter includes statements from the datasets about academia as experiences of two different normalized characteristics of academic space: conducting research and knowledge production. The datasets contained reports on few disabled academics, and that there seems to be little emphasis on embodied knowledge in Human Geography literature. Therefore, this section presents the findings on how ‘disability’ is defined as Other in academia through ableist structures, disablism towards stigmatized (dis)abled bodyminds and Othering of embodied knowledge.

5.3.1 Stigma and inaccessibility in academia

This section applies the concept of (dis)abled bodyminds and analyzes how structural conditions allow for normalizing and defining ‘disabled’ bodies in the material and abstract spaces of academia – effectively narrowing the scope of the geographical canon. Based on the dataset, there are seemingly two reasons why there are few stigmatized (dis)abled bodyminds in academia: inaccessibility and stigma. The datasets show both structural and material inaccessibility as allowing for defining ‘disabled’ bodies in academia. These inaccessibilities relate to the structural conditions of the school system such as deadlines, and the materialities such as infrastructure.

In school, stigmatized (dis)abled bodyminds that cannot conform to the tempo or quality of progress that is expected of students risks attaining lower grades or dropping out. For example, during oral presentations in high school, students are docked points for fidgeting or stuttering. Students with disabilities drop out of school at high rates. Reports show that drop-out happens either because the school are not willing to be flexible on deadlines (dis)abled bodyminds that experience pain in periods, or because the students have ‘learning disabilities’, or would learn more if the school could develop educational methods in interaction with the student’s need

(NOVA, 2014; Pyle & Wexler, 2012). The student's standard of achievement has direct effects on their opportunities for further education and employment – thus when high school becomes inaccessible to the (dis)abled bodymind, they have a smaller chance for attaining higher education. Stigmatized (dis)abled bodyminds are simply expected to use disability benefits – the school system is not designed for them to prosper (Christian Wendelborg, Kittelsaa, & Wik, 2017). Hashani (2020) explains that “disabled students do not gain independence. From early childhood we are taken for being less intelligent and poor. This is discrimination that propagates further through adolescence, and which stifles all belief in careers” (Hashani, 2020).

The historic absence of stigmatized (dis)abled bodyminds in academia has materialized as inaccessible universities – both in terms of infrastructure and attitudes. Old university buildings can be inaccessible to several stigmatized (dis)abled bodyminds. The Equality and Anti-Discrimination Ombudsman in Norway found that a university building was inaccessible to wheelchair users, but since the building was listed, no one was breaking any laws (LDO, 2011). Furthermore, Yasmin pointed out that accessibility to a space does not mean that the (dis)abled bodymind has access to participation:

People in wheelchairs cannot choose where we want to sit in the auditoriums in the University of Oslo. Wheelchair users must sit all the way in the back. If you've poor eyesight, you must sit at the back. If you're hard of hearing, you must sit at the back. It's the only place. You cannot decide what row you want to sit on. It is already decided where you are going to sit (Yasmin, paraphrased).

The semiotics of the material building, as well as the structural conditions of the law, tells the stigmatized (dis)abled bodymind that they are not welcome in the academic space, and that their contributions to academia or society will not be worth more than the listed door. The building remains inaccessible to several (dis)abled bodyminds who becomes excluded from academia. Consequently, there are few ‘disabled’ academics.

Many stigmatized (dis)abled bodyminds do access academic education. Statistics show that nearly 13% of undergraduates have a known disability (Brown & Leigh, 2018a, p. 985). However, there are very few (dis)abled bodyminds in academic staff who declare having a 'disability'. Statistics show that there are four times as many working age adults with a known disability than proportion of staff in universities that declare having a disability. Considering these statistics, there is a

stark under-representation of (dis)abled bodyminds amongst academic staff: academic (dis)abled bodyminds exists, but the matter of declaring invisible disabilities and illnesses is a primary concern in academia (Brown & Leigh, 2018a, p. 985).

Brown and Leigh (2018a, p. 985) explain that “changes to funding structures, increased globalization, marketisation and bureaucratization of higher education have resulted in a performance-driven working environment where teaching workload and pressures to publish are further intensified due to excellence exercises in teaching and research”. Based on Brown and Leigh's presentation about ableism in academia, one can deduce that there are social and practical conditions of who can produce legitimate knowledge, and how they should produce knowledge. In a performance-driven working environment, those who declares ‘disabled’ to for example ask for using more time, will become abnormal in the academic space. Brown and Leigh (2018a, p. 987) states that in academia, invisible 'disabilities' are dismissed as a “fabrication” or being a “lazy or overwhelmed worker seeking validation”. Such invalidating perspectives on stigmatized (dis)abled bodyminds are examples of social, cultural, and psycho-emotional exclusion of stigmatized (dis)abled bodyminds (Tyler, 2015, p. 660). Invalidating perspectives on disability is disablist discrimination at the subjective level that reveal how disclosing disability links the personal to academic accessibility as well as social relations.

The performance-driven working environment has left those who are able to conform to the structural conditions of academia in power. When those who have power say that something is real, for example that the ‘disabled’ academic is lazy, they maintain their own position not only by conforming to the structural conditions, but also by Othering stigmatized (dis)abled bodyminds. Consequently, academic (dis)abled bodyminds does not declare ‘disabled’ and struggle more than necessary to keep up with the high tempo. Others might not be able to and become lesser valuable academics (Brown, 2017; Brown & Leigh, 2018a, 2018b). Thus, the analysis finds that the performance-driven working environment is ableist disability discrimination which privileges norm-functioning academics (Tyler, 2015).

The decision about whether to disclose or to hide a disability is therefore an act of self-preservation, information control and impression management (Brown & Leigh, 2018a, p. 987; Goffman, 1990). Academic (dis)abled bodyminds are concerned that they are not taken seriously as academics, and that their achievements and publications are considered through the lens of their disability status. Stigmatized

(dis)abled bodyminds seem to fear that they are suddenly no longer seen as academics or persons, but as their disability. In this sense, academics themselves are the physical manifestation of internalized ableism within academia (Brown & Leigh, 2018a, p. 988).

The (dis)abled bodymind is fluid. For example, people who menstruate have a monthly cyclical hormonal variability. Menstruating people bleed, experience fatigue and cramps – days after, the same body has the potential to be at its strongest. The body may be attacked by viruses or bacteria that make our temperature rise and increase the production of fluids. Some bodies can walk but need a wheelchair for support, have a prosthetic arm, or have eyesight in brightly lit spaces but will need a cane in the dark. All (dis)abled bodyminds becoming physically weaker and forget easier. However, the current geographical canon lacks conceptions of the body as fluid (Longhurst, 2001, p. 24).

The lack of conceptions of the body as fluid is significant because the messiness of (dis)abled bodyminds is often conceptualized as feminized, Othered and not written about. Longhurst (2001, p. 24) states that ignoring the messy body contains a political imperative that helps keep masculinity intact. Geographical knowledge production commonly avoids questions about the boundaries of body-space relationships and the “messiness” of the (dis)abled bodymind. This can be seen as an attempt to separate knowledge production from its subjects' and producers' corporeality. Here, I observe a path to the fear that stigmatized (dis)abled bodyminds experience when they worry that their colleagues will only perceive them as their disability. Bell (2009, p. 119) underlines that geographic discipline knowledge production wittingly and unwittingly perpetuates heteronormative knowledges, despite intellectual challenges from feminist and queer geographers. I argue that Bell (2009) arguments considering heteronormativity is applicable to norm-functioning knowledges. Hansen and Turnbull (2013) reports that (dis)abled bodyminds knowledges have been dismissed as too tinted by corporeality and thus inherently un-academic. Even though geographers have conceived identities as fluid, geographers seem more reluctant to explore the fluidity of the corporeal body. Thus, much academic knowledge about ‘disability’ have stripped the data of the abject and presents norm-functioning academics constructions about (dis)abled bodyminds.

However, one can ask oneself what value knowledge stripped of the corporeality and the abject can have for the real world? The body is corporeal and

necessarily «messy» Some bodies are «messier» than others, and by keeping the «messy» bodies out of geographical academic knowledge, geographers are Othering the (dis)abled bodymind (Longhurst, 2001, p. 24). Geographers that want to contribute to societal development should strive to understand the corporeality of research subjects and convey the human diversity and corporeality in their research.

(Dis)abled bodyminds are Othered in academia - implying that some structural conditions of academia allow for normalizing and defining 'disabled' bodies.

Practical conditions of academia force stigmatized (dis)abled bodyminds to either perform as invisible or as abnormal. Invisible (dis)abled bodyminds constitute those who are excluded from the space, but also those who are 'disabled' but passing as norm-functioning in the academic space. The stigmatized (dis)abled bodyminds are abnormal academics, their social markers have made them the abnormal within the normal. The following sections explore how the Othering of (dis)abled bodyminds in academia is rooted in Western ontology of binaries and epistemology of sight and measurability.

Ontologically, Western academia prefers measurable knowledge to embodied knowledge, a preference that restricts the development of geographical knowledge production. Longhurst (2001, pp. 25-26) addresses the boundaries of geographic knowledge production that occurs due to Othering. Longhurst states that geography's boundaries undergo constant securing in an attempt to legitimize particular (disembodied) knowledges. Information considered plain banal or inappropriate is often edited out from publications, as we prefer the clinical, important, scientific and statistical. This preference reflects the Western ontology and that Western epistemology emphasizes the visual and the measurable as elaborated in Chapter 2: Theoretical Framework. Longhurst elaborates that what constitutes appropriate issues and legitimate topics to teach and research in geography comes to be defined in terms of reason, rationality, and transcendent visions, as though these can be separated out from passion, irrationality, messiness, and embodied sensation (Longhurst, 2001, p. 25). As a consequence of contemporary Western ontological perspective on knowledge, literature, research and knowledge production on and by stigmatized (dis)abled bodyminds becomes Othered.

Epistemologically, Western academia prefers the objective and manageable knowledge production. Longhurst (2001, p. 25) claims researchers who want to address Other topics and researchers who themselves may be defined as Others are

forced to struggle for the legitimization of their interests in the geographic discipline. “Their knowledge cannot count as knowledge, for it is too intimately grounded in, and tainted by, their corporeality. People whose bodies are understood to be messy or out of control are likely to be marginalized as illegitimate bearers of geographical knowledge” (Longhurst, 2001, p. 26). As a consequence of the current Western epistemological perspective the subjective and the abject is left out of knowledge production. What is acknowledged knowledge is decided by those who are already known as bearers of valid knowledge (Bell, 2009, p. 119).

Essentially, said gaps in geographical knowledge are arguably due to unbalanced power relations, normativity, and Othering. Said (1978) presents the concept Othering in Orientalism and simultaneously captures Otherings’ connections to power and normativity. Even though Said (1978) does not mention normativity explicitly, he mentions hegemony, dominance, and the West as the ‘normal’. Said’s (1978, p. 32) explanations of West’s domination of the Orient can be understood as transferable to the concept of norm-functioning people’s domination of knowledge concerning disabled bodies. For a norm-functioning person to have knowledge of disability is to dominate it, to have authority over it. Authority here means for «us» – normative bodies – to deny autonomy to «it» – the disabled bodies – since the able-bodied know disability, disability exists as non-disabled people know it. Non-disabled persons’ knowledge of disability is disability for non-disabled persons.

Because academia traditionally has been a space that excludes stigmatized (dis)abled bodyminds, the assumption that academia is inaccessible remains the norm: buildings, academic language and lectures are inaccessible to several (dis)abled bodyminds. Stigmatized (dis)abled bodyminds in academia are stigmatized as lazy because academia has become a performance-driven space where the academic (dis)abled bodyminds value is measured in productivity in terms of entities. Lastly, embodied knowledge produced by (dis)abled bodyminds are Othered due to traditional perspectives on what is legitimate knowledge. The common denominator for all the ways in which ‘disability’ is normalized and defined in academia is power. Unbalanced power relations in academia lead to discursive- idea- and object constructions of what ‘disability’ constitute, disablism, internalized ableism, and passing. Addressing these unbalanced power relations allows observing how power relations, such as knowledge production, without the inclusion stigmatized (dis)abled bodyminds genuine voices, reproduce the Othering of stigmatized (dis)abled

bodyminds. Existing power relations create the difference between the norm-functioning academic and the ‘disabled’ academic and legitimate and illegitimate knowledge. The unbalance of power relation increases when the material difference between the two increases. Therefore, power is the reason and result of the Othering of people with disabilities.

Thus, particular (dis)abled bodyminds and knowledges becomes Othered in academia – and ‘disabled’ academics and knowledges are defined and normalized as someone who do not take part in academia. Comment on academia supposed to serve the public. Thus, the concept of power offers tools to convey and agenda of this thesis that is that human geographers should include people with disabilities in their research. This section answers to the agenda of this thesis by speaking directly to the target group of human geographers both in academia and planning. Human geographers must act responsibly with the power they hold and question the status quo of academic knowledge production. Furthermore, this thesis encourages human geographers in planning to make sure accessibility is not only a thing to check off on a list. Thus, productivity is a practical condition for conducting research today, to which the analysis finds efficiency to be the structural condition. Moreover, a practical condition of knowledge production as a whole is to ensure legitimate knowledge, which one achieves through the structural conditions of measurability.

5.4 Discussion

Ontologically, the analysis shows that the binary assumptions in Western ontology affects understanding of the body and allows for defining the ‘disabled’ body in line with Western epistemology of sight and measurement. Applying the assemblage analysis ontology, critical ontology and epistemology of embodiment as analytical tools allows for understanding the body differently. Based on the analysis of the datasets, this thesis finds that stigmatized (dis)abled bodyminds are constructed as Other and disabled by being invisible or abnormal in the public space, private life, and academia because of stigma and inaccessibility. This analysis finds that the normalized characteristic of infrastructure, accessibility, is conditioned by inaccessibility. This thesis finds productivity as the cause of inaccessible infrastructure, as developing accessible spaces necessarily entails including stigmatized (dis)abled bodyminds in the planning process (Hansen & Turnbull, 2013).

That would entail allowing time to think creatively and innovative about the development of place, and risk being less productive. Furthermore, having power is a necessity for exerting agency and conveying one's genuine identity. Inaccessibility and exclusion in the school system, job market and academia deprives stigmatized (dis)abled bodyminds of opportunity to comply with the structural conditions that could ensure more agency. In private life, there is competition for obtaining success – the concept of success itself relies on being successful in relation to others, meaning that someone has to be less successful and that our epistemological argument for calling someone successful is by measuring one's status against someone else's. Furthermore, a structural condition in private life is individualism, emphasizing the benefit as well as responsibility for the individual rather than the collective. Lastly, in private life, being independent and having resourcefulness implies that someone is dependent. In academia, the normalized characteristic of being productive and the structural condition of ensuring efficiency implies that some (dis)abled bodyminds cannot conduct research. Lastly, as long as producing legitimate knowledge in academia is dependent on the structural condition of measurability – embodied knowledges remain second in line to measurable science.

The common denominator for productivity, agency, betterment, individualism, independence, efficiency, and measurability is *competition*. The analysis arrived at competition as a common denominator through abstracting meaning from the listed structural conditions. Through critical ontological analysis of how power affects how we act, one can argue that competition is a concept rooted in the individualistic Western ontological and epistemological perspectives on the body and the hegemonic heteronormative discourse that makes Others precarious. Competition is arguably a pillar of neoliberal ideology where the individual must ensure its own fortune. Neoliberalism emphasizes the individual's responsibility of itself, effectively pitting (dis)abled bodyminds against each other. The practical conditions of space, of which (dis)abled bodyminds can measure themselves against, all emphasize the importance of (dis)abled bodyminds on being *better* than others. This thesis does not imply that (dis)abled bodyminds in Western society lack compassion for each other, or are completely independent of each other. However, neoliberal ideology portrays the counterparts to productivity, agency, betterment, individualism, independence, efficiency, and measurability as lesser desirable properties – and makes the individual struggle and compete to be the best version of themselves following a capitalist logic.

This prompts the question of how we come to know the structural conditions of society? (Dis)abled bodyminds come to know the structural conditions of society by observing our role models and measuring the responses they get from behaving in certain ways. Based on our observations, we think, say and act accordingly. Epistemological and ontological assumptions contribute in maintaining the structural conditions of society and constructions of ‘disabled’ bodies.

Through the analysis of the empirical data, this thesis finds that the normalization of the ‘Disable’ has consequences for social difference. Some (dis)abled bodyminds lack access to physical safety, community, culture and infrastructure. The inaccessibility itself makes the (dis)abled bodymind precarious – more dependent on the Able than the Able is on the Disable. Social difference prevails when precarity is unequally distributed (Butler, 2004, 2010). The analysis elaborates that (dis)abled bodyminds must perform as invisible or abnormal, and a notion of “us” and “them” is constructed in the norm-functioning (dis)abled bodymind. As a result, particular (dis)abled bodyminds are subject to stigma and microaggressions, and experiences feelings of exclusion and even trauma.

Chapter 6

Conclusion

This thesis carries out a spatial analysis of constructions and materialities of (dis)abled bodyminds through the scale of structures, materiality, body and mind, locating three spaces in which structural conditions allow for normalizing and defining ‘disabled’ bodies. Chapter 5: Analysis presents three spaces where the structural conditions of competition allow for constructing ‘disabled’ bodies through Western ontological prompts to measure individuals against each other: social space, private life, and academia. The three presented spaces are located through an analysis of empirical data based on several (dis)abled bodyminds’ embodied knowledges. The analysis of the empirical data shows that particular (dis)abled bodyminds experience inaccessibility to comply with the practical conditions of social space, private life, and academia and are forced to perform as either invisible or abnormal in these spaces. Therefore, this thesis argues that disability derives from the individual (dis)abled bodyminds encounters with disabling structural conditions that manifest materially and discursively in the embodiment of (dis)abled bodyminds. Thus, defining and normalizing ‘disabled’ bodies stigmatizes particular (dis)abled bodyminds and reproduces social difference by fueling microaggressions, trauma, and feelings of exclusion.

This thesis applies theoretical concepts from disability studies and feminist literature to conduct a critical analysis on how embodied experiences of (dis)abled bodyminds are manifestations of structural conditions that allow for defining and normalizing ‘disabled’ bodies. Using the theoretical concept of (dis)abled bodyminds, this thesis shows how the Western ontology of binaries and epistemology of sight and measurement narrows the scope for understanding the body. Moreover, this thesis explains that everyday actions, and subsequently order of society, are rooted in ontological and epistemological assumptions about the ‘disabled’ body. However, “assumptions” imply normalization, a constructed and taken-for-given truth about the body. Recognizing that ‘disability’ is normalized as a result of current Western assumptions of what the body allows for experimenting with imagining ‘disability’ in novel ways.

Chapter 2: Theoretical framework, divides the production of ‘disability’ in contemporary Western society into four spheres which constitute the novel theoretical framework of (dis)abled bodymind: the structural, the material, the body, and the mind. Each sphere consists of several theoretical concepts that in interaction challenge the Western perspective on the body. The presented theoretical concepts allow for understanding ‘disability’ as produced rather than constant. While four spheres are constantly in interrelation, a scalar perspective allows for stratifying and visualizing moments in time and space and analyze what is happening and how social difference is emerging. The purpose of applying the concept of (dis)abled bodyminds is to differ between the traditional Western perspective on the body and a contending perspective on the body. This thesis visualizes a constant circle in Figure 3, in which the production of ‘disabled’ bodies is reproduced. Moreover, building on post-structural feminist theory, this thesis argues that one can intervene in the reproduction of ‘disability and subsequently change the definition of ‘disabled’ bodies.

Chapter 3: Methodology, presents the ontological and epistemological perspectives this thesis is embedded in, as an alternative to Western ontology and epistemology. The alternative ontological and epistemological positions are critical ontology merged with assemblage analysis ontology and epistemology of embodiment. These positions function as the basis for the techniques for qualitative data gathering and analysis of the empirical data, emphasizing embodied knowledge and lived experiences. Thus, Chapter 3: Methodology functions as a philosophical bridge between the theoretical framework of (dis)abled bodymind and the data gathering process and analysis. The qualitative data gathering process consists of in-depth, semi-structured interviews with four (dis)abled bodyminds and an online data collection with empiricism from social media, news articles, and reports. This thesis applies data- and methodological triangulation to develop three data sets. Through an analysis of these data sets, this thesis seeks to answer the research question through two sub-questions.

Sub-question 1: *How are ‘disabled’ bodies defined and normalized through structural conditions?*

In order to conduct a rigid analysis by actively engaging with the theoretical framework and the methodological considerations of this thesis, the question is further specified the question by asking it in terms of practicality, ontology, and epistemology.

Practically, the analysis chapter presents three spaces where the defining and normalization of disabled bodies are made possible: public space, private life, and academia. By applying the presented theoretical framework of (dis)abled bodyminds, this thesis observes various practical conditions within said spaces: accessibility, power, success, norm-functionality, resourcefulness, productivity, and legitimate knowledge. Furthermore, by operationalizing Table 2, this thesis observes that not all (dis)abled bodyminds can comply with the mentioned practical conditions. Consequently, the (dis)abled bodyminds must perform as abnormal or invisible in spaces. Furthermore, the analysis shows that the practical conditions are embedded in several structural conditions, which respectively are productivity, agency, betterment, individualism, independence, efficiency, and measurability. The common denominator of said structural conditions is competition – a pillar in neoliberal ideology.

Ontologically in Western society, a body is ‘disabled’ because of an underlying understanding that (dis)abled bodyminds who comply to the practical conditions of space, and thus accept the values included in the structural condition of society, are ‘normal’ and Able, while those who do not are ‘abnormal’ and Disable. Thus, the iterative process of defining ‘disabled’ bodies is maintained. Based on the analysis of the datasets, this thesis finds that the ‘disabled’ body ontologically is a stigmatized (dis)abled bodymind that is restricted by materiality from conforming to structural and practical conditions. However, the analysis chapter shows that the identity that norm-functioning people assign ‘disabled’ bodies when they define and normalize them, is deviant from how stigmatized (dis)abled bodies experience their own identity – which testifies the assumption that ‘disabled’ bodies are wrongly defined and normalized by others.

Epistemologically in the status quo, (dis)abled bodyminds know whether others comply with the practical or structural conditions based on observing role models and measuring the response they get. The analysis chapter finds that (dis)abled bodyminds come to know the structural conditions of society by observing the responses they get from behaving in certain ways. This thesis argues that other’s expectations of us, and the reinforcement we get from living up to them, and the sanctions we see imposed on the abnormal, makes one want to comply and be part of the “normal” rather than the “abnormal.”

Sub-question 2: *What effects do the constructions of 'disabled' bodies produce?*

When discussing sub-question 1, this thesis finds that (dis)abled bodyminds are defined and normalized as 'disabled' bodies in space when they are forced to perform as invisible or abnormal, and as such is Othered and constructed as Disable. The implicit effect of constructing an Able and a Disable is maintaining the binary of the body and maintaining a justification of social difference as presented initially in Chapter 2: Theoretical Framework.

Chapter 5: Analysis suggests that the Able/Disable binary exists because of the heteronormative matrix by transferring Butler's (2006) argument on the gender binary of male/female and that this has effects on social difference. However, the Able/Disable binary is at a different scale compared to the male/female within the matrix: the 'disabled' body does not fit into the heteronormative matrix of sex, gender, and desire. The gender performance of a 'disabled' body differs from what is expected from a male or a female – if we take for granted that the 'disabled' body is defined as such when it is performing as abnormal or invisible in space. Moreover, when attempting to place the 'disabled' body in the heteronormative matrix of sex, gender and desire, the analysis discovers that (dis)abled bodyminds will become abnormal regardless of their own experience of sex, gender, and desire. Other's assumptions about the discursive performance of the 'disabled' body construct stigmatized (dis)abled bodyminds as Disable and restricts stigmatized (dis)abled bodyminds agency to convey their identity. Thus, the (dis)abled bodymind becomes stigmatized – an outsider within the heteronormative matrix, their existence is not interfering with the heteronormative hegemonic discourse, but yet passively sustaining the Western economic and cultural structures.

Ultimately, the normalization and definition of 'disabled' bodies allow for constructing the Disable. These constructions create a division between "us" and "them," effectively justifying social difference. Due to the epistemology in which Western society is embedded, observing 'disabled' bodies treated differently allows for accepting a reproducing of the status quo. However, the analysis finds that the situation for stigmatized (dis)abled bodyminds could be another one. By taking other ontological and epistemological positions, we could imagine (dis)abled bodyminds in space differently. By applying 'I can' as the epistemological origin of consciousness, rather than 'I think', we relate the bodymind to the world and acknowledge the

correspondence between the material and the (dis)abled bodymind (Tanaka, 2011, pp. 152-153). One can observe the relation of a person to his or her world by connecting this epistemological position to the anti-essentialist assemblage ontology of materialism and the questions ‘what can and could a (dis)abled bodymind do?’ (Barbour, 2016, p. 228; Merleau-Ponty, 1962) and comprehend that the body might *currently* be unable to access a particular space. However, current inaccessibility does not mean that an inability to access the must exist at all times and in all places. Because a body always exists within a specific material context, and the fluidity and tentativeness of (dis)ability itself, the (dis)abled bodyminds’ capacities – the things it can and cannot do – are always contextual and relational, and the list of capacities of a (dis)abled bodymind will necessarily be ongoing (Feely, 2016, pp. 870-871).

Finally, this thesis answers the main research question: *How are Western constructions of disabled bodies embedded in social structures and with what consequences for social difference?*

Based on the data sets, this thesis scopes out three spaces where the definition and normalization of ‘disabled bodies’ take place: private life, public space, and academia. By the means of these spaces, this thesis systemizes and visualizes how structural conditions manifest and allow for normalizing and defining ‘disabled’ bodies as invisible or abnormal based on whether they comply with various practical conditions. Therefore, Chapter 5: Analysis inspects whether specific (dis)abled bodyminds have access to complying with the presented practical and structural conditions of space or not. Lastly, the analysis chapter discovers specific structural conditions of the space by identifying compulsory values that practical conditions are embedded in: productivity, agency, betterment, individualism, independence, efficiency, and measurability.

The presented empirical data illustrates that social spaces, private life, and academia include normalized characteristics, in which the analysis locates specific places and intrinsic social structures such as school, housing, and workspace with the help of Table 2. Furthermore, the combination of the data sets and Table 2 allows for locating specific rooms in infrastructure, namely the restroom and the parking bay, as well as the social relationships of identity construction. These are the spaces in which the research participants are defined and normalized as disabled.

Western constructions of disability are embedded in social structures - materiality bridges the structural world to the bodymind as the structural conditions

manifests materially and discursively. Practical conditions of material space force (dis)abled bodyminds to perform as abnormal or invisible in space, which allows for defining them as Other and normalize them as different. Reminiscing on historical models of disability (Beaudry, 2016; Griffo, 2014; Lawson & Beckett, 2021; Retief & Letšosa, 2018) allows assuming that a consequence of normalizing some (dis)abled bodyminds as different from the Self justify different treatment - historically in the terms of 'disabled' bodies *different is lesser*.

The structural conditions of productivity, agency, betterment, individualism, independence, efficiency, and measurability allow for defining and normalizing 'disabled' bodies. Said structural conditions comply with the presented Western ontology and epistemology because they are binary, they all have a negative counterpart – something (dis)abled bodyminds are conditioned to seek to avoid. Furthermore, this thesis analyses the commonality between the structural conditions presented throughout the analysis and finds the common denominator: competition. This thesis finds competition as the common denominator of structural conditions by coding the structural conditions until arriving at competition and concluding that this structural condition in fact is associating the structural conditions.

The term and structural condition of competition reflect (dis)abled bodyminds struggle to be productive and show agency to ourselves and others. However, being productive is only possible because it is an undesired counterpart to being productive. The struggle for betterment implies obtaining success – being richer, healthier, and safer. The concept of success itself relies on being successful in relation to others, meaning that someone must be less successful – less rich, less healthy, and less safe. Implicitly, our epistemological basis for calling someone successful is by measuring someone's success against someone else's. Likewise, individualism, independence, efficiency, and measurability have less desirable counterparts, and we achieve the structural conditions as individual (dis)abled bodyminds by competition. Thus, the goal becomes to be better than others at complying with these structural conditions.

This thesis observes competition as a binary understanding which (dis)abled bodyminds can understand by measuring themselves against others. Through critical ontological analysis, this thesis finds that competition is a concept rooted in the individualistic Western ontological and epistemological perspectives on the body. This conclusion is verified by the fact that competition is an intrinsic part of neoliberalism, the ideology which underlies Western society. Thus, this thesis finds

that competition through its embedded emphasis on individualism is a structural condition that allows for normalizing and defining ‘disabled bodies’ in contemporary Western society.

Western constructions of ‘disabled’ bodies are embedded in social structures through the ableist qualities of structures that materialize as disablist inaccessibility in material space and force stigmatized (dis)abled bodyminds to perform as invisible or abnormal. (Dis)abled bodyminds justify the social differentiation between “us” and “them” based on the stigmatized (dis)abled bodyminds performativity as abnormal or invisible. The effects are that stigmatized (dis)abled bodyminds lack access to culture, education, the job market, safety, and infrastructure in comparison to norm-functioning (dis)abled bodyminds. The construction of ‘disabled’ bodies that embeds in social structures leads to the discrimination, microaggressions, and trauma that stigmatized (dis)abled bodyminds experience. However, through an application of the novel conceptual framework of (dis)abled bodyminds, this thesis suggests that through a change in discourse – and consequently attitude – the construction of ‘disabled’ people can in fact be transformed, and have valuable effects on social equity for all (dis)abled bodyminds.

6.1 Further Work

During the work on the spatial analysis of Constructions and Materialities of (dis)abled bodyminds, I have visited topics such as ontological and epistemological positions and the concepts of structures, materialities, body, and mind. This section summarizes the proposed further research directions branching from the topics in this thesis.

6.1.1 Data collection methods

The data collection of this thesis is restricted by social distancing as an infection control measure towards the Covid-19 pandemic. Thus, further work could focus on a more comprehensive data collection. I suggest a more diverse selection of participants in terms of age, gender identity, and (dis)ability. Consequently, researchers can obtain a more nuanced concept of the meaning of place to the individual (dis)abled bodymind. A valuable data gathering method could involve equipping research

participants with cameras, letting them photograph different situations in their everyday life, and write short notes on what they experienced taking that photo. Moreover, the research participants could note what they experience looking at other participants' photographs. The proposed data collection method allows for analyzing how different (dis)abled bodyminds interpret the semiotics of the material world differently. Furthermore, the proposed data collection method could be a useful tool for creating a comprehensive survey of spaces where disability becomes normalized and defined. Furthermore, I propose applying inclusive research designs and include stigmatized (dis)abled bodyminds to write an accessible summary of the project.

6.1.2 Developing (dis)abled bodyminds as a concept

This thesis suggests that the novel concept of (dis)abled bodyminds contributes to perceiving 'disability' as a concept relative to space and time. The concept of (dis)abled bodyminds is designed to shift the perception of 'disability.' This thesis presents (dis)abled bodyminds as the product of structures, materiality, mind, and body. However, the proposed theoretical framework of (dis)abled bodyminds could be developed in future spatial disability studies. In future research projects I suggest including theoretical background on embodiment, discourse, and justice in particular.

6.1.3 Intersectionality

This thesis bases on work by Kafer (2013) and Price (2014) when stating that (dis)abled bodies with the same medical diagnosis experience their disability differently. Thus, a compelling research direction could involve researching how social markers such as gender, age, class, religion, and ethnicity, relates to space and effects the embodied experience of the (dis)abled bodymind and the normalization and definition of 'disability.'

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